Biological hazards

– **Infectious disease control**

Police, prison officers, other workers in correctional facilities and emergency response workers >

This information bulletin provides examples of several safe work practices which could form the basis of more detailed procedures to be adopted in individual work situations or incorporated into the work of high risk professions such as the police, prison officers and emergency response workers.

Introduction

This information bulletin should be read in conjunction with the National Code of Practice for the Control of Work-related Exposure to Hepatitis and HIV (Blood-borne) Viruses [NOHSC: 2010(2003)], which is an Approved Code of Practice under section 187A of the *Workers Rehabilitation and Compensation Act*.

There are some areas of work that could place certain professions at higher risk of transmission of HIV and the hepatitis B virus than the general public. For example:

- Police – intervening in domestic disputes, attending motor vehicle accidents, arresting offenders and investigating crimes.
- Prison officers – work in a potentially hostile environment in which they have to deal with assaults (between prisoners, and between prisoners and prison officers), self-mutilation by prisoners, traps set by prisoners (such as, needles and syringes containing blood taped to locks), and objects concealed by prisoners (such as needles and syringes containing blood).
- Emergency response workers – attending motor vehicle accidents and removing injured persons from wrecked motor vehicles.

In all situations where there is a potential risk of exposure to bloody or body fluids, all staff must adopt an attitude that all of these fluids and substances are infectious and should be treated as such.

Preventing transmission of HIV and the hepatitis B virus in the workplace, therefore, means preventing:

- injuries from sharps and other instruments contaminated with blood or body fluids; and
- contact between blood or body fluids and the eye, or other mucous membranes, and broken skin or cuts.

Universal precautions are based on the concept that all blood, blood products and body fluids of all persons are potential sources of infection, independent of diagnosis or perceived risk.

All staff must adhere rigorously to protective measures that minimise exposure to these agents. The use of universal precautions involves placing a barrier between staff and all blood and body fluids training.

It is essential that staff receive initial and ongoing training to enable them to do their duties in a healthy and safe manner. This training should enable them to anticipate and manage situations in which they may be exposed to infectious organisms such as HIV or the hepatitis B virus. Staff should also be trained in the safe provision of first aid.

It is also important that staff have access to appropriate professional counseling and that follow-up services are available after possible and definite exposures to blood and body fluids.

Safe work practices

Safe work procedures should be developed within the framework of risk identification, risk assessment and risk control. Work practices and the choice of personal protective equipment should be based on universal precautions.

At the beginning of each shift, staff should wash their hands to both clean them and identify any cuts or breaks in the skin. Cuts or abrasions should be covered with waterproof dressings.

Work practices in emergency situations need to take into account the unpredictable nature of exposures to blood and body fluids that may occur. It is also important to remember that ample space, adequate lighting and optimum levels of staff are essential to ensure safe work practices.

- Particular care should be taken where workers are likely to come into contact with broken glass. Reinforced gloves should be used for cleaning debris or removing injured persons from wrecked motor vehicles.
- Clothing contaminated with blood should be removed as soon as possible.
- Used needles and other disposable sharp instruments should be promptly discarded into an approved sharps container. See Australian Standard AS 4031 Non-reusable Containers for the Collection of Sharp Items Used in Health Care Areas.

Post-exposure procedures

All workplaces must have in place post-exposure procedures. These procedures should be consistent with procedures for other workplace accidents and should utilise existing mechanisms for compensation, rehabilitation, retraining and long term follow-up of employees injured at work.

The procedures should address:

- immediate action;
- follow up action;
- record keeping;
- confidentiality.

Personal protective equipment

Personal protective clothing and equipment serves as a barrier to exposure to infectious organisms such as HIV and the Hepatitis virus. Staff should be trained in correct fit and use and the appropriate equipment should be accessible to staff at all times. Specific kits designed to be attached to the belt, as part of an officer's uniform should be worn when on duty. All this equipment should be checked regularly, maintained and restocked as necessary.

While on duty relevant staff should have access to the following, matched to the risk of exposure to blood and body fluids:

- gloves, both sterile and non-sterile, latex and reinforced;
- masks for use in mouth-to-mask resuscitation (Standards Australia is preparing a draft standard titled Ancillary Devised for Expired Air Resuscitation);
- specific airways or face masks for expired air resuscitation;
- plastic aprons or gowns;
- protective eyewear;
- disposable overalls;
- mouthwash;
- soap or an alternative hand cleanser;
- approved sharps containers;
- a supply of impermeable bags for contaminated clothing and debris;
- material for cleaning and impermeable dressings for broken skin or cuts;
- sterile saline solution for eye irrigation in situations where running water is not available;
- mirrors for use in searching;
- tongs/forceps;
- masks to use when handling people who spit;
- disinfectant;
- bleach solution.

Searching – police and prison officers

All staff involved in searches must follow infection control guidelines. Searching procedures must be developed to ensure the health and safety of all concerned, i.e police, suspects, prison officers and/or inmates.

Evidence packs should be used when searching. They should also be used for transporting, collecting and storing contraband. Sharp objects should be kept in a sharps container at all times.

Examples of techniques that could be used in searching procedures are:

- Always wear latex or other suitable gloves when searching;
- Do not run fingers along or under tables, beds, etc as sharp objects may be concealed. This should be anticipated. Where practicable, these items should be turned over to provide maximum viewing to searcher, or alternatively use pens, rulers etc or a mirror to view areas you cannot see. Do not place your hands where you cannot see;
- Torches or angled lighting should be used to illuminate dark areas;
- When searching bags etc, hands must not be placed inside. The contents should be tipped out onto a flat surface for examination;
- Non-sharp items contaminated with blood or body fluids should be placed in a pillowcase or canvas bag (plastic bags and sweat can destroy evidence) and seal with tape, not stapled. All samples should be clearly labeled;
- Sharp objects, which may be used as evidence, should be placed in a sharps container. When contraband needs to be removed from the container, the disposable forceps (already in the container) must be used. See Australian Standard AS 4031 Non-reusable containers for the collection of sharp items used in health care areas;

- Sharps containers should be carried to the area rather than carrying the object to the sharps container;
- Needles should not be recapped, bent or broken. Where practicable, all sharp objects should be handled with forceps, tongs or another hands-free method. Sharp objects found in the search should be placed in a sharps container;
- Gloves should be removed, put into a plastic bag and disposed of appropriately when searching is completed.

Handling violent offenders/prisoners

Police and prison officers confronted by prisoners exhibiting physical violence toward them should follow established operational procedures for dealing with such situations.

Offenders may try to splash police/prison officers with blood or spit at them. The risk of infection from this type of exposure is very low.

Handling deceased persons

The procedure for handling deceased persons should ensure that the number of people who touch the body is kept to a minimum. Those who are required to handle the body should cover their cuts and abrasions, wear impermeable gloves and comply with universal precautions.

More information

A range of information bulletins are available on related topics. Please contact NT WorkSafe for details.

Australian Standards are available from the Territory Construction Association, phone 8922 9666. Australian Standards can be viewed online by visiting the Northern Territory Library, Parliament House, phone 8999 7177.

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