

Policy

- A. The Department will instruct both employees and prisoners on how to help prevent the spread of specific infectious diseases transmitted by airborne pathogens. The Department's instructions will comply with state law, federal law, and Departmental policies.
- B. Prior to hiring, the Department will conduct TB testing for institutional personnel and other Department employees who have frequent contact with prisoners, probationers, and parolees. Employees in these groups will be offered TB tests at least annually.

Procedure. The Department will implement the disease-specific protocols in sections B through D below. These precautions normally are sufficient to prevent the airborne transmission of droplet infection (see section A(2) below).

- A. **General:** The definitions below apply to this policy:
 - 1. Airborne Pathogens. Airborne pathogens are pathogenic microorganisms that are spread by droplet nuclei through the air by coughing, sneezing, singing, or talking. These pathogens include, but are not limited to: hemophilus influenzae, measles, meningitis, mumps, pertussis, tuberculosis, diphtheria, plague, and varicella.
 - 2. Droplet Infection. A person may acquire a droplet infection by inhaling pathogenic microorganisms in particles of liquid that an infected person exhales, sneezes, or coughs.
 - 3. Occupational Exposure. Reasonably anticipated eye, mouth, mucous membrane, or respiratory contact with potentially infectious materials that may result from an employee performing his or her duties.
 - 4. Source Individual. Any individual, living or dead, whose potentially infectious materials may be a source of occupational exposure to an employee.
- B. **General Respiratory Protocol.** This protocol is designed to prevent transmission of infectious diseases primarily over distances through air by droplet transmission.
 - 1. Diseases or Conditions. The following diseases or conditions require general respiratory protocol:
 - a. epiglottitis, hemophilus influenzae;
 - b. measles;
 - c. meningitis—either suspected or known;
 - d. meningococcal disease;
 - e. mumps;
 - f. pertussis; and
 - g. pneumonia, hemophilus influenzae.

2. Procedures

- a. The Department shall place a prisoner diagnosed with any of the diseases in section B(1) above in a single cell, preferably with negative air flow.
- b. Health care staff must place a warning sign outside the isolation room stating the necessary precautions.
- c. All persons (e.g., medical staff, correctional staff, and other prisoners) must wear masks when in close contact with the prisoner.
- d. Persons need not wear gowns and gloves.
- e. All persons must wash their hands after touching the prisoner or any potentially contaminated articles. A potentially contaminated article has the presence or the reasonably anticipated presence of droplet nuclei on the item or surface, e.g., tissues, laundry, or any other object that has been soiled with potentially infectious materials.
- f. Staff must double-bag contaminated articles in red or orange bags and label them "CONTAMINATED" before sending them out for decontamination, sterilization, reprocessing, or destruction under current Occupational Safety and Health Administration (OSHA) regulations.
- g. If the Department releases an infectious prisoner from custody, institutional health personnel shall notify the public health nurse and, if appropriate, the probation or parole officers of the prisoner's airborne pathogen status.

C. Tuberculosis Protocol (Acid-Fast Bacilli (AFB) Isolation). This protocol is for prisoners who have been diagnosed with pulmonary TB, who have a positive smear or chest x-ray (CXR) that is indicative of active TB, or have suspected disease until proven non-infective. The infectious agent for TB is carried on airborne droplet nuclei that are so small (1-5 microns) that normal air currents can keep them airborne for long periods of time.

1. Procedures

- a. The Department shall screen and test all prisoners for TB within 48 hours of incarceration, before placing them in a community residential center. Inmates shall be screened annually thereafter.
- b. Health care staff shall inform the Superintendent or designee of any prisoner who meets the criteria in section C above. The Superintendent shall place the prisoner in a negative pressure cell or room to prevent the spread of the droplet nuclei. If a negative pressure room is not available, the Health Care Operations Officer or designee shall make every effort to transport the prisoner to an institution with a negative pressure cell. If this is not possible, the Department must hospitalize the prisoner until the prisoner is no longer infectious.
- c. Staff must place a warning sign outside the isolation room stating the necessary precautions.

