



ADMINISTRATIVE PROCEDURE

**ADMINISTRATIVE PROCEDURE NO: AP 309.01
RELATED TO POLICY NO. 309**

TITLE: EMPLOYEE PROCEDURES

In order to protect employees, students and visitors, the College has established rules and procedures for prevention or transmission of communicable diseases including Hepatitis B and HIV infections/ARC/AIDS. All college employees will abide by these rules and procedures.

- A. All college employees shall take reasonable and necessary steps to prevent the spread of communicable/infectious disease.
- B. Self-disclosure is voluntary. However, since any disease may adversely affect job performance, an employee with a communicable disease is encouraged to seek assistance from a supervisor and/or the Director of Personnel/Affirmative Action. Job performance alone, not the fact that an employee seeks assistance, will be the basis of performance appraisals.
- C. If the College becomes aware that an employee has been diagnosed as having a communicable disease, the information will not be disseminated to anyone without the permission of the infected person. If rumors or co-worker concerns become so wide spread and disruptive that it is impractical to maintain productivity, the consent and cooperation of the infected employee will be sought in developing coworker communication.
- D. College employees will receive educational information on communicable diseases and preventative/precautionary measures. Dissemination of accurate information and creation of informed public opinion about the blood borne diseases relating to HIV virus (AIDS, ARC, HIV test positive) is a policy goal of the College. Appropriate educational efforts directed to employees shall be undertaken through the office of Staff Development.
- E. In the case of employees who are unable to perform regular duties due to health, it shall be the policy of the College in regard to the impacted employee to consider and, if reasonably available, provide alternative work assignments until an impacted employee again becomes health qualified for return to regular assignment.
- F. Any employee who has a communicable disease will be treated the same for all employment-related purposes as other employees who have medical conditions with a similar impact on the employee's job performance. If reassignment or lay-off is necessary to provide reasonable accommodation for an infected employee, the action taken will follow appropriate college policies that govern such reassignments or layoffs for medical reason, including the use of appropriate sick leave and disability leaves.

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- G. The following Administrative Rules for Infection Control as outlined by Oregon Health Division shall be followed by all employees. (These apply to all situations, not just to those persons known to have Hepatitis B and HIV infections/ARC/AIDS.)

[Oregon Health Division's Guidelines for AIDS in the Workplace, 9/86]

"... B. Recommendations: ... Infection control guidelines: These apply to all situations, not just to those persons known to have AIDS, HTLV-III infection, or hepatitis B.

"Infections of greatest concern in the workplace are those transmitted by the respiratory route (measles, influenza). At a much lower level of risk, diseases spread by the fecaloral route (Hepatitis A, salmonellosis), or by close personal contact (examples: staphylococcal skin infections, head lice) may be of concern. Good personal hygiene (hand washing, covering coughs and sneezes, etc.) early diagnosis and treatment, exclusion from work while infectious if a risk of transmission exists, and adequate environmental hygiene -- are the primary defenses against the spread of infectious disease.

Blood-borne and sexually-transmitted infections (examples: Hepatitis B and the AIDS virus, HIV) are generally of little concern in the workplace because they require mucous membrane or blood exposure to an infected person's blood or body fluids in order for transmission to occur. This usually means sexual contact or injectable drug and needle-sharing with the person who is ill. However, given concerns about the acquired immunodeficiency syndrome (AIDS), the Oregon Health Division is issuing the following set of guidelines.

a. Background

- i. The causative agent of AIDS is a virus, known as human immunodeficiency virus (HIV). It is also known as the human T-lymph tropic virus type III (HTVL-III).
- ii. The HIV is most commonly transmitted through intimate sexual contact involving exchange of semen and/or other body fluids, or via sharing of infectious blood during i.v. drug abuse. Newborn infants may be infected prenatally by infected mothers.
- iii. The vast majority of persons infected with this virus is currently free of symptoms, and are unaware that they have been infected.
- iv. There is no evidence to date that casual contact exposure has led to transmission of the virus. There is much evidence from the study of household contacts of AIDS cases that spread of the infection does not occur through casual contact.
- v. Many infected persons may never become ill from this infection; however, all persons infected with HIV must be presumed to be capable of transmitting the virus to others, through sexual contact or blood contact.
- vi. An infected person may experience a spectrum of clinical conditions, and may remain without symptoms indefinitely. It generally takes 3 years or more for an infected person to develop AIDS, among that small percentage of infected persons who develop the syndrome.
- vii. Once diagnosed as having AIDS, most patients die within 2 years.
- viii. The virus is quite fragile and is quickly killed on environmental surfaces, when treated with common, inexpensive disinfectants (see below).
- ix. At present, the only means available to ascertain a person's infection status is a special antibody test. If a person is infected, the test should become positive within 12 weeks. However, the test is not 100% accurate, and for many reasons is

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- not recommended for routine screening of all persons.
- x. All sharp objects which could be a source of cuts, punctures, or lacerations, should be covered where possible or labeled appropriately. When needles are used in health care facilities, personnel should be educated not to re-sheath them after use. Sharp objects must be disposed of in safe containers so as not to pose a hazard for custodial personnel. [Special procedures may be appropriate where moving machinery exists which could cause a bleeding injury, such as on assembly lines.]
 - xi. Persons with cuts, scratches, or other lesions on the hands or other exposed areas, should wear covering bandages and/or gloves to prevent blood/body fluid contamination of their surroundings, of themselves, or of other persons.
 - xii. Whenever possible, disposable rubber or plastic gloves should be worn when providing first aid for bleeding injuries. However, administration of appropriate care should not be delayed because gloves are not available.
 - xiii. Contact of the skin with blood or body fluids from other persons should be avoided. If such exposure occurs, the affected skin should be washed thoroughly with soap and water.
 - xiv. Contact with the mouth, eyes, or other mucous membrane areas with blood or other body fluids from other persons should be avoided. If such exposure occurs, the affected region should be washed thoroughly with water.
 - xv. Environmental surfaces on which blood has been spilled should be cleaned promptly with soap and water, followed by disinfection with a freshly made solution of one part bleach to 10 parts water. Some commercially available disinfectants are an acceptable substitute.
 - xvi. Blood-contaminated items such as gloves, bandages, and paper towels should be placed in a sealed plastic bag, and immediately put in the garbage receptacle.
 - xvii. Hard, impervious containers should be used when disposing of sharp blood-contaminated materials which could cause injuries to others.
 - xviii. An incident in which blood from one person contacts mucous membranes or broken skin of another should be promptly reported to the supervisor.

DATE OF ADOPTION:

DATE(S) OF REVISION(S):

DATE OF LAST REVIEW: