

The annual report is the responsibility of the Chief of Police or his designee. The report should be a summary of the previous year's significant events, reporting of crime and accident statistics, a report on whether the previous year's goals were met, and a listing of new goals and objectives for the department.

COMMUNICABLE DISEASE

In Effect: 11/04/2008**Review Date:** 09/01/2025**20.10 COMMUNICABLE DISEASE**

NHPSTC Model Policy
NH RSA 141-G

I. PURPOSE:

The purpose of this policy is to provide guidelines for law enforcement officers in preventing the contraction of communicable diseases.

II. DISCUSSION:

Police and other public safety personnel routinely come into contact with members of the public. At some point it is predictable that police officers will come into contact with a person who has an infectious disease such as Acquired Immune Deficiency Syndrome (AIDS), hepatitis or other infectious disease. Extreme caution should be exercised by police personnel. The following procedures shall be followed when dealing with blood, items stained with blood or other bodily fluids, and all people in general.

III. DEFINITIONS:

- A. **BODY FLUIDS:** Liquid secretions including blood, semen and vaginal or other secretions that might contain these fluids such as saliva, vomit, urine or feces.
- B. **COMMUNICABLE DISEASE:** Those infectious illnesses that are transmitted through contact with the body fluids of an infected individual.
- C. **AIDS -- ACQUIRED IMMUNE DEFICIENCY SYNDROME:** An incurable, contagious disease affecting the body's immune system, rendering the body susceptible to a variety of rare and usually fatal illnesses. AIDS is caused by a virus called HIV.
- The AIDS virus is very fragile. It cannot survive long outside the human body and dies in a laboratory setting, usually within three (3) days, whereas Hepatitis-B can survive for up to thirty (30) days.
- D. **HIGH-RISK GROUP:** The persons most likely to become infected with AIDS are homosexual and bisexual males, intravenous drug users, hemophiliacs and persons receiving blood transfusions.
- AIDS is transmitted primarily through blood-to-blood contact during sexual acts or while sharing needles and there has never been a case where it has been spread by casual contact such as shaking hands,

coughing, sneezing, spitting, kissing nor from using toilet seats, bathtubs, showers, dishes, linen or utensils, nor from food and water.

- E. **SOURCE INDIVIDUAL:** means any person whose blood, body fluids, tissue, or organs were specifically identified as the source of an exposure to an emergency response/public safety worker.
- F. **UNPROTECTED EXPOSURE:** includes instances of direct mouth-to-mouth resuscitation or the commingling of blood or other potentially infectious material of a source individual and an emergency response/public safety worker, which is capable of transmitting an infectious disease.

IV. PROCEDURES:

A. COMMUNICABLE DISEASE PREVENTION:

1. In order to minimize potential exposure to communicable diseases, officers should assume that all persons are potential carriers of a communicable disease.
2. Disposable gloves shall be worn when handling any persons, clothing or equipment with body fluids on them.
3. Masks, protective eyewear and coveralls shall be worn where body fluids may be splashed on the officer.
4. Plastic mouthpieces or other authorized barrier/resuscitation devices shall be used whenever an officer performs CPR or mouth-to-mouth resuscitation.
5. All sharp instruments such as knives, scalpels and needles shall be handled with extraordinary care, and should be considered contaminated items.
 - a. Leather gloves shall be worn when searching for or handling sharp instruments.
 - b. Officers shall not place their hands in areas where sharp instruments might be hidden, such as under car seats. An initial visual search of the area should be conducted, using a flashlight where necessary. The suspect may also be asked to remove such objects from his person.
 - c. Needles shall not be recapped, bent, broken, removed from a disposable syringe or otherwise manipulated by hand.
 - d. Needles shall be placed in a puncture-resistant container when being collected for evidentiary or disposal purposes.
6. Officers shall not eat, drink, smoke or apply makeup at crime scenes where bodily fluids are present or other contagious factors exist.
7. At crime or accident scenes where Berlin Emergency Medical Services are available, disposable gloves and other materials contaminated with body fluids should be disposed of on the ambulance in the appropriate container before the officer leaves the scene. If this is not feasible, the officer must seal these items in a plastic bag, being careful not to contaminate the cruiser, and dispose of them at the Berlin Health Department in the "contaminated Item" receptacle.
8. Any evidence contaminated with body fluids will be dried, double bagged in paper bags and marked to identify potential or known communicable disease contamination.