- d. Both the prisoner and staff must wear masks when interacting with one another.
 - e. Persons entering the cell need not wear a gown unless there is danger of an occupational exposure incident that would contaminate clothing.
 - f. Staff may wear gloves, although they are not medically indicated.
 - g. All persons must wash their hands after interacting with the prisoner or after handling potentially contaminated articles and before interacting with other persons.
 - h. Staff must double-bag contaminated articles in red or orange bags and label them "CONTAMINATED" before sending them for decontamination, sterilization, reprocessing, or destruction under current OSHA regulations.
 - i. Prisoners in AFB isolation must wear a mask and gown when being transported. Officers transporting the prisoners must wear a mask under OSHA guidelines.
 - j. Health care staff shall follow the same procedure under section B(2)(g) above when it releases an infectious prisoner from incarceration.
- D. **Strict Isolation Protocol.** This isolation protocol is designed to prevent transmission of highly contagious or virulent infections that may be spread by both air and contact.
1. Diseases. Diseases that require strict isolation are:
 - a. diphtheria, pharyngeal;
 - b. plague; and
 - c. varicella (chicken pox).
 2. Procedures
 - a. Health care staff shall notify the Superintendent when a prisoner has a highly contagious or virulent infection. The Superintendent or designee shall strictly isolate the prisoner in a single, closed room, preferably with a negative air flow unless the IHCO determines that hospitalization is necessary to protect staff and other inmates. Prisoners infected with the same organism may share a room.
 - b. Staff must keep the door to the room closed.
 - c. All persons entering the room must wear masks, gowns, and gloves.
 - d. Persons must change their gloves and wash their hands after touching the prisoner or any potentially contaminated articles before contact with another person.
 - e. Staff must double-bag contaminated articles in red or orange bags and label them "CONTAMINATED" before sending them for decontamination or destruction under current OSHA regulations.

- f. Health care staff must place a warning sign outside the room that states "Strict Isolation Technique Will be Observed" and describes all other necessary precautions.
 - g. Health care staff shall follow the same procedure under section B(2)(g) above when releasing an infectious prisoner from incarceration.
- E. Institutional Employees, Transportation Officers, Probation and Parole Employees, Health Care Staff and any other employees having direct exposure to offenders.
1. Preemployment Testing. The Department will screen all potential employees described in section E above for TB before hiring them and periodically during their employment. If a private physician screens the employee, the employee must provide the test results to the employee's supervisor and appropriate health care staff.
 2. TB Testing. The Department will offer its institutional employees, transportation officers, probation/parole officers, health care staff and any other employees having direct exposure to offenders annual TB testing, or testing every six months if an employee is exposed to suspected or confirmed cases of active TB.
 3. Follow-up for employees Who Have Tested Positive. All employees who tested positive for the first time shall be required to be evaluated by a health professional to rule out active TB. Employees who have tested positive shall see a health professional to have an annual screening, including chest x-rays.
 4. Immunization and Exposure Record. All TB Screening and testing will be recorded on form 202.04A.
 5. Health Care Records. The administrative managers of the institutions or divisions shall maintain records under OSHA requirements.
 - a. The managers shall retain the employee's health care records for the duration of their employment plus 30 years.
 - b. Health care records are confidential. The Department only may provide these records to the employee or employee's designated representative with the employee's written consent. The records must also be available upon request to the Division of Labor Standards and Safety, Alaska Department of Labor.
 6. Training. The training academy shall give the initial OSHA required training to new Department employees. The administrative managers and the training academy shall provide initial and additional training to previously hired institutional employees, transportation officers, probation and parole employees, and health care staff.
 7. Training Records. The Training Academy and Administrative Manager shall maintain employee training records for three years from the date of training. These records must be available upon request to Division of Labor Standards and Safety, Alaska Department of Labor. The records must include:

- a. dates of training sessions;
- b. contents or a summary of the training sessions;
- c. names and qualifications of persons that conduct the training; and
- d. names and job titles of all persons that attend the training sessions.

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Date

Margaret M. Pugh
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Department of Corrections

Authority:
8 AAC 61.010

Forms Applicable:

202.04A