

	KANSAS CITY, MO POLICE DEPARTMENT	DATE OF ISSUE	EFFECTIVE DATE	NO.
	<b>PERSONNEL POLICY</b>	03/15/2023	03/15/2023	819-05
SUBJECT			AMENDS	
Policy Series 800: Member's Health On-Duty Exposure to Communicable Diseases and Physical Health Protection				
REFERENCE		RESCINDS		
PI: Ambulance Calls and Arrests Taken to Hospitals Arrest Guidelines / Procedures Clandestine Laboratory Operations Patrol Procedures DM: COVID-19 Personal Protective Equipment (PPE) Preparedness Protocols		PPBM: 819-04		

## I. INTRODUCTION

- A. The Kansas City Missouri Police Department (Department) is committed to Department member's safety in the performance of their duties. Maximum effort will be made to provide Department members with information on recommended disease prevention practices and personal protective equipment (PPE).
- B. This directive establishes procedures and guidelines to follow in the event an on-duty Department member sustains significant exposure to communicable diseases or hazardous materials, i.e., Tuberculosis, Hepatitis B and C, HIV, AIDS, Rabies, COVID, etc.
- C. In addition, this directive establishes protective measures for handling items that may be contaminated with communicable diseases or hazardous materials.

## II. TERMINOLOGY

- A. **Communicable Disease** - A disease that can be transmitted from one (1) person to another through direct or indirect contact.
- B. **Significant Exposure** - According to the Centers for Disease Control and Prevention (CDC):
  1. Any person-to-person contact in which a co-mingling of respiratory secretions, e.g., saliva and mucus, of an individual and Department member may have taken place;
  2. Transmittal of blood or bloody body fluids of an individual onto the mucous membranes, e.g., mouth, nose, eye, of the Department member and/or into breaks of the skin of the Department member;
  3. Transmittal of other body fluids, e.g., semen, vaginal secretions, amniotic fluids, feces, wound drainage, or cerebral spinal fluid, onto the mucous membranes or breaks in the skin of the Department member;

4. Any non-barrier unprotected contact of the Department member with mucous membranes or non-intact skin of the individual.

### **III. POLICY**

- A. Department members should always take appropriate precautions to reduce the risk of contracting communicable diseases or exposure to hazardous materials when assisting individuals, rendering first aid, arresting suspects, investigating crime scenes, and when recovering property or evidence.
- B. Individuals who have communicable diseases may or may not display overt symptoms. Risks related to contracting communicable diseases can be greatly reduced through careful hand washing and by taking preventive measures to reduce exposure, including wearing PPE.
- C. Members will recover property contaminated with blood or body fluids in accordance with the current directive entitled, "Recovered Property Procedure."

### **IV. GUIDELINES**

- A. Department members will immediately inform their supervisor of an on-duty encounter with an individual or Department member suspected of having a communicable disease.
  1. During regular operating hours:
    - a. The Department member's supervisor will notify the occupational healthcare provider of all pertinent information regarding the member's contact with an individual suspected of having a communicable disease.
    - b. Upon the recommendation of the occupational healthcare provider, the supervisor will send the affected Department member(s) to the occupational healthcare provider facility for treatment.
    - c. Upon arrival, the Department member or a designee must complete a Communicable Disease Exposure Report Form, MO 580-1825, available at the occupational healthcare provider and in the I: Drive; Word Templates; "FORM MO 580-1825 COMMUNICABLE DISEASE EXPOSURE REPORT." These reports are emailed to [InjuryReport@kcpd.org](mailto:InjuryReport@kcpd.org).

2. During hours that the occupational healthcare provider is closed:
    - a. The Department member's supervisor will notify the medical personnel at the approved medical facility. Refer to the current directive entitled, "Duty Related Injuries," regarding approved medical facilities.
    - b. Upon arrival, the Department member or a designee must complete a Communicable Disease Exposure Report Form, MO 580-1825, available at the medical facility. These reports are emailed to [InjuryReport@kcpd.org](mailto:InjuryReport@kcpd.org).
    - c. Upon determining the type of communicable disease the Department member(s) were exposed to:
      - (1) The approved medical facility will recommend immediate treatment at their facility; or
      - (2) Refer the Department member(s) to the occupational healthcare provider for treatment on the next business day;
      - (3) The supervisor will send the affected Department member(s) to the appropriate facility based on the recommendation of the personnel at the approved medical facility.
  3. The Department member's supervisor will complete an Injury Report Form 314 P.D. (Form 314), and email it directly to the Benefits Section, [InjuryReport@kcpd.org](mailto:InjuryReport@kcpd.org), prior to the supervisor's end of shift.
- B. When a period of convalescence and/or isolation is required due to an on-duty exposure to a communicable disease, the Department member will be placed on Injury Leave in accordance with the current directive entitled, "Duty Related Injuries." Refer to the current directive entitled, "Limited Duty."
- C. If a Department member has come into contact with a dead body believed to have a communicable disease:
1. The Department member will immediately notify their supervisor;
  2. The supervisor will immediately contact the appropriate medical examiner/coroner to request the dead body be tested for possible communicable diseases;

3. The medical examiner/coroner will report the findings to the Department members' supervisor; and
4. The supervisor will complete a Form 314, if necessary, and email it directly to the Benefits Section, [InjuryReport@kcpd.org](mailto:InjuryReport@kcpd.org), prior to the supervisor's end of shift.

D. The occupational healthcare provider will:

1. Coordinate treatment of those Department members who have been exposed to a communicable disease;
2. Instruct the Department member to respond to one of the approved medical facilities if hospitalization is required;
3. Receive information regarding individuals suspected of having a communicable disease and verify that information with the approved medical facility and/or authority;
4. Notify the Benefits Section Supervisor of any information obtained from the various approved medical facilities and/or authorities.

E. Precautions

1. Department members will use discretion to limit their exposure to communicable diseases and hazardous materials.
2. When a Department member is exposed to a communicable disease, there are certain vaccinations that can be administered.
3. To avoid exposure, Department members will not eat, drink, smoke, or chew tobacco at crime scenes.
4. Department members are to be aware that certain prescribed medications, e.g. steroids and asthma medications, may suppress the immune system and cause increased susceptibility to communicable diseases. Department members should consult with their private physician if they are taking prescription medications.
5. Pregnant Department members are advised to report any direct contact with body fluids in the line-of-duty to their physician.

F. Personal Protective Equipment (PPE)

1. When available, PPE should be used in addition to using caution and maintaining good hygiene and cleaning practices.

2. Department members will ensure that Department vehicles are stocked with the proper PPE.
3. Disposable gloves provide barrier protection from blood and other body fluids. Department members are to be aware that some types of disposable gloves, such as latex, provide limited protection only from certain chemicals and corrosive substances.
  - a. Disposable gloves should be worn when:
    - (1) Searching persons or vehicles;
    - (2) Administering first aid;
    - (3) Handling evidence or contaminated property items;
    - (4) Handling items such as used mouthpieces from an alcohol breath test machine or tubes of blood obtained for evidence;
    - (5) Handling known or suspected narcotics and/or narcotics paraphernalia; and/or
    - (6) There is contact with body fluids, including blood, oral secretions, vomit, urine, feces, or contaminated objects.
  - b. Disposable gloves offer minimal protection from needle punctures or cuts from sharp objects. Particular care should be used when handling or searching for or near needles or other sharp objects while wearing disposable gloves.
  - c. Personal gloves should not be substituted for disposable gloves. Department members are to be aware that if personal gloves become contaminated they should be thoroughly cleaned prior to re-using or discarded.
4. Laerdal Pocket Masks assist in providing ventilation for a non-breathing adult, child, or infant. The mask eliminates the need for traditional mouth-to-mouth contact during Cardiopulmonary Resuscitation (CPR) rescue breathing. Disposable gloves should be worn when using the pocket mask.

5. Disposable paper masks protect the mucous membrane of the mouth and nose from exposure to blood or body fluid.
  - a. Disposable paper masks should be worn when:
    - (1) There is a possibility of airborne pathogens, blood, or other body fluid being exchanged while rendering first aid;
    - (2) A Department member is in the immediate area of a dead body in an advanced state of decomposition, e.g., in the same room with or working directly within an open area;
    - (3) Conducting investigative duties around dead bodies in the morgue; and/or
    - (4) A Department member comes into contact with a person who has Tuberculosis.
  - b. When applying the disposable paper mask, ensure that both the mouth and nose are completely covered.
  - c. Disposable gloves should be worn when using the disposable paper mask.
6. Necessary PPE will be worn while gathering and packaging contaminated items.
7. Packages containing contaminated items will be sealed with orange evidence tape to indicate contamination.
8. For information regarding the chemical resistant suit and accompanying equipment, see the current directive entitled, "Emergency Operations Procedure."

G. Personal Protective Equipment (PPE) Disposal

1. Department members will ensure the proper disposal of disposable PPE they have used.
2. Upon leaving an emergency scene, disposable gloves will be removed and placed in an appropriate disposal container as soon as possible.

3. Used disposable equipment will be disposed of during the member's tour-of-duty.
4. Locations of disposal containers marked "Contaminated Material":
  - a. Maintenance Shop (HQ basement);
  - b. Police Service Station;
  - c. Regional Criminalistics Division (KCMO Police Crime Lab);
  - d. All Patrol Division Stations; and
  - e. Traffic Unit.
5. Department members utilizing disposable PPE will be responsible for securing replacement equipment from the Supply Section as soon as possible.

#### H. Hygiene and Cleaning Practices

1. Cleaning Solutions
  - a. Soap and water - To be used for removing transient micro-organisms acquired by direct or indirect contact on the skin. Soap and water provide an effective means of self-protection and should be used in preference to other skin cleansing solutions.
  - b. Alcohol disposable antimicrobial hand wipes or antibacterial hand sanitizer solution should be used when soap and water are not available for cleansing the skin. When soap and water become available, the skin should be re-washed.
  - c. Household Bleach - A solution of one-part sodium hypochlorite (household bleach) and ten parts water is effective for cleaning counter tops and other surfaces that may have been contaminated with blood or other body fluids.
  - d. Disinfectants - A chemical germicide registered with the Environmental Protection Agency (EPA), such as a "hospital disinfectant" spray, should be used to clean equipment items, counter tops, or other surfaces that may have been contaminated with blood or other body fluids.

2. Washing exposed areas of the skin on a regular basis provides a high degree of protection. Hand washing is most important, even if gloves are worn. Hands should be washed after:
  - a. Touching another person;
  - b. Touching inanimate objects likely to be contaminated by blood or other body fluids;
  - c. The use of antimicrobial hand wipes or antibacterial hand sanitizer solution; and/or
  - d. Using any restroom facility.
3. When soap and water are not immediately available, antimicrobial hand wipes and/or antibacterial hand sanitizer solution will be used:
  - a. After removing disposable gloves.
  - b. After an exposed area of skin contacts a surface potentially contaminated with blood or body fluids (wet or dry).
4. There are viruses, e.g., Hepatitis, HIV/AIDS, COVID, that can survive for extended periods of time on surfaces at room temperature. Good hygiene practices including regular bathing, maintaining a clean uniform, etc., should be adhered to.
5. Contaminated Clothing
  - a. Any clothing item contaminated with blood or other body fluids should be removed and cleaned as soon as practically possible.
  - b. Chemical dry cleaning should be adequate to decontaminate clothing. Notify the dry cleaner of any blood or body fluid stains in advance so that the appropriate chemicals can be used for removal.
  - c. Clothing reimbursement will comply with the current directive entitled, "Claims for Damage to Personal Property."
- I. Timeframe a Department member should be vaccinated after exposure or diagnosis of a communicable disease is determined by the occupational healthcare provider.



J. Equipment and Department Facilities

1. All Department members are responsible for keeping their equipment, vehicle, and/or assigned work area clean and free of soil, trash, or other residue.
2. When police vehicles become contaminated with blood, bodily fluids, or airborne pathogens, there are bodily fluid clean-up kits located at each patrol division station.

K. Persons In-Custody

1. Department members are to use caution when conducting searches of persons and vehicles to prevent skin punctures by needles and/or drug paraphernalia and other sharp objects. Extreme caution must be used:
  - a. When searching persons who are suspected of engaging in high-risk activities; and/or
  - b. When reaching into areas that are not visible, such as under car seats.
2. If there is a likelihood disposable PPE was contaminated during a search, the Department member should carefully remove the PPE and place it in a disposal container marked "Contaminated Material," or in a red plastic bag.
3. To prevent possible transmission of communicable diseases, a protective helmet with a protective shield will be placed on arrestees who attempt to spit, bite, or head butt Department members. The protective helmet must be cleaned after each use.
- \*4. If a Department member determines that an arrestee has been diagnosed with a communicable disease, i.e., Tuberculosis, etc., the member will contact an appropriate Department detention facility to determine where the contaminated arrest will be taken.
- \*5. Department Detention Officers (DO) who are pre-booking, will ask the arrestee medical questions to confirm the communicable disease information.
- \*6. When the arrest is being interviewed by an investigation's member. The member will:
  - a. Put on a disposable paper mask;

- b. Wear a pair of disposable gloves;
  - c. Put a disposable paper mask on the contagious person, ensuring the mouth and nose are completely covered; and
  - d. Dispose of used disposable paper mask and gloves in a red plastic bag designated for hazardous materials.
- 7. In cases where the Drug Trafficking Squad (DTSquad) has responded to a scene and determined that the scene and the arrestee are contaminated, the DTSquad personnel will take the arrestee's contaminated clothing and issue a paper suit. The DTSquad personnel will then respond to the Environmental Management/Household Hazardous Waste Center for disposal of the contaminated clothing.
- 8. Department members will inform other first responders, e.g., firefighters, paramedics, outside agency personnel, etc., whenever transfer of custody occurs and the individual has blood or body fluids present on their person or if the individual has made a voluntary statement that they have a communicable disease.
- L. Any Department member who obtains information regarding an arrestee's suspected communicable disease:
  - 1. Will access the electronic booking system and ask the arrestee a series of health questions. The electronic booking system will serve to alert any Department member subsequently contacting the arrestee to the possibility of a communicable disease;
  - 2. May request the information be placed in a Computer Aided Dispatch (CAD) entry and/or the electronic hit notification system via a Memorandum, an email, or Interdepartment Communication, Form 191 P.D. The Department member will note how the information was obtained within the request for chain-of-command approval.
- \*M. If the arrestee is released to an outside agency, the DO will review the electronic booking system and provide a copy of the health questions to the outside agency.
- N. Chemical or Biological Hazards and Suspicious Substances
  - 1. Department members will exercise extreme caution and use sound judgment when dealing with situations involving chemical or biological hazards and suspicious substances. A supervisor will be

notified and the appropriate Department element or other resource will be requested.

2. If hazardous materials or radiation are determined to be present, refer to the current directives entitled, "Emergency Operations Procedure" and "Patrol Procedures," for further instructions.
3. If an explosive device is suspected or encountered, refer to the current directive entitled, "Explosive Device Call," for further instructions.



Stacey Graves  
Chief of Police

Adopted by the Board of Police Commissioners this 28<sup>th</sup> day of February, 2023.



Mark C. Tolbert  
Board President

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