

Policy Name:	INFECTIOUS AND COMMUNICABLE DISEASE EXPOSURE		
Policy #:	AD 5.6	Last Updated:	2022-07-13
Issued By:	SUPPORT SERVICES BUREAU	Approved By:	SURREY POLICE BOARD
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RELATED POLICIES

AD 5.8.2 *Occupational Health and Safety – Workplace Injuries*

OP 4.34.4 *Assault Peace Officer*

1. PURPOSE

1.1 Police work is inherently dangerous. Surrey Police Service (SPS) Employees put themselves in contact with the public and situations regularly during their duties that increase potential exposure to Infectious and Communicable Diseases. This policy ensures Employees reduce the risk of exposure to Infectious and Communicable Diseases through the use of Personal Protective Equipment (PPE) and safety protocols where practicable.

1.2 To provide direction for Members who may have been exposed to a Communicable Disease to obtain a Test Order under the *Emergency Intervention Disclosure Act*.

2. SCOPE

2.1 This policy applies to all Employees.

3. POLICY

3.1 Employees must assume that blood and other bodily fluids, and objects contaminated or possibly contaminated with such fluids are potentially infectious, regardless of the source. Universal precautions such as Personal Protective Equipment (PPE) must be used, whenever practicable.

3.2 Employees must be aware of the risks of Infectious and Communicable diseases and comply with this policy if they believe that they have been exposed to an Infectious or Communicable Disease and/or have confirmed they have been exposed to an Infectious or Communicable Disease.

4. PROCEDURE

4.1 Employees should take precautions and use safety procedures and PPE whenever practicable. Humans can be infected with disease-causing organisms and may not exhibit symptoms of a diseased state. The first line of defence against Infectious Diseases and Communicable Diseases is protecting the Employees' hands, keeping them clean, and keeping them away from the eyes, mouth and nose. Employees should use PPE, such as gloves, masks, and eye protection due to the need for precautions when coming into close contact with persons involved in cases such as motor vehicle collisions, suicides, drug searches, scenes of violent crime and any other incidents where exposure may be increased.

Personal Protective Equipment (PPE)

4.2 PPE protects the wearer from making contact with any bio-hazardous substance. Selection of the appropriate PPE items should be made based on the potential for exposure.

4.3 SPS will supply disposable latex gloves to all Employees who may have close interaction with the public. Employees should wear gloves during any interaction involving physical contact with a member of the public, when practicable. This includes wearing gloves when physically handling items that may have been recently touched by another person.

4.4 PPE must be worn whenever handling blood or bodily fluids, or objects that may be contaminated with blood or bodily fluids. PPE includes disposable gloves (latex, nitrile or similar material), surgical face masks, eye protection, disposable apron or gown, and shoe covers.

4.5 All specialized investigative sections where there is the potential for requiring exposure to biohazardous material (e.g., crime scenes) will have protective garment kits and supplies available including:

- i. One-piece hooded suits;
- ii. boot covers;
- iii. latex gloves or similar;
- iv. surgical face masks / or issued CBRN respirator mask; and
- v. protective eyewear.

4.6 Disposable latex gloves must be worn by investigators and crime scene technicians while investigating all incidents where blood and other bodily fluids or persons are or may reasonably be suspected of being present.

4.7 Surgical masks and protective eyewear or full-face shields must be used when the possibility exists that dried blood particles or drops of liquid blood may strike the face or eyes.

4.8 Disposable protective shoe coverings must be considered if footwear could become contaminated with blood, which can be transported from the crime scene to police vehicles, the police station, or home.

Modes of Transmission

4.9 The appropriate PPE should be chosen based on the potential exposures that may exist when attending a medical incident and providing treatment to a person. Exposure to hazardous microorganisms may occur through direct contact, droplets, or airborne particles. The following are examples for each type of potential exposure:

- Contact - MRSA, C. Diff, Hepatitis (A, B, C), or HIV.
- Droplet - Rhinovirus, Influenza, SARS, Meningitis, Mumps.
- Airborne - TB, Chicken pox (Varicella), Measles, Coronavirus

Exposure - Employee

4.10 If an Employee believes they may have been exposed to Infectious or Communicable Disease by coming into contact with blood or bodily fluids of another person, or an Employee has received a hypodermic needle stick injury, the Employee must:

- i. immediately notify their Supervisor that an exposure has occurred;
- ii. if applicable, make all reasonable attempts to convince the involved person to accompany the Employee to the hospital for blood analysis;
- iii. attend the closest hospital Emergency Ward to receive the appropriate medical aid; and
- iv. complete the Employee section of a Worksafe BC claim form.

