



# INTERNAL MANAGEMENT POLICY & PROCEDURE

**Applicability:**  ADULT Operations Only  JUVENILE Operations Only  DEPARTMENT-WIDE

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**SAFETY AND SANITATION: Prevention and Control of Communicable, Environmental, and Infectious Diseases**

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**Approved By:** \_\_\_\_\_, Secretary **Next Scheduled Review:** 01/2025

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## POLICY

The Kansas Department of Corrections shall implement a comprehensive program designed to prevent the incidence and spread of communicable, environmental, and infectious diseases. Appropriate procedures and guidelines shall be established to ensure the safety and health of its employees, residents, and members of the general public who enter into departmental facilities and/or offices. The resources of the Department and the Regional Medical Director shall be utilized to prevent, identify, monitor, control, manage, and treat such diseases.

## DEFINITIONS

**Appointing Authority:** As defined in IMPP 02-109D, any person or group of persons empowered by the constitution, by statute or by lawfully delegated authority to make appointments to positions in the State service pursuant to KAR 1-2-9. Anytime this term is used in this IMPP, it can be read as referring to the "appointing authority or designee".

**Blood borne pathogens:** Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV).

**Communicable diseases:** A disease due to an infectious agent, which may be transmitted directly or indirectly from one individual to another.

**Contaminated laundry:** Laundry which has been soiled with blood, body fluids, or other potentially infectious materials or which may contain sharps.

**Contaminated sharps:** Any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, exposed ends of dental wires, and weapons such as shanks, clubs, etc.

**Regional Medical Director:** The medical director of the agency or organization responsible for the provision of health care services for the Kansas Department of Corrections.

**Employee:** Any person employed full-time, part-time, or on a temporary appointment to the Kansas Department of Corrections, including personnel employed by a contractor to provide services to the Kansas Department of Corrections.

**Engineering controls:** Containers or devices (e.g., sharps disposal containers, self-sheathing needles) that isolate or remove the infectious pathogens hazard from the workplace.

Environmental diseases: Diseases not normally considered "communicable" or "infectious" caused by an organism present in the environment, which leads to illness in an individual only under specific circumstances (e.g., Legionella, botulism and tetanus are generally present in the environment and produce illness only under unique circumstances in individuals who are susceptible).

Exposure incident: A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or potentially infectious materials that results from the performance of an employee's duties.

Hand washing facilities: Permanent or portable facilities providing an adequate supply of running potable water, soap, and single use towels or hot air-drying machines.

Infectious diseases: Any disease caused by growth of pathogenic microorganisms in the body, capable of being transmitted with or without contact.

Office of Healthcare Compliance: The Kansas University Medical Center staff designated by the Deputy Secretary of Programs and Staff Development to serve as the Departments liaisons with the Regional Medical Director, responsible for oversight of the health care services program.

Occupational exposure: Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with body fluids, blood or other potentially infectious material that may result from the performance of an employee's duties.

Parenteral contact: Contact which results in material being taken into the body by injection or under the skin rather than through the digestive tract.

Personal protective equipment: Specialized clothing or equipment worn by an employee for protection against a hazard (e.g., blood, body fluids, sharps, etc.). General work clothes (e.g., uniforms, pants, shirts, or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

Standard Precautions: An approach to infection control based on the concept that all human blood and certain human body fluids are treated as if known to be infectious for Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and other blood borne pathogens.

Work practice controls: Controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting the recapping of needles by a two-handed technique).

## **PROCEDURES**

### **I. Elements of the Program**

- A. The KDOC program for the prevention and control of communicable, environmental, and infectious diseases shall consist of the following:
  1. Infection Control Manual provided by the Contracted Health Services Provider, approved by the Regional Medical Director and Office of Health Care Compliance.;
  2. Occupational Exposure Control Manual (OECM) provided by the KDOC;
  3. All Internal Management Policies and Procedures (IMPPs) pertaining to the prevention, control, and treatment of communicable, environmental and/or infectious diseases; and,
  4. All policies, procedures, and protocols issued by the Contracted Health Services Provider that pertain to the prevention, control, and treatment of communicable, environmental and/or infectious diseases.
    - a. All manuals, policies, procedures, and protocols issued by the Departmental Health Authority shall be subject to approval Office of Health Care Compliance.
    - b. All manuals, policies, procedures, and protocols issued by the Contracted Health Services Provider shall be in compliance with KDHE and or CDC guidelines and include reporting requirements to applicable local, state, and federal agencies.

