

## Custodial Operations Policy and Procedures

# 6.5 Infectious and communicable diseases

### Policy summary

Corrective Services NSW (CSNSW) is committed to the prevention and control of infectious and communicable diseases in its facilities and areas of operation.

This can be achieved by implementing a range of measures including governance, awareness and assessment, standard and additional precautions, treatment and vaccination, reporting, cleanliness, and food safety.

Standard precautions must be followed to reduce risk