B. TRANSPORT AND CUSTODY:

1. Where appropriate protective equipment is available, no officer shall refuse to arrest or otherwise physically handle any person who may have a communicable disease.
2. Officers shall not put their fingers in or near any person's mouth.
3. Individuals with body fluids on their persons shall be transported in separate vehicles from other individuals. The individual may be required to wear a suitable protective covering if he/she is bleeding or otherwise emitting body fluids.

4. Officers have an obligation to notify relevant support personnel during a transfer of custody when the suspect has body fluids present on his person, or has stated that he has a communicable disease.
5. Suspects taken into custody with body fluids on their persons shall be directly placed in the designated holding area for processing. The holding area shall be posted with an "Isolated Area--Do Not Enter" sign.
6. Officers shall document on the appropriate arrest or incident form when a suspect taken into custody has body fluids on his person, or has stated that he has a communicable disease.
7. Those persons infected with AIDS or other communicable diseases are legally assured of the utmost confidentiality regarding their condition. For this reason, medical information concerning the infected person must be limited to only those officers and public safety personnel **IMMEDIATELY** involved in the incident at hand, and only if there is a need to know the information disseminated. Berlin Police personnel are prohibited from disseminating any person's medical condition or history to anyone except as provided above.

C. DISINFECTION:

1. Any unprotected skin surfaces that come into contact with body fluids shall be immediately and thoroughly washed with hot running water and soap for 15 seconds before rinsing and drying.
 - a. Alcohol or antiseptic cleanser or towelettes may be used where soap and water are unavailable. Each cruiser is equipped with instant antiseptic hand cleanser for this purpose.
 - b. Protective disposable gloves will be worn during all phases of disinfection. Officers and maintenance personnel should be aware that rings, jewelry or long fingernails may compromise the structural integrity of the gloves. They should make certain the gloves are not torn before they attempt to begin any phase of the disinfection process.
 - c. Disposable gloves should be rinsed before removal. The hands and forearms should then be washed.
 - d. Hand lotion should be applied after disinfection to prevent chapping and to seal cracks and cuts on the skin.
 - e. All open cuts and abrasions shall be covered with waterproof bandages before reporting for duty.
2. Officers should remove clothing that has been contaminated with body fluids as soon as practical. Any contacted skin area should then be cleansed in the prescribed fashion. Contaminated clothing should be handled carefully and laundered in the normal fashion.
3. Disinfection procedures shall be initiated whenever body fluids are spilled, or an individual with body fluids on his person is transported in a departmental vehicle.
 - a. A supervisor shall be notified and affected vehicles shall be immediately designated by the posting of an "Infectious Disease Contamination" sign while awaiting disinfection.
 - b. Any excess blood or bodily fluids should first be wiped up with a disposable absorbent material, paying special attention to any cracks, crevices or seams that may be holding excess fluid. The absorbent materials should be immediately placed in a plastic bag and placed in the designated "Contaminated Item Receptacle" at the Berlin Health Department.
 - c. The affected area should be disinfected using hot water and detergent or alcohol and allowed to air dry.
4. Non disposable equipment and areas upon which body fluids have been spilled shall be disinfected as follows:
 - a. Any excess of body fluids should first be wiped up with approved disposable absorbent materials. The absorbent materials should be immediately placed in a plastic bag and placed in the designated "Contaminated Item Receptacle" at the Berlin Health Department.
 - b. A freshly prepared solution of one part bleach to 10 parts water or a fungicidal/ mycobactericidal disinfectant shall be used to clean the area or equipment.
5. All disposable equipment, cleaning materials or evidence contaminated with body fluids shall be

bagged and disposed of in the designated "Contaminated Item Receptacle" at the Berlin Health Department or by other means in compliance with state law provisions for disposal of biologically hazardous waste material.

D. SUPPLIES:

1. A designated officer will be responsible for continuously maintaining and storing in a convenient location an adequate amount of communicable disease control supplies for the Department. This supervisor will initiate reordering procedures before supplies become depleted.
2. Supervisors are responsible for dissemination of supplies for infectious disease control to their shift or division. Protective gloves, other first aid supplies and disinfecting materials will be made readily available at all times.
3. Officers using supplies stored in police vehicles are responsible for their immediate replacement.

E. LINE OF DUTY EXPOSURES TO COMMUNICABLE DISEASES:

1. Any officer who has been bitten by a person, or who has had physical contact with body fluids of another person while in the line of duty shall be considered to have been exposed to a communicable disease.
2. If you receive a human bite that breaks your skin, wash the area with soap and hot water, and report to the Androscoggin Valley Hospital.
3. Immediately after exposure, the officer shall be transported to the Androscoggin Valley Hospital for clinical and serological testing for evidence of infection.
 - a. The department shall ensure continued testing of the officer for evidence of infection and provide psychological counseling as determined necessary by the health care official.
 - b. Unless disclosure to an appropriate departmental official is authorized by the officer or by state law, the officer's test results shall remain confidential.
4. Any person responsible for potentially exposing the officer to a communicable disease shall be encouraged to undergo testing to determine if the person has a communicable disease.
 - a. The person shall be provided a copy of the test results and guaranteed its confidentiality.
 - b. Criminal charges may be sought against any person who intentionally acts to expose an officer to a communicable disease.
5. Officers who test positive for a communicable disease may continue working as long as they maintain acceptable performance and do not pose a safety and health threat to themselves, the public or members of the department.
 - a. The department shall make all decisions concerning the employee's work status solely on the medical opinions and advice of the department's health care officials.
 - b. The department may require an employee to be examined by department health care officials to determine if he is able to perform his duties without hazard to himself or others.
6. All personnel shall treat employees who have contracted a communicable disease fairly, courteously and with dignity.
7. If the source individual was not transported to a licensed medical care facility, the source individual shall be informed of the incident and shall be asked to consent to being tested for HIV infection. In situations where the source cannot or will not give consent, it should be assumed that the source was infected with HIV.
8. All inquiries concerning communicable disease shall be directed to the Medical Referral Consultant or to the New Hampshire Division of Public Health Services Bureau of Disease Control's AIDS Hotline 1-800-752 AIDS.

F. RECORD KEEPING:

The department shall maintain written records of all incidents involving employees who have potentially been exposed to a communicable disease while acting in the line of duty. The records shall be stored in a secured area with limited access, and maintained in conformance with applicable privacy laws.

INVOLUNTARY ADMISSIONS

In Effect: 11/04/2008

Review Date: 09/01/2025

40.12 INVOLUNTARY ADMISSIONS

I. PURPOSE:

The purpose of this Standard Operating Procedure is to establish guidelines for the immediate care of individuals having the inability to care for themselves as defined under RSA 135-C:2X - "Mental Illness." This Standard is established with the concern for the individuals rights as well as the responsibility of our department to protect the individual and the public interest.

The criteria to be used by our department and the examining physician is defined under NH RSA 135-C:27.

II. POLICY:

A person shall be eligible for involuntary emergency admission if he is in such mental condition as a result of mental illness to pose a likelihood of danger to himself or others.

A. As used in this section "danger to himself" is established by demonstrating that:

1. Within 40 days of the date that a petition for involuntary emergency admission is completed, the person has inflicted serious bodily injury on himself or has attempted suicide or serious self-injury and there is a likelihood the act or attempted act will reoccur if admission is not ordered;
2. Within 40 days of the date that a petition is completed, the person has threatened to inflict serious bodily injury to himself and there is likelihood that an act or attempt of serious self-injury will occur if admission is not ordered; or
3. The person's behavior demonstrates that he so lacks the capacity to care for his own welfare that there is a likelihood of death, serious bodily injury, or serious debilitation if admission is not ordered.

B. As used in this section "danger to others" is established by demonstrating that within 40 days of the completion of the petition, the person has inflicted, attempted to inflict, or threatened to inflict serious bodily harm on another.

III. PROCEDURE:

A. When an officer of the Berlin Police Department receives information, or has witnessed an individual or has taken into custody an individual who is in such mental condition that the likelihood of harm exists to himself or others, as defined above, he will prepare a Complaint and Prayer for Compulsory Mental Examination, pursuant to RSA 135-C:28, II. (See Addendum #1) The officer will also complete the attached petition for Involuntary Emergency Admission (I.E.A.) (See Addendum #2). The petition shall outline the reasons for the I.E.A. using the above criteria.