- B. The Department shall maintain a tuberculosis screening program, per the procedures provided in the KDOC Occupational Exposure Control Manual (OECM).
1. All employees, contract workers, and facility volunteers who serve more than 20 hours per week shall be required to participate in annual tuberculosis skin testing.
  2. As a condition of employment, all newly hired facility personnel and contract workers, as well as newly approved volunteers, shall obtain a TB skin test and test annually thereafter.
  3. Testing shall be accomplished through clinics in KDOC facilities, or, at the person's option, through their personal physician.
  4. Individuals found to have a positive reaction shall be responsible for follow-up consultation with their physician.
    - a. Provisions for leave for employees, within reason and subject to the approval of the appointing authority, will be granted for such follow-up procedures and consultation.
    - b. Employees found to be infectious, requiring their absence from work, shall be required to use leave benefits.
  5. Any employee who refuses to comply with any part of the mandated testing shall be subject to disciplinary action, up to and including dismissal; and any contract worker or volunteer who so refuses shall be barred from KDOC offices, facilities, and grounds.

## **II. Infection Control Manual**

- A. Under the direction of the Regional Medical Director as designated by the Secretary, an Infection Control Manual shall be maintained for use at all facilities and offices.
- B. The Infection Control Manual shall provide specific procedures and consolidate all other existing policies and procedures related to the prevention, control, and treatment of infectious diseases. It shall include coverage of each of the following topic areas:
1. Glossary of terms;
  2. Precautions including isolation precautions;
  3. Protective clothing and equipment;
  4. Medical clinic and infirmary;
  5. Cleaning and disinfecting;
  6. Search precautions;
  7. Infectious waste disposal;
  8. Laundry;
  9. Security equipment and vehicles;
  10. Record keeping; and
  11. Training.
- C. The manual shall mandate the use of strict adherence to universal precautions, emphasizing personal protective equipment, engineering and workspace controls. This includes, but is not necessarily limited to:

1. Storage, handling and disposal of blood and other body fluids;
  2. Storage, handling, and cleaning of contaminated laundry.
  3. Storage, handling and disposal of contaminated sharps;
  4. Location of hand washing facilities; and,
  5. Decontamination of medical, transportation equipment and vehicles.
- D. Procedures established in the Infection Control Manual shall have the same force and effect as if they had been established in an IMPP.
- E. The Infection Control Manual shall be used in conjunction with any housekeeping or safety plan or manual in use at a facility or office.
1. In the event of conflict between the Infection Control Manual and the housekeeping plan or manual in use at a facility or office, the Infection Control Manual shall control.
    - a. In such instances, the appropriate KDOC Deputy Secretary, Contracted Health Services Provider, and Office of Healthcare Compliance shall coordinate corrective action to correct the conflict.
- F. The Infection Control Manual shall be accessible to all employees.
- G. The Infection Control Manual shall be reviewed annually and revised as new information becomes available.

### **III. Occupational Exposure Control Manual (OECM)**

- A. The Occupational Exposure Control Manual shall :
1. Establish measures, which detect, prevent, and control the risk of transmitting disease through body fluids, blood borne pathogens, and other potentially communicable and/or infectious material.
  2. Provide for effective post exposure follow-up, treatment or referral for treatment, and reporting of exposure to blood borne pathogens and other communicable diseases.
  3. Provide the procedures and related forms, identify the test methods, and specify the responsibilities of staff for the implementation of the Department's Tuberculosis Screening program.
  4. Maintain confidentiality in accordance with appropriate statutes.
- B. The content of the OECM shall:
1. Set forth in writing the job classifications and the associated tasks and procedures where occupational exposure to blood and/or other body fluids or infectious material could occur.
  2. List the required personal protective equipment (e.g., gloves, gowns, masks, mouthpieces, and resuscitation bags) and its location.
  3. Establish the post exposure evaluation and follow-up procedures for any exposure incident which include:
    - a. Reporting of the exposure incident;
    - b. Confidential medical evaluation;

