

**THE BILL BLACKWOOD  
LA W ENFORCEMENT MANAGEMENT INSTITUTE OF TEXAS**

Assessing The Need For Training To Protect  
Law Enforcement Officers From Bloodborne Pathogens

A Policy Research Project  
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by  
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## **Abstract**

HIV and Hepatitis B are but two of a wide range of life-threatening diseases that can be transmitted through contact with human blood or other body fluids. These diseases, also referred to as bloodborne pathogens, pose a very significant threat to law enforcement employees who may come in contact with them through occupational exposure. While research reveals that the actual chance of a police officer contracting my or Hepatitis B through occupational exposure is remote, the threat is nevertheless real. Also real are the fears and prejudices that many law enforcement employees have concerning persons who may carry one of the diseases, especially my. These fears along with the lack of knowledge pose a threat to the effective service delivery of police agencies whose officers may avoid performing their duties when confronting suspected carriers of these diseases. Thus, the need for a departmental policy covering occupational exposure to bloodborne pathogens is needed to help alleviate these fears. In addition to providing information our officers need to prevent infection. A successful policy will be comprehensive, containing components such as, effective work practice controls and training.

A review of relevant articles from criminal periodicals as well as actual existing policies from Texas criminal justice agencies, was used for research. The conclusion shows that our department must take immediate steps to implement a policy covering occupational exposure to bloodborne pathogens to provide a safer working environment for our officers. This paper will show that this policy can be enacted at little or no cost to the City of Nassau Bay.

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## **Introduction**

Today an alarming number of police officers in this country are exposed on a continuing basis to bloodborne pathogens such as Human Immunodeficiency Virus (HIV) and Hepatitis B (HBV). Exposure to these viruses can be deadly.

It is vital that the Nassau Bay Police Department immediately develop a procedural and training program to minimize the risk of exposure to these and other life-threatening diseases transmitted through bloodborne pathogens. By far the primary purpose for instituting this policy is that we have a legal and moral obligation to provide a safe working environment for our employees. This policy will help achieve that goal by providing our employees with the information they need to learn about the dangers of bloodborne pathogens and will give them specific, detailed guidelines and procedures that will lessen their risk of exposure.

A second and very important fact that needs to be considered is that the City of Nassau Bay could potentially face increasing civil liability suits should an officer not be properly educated or instructed about the dangers of blood borne pathogens. Contraction of these or other viruses in the line of duty, can leave a city open to suit because they failed to properly educate the officer about the risk of exposure. Another factor to be considered is that a training program instituted under this policy could help dispel irrational fears and prejudices about these diseases and those who either carry them or are suspected of carrying them.

All Law enforcement agencies must implement a comprehensive policy concerning occupational exposure to bloodborne pathogens. Such a policy will help dispel fears and prejudices that many officers hold toward diseases like HIV and HBV. A Policy setting out guidelines and procedures for controlling occupational exposure to bloodborne pathogens will not only help protect the lives of our officers, but will hopefully lessen and/or eradicate fears (some irrational) among officers that can hinder effective service delivery. In addition it will help lessen the likelihood the City will be held liable for failing to properly inform our employees about the dangers associated with occupational exposure to blood borne pathogens.

I believe that the cost of implementing this policy is a necessary but inescapable cost that can be held in check using available resources. This Policy Research Proposal will be submitted to the Chief of the Nassau Bay Police Department for his review and hopeful approval. Should it receive his approval will present my proposal to the Nassau Bay City Council and City Manager for their consideration and hopeful acceptance. Should the City Council accept my proposal will then begin developing the policy for adoption by the Nassau Bay Police Department. In conducting research will survey existing policies of other law enforcement agencies concerning exposure to bloodborne pathogens. Will also review relevant articles from criminal justice periodicals including publications from the Occupational Health and Safety Administration (OSHA) to help show the urgent need for this policy and to address factors to be considered in instituting such a policy. Believe that we urgently need to develop this policy to help provide a safer working environment for our officers, and to lessen the likelihood that the City will face civil and/or criminal liability for failing to provide this policy.

## **Historical, Legal, or Theoretical Context**

The Human Immunodeficiency Virus (HIV) and Hepatitis B (HBV) are two viruses that pose a threat to criminal justice employees through occupational exposure. While HIV and HBV are both transmitted through body fluids, HBV is more easily transmitted and infects more people than HIV although it has a lower mortality rate (Brothers, p. 43).

Since it was first officially recognized in 1981, the Acquired Immunodeficiency Syndrome (AIDS) which develops after HIV infection, has become one of the world's most important health issues. The general public as well as many law enforcement employees remain largely uninformed about the causes of AIDS and the methods by which it can be transmitted. The lack of education and information coupled with fear of contracting the disease has hindered the operational effectiveness and service delivery of many law enforcement agencies because many officers report that they fear they will contract the disease through administering CPR, searching prisoners, and handling contaminated evidence (Yearwood, p. 67). Some officers have even refused to transport prisoners that they suspect of being infected with AIDS. The fears that many officers have concerning AIDS can thus hinder the operational effectiveness of the employing criminal justice agency (Yearwood, p. 67).

Many of the fears that police officers have concerning AIDS is due in a large part to the lack of knowledge and understanding about how the disease is contracted. As the AIDS epidemic continues and grows, so will the fears, prejudices and failure to perform duties by many officers who come in contact with real or suspected carriers of these diseases. While the threat of AIDS looms foremost in the minds of many law enforcers, a virus of equal if not greater concern is the

threat of Serum Hepatitis, a variety of hepatitis caused by the Hepatitis B (HBV) virus. While HIV and HBV can both be transmitted through body fluids, HBV is more easily transmitted and infects more people (Brothers, p. 43). The greater risk of contracting HBV than HIV is very well illustrated in the following statistic from the U.S. Center for Disease Control (CDC). The CDC estimated that through 1992 12,000 health-care workers in the United States were infected with Hepatitis B and that 250 died as a result. Conversely, the CDC reported that only 32 health-care workers had contracted HIV through occupational exposure during the same period (Brothers, p.43).

Like AIDS, there is currently no known cure for HBV, although HBV is less likely to result in death. Up to two thirds of persons suffering from HBV live in a chronic state of suffering characterized by nausea, vomiting, loss of appetite and jaundice. Like AIDS though, the most prevalent manner of transmission of HBV is through hyperemic needle punctures (Brothers p. 43).

### **Review Of Literature or Practice**

The Federal Bureau of investigation (FBI) conducted a study of police officer occupational exposure to HIV and HBV viruses from the year 1981 to 1991. According to the study there were seven verifiable cases of police officers contracting the AIDS virus as a direct result of occupational exposure. As of 1993, three of these subjects had died as a result of the disease. These infections were acquired as follows-- three by absorbing infected blood through

open sores, cuts or scrapes; two by being stuck by infected hypodermic needles; one from an infected blood transfusion after an on duty accident; and one in an undescribed manner (Bigbee, p. 3).

The same study also found that during the same period 31 officers were infected with Hepatitis B as a result of occupational exposure. These exposures were broken down as follows-- eight from absorption of infected blood through open sores, cuts or scrapes; six from being stuck with infected hypodermic needles; six from being bitten by infected suspects; and eleven in undescribed manner. Out of the thirty-one infected, two officers had died as of 1993. The FBI study concluded that police officers had an "extremely small chance" of acquiring AIDS or HBV through occupational exposure (Pilant, p. 35).

Despite the apparent small risk of actually contracting either HIV or HBV through occupational exposures, police officers as well as police administrators should still take steps to protect themselves from acquiring the virus as the viruses could prove fatal not only to officers but to their spouses who acquire the disease from them (Bigbee, p. 4).

In the early 1990's a research study was conducted on members of the Durham, North Carolina Sheriffs Department to determine how an officer's knowledge of and fears of AIDS correlated into how officers felt about AIDS carriers they came in contact with on duty, and how their attitudes altered their job performance (Yearwood, p. 71). The study found that although many officers possess a basic understanding of AIDS, there were still many misconceptions about how the disease is transmitted. The study found that too many officers still had inaccurate



knowledge about AIDS transmission and about the probability of contracting AIDS through occupational exposure. The study concluded that an important goal of any AIDS education program should be to minimize or eradicate the irrational fears that many officers hold (Yearwood, p. 77).

Recognizing the need to protect their employees from occupational exposure to bloodborne pathogens, the Brazos County Sheriffs Department has enacted a comprehensive fourteen page policy concerning procedures and guidelines to be followed when blood or other body fluids are encountered in the line of duty. The policy contains basic but important instructions such as " Try to avoid contact with body fluids whenever possible" and "Cover all open wounds before reporting for duty". The policy contains guidelines that dictate the type of training each officer is to receive. The policy mandates that each officer is to receive information on bloodborne pathogens at the initial time of job assignment and once per year after that (Brazos County Sheriff).

The Department of Public Safety of the Dallas/Fort Worth Regional Airport has enacted an "Infection Control Policy" in the hopes of lessening occupational exposure to AIDS, HBV and other bloodborne diseases. In contrast to the similar policy of the Brazos County S.O., I found that D/FW policy is not as comprehensive. Among other omissions, the D/FW policy does not even mention training anywhere in the policy. The policy also lacks specific, detailed procedures to be followed following exposure like Brazos County's does (DFIW Airport-DPS).

It is apparent that in developing a policy, special attention must be paid to insure that the policy is comprehensive and does not contain any important omissions. This research has led to a new understanding about bloodborne pathogens. The research cited above strongly illustrates that the risk of contracting HIV or HBV is really quite low. However this should not lessen the need for a comprehensive training and procedure policy on bloodborne pathogens. Law enforcement agencies must still instruct their officers about bloodborne pathogens, first to provide them with the knowledge they need to protect themselves from unnecessarily contraction of a disease through occupational exposure, and second to help remove fears and misconceptions that many officers possess about these diseases and how they are contracted.

### **Discussion Of Relevant Issues**

The need for a written policy covering occupational exposure to bloodborne pathogens is urgently needed by this department. Administrators have a moral and legal obligation to implement this policy to protect the lives of employees. Immediate steps must be taken to conform to the mandated guidelines handed down by OSHA which require that employers provide for the safety of their employees who may come in contact with blood or body fluids in the course of duty. At present the State of Texas has an agreement with OSHA which allows Texas to set its own health and safety guidelines. Therefore, there is no required compliance with Federal OSHA rules in this' state. Despite this, Departments should voluntarily comply with the OSHA guidelines since all states may be required by federal law to adopt OSHA rules in the future.

Failure to enact this badly needed policy could result in unnecessary threats to the lives of employees, not just from HIV or Hepatitis B, but from a wide range of other diseases transmitted through contact with human blood. Failure to enact this policy could also result in unnecessary civil lawsuits filed against the City for failure to properly train or otherwise inform our employees about these dangers. The first step in implementing a policy covering bloodborne pathogens, is to write an "Exposure Control Plan", of which the goal is to minimize unnecessary exposure to bloodborne pathogens (Benny, p.16). The exposure control plan will build a foundation upon which the rest of the policy will grow from. The exposure control plan includes elements like "Universal Precautions" to be taken when in contact with blood or other body fluids, work practice controls, personal protective equipment to be utilized, and general housekeeping procedures (Brothers, p.44). All employees must have ready access to the exposure control plan and it is necessary to review and update it on an annual basis. Training is an integral and very important element of any policy that we enact. To be successful the training program must provide a sensitive, practical method of providing information. One goal of the training program must be to allow officers to come away from the training with a new outlook that allows them to view diseases like AIDS without any religious or moralistic overtones (Stewart, p.13). The training must be an on going program that is supplemented with new information that is disseminated to employees on a regular basis. The training should be conducted by a licensed healthcare professional, preferably a physician or Registered Nurse with expertise in the field, and training should be tailored to the specific needs of a department. Additionally training must be documented and training records should be maintained for at least 3 years (Benny, p.16-17). The training sessions must cover the following items; elements of the exposure control plan; the

symptoms of and methods of transmission of bloodborne diseases (with heavy emphasis on HIV and HBV); how to recognize and prevent bloodborne diseases; and instruction on post-exposure reporting and follow-up (Brothers, p.47).

Another important concern that needs to be carefully considered when developing a bloodborne pathogen policy is the cost of implementing and maintaining the program. The costs can be controlled to manageable levels by heavy utilization of existing federal, state and local resources that are available at no cost or reduced cost. One example is the speakers bureaus of local hospitals that could provide a knowledgeable healthcare professional to give a program on bloodborne pathogens. These talks are usually provided free to community groups. I believe that this presentation could be a vital component of our training program. Other costs associated with training could be held down by utilizing printed material and videotapes that are available to governmental organizations by agencies like OSHA and the Center for Disease Control at no cost to the requesting agency. Also available from OSHA and the CDC are complete training program outlines that include a recommended course of study along with suggested titles for videotape and other audio-visual teaching aids.

There are however some unavoidable costs that the City will have to bear, but can hopefully be held down by careful planning. One of these costs is for personal protective equipment like gloves, masks, eye and face protection and gowns. Safety supply companies usually provide discounts for volume buyers. It may be possible for a department to enter into an agreement with one or more local law enforcement agencies to order this equipment together

resulting in additional savings for each department. Another unavoidable cost is the cost of providing HBV vaccinations for our employees. While these vaccinations should necessarily be provided at no cost to our employees, each vaccination can cost the City anywhere from \$75.00 to \$125.00. Once again through competitive shopping and discussions with local hospitals arrangements can be made to even further reduce the cost of these vaccinations. These vaccinations should be offered to all employees on a voluntary, not mandatory basis. Documentation should be kept to indicate that the vaccination was offered to the employee at no cost to the employee.

This policy can be rather easily developed by utilizing resources such as copies of existing policies from other law enforcement agencies and printed and video material from agencies such as OSHA and the CDC. Additionally, I believe that the cost of implementing and maintaining this program can be held down by negotiations with local healthcare facilities and safety supply companies. The end result is that the policy can be implemented at little cost to the City of Nassau Bay.

## **Conclusion / Recommendations**

A policy covering occupational exposure to bloodborne pathogens is badly needed and is overdue. The City and the Department bear a heavy responsibility for providing a safe working environment for its employees. One of these responsibilities is providing information about health hazards our employees may face while in the course of duty. One of the health hazards facing all law enforcement employees today is the threat of diseases transmitted by bloodborne pathogens.

HIV and HBV are two of a wide range of diseases that can be transmitted by bloodborne pathogens. Even though research has revealed that the likelihood that one of our officers will contract a disease like HIV or HBV through occupational exposure is remote, this should not in anyway lessen the need to provide our employees with information about these or other diseases transmitted through contact with human blood. Sadly the Center for Disease Control has reported that in the following years a whole range of new and potentially more dangerous bloodborne and even airborne diseases will likely appear. This potential is an all to real threat makes the immediate implantation of this policy all the more important. The rising threats posed by bloodborne pathogens make it necessary that this policy be developed and implemented without unnecessary delay.

Through utilization of available resources provided by OSHA and the Center for Disease Control, and by careful shopping for other needed materials, the cost associated with implementing this policy can be kept low resulting in a minimal expenditure of City funds. But more importantly than any other factor implantation of this policy will both allow us to help provide a safer working environment for employees, and will hopefully clearly convey the message to our employees that we are dedicated to making their jobs safer.

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