

YOUTH SERVICES POLICY

Title: Communicable and Contagious Diseases and Infection Control Program	Type: B. Classification, Sentencing and Service Functions Sub Type: 6. Medical/Mental Health Number: B.6.2
Page 1 of 12	
References: La. R.S. 15:739; State of Louisiana Sanitary Code, Chapter XXVII; Office of Risk Management, Loss Prevention Manual; ACA Standards 2-CO-1C-19 and 2-CO-4E-01 (Administration of Correctional Agencies), 4-JCF-4C-22 through 4C-27, 4C-54, 4C-59, 4C-62, and 6C-06 (Performance-Based Standards for Juvenile Correctional Facilities); YS Policy Nos. A.2.61 "Health Screening for Direct Care Positions", A.2.67 "Management of Tuberculosis – Employees", B.6.1 "Health Care", C.2.6 "Use of Interventions – Secure Care", and C.6.1 "Food Services"; OJJ/WP Joint Policies C-22 "Communicable and infectious Disease Management", C-23 "Management of Tuberculosis", C-24 "Management of Hepatitis A, B, and C", C-25 "Management of HIV", C-26 "Management of MRSA", C-27 "Health Education" and the Contracted Health Care Provider's Infection Control Manual	
STATUS: Approved	
Approved By: <i>William A. Sommers, Deputy Secretary</i>	Date of Approval: 08/02/2022

I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

II. PURPOSE:

To ensure that youth and employees live and work in a controlled environment which maintains infection control standards to monitor, evaluate, treat and contain the spread of infestations, bacterial, and viral infections (communicable and contagious diseases), and to supplement the YS Contracted Health Care Provider (CHP) policies as they relate to youth and employees.

III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Undersecretary, Deputy Undersecretary, Chief of Operations, Executive Management Advisor, Probation and Parole Program Director, Youth Facilities Director - Statewide, Regional Directors, Facility Directors, Regional Managers, Health Services Director (HSD), employees, contract providers, volunteers and youth in secure care facilities.

Unit Heads, the HSD, the CHP, and all managers and supervisors shall be responsible for ensuring the implementation and continued adherence to this policy.

Unit Heads are responsible for conveying the contents of this policy to employees and/or youth.

IV. DEFINITIONS:

Amniotic Fluid - The fluid surrounding the unborn baby in the womb.

Blood Borne Pathogens - Pathogenic microorganisms present in human blood, which may cause disease in humans, including Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV). Other pathogenic microorganisms may be identified or present during acute phases of other infectious diseases.

Body Fluids -

Precaution body fluids - PBF (known to transmit HIV and hepatitis viruses):

- Blood and other bodily fluids containing visible blood;
- Semen;
- Vaginal secretions;
- Cerebrospinal fluid;
- Synovial fluid;
- Pleural fluid;
- Peritoneal fluid;
- Pericardial fluid; and
- Amniotic fluid.

Type I non-precaution body fluids (considered PBF if they contain visible blood):

- Feces;
- Urine; and
- Vomit.

Type II non-precaution body fluids (considered PBF if they contain visible blood):

- Nasal secretions;
- Saliva;
- Sputum;
- Sweat; and
- Tears.

Cerebrospinal Fluid - Fluid found around the brain and the spinal cord.

Communicable/Contagious - Diseases spread by direct or indirect contact.

Contamination - The presence of PBF or Type 1 non-PBF on a surface or piece of clothing.

Hepatitis A - An infectious disease of the liver which is caused by a virus which has been designated as the Hepatitis Virus Type A.

Hepatitis B - An infectious disease of the liver which is caused by a virus which has been designated as the Hepatitis Virus Type B.

Hepatitis C - An infectious disease of the liver which is caused by a virus which has been designated as the Hepatitis Virus Type C (formerly known as non-A, non-B hepatitis).

High Risk Employees - Employees with job titles OR who perform job duties related to the following categories of workers, and have reasonable occupational exposure to blood or other potentially infectious materials are classified as high-risk. Some examples of "high-risk" occupations include healthcare workers, lab technicians, law enforcement officers, first responders, firefighters, custodial workers (that may handle contaminated linen), kitchen workers (that may handle sharp equipment), public safety workers, plumbers, etc.).

HIV (Human Immunodeficiency Virus) - The virus that causes immunosuppression resulting in any number of opportunistic infections and/or diseases and detected through blood tests. Blood, vaginal fluid, and semen are usual modes of transmission of this virus.

Infectious Disease - Any disease caused by the presence of bacteria, protozoa, viruses, or other parasites in the body. The disease may or may not be communicable/contagious (i.e., transmitted from person to person).

Lesion - A break in the skin, a cut, or a scrape.

Latent Tuberculosis Infection (LTBI) - A Tuberculosis infection present or potential, but not evident or active.

Low Risk Employees - Employees who are at low risk exposure to infectious diseases. As an example, these employees generally work in an office or classroom.

Methicillin Resistant Staphylococcus Aureus (MRSA) - A bacterium responsible for several difficult-to-treat infections in humans.

Mucosal - Pertaining to the mucous membrane.

Mucous Membrane - The smooth, moist skin found lining the inside of the mouth, nose, vagina, eye socket, etc.

Occupational Health Clinic (OHC) - Any general hospital, or any other medical facility which operates a corporate medicine program or an employee wellness program which includes any of the following: (1) Routine commercial activities, such as pre-employment examinations, (2) mandated examinations, such as Federal Occupational Safety and Health Administration examinations, (3) routine workers' compensation cases, (4) routine medical evaluations involving establishment of product liability, (5) evaluations consigned to independent medical examiners, (6) employee physical programs, (7) employee wellness programs, or (8) employee drug testing programs.

Perinatal - Pertaining to or occurring in the period shortly before and after birth.

Peritoneal Fluid - Fluid found in the abdomen.

Pleural Fluid - Fluid found surrounding the lungs or in the chest.

Protein Derivative Tuberculin (PDT) - Tuberculin testing for signs of TB.

Saliva - Spit.

Semen - The fluid which is discharged from the penis during ejaculation.

Sputum - Fluid that is coughed up from the lungs.

Synovial Fluid - Fluid found in any joint.

Tuberculosis (TB) - An infectious disease caused by the tubercle bacillus and characterized by the formation of tubercles on the lungs and other tissues of the body, often developing long after the initial infection.

Unit Head – For the purpose of this policy, the Unit Head consists of the Deputy Secretary, Facility Directors and Regional Managers.

Universal Precautions – Universal infection control practices used to treat all human blood and certain body fluids as if they were known to be infected for HIV, HBV and other blood borne pathogens.

Vaginal Secretions - Fluid normally found in the vagina that is secreted by vaginal glands.

Venipuncture - Introduction of a needle into a vein.

V. POLICY:

A. It is the Deputy Secretary's policy that YS Communicable and Contagious Diseases and Infection Control Program shall include the following components:

1. Exposure Determination - An occupational exposure determination shall be prepared and contain a list of all job classifications, tasks and procedures in which some or all employees in those job classifications have occupational exposure.

This determination shall be made without regard to the use of personal protective equipment.

2. Medical Evaluation for Affected Employees - Following a confirmation of an exposure incident, YS shall make immediately available to the exposed employee a confidential medical evaluation and follow-up.

When the source individual is already known to be infected with HBV or HIV, it is not necessary to repeat testing.

3. Methods of Compliance - Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid type is difficult or impossible, all body fluids shall be considered potentially infectious materials. This shall be accomplished by having Work Practice Controls and/or the use of Personal Protective Equipment. These steps shall be taken to reduce the likelihood of exposure.

B. YS and the CHP shall maintain a plan to address the management of infectious, communicable and contagious diseases, including guidelines to contain and/or eliminate the spread of infestations, bacterial, and viral infections. Employees shall attend annual in-service training on infection control measures.

C. Infection control plans shall include procedures for prevention and disinfection of the physical plant, food service areas, and equipment used in living and work areas, standardization of laundry processes and cleaning methods, education, identification, surveillance, immunization (when applicable), treatment, follow-up, medical isolation of infectious cases (when indicated), and reporting requirements to applicable local, State and Federal agencies.

