



TITLE	POLICY NUMBER	
Communicable Diseases	DCS 02-02	
RESPONSIBLE AREA	EFFECTIVE DATE	REVISION
Business Support Services – Risk Management Human Resources	12/19/16	3

I. POLICY STATEMENT

The Department of Child Safety (DCS) is committed to providing a safe and healthy work environment for clients and staff. It is the policy of DCS to minimize contact with communicable diseases while still providing opportunity for clients to access services and for employees to perform their jobs.

II. APPLICABILITY

This policy applies to all employees of DCS.

III. AUTHORITY

The following statutes, at a minimum, should be reviewed to determine their appropriate application in situations involving clients and employees who have been exposed to or diagnosed as having a communicable disease:

[A.R.S. § 36-664](#)

Confidentiality; exceptions

[A.R.S. § 41-1959](#)

Confidential information; permissible disclosure; rules; violation; classification

IV. DEFINITIONS

Casual contact: Non-intimate touches, touching of items that will be touched by others, and breathing on or near others that does not involve the exchange of body fluids.

Communicable Disease: A contagious, epidemic, or infectious disease required to be reported to the local or state board of health pursuant to [A.R.S. § 36-661](#); an illness caused by an agent or its toxic products that arises through the transmission of that agent or its products to a susceptible host, either directly or indirectly.

Department or DCS: The Department of Child Safety.

Department Management: The leadership positions responsible for making decisions as outlined in this policy.

Medical Professional: A doctor of medicine or osteopathy, physician's assistant, or registered nurse practitioner licensed in [A.R.S. Title 32](#), or a doctor of medicine licensed and authorized to practice in another state or foreign country. A medical professional from another state or foreign country must provide verification of valid and current licensure in that state or country.

V. POLICY

A. Services to Clients with a Communicable Disease

DCS shall serve all clients in the least restrictive setting possible.

1. DCS shall only place restrictions on a client's ability to access DCS services and DCS facilities due to a communicable disease or suspected communicable disease when the restrictions are based on recommendations or limitations provided in writing from a medical professional.
2. DCS shall maintain restrictions on the client's access to DCS services or DCS facilities until the medical professional states in writing that the restrictions are no longer necessary.
3. Department Management shall be responsible for the approval of all restrictions on a client's ability to access DCS services or DCS facilities prior to the imposition of these restrictions except in the case of an emergency.

- a. DCS employees shall impose restrictions on a client based on (A) (1) of this section in the case of an emergency where restrictions must be made on a client's access to DCS services or to a DCS facility to protect either the client, other clients, the general public, or DCS employees from threat of immediate harm;
 - b. DCS employees shall notify Department Management immediately upon the decision to impose these restrictions and shall complete an [Unusual Incident Report](#).
4. Department Management shall utilize the Americans with Disabilities Act (ADA) Title II ([DCS 04-07](#)) Policy when concerns exist that a client's infection with a communicable disease may meet the definition of a disability found in the ADA Policy.

B. Employees with a Communicable Disease

DCS employees shall notify Human Resource/Employee Relations in writing when the employee has been diagnosed by a medical professional to be infected with a communicable disease that may, via casual contact, infect others in the workplace.

- 1. DCS employees shall not return to the workplace until documentation from a medical professional is presented stating the employee no longer poses a risk for infecting others with the communicable disease via casual contact and may return to work.
- 2. DCS shall place no requirement or expectation on employees to disclose a communicable disease that does not pose a risk for infecting others via casual contact.
- 3. Department Management shall utilize Americans with Disabilities Act (ADA) Title I ([DCS 04-03](#)) policy when concerns exist that an employee's infection with a communicable disease may meet the definition of a disability.
- 4. DCS employees who are exposed in the workplace to a communicable disease that can be transmitted via casual contact shall complete an [Unusual Incident Report](#) immediately after being informed of the exposure. The Attendance and Leave policy ([DCS 04-18](#)) that addresses industrial leave may be utilized in this situation.

C. Exposure to Potentially Infectious Material

1. When any DCS office or vehicle is contaminated with potentially infectious material such as bodily fluids, DCS staff shall immediately request janitorial services by calling the 24-hour Building Emergency Landport Hotline at (602) 542-2236. DCS employees are not responsible for cleaning up any bodily fluids that have been spilled.
2. Janitorial services shall follow the cleaning, sanitizing, and disinfecting procedures outlined in the addendum attached to this policy.
3. Department Management shall utilize the Bloodborne Pathogen Policy ([DCS 02-04](#)) when concerns exist that an employee's exposure involved contact with blood or other potentially infectious material.

D. Confidentiality

All DCS employees shall hold information regarding communicable diseases related to clients and related to DCS employees as confidential and shall not share this information except as authorized in this policy or in compliance with [A.R.S. § 36-664](#) and [A.R.S. § 41-1959](#).

VI. PROCEDURES

- A. Clients who have restrictions approved by Department Management related to their access to DCS services and DCS facilities are notified in writing of these restrictions. The following information is contained in the notification:
1. the reason for the restriction;
 2. the duration of the restriction;
 3. options available to the client for continued participation in services and for access to DCS personnel;
 4. any steps that need to be taken by the client to alleviate the restriction; and
 5. the contact information for Department Management and for the Office of the Ombudsman.
- B. DCS employees shall provide the following information to Department

Management for use in determining the action to take regarding clients who have or are suspected of having a communicable disease that may pose a threat to others:

1. client's name and identifying information;
2. services in which the client is involved;
3. type(s) of communicable disease and evidence of the client's infection with this disease;
4. documentation from a medical professional regarding the client's communicable disease, when available;
5. considered options for the client's continued participation in services;
6. contact information for the client; and
7. description of the incident in the workplace involving other clients' or employees' exposure from the client with a communicable disease when infection is likely via casual contact.

C. Upon notification, via an [Unusual Incident Report](#), of the exposure of an individual or facility within DCS to a communicable disease, DCS Risk Management shall notify the Office of Real Estate Services Administrator. The Administrator shall:

1. assess the need for cleanup or decontamination of the facility; and
2. advise the Deputy Directors of all efforts to clean up or decontaminate a facility because of the exposure to a communicable disease.

D. When a client violates restrictions placed on them by DCS Management related to communicable disease, DCS employees shall:

1. remind the client of the restrictions;
2. refrain from providing service to the client in violation of the restrictions; and
3. consult with Department Management on any other steps to take in relation to the situation.

- E. Employees may get information about the signs and symptoms of communicable diseases and the precautions and preventative actions to consider on the websites listed below. The information provided on these websites is for general employee knowledge only and should not be considered a substitute for professional medical advice or treatment for specific medical conditions.

[Arizona Department of Health Services - Epidemiology & Disease Control](#)
[Centers for Disease Control and Prevention](#)

VII. FORMS INDEX

[*Unusual Incident Report \(DCS-1125A\)*](#)

*Communicable Disease Policy Addendum A***AVOIDING COMMUNICABLE DISEASES**

The most common way that diseases spread is by microscopic organisms, such as bacteria and viruses, which can enter the body and interfere with normal functions. The following standard precautions reduce the risk of transmission of organisms that cause infection and illness. This is particularly important when dealing with:

- bodily fluid secretions (e.g., saliva, sweat); all bodily fluids should be presumed to be infectious;
- excretions (e.g., urine, feces) whether or not they contain visible blood;
- blood caused by cuts or scrapes resulting in non-intact skin;
- mucous membranes that line the digestive, respiratory, and reproductive tracts of the body including the nostrils, lips, eyelids, ears, genital area, and anus.

Additionally, transmission can occur indirectly, via droplets or smaller particles that are expelled by an infected individual who talks, laughs, coughs, or sneezes. These tiny particles remain suspended in the air and travel in air currents. Colds caused by viruses, influenza, and tuberculosis are a few types of infectious diseases usually spread through the air. Additionally, many germs can linger on an inanimate object, such as a tabletop, doorknob, or faucet handle.

The information below is designed to eliminate or minimize exposure incidents.

Cleaning, Sanitizing, and Disinfecting

Cleaning is the process of wiping or scrubbing an item using soap or another detergent with fresh water that removes not only visible dirt and debris, but germs as well. Clean objects and surfaces contaminated with blood or body fluids immediately; use disposable towels and discard in a plastic-lined trash can. Wash hands **immediately**, even if gloves were worn. After cleaning, *sanitizing* and *disinfecting* can occur.

Sanitizing reduces the amount of harmful germs on contact surfaces and other objects to levels that are considered safe. Spray the item with sanitizing solution if it is too large to soak. Do not rinse after sanitizing; air dry or let stand for recommended contact time before towel drying. Be sure the product label indicates that the product can be used for sanitizing; follow the manufacturer's instructions on the chemical to water ratio.

Disinfecting destroys or inactivates germs on contact surfaces. Disinfecting solution is usually at a stronger concentration than sanitizing solution. Use an appropriate solution that is safe and EPA-registered. Follow the manufacturer's instructions closely for use. Spray the area

thoroughly and follow the instructions on the product for the appropriate contact time. Wipe with a single-use paper towel or, if appropriate, mop with disinfecting solution. Discard used paper towels. If a mop is used, soak it in disinfecting solution for 10 to 30 minutes (or according to the product label) and hang to dry.

Diapers

The spread of illnesses can be reduced by following the diapering guidelines described below. Even if you wear gloves, always wash your hands after changing them.

- Change diapers only in a designated diapering area. The changing surface should be smooth, moisture-resistant, and easily cleanable. For extra protection, a non-absorbent, disposable paper should be placed under the child while changing. Ideally, a sink in the diapering area designated for handwashing should be available.
- Disposable paper towels should be used instead of cloth towels.
- Wear disposable gloves and discard them afterwards.
- Dispose of soiled diapers in a “hands-free” tightly covered waste container.
- Wash hands of both staff and children after diapering.
- Disinfect the diapering surface after every child.
- Do not allow pacifiers, toys, baby bottles, blankets, or food in the diapering area.

All diapers must have an absorbent inner lining completely contained within an outer covering made of waterproof material that prevents the escape of feces and urine. Pre-moistened wipes must be dispensed in a manner that prevents contamination of the wipes or the container. It is recommended to remove the wipes before use, but leave the container of wipes open and readily accessible in case more wipes are needed.

If skin care items are used, keep them within reach and out of the reach of children. Use skin care items according to package directions. Do not apply skin care items with bare fingers. Apply by using a clean glove, tissue, or disposable wipe.

Glove Use

Gloves help protect you when directly handling potentially infectious materials or contaminated surfaces. Wear disposable latex, vinyl, or nitrile gloves when you are:

- touching people or food;
- touching items, surfaces, or clothing soiled by blood or bodily fluids (e.g., feces, vomit, urine, nasal and eye discharge, saliva);

- cleaning diapering areas and any areas contaminated with bodily fluids;
- changing diapers or any soiled clothing;
- having any contact with mucous membranes and non-intact skin (e.g., cut, scrape, or sore such as fever blister or cold sore).

Discard single-use gloves after each use. Change gloves when they are visibly soiled, torn, or punctured. Wash hands thoroughly upon removing gloves.

Managing Skin Wounds

- **Bruises:** Apply cool compresses. Call the medical provider if the child has continued pain or swelling.
- **Cuts:** Rinse small cuts with water until clean. Use direct pressure with a clean cloth to stop bleeding and hold in place for 1 to 2 minutes. Call the medical provider or seek emergency care for large or deep cuts, or if the wound is open. For major bleeding, call 911. Continue direct pressure with a clean cloth until help arrives.
- **Scrapes:** Rinse with clean, running tap water for at least 5 minutes to remove dirt and germs. Do not use detergents, alcohol, or peroxide.
- **Splinters:** Remove small splinters with tweezers, and then wash until clean. If you cannot remove the splinter completely, seek help from a medical provider.
- **Puncture Wounds:** Do not remove large objects (such as a knife or stick) from a wound. Call 911 for immediate help.
- **Bleeding:** Apply pressure with gauze over the bleeding area for 1 to 2 minutes. If still bleeding, add more gauze and apply pressure for another 5 minutes. You can also wrap an elastic bandage firmly over gauze and apply pressure. If bleeding continues, call 911 for help.

Managing Bed Bugs and Lice

Bed bugs are small parasitic insects that feed on the blood of people while they sleep. Symptoms, which may not appear for up to six weeks, include intense itching, rashes, and skin burrows (short, thread-like lines in the skin). Children and youth who appear to have been exposed to bed bugs should have their clothes washed in hot water, and all non-washable items sealed in a plastic bag for seven days. Furniture should be cleaned and disinfected.

Bed bug bites usually do not pose a serious medical threat. It is helpful to avoid scratching the area and apply antiseptic creams or lotions. Bed bug infestations are commonly treated by insecticide spraying. The Arizona Department of Health Services (ADHS) offers a [Bed Bugs Toolkit](#) with pertinent information about preventing, controlling, and eliminating bed bugs.

Lice are a parasitic infection caused by tiny insects. Over-the-counter treatments may eradicate them, or a prescription from a health care provider may be needed. Instructions should be followed carefully – the medications used to treat lice are insecticides and can be dangerous if misused. The Center for Disease Control (CDC) offers tips for treatment at [cdc.gov/parasites/lice/index.html](https://www.cdc.gov/parasites/lice/index.html). Other household members and those in close contact with the child should be advised to check for lice.

Infection Preventions

The first line of defense is good personal hygiene habits. Prevent infection before it begins and avoid spreading it to others with these easy measures:

- Wash your hands well with clean (preferably warm) water and soap; Rub hands together for 20 seconds to create a lather and scrub all surfaces; Rinse hands well, dry hands using a paper towel or air dryer. If possible, use your paper towel to turn off the faucet. If soap and water are not available and your hands are not visibly dirty, use an alcohol-based hand sanitizer (60% alcohol or greater).
- Cover a cough. Cover your mouth and nose with a tissue when you sneeze or cough, then dispose of it. If no tissue is handy, cough or sneeze into your elbow rather than into your hands.
- Wash and bandage all cuts.

For further information, ADHS has a webpage with a [comprehensive, alphabetized list of communicable diseases](#), as does the [CDC](#).