Note: the optimal time for attending the hospital is within two (2) hours following the exposure, or as soon as possible.

Exposure - Supervisor

4.11 Upon being notified that an Employee may have been exposed to an Infectious or Communicable Disease, the Supervisor must:

- i. attend the hospital and meet with the Employee who sustained the exposure; and
- ii. conduct an evaluation of the Employee's needs and wellbeing, taking the extent of the exposure into consideration;
- iii. complete, along with the Employee (or for the Employee if appropriate) a Worksafe BC claim form. The Supervisor must fully investigate, complete the Supervisor's portion of the Worksafe

- BC form and forward to the Employee Services Section, within 24 hours of the incident (see AD 5.8.2 *Occupational Health and Safety – Workplace Injuries*); and
- iv. notify the Duty Officer and provide all relevant details regarding the exposure and any need for immediate follow up by other sections of SPS.

Exposure – Duty Officer

4.12 The Duty Officer must notify:

- i. Employee Services Section (ESS) (or Human Resources (HR) for civilian Employees);
- ii. the Wellness Management Team, if appropriate; and
- iii. the Employee’s Inspector/Manager regarding the exposure and report on the actions taken regarding the exposed Employee.

Exposure – ESS/HR

4.13 Upon being notified that an Employee may have been exposed to an Infectious or Communicable Disease, ESS or HR designate must:

- i. upon receipt of the Worksafe BC form, contact the Employee to ensure that appropriate follow-up medical treatment is provided and that all necessary reports have been completed;
- ii. if required, provide a Member with information regarding making an application for a Testing Order under the *Emergency Intervention Disclosure Act* and assist with the application process; and
- iii. provide any other assistance for the Employee as required.

Decontamination and Disposal of Contaminated Items

4.14 Employees must attempt to clean and decontaminate reusable duty-issued equipment and supplies using a germicide or bleach solution if available.

4.15 Employees should wear clean gloves to remove other PPE items such as facemasks, protective earwear and shoe covers. All one-time use PPE and disposable items such as pens, pencils, gloves, masks and shoe covers must be placed in a sealed plastic bag and labelled for disposal.

4.16 Needles, syringes and other small sharp objects or contaminated items must be placed in needle drop box receptacles with a biohazardous label. Needles and syringes seized for evidence can be placed in a transparent plastic tube with a biohazardous label and processed as required.

Member Safety – *Emergency Intervention Disclosure Act*

4.17 The *Emergency Intervention Disclosure Act* (EIDA) permits Members to apply to the Provincial Court of British Columbia for an order to have another person tested for Hepatitis B, Hepatitis C, and HIV if they have come into contact with that person’s blood or bodily substance in any of the following circumstances:

- i. while providing emergency health services;
- ii. while performing their duties as a firefighter, an emergency medical assistant, or a peace officer; or
- iii. when they have reason to believe that they have been the victim of an alleged offence under the *Criminal Code* and have reported the matter to a law enforcement agency.

4.18 If the source individual may have committed an offence under *Criminal Code* section 270.01 (assaulting a peace officer with weapon or causing bodily harm) by intentionally exposing the Member to blood and/or bodily fluids, see policy OP 4.34.4 *Assault Peace Officer*, section 4.7.

4.19 The purpose of the testing order is to provide information to the exposed individual (Member) about the health status of the source individual, which may assist the exposed individual and their physician in managing the possible consequences of the exposure.

4.20 The source individual can agree to be voluntarily tested by consent for infectious blood-borne diseases beyond those included in EIDA. The voluntary consent form should authorize testing for Hepatitis A, B, C, D and E, HIV/AIDS, MRSA (methicillin-resistant staphylococcus aureus), necrotizing fasciitis (flesh-eating disease), and Herpes viruses (relevant for eye infections arising from exposure to the eyeball). The source individual and the Member exposed can consult any primary care provider or emergency department to undergo testing, and request that the results be communicated to the exposed individual's healthcare provider. Voluntary consent to blood testing is not subject to the use and disclosure limitations in EIDA.

4.21 If the source individual does not agree to be voluntarily tested, they must be informed of the exposed individual's intention to apply for a testing order.

4.22 The testing sample can only be analysed for the diseases specified in the testing order and may not be used for any other purpose.

4.23 Testing orders under EIDA are not available for blood testing of deceased bodies, including source individuals who intentionally or accidentally exposed a Member to blood and/or bodily fluids while the source individual was alive, and then the source individual subsequently died.

Confidentiality

4.24 A person must not disclose any information concerning either the applicant for a testing order or the source individual that is revealed in the course of carrying out the responsibilities under EIDA, or as a result of obtaining a testing order.

4.25 The prohibition against disclosing information does not apply in the following circumstances:

- i. in the course of administering EIDA or of carrying out a duty imposed or exercising a power given under EIDA;
- ii. as required by law;
- iii. with the consent of the person whom the information is about;
- iv. in the course of a consultation between qualified health professionals; and
- v. in the case of information about a person who is a minor or represented adult, to a guardian of that person.

Non-Compliance

4.26 If a source individual does not comply with a testing order issued by the Provincial Court, EIDA provides for fines of up to \$10,000, upon conviction, for each day that the contravention continues.

Forms

4.27 The following forms are required to apply for a testing order (they are located on the British Columbia Government website: <http://www.healthlinkbc.ca>):

- i. Notice of Intention;
- ii. Affidavit of Personal Service;
- iii. Physician's Report;
- iv. Application to Obtain a Testing Order;
- v. Testing Order Template; and
- vi. Information Accompanying Testing Order.

Test Results

4.28 The source individual named in the testing order must attend the health facility identified in the order to have a blood sample taken. The health facility must then deliver the sample to the BC Centre for Disease Control (BCCDC) to have it analysed for the specified diseases.

4.29 When the analysis is complete, the BCCDC will provide a written report of the results to both the applicant's and the source individual's physicians. If the source individual did not provide a physician's name to the health facility, they will receive the results directly from the BCCDC.

Appeal Process

4.30 The source individual and the applicant have the right to appeal the Provincial Court's decision relating to a testing order to the Supreme Court of British Columbia.

Service of Documents

4.31 All documents must be served personally by the Member, or by someone acting on their behalf. Whoever serves a document must complete an Affidavit of Service, which must then be filed with the Provincial Court registry office. If there is more than one person served, a separate Affidavit of Service must be prepared for each person.

4.32 If it is impossible or impracticable to serve the documents upon the source individual within a reasonable time, the applicant must articulate to the court the reasons why and provide details of all efforts that were made to do so.

4.33 If the person to be served is under the age of 19 years or is a represented adult, the documents should be served on the parent or guardian of that person.

Procedure for Applying

4.34 A Member who wishes to apply for a testing order (the applicant) must consult the Employee Services Section Wellness Sergeant. The ESS Wellness Sergeant will consult the SPS Legal Application Support Team (LAST) for procedural advice on EIDA testing orders. ESS and LAST will consult the SPS General Counsel, Legal Services for legal advice on EIDA testing orders and blood testing by consent of the source individual.

4.35 The following procedures apply:

Notice of Intention

- i. The applicant must complete the Notice of Intention form, and retain a copy.
- ii. The applicant, or someone acting on their behalf, must personally serve the original Notice of Intention on the source individual at least three days before applying to the court for a testing order.
- iii. Once the Notice of Intention form has been served on the source individual, the applicant or the person who served the document must complete an Affidavit of Personal Service form.
- iv. The applicant must keep the copy of the completed Notice of Intention form that was served on the source individual, along with the completed Affidavit of Personal Service form, as evidence for court.
- v. If the source individual agrees to be voluntarily tested after receiving the Notice of Intention, they must sign the "Consent for Voluntary Testing", and follow the instructions on the accompanying information sheet: About the Notice of Intention Form.

Physician's Report

- vi. The Physician's Report is a required form that is part of the application to the court for a testing order. The applicant should request that a physician complete the Physician's Report as soon as possible. The applicant will retain the original, and make three copies of the Physician's Report.
- vii. The applicant must tell the physician that the report is related to a Worksafe BC claim. If the applicant is required to pay the associated fees at the time of the consultation, the applicant should pay the fees, retain the receipt, and contact the Employee Services Wellness Sergeant for assistance at the earliest convenience.

Application to Obtain a Testing Order

- viii. The applicant must complete the first page of the Application to Obtain a Testing Order, and must allow three (3) days to pass between serving the Notice of Intention and making the application for a testing order. The application must be made within thirty (30) days of when the exposure to the blood/bodily substance of the source individual occurred. In addition to the original, the applicant will need three (3) copies of the Application to Obtain a Testing Order for court purposes.
- ix. The applicant will also require a Testing Order Template, which will accompany the Application to Obtain a Testing Order.
- x. The completed Application to Obtain a Testing Order and accompanying documents must be filed at the BC Provincial Court registry office.
- xi. The following documents must be filed together at the Provincial Court registry:
 - A copy of the Notice of Intention to apply for a testing order that was served on the source individual
 - The completed Affidavit of Personal Service relating to the Notice of Intention
 - The original and three (3) copies of the Physician's Report
 - The original and three (3) copies of the completed Application to Obtain a Testing Order
 - The testing order template
- xii. After the Provincial Court registry office has entered the date, time, and location of the court hearing on the Application to Obtain a Testing Order form, the applicant, or someone acting on their behalf, must personally serve the Application to Obtain a Testing Order and a copy of the completed Physician's Report on the source individual at least four (4) days before the scheduled date for the court hearing.
- xiii. An Affidavit of Personal Service must be signed by whoever has served the documents, and filed with the Provincial Court Registry office.

Serving the Testing Order

- xiv. If, following the hearing, the court grants a testing order, the applicant, or someone acting on their behalf, must, within the time period specified in the order, serve the following documents on both the source individual and the health facility identified in the order:
 - a. The testing order.
 - b. the information sheet titled "Information Accompanying Testing Order".
- xv. Separate Affidavits of Personal Service must be signed by whoever has served the documents on both the source individual and the health facility, and filed with the Provincial Court Registry office.

Non-Compliance

xvi. If the source individual fails or refuses to comply with the testing order, charges can be requested under section 13 of EIDA, which provides for fines of up to \$10,000, upon conviction, for each day that the contravention continues. EIDA contains no arrest provision; a source individual cannot be arrested without warrant for failing or refusing to comply with a testing order, and police cannot use force to restrain a source individual when the source individual is being blood tested by medical personnel.

Note: for further information on the testing process, step by step instructions and the required forms, Employees can refer to <http://www.healthlinkbc.ca> and search the FAQ about Testing Orders.

APPENDIX A: DEFINITIONS

“Applicant” means an exposed individual who is applying to the court for a testing order.

“BCCDC” means the British Columbia Centre for Disease Control.

“Communicable Disease” means a contagious disease that is spread from human and/or animal to human through various means.

“EIDA” means the *Emergency Intervention Disclosure Act*.

“Employee” means a sworn Police Officer or civilian Employee appointed by the Surrey Police Board.

“Exposed Individual” means the individual who came into contact with another person’s blood or other bodily substance.

“Infectious Disease” means an illness that spreads by an infectious agent entering the body.

“Member” means a sworn Police Officer appointed by the Surrey Police Board.

“PPE” means personal protective equipment.

“Source Individual” means a person identified by an applicant as the person with whose blood or other bodily substance the applicant came into contact.

“Supervisor” means a Team Leader, Manager, Staff Sergeant, Sergeant, Inspector, Superintendent, Deputy Chief Constable, Chief Constable, and any other person acting in a Supervisory capacity who is accountable for a particular area or shift on behalf of SPS.

APPENDIX B: REFERENCES

Emergency Intervention Disclosure Act, S.B.C. 2012, c. 19

<http://www.healthlinkbc.ca>