- c. Documentation of the circumstances of exposure;
  - d. Identifying and testing of source individual if feasible;
  - e. Testing exposed employee's or resident's blood if he/she consents;
    - (1) Provisions shall be made to ensure that residents suspected of having a communicable disease receive a medical evaluation.
    - (2) Indicate when and where staff and/or residents will be tested; and,
    - (3) Indicate who will be responsible to conduct the tests
  - f. Post-exposure prophylaxis;
  - g. Follow-up counseling, and,
  - h. Medical referral, when necessary.
4. Provide for appropriate orientation training on the plan prior to independent assignment of duties following the initial employment and, at least annually thereafter, the training of employees identified as being at risk of exposure.
- a. Corrections officers and other staff with risk of occupational exposure shall receive basic and annual training in the precautions and procedures with respect to infectious and communicable diseases, in accordance with IMPP 03-104D.
  - b. Residents shall be provided health education and training in self-care skills related to HIV infection, AIDS and HBV, MRSA, and other infectious diseases.
5. Mandate procedures for proper record keeping, which include:
- a. Provision to confidentially maintain records of exposure incidents for the duration of the subject employee's employment plus 30 years.
  - b. Exposure incident records shall include:
    - (1) Name and social security number of the affected employee;
    - (2) Description of the incident;
    - (3) Hepatitis B vaccination status (including dates) of the affected employee; and,
    - (4) Results of examinations, medical testing and follow-up procedures.
  - c. Training records shall be maintained in accordance with IMPP 03-110D.
  - d. Records shall be accessible to the affected employee upon written request.
- C. The OEEM shall be accessible to all employees, and to residents on a need-to-know basis.
- D. The OEEM shall be reviewed annually and updated as necessary by staff designated by the Secretary in consultation with the Office of Healthcare Compliance and designees.

#### **IV. Related Internal Management Policies and Procedures (IMPPs)**

- A. The following IMPPs shall be considered part of the Prevention, Control, and Treatment of Infectious Disease Program:

1. 01-113D Incident Reports and Immediately Reportable Incidents;
2. 03-104D Minimum Departmental Training Standards ;
3. 03-118D Training Requirements for Designated Fire Safety Officers, Health and Sanitation Officers, Industrial Safety Officers, and Weekly Inspectors;
4. 09-102D Housekeeping Plans and Health and Sanitation Inspections;
5. 09-103D Industrial Safety Inspections and Preventative Maintenance Plans;
6. 10-124D Health Screening; Sanitation and Hygiene Requirements for Food Service Workers;
7. 10-125 Provisions for Use of Resident Labor for Community Service Work;
8. 12-112D Control and Use of Hazardous Materials Within Facilities;
9. 15-101A Work Release Selection Criteria and Placement Procedures;
10. 15-102A KCI Industry and Private Industry Employment Selection Criteria and Placement Procedures;
11. 16-103D Utilization of Residents in the Health Services Area; and
12. 16-106D Management of Residents with Infectious/Communicable Disease.

**V. Related Contracted Health Services Provider Policies**

- A. All policies and procedures of the Contracted Health Services Provider which prescribe the procedures to prevent, identify, monitor/control and/or treat communicable, environmental and infectious diseases shall be considered part of the Prevention, Control and Treatment of Infectious Disease Program.

**VI. General Orders and Post Orders**

- A. Facility General Orders and/or Post Orders may be developed which address the site-specific procedures required to implement the provisions of this IMPP.
  1. Such orders shall be limited to the responsibilities of staff designated to implement the program of prevention and control of communicable, environmental, and infectious diseases.
  2. Such orders may also include the designation of staff responsible to monitor the facility's compliance with this IMPP, the Infection Control Manual, and the Occupational Exposure Control Manual.
- B. Facility General Orders and/or Post Orders shall be developed which ensure:
  1. The installation, maintenance, and appropriate use of liquid soap dispensers in the following areas:
    - a. All restrooms and showers in the clinics and infirmaries;
    - b. Restrooms of all community living areas such as day rooms;
    - c. Employee and public restrooms; and,
    - d. Dorm/cellhouse rest rooms shared by greater than four residents.

2. The availability of hand towelettes and hand sanitizer on the transportation buses for both employees and residents to use after using the restroom, before eating, and at such other times as they are personally determined to be necessary for adequate hygiene.

**NOTE:** The policy and procedures set forth herein are intended to establish directives and guidelines for staff, residents and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees, residents or offenders, or an independent duty owed by the Department of Corrections to employees, residents, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure are not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

### **REPORTS**

None.

### **REFERENCES**

KDOC Occupational Exposure Control Manual  
KAR 1-2-9

IMPP 01-113D, 02-109D, 03-104D, 03-110D, 03-118D, 09-102D, 09-103D, 10-124D, 10-125, 12-112D, 15-101A, 15-102A, 16-103D, 16-106D

### **HISTORY**

04-14-2022 Original

### **ATTACHMENTS**

None.