- D. An Infection Control Committee shall be formed at each secure facility to review and discuss communicable/contagious diseases and infection control activities. Committee members shall include a representative of the facility's administration, the facility's contracted Health Services Administrator (HSA), the responsible physician, and other professionals on staff and/or from within the community. The committee shall meet at least quarterly and minutes shall be recorded and maintained on file. A copy of the minutes shall be forwarded to the CO/HSD and the Chief of Operations/CQIS.
- E. Appropriate protective supplies shall be available for use as needed.
- F. Counseling shall be available to all persons who request such services regarding their concerns about communicable/contagious diseases, including ways to prevent the spread of the diseases to others.
- G. Any youth who is involved in an incident in which another person is potentially exposed to an infectious disease by the throwing of feces, urine, blood, saliva, any form of human waste or bodily fluid on the other person shall be appropriately tested to determine whether the youth is infected with an infectious disease.
- H. Managing youth with an MRSA infection shall include evaluation and treatment if indicated in accordance with an approved practice guideline, medical isolation when indicated, and follow-up care, including arrangements for continuity of care if the youth is released prior to the completion of therapy.
- I. The management of TB in youth includes the requirements as identified in this policy. In addition, the program for TB management shall include evaluation and treatment in accordance with an approved practice guideline, medical isolation when indicated, and follow-up care, including arrangements for continuity of care if the youth is released prior to the completion of therapy.
- J. The CHP shall develop policies and procedures for serving youth with infectious diseases. The CO/HSD shall assist the provider with the development of the policies and procedures, which shall address the management of communicable diseases; and provide an orientation and ongoing education for new employees and youth concerning the diseases.

Policies and procedures shall be revised as new information becomes available.

- K. The Deputy Secretary may authorize the testing of an employee for communicable/contagious diseases at an Occupational Health Clinic (OHC) when such testing is in the best interest of YS, such as Management of Tuberculosis - Employees. (Refer to YS Policy No. A.2.67)
- L. Employees involved in any handling of food shall receive a pre-employment health screening/physical examination pursuant to YS Policy No. A.2.61. Annual examinations shall also be required for employees handling and preparing food to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food and utensils. Annual examinations shall be conducted by an Occupational Health Center (OHC) located in the local area where the facility is located, and shall occur on or during the month of the employee's anniversary hire date.
- M. Pursuant to law, a youth under supervision may request to be tested for the presence of HIV. Examinations shall be performed on youth by proper medical authorities for all symptomatic cases of communicable diseases.

Knowledge that a youth has a communicable disease shall be confidential and shall be released only to those responsible for the youth's care and treatment.

VI. PROCEDURES:

- A. General Infection Control Guidelines
 - 1. Hand-washing and personal hygiene - Most bacteria and viruses are transmitted through hand-to-hand contact. Employees and youth shall be taught and continually reminded of the importance of hand-washing. Adequate hand-washing facilities shall be available for employees and youth. Hand-washing soap shall be available at all times.

To prevent skin disease, youth should practice good personal hygiene, including frequent showers. Youth should avoid touching wounds or the drainage of others, and should wash their hands as soon as possible after touching wounds or contaminated dressings or clothes. The practice of hand-washing items of clothing in common sinks or elsewhere is prohibited.
 - 2. Physical plant - All youth living areas shall be cleaned on a regular basis with a disinfectant effective in killing pathologic bacteria and viruses. This cleaning shall be documented as to frequency, areas cleaned, and chemicals used. In addition, individual living spaces, i.e., rooms or beds shall be cleaned whenever the person occupying the space changes.

3. Laundry - Minimum temperatures shall be monitored on all washing machines. The recommended temperature for wash water per the Center for Disease Control (CDC) is 160° F or 71° C for a duration of 25 minutes unless the wash system being used specifies a different temperature. A disinfectant (a detergent and/or powdered bleach on colored clothes and a liquid bleach on whites) shall be used as part of the wash or rinse cycle.
4. Kitchen - Kitchen areas shall be cleaned, sanitized and inspected in pursuant to the requirements of YS Policy No. C.6.1. Appropriate dress and cleanliness are expected of Food Service Workers. They shall wear clean uniforms; keep their hands and nails clean and well-manicured; wash their hands before going to work and before resuming work after breaks or going to the restroom; wear gloves when appropriate to handle food; keep hair clean, no longer than collar length and wear covering on their heads, and keep mustache hair no longer than one-half inch in length - beards shall not be allowed.

Dishwashing water temperatures shall be within acceptable ranges and monitored. Any water temperature deemed to be out of acceptable ranges shall be reported pursuant to YS Policy No. C.6.1.

5. Equipment - Equipment shall be cleaned on a routine basis with a disinfectant. Equipment that is used on a youth shall be cleaned with a disinfectant between uses.
6. Medical isolation - When admitted to an infirmary, youth with contagious infections shall be placed in medical isolation at the discretion of the CHP.
7. Monitoring - A system for trending, monitoring and containment of contagious infectious diseases shall be established by the CHP.

B. Body Fluid Precautions for PBF and Type I non-PBF

1. General Infection Control Guidelines for all Employees and Youth
 - a. Gloves shall be worn when it is anticipated there will be contact with PBF and Type I non-PBF fluids.
 - b. Spills shall be cleaned up as soon as possible.
 - c. Following a spill, contaminated surfaces shall be cleaned with a freshly prepared 1:10 chlorine bleach solution (one part bleach mixed with nine equal parts water) or a comparable disinfectant.

- d. Items soaked with referenced body fluids that are disposable shall be placed in a sturdy red plastic bag, sealed, and marked "Blood and Body Fluid Precautions". Disposal of the bag shall be in compliance with the State Sanitary Code - State of Louisiana Chapter XXVII - "Management of Refuse, Infectious Waste, Medical Waste, and Potentially Infectious Biomedical Waste".
- e. Employees and youth cleaning up spills or handling contaminated items shall wear disposable gloves during the clean-up and wash their hands after such activities, even if they were wearing gloves.
- f. Contaminated clothes and linens shall be placed in a plastic bag, marked "Contaminated Laundry" and laundered with an approved disinfectant. All persons handling contaminated clothing and linens shall wear gloves while doing so.
- g. Employees and youth whose clothes have been contaminated shall be provided a change of clothes and an opportunity to wash as soon as possible, or discard if indicated.
- h. Persons who have had a significant exposure (e.g. splashing into the eye, mouth, or an open lesion; puncture with a contaminated item; or a human bite) shall be evaluated by the CHP regarding the exposure and potential post-exposure prophylactic treatment and follow-up recommendations.
- i. Employees and youth shall be encouraged to cover all open wounds or cuts, especially when handling PBF and Type I non-PBF.
- j. Pregnant women are not known to be at any greater risk to contract these infectious diseases than women who are not pregnant; however, if a woman develops such infections during pregnancy, the infant is at risk for contracting the disease due to perinatal transmission.

Because of this increased risk, pregnant women should be especially familiar with, and strictly adhere to, precautions to minimize the risk of transmission.

C. General Infection Control Guidelines for Custody and Other Employees

1. Searches:

- a. Make sure all open wounds and sores are covered with clean bandages to prevent possible exposure to blood;
- b. Wear protective devices when there is contact with PBF or Type I non-PBF on a youth, clothing, linen, or any other contaminated objects;

- c. Avoid needle sticks or punctures with any sharp objects (e.g., knives or razors that may be contaminated with blood); and
- d. Never blindly place hands in areas where there may be sharp objects that could cut or puncture the skin, and be particularly alert for such objects during searches.

2. Use of Intervention: (Refer to YS Policy No. C.2.6)

- a. The employee shall wear protective gloves if it is anticipated that there will be contact with PBF or Type I non-PBF;
- b. When custody staff is not able to anticipate potential contact with PBF or Type I non-PBF (i.e., when breaking up a fight) and there is no time to put on gloves, the emergency must be handled and then immediately do the following:
 - 1) Thoroughly wash hands and all other areas of the body which were exposed to contamination;
 - 2) Remove contaminated clothes and linens and place them in an appropriately marked plastic bag to launder;
 - 3) Employees and youth whose clothes have been contaminated with PBF or Type I non-PBF of another person shall be provided a change of clothes and an opportunity to wash as soon as possible; and
 - 4) If exposure has occurred, the employee shall be promptly evaluated by the CHP.

3. Procedures for First Aid and CPR:

- a. First aid kits with the proper supplies shall be maintained and stocked with expired contents replaced as needed. The kits shall be available in designated areas as determined by the CHP.
- b. Appropriate ventilation devices shall be included with the first aid kits for use by designated trained personnel to minimize the need for emergency mouth-to-mouth resuscitation.

4. Precautions for Contaminated Equipment or Spills:

- a. All equipment contaminated with PBF or Type I non-PBF shall be initially cleaned with soap and water. A freshly prepared 1:10 solution of bleach (one part bleach mixed with nine equal parts of water) or a comparable disinfectant shall then be used to disinfect the area by wiping all exposed surfaces.

- b. Restraint equipment (i.e., handcuffs) which potentially could be contaminated with PBF or Type I non-PBF shall be similarly washed and then disinfected.
- c. Each appropriate work area shall be provided with disposable gloves for use by employees and youth when it is necessary to handle or clean up PBF or Type I non-PBF. The gloves can be disposed of in the normal trash unless they are contaminated with PBF or Type I non-PBF. They then shall be disposed of according to the facility's infection control procedures, along with all other materials used in the cleanup process.

D. Management of Biohazardous Waste

Each secure care facility shall have a plan for the management of biohazardous waste, and for the disinfection and sterilization of medical and dental equipment.

E. Infection Control Education and Training

1. Employee Orientation:

- a. All new employees shall receive awareness/training by a designated person trained in communicable, contagious and infectious diseases that shall be focused on HIV, AIDS, Hepatitis B and Tuberculosis control.
The training schedule shall be contingent upon the level of exposure (high risk or low risk positions) to blood borne pathogens. All OJJ staff are designated as high-risk for exposure to blood borne pathogens.

All workers with occupational exposure shall receive training within 90 days of hire and at least once per year thereafter.

While in-person classroom instruction is always the preferred method of training, virtual training is an acceptable alternative provided that **all** of the following criteria is met, without any exception:

- The qualified instructor is present and available for interaction at all times.
- Requires all participates to turn on their video feed, leave it on and unobstructed, and remain in front of the camera for the entire duration of the training.
- Assign (and document) someone to monitor the screen the entire time to ensure that no one leaves, is distracted, or tuns off their video feed.

- Limit class size to the max gallery screen allowed under the video setting in the online platform used.
- Central Office and Regional Offices that use this virtual training option shall obtain a participant report from the online platform to use as your attendance sheet and to call roll before and after training. The participate report must be signed and dated by the instructor and designated monitor. The virtual attendance roster shall be maintained on file for auditor review. (**Note:** The host who sets up the virtual training is the person who can print the participant report. It is recommended that this person be designated as the monitor. The instructor and the monitor cannot be the same person).

Instructions to obtain the participation report can be found at:

<https://www.youtube.com/watch?v=OVdbnRn7ms>

- Secure care facilities shall utilize the attached form B.6.2(a), “Blood Borne Pathogens Virtual Training Attendance Roster”. The attendance rosters shall be maintained on file for auditor review.
- b. Documentation that the employee received the orientation shall be entered in the Training Records Entry Completed (TREC) database and/or Louisiana Employees Online (LEO) database and retained in the employee's training file.
 - c. On-going employee annual in-service training shall be provided at each facility and/or regional office.
2. Youth Orientation:
- a. All new youth entering the system shall receive orientation focused on communicable/contagious diseases.
 - b. Documentation that the youth received this orientation shall be maintained in each youth's Master Record.
 - c. Education regarding blood borne infectious health diseases and other communicable/contagious diseases shall be conducted annually by the CHP at each facility.
3. Awareness/training records shall be available for review by the Office of Risk Management, Loss Prevention Unit, and shall be retained for at least five (5) years.

Previous Regulation/Policy Number: B.6.2

Previous Effective Date: 12/09/2021

Attachments/References: B.6.2 (a) Blood Borne Pathogens Virtual Attendance Roster August 2022

**Office of Juvenile Justice
Blood Borne Pathogens
Virtual Attendance Roster**

Date: _____ Location: Central Office P&P Office ACY/ACYSM BCCY SCY/SCYC

Instructor Name: _____ Monitor Name: _____

Start Time: _____ End Time: _____ % of Participation: _____

List of Curriculum – Materials – Hand-Outs (Be Specific):

MUST BE LEGIBLE					
CALL ROLL √	Last Name	First Name	CALL ROLL √	Must Include Personnel # to Receive Credit	Secure Care Signature of Staff
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I swear and attest that the above listed staff attended the Blood Borne Pathogens virtual training class as outlined above.

Signature of Monitor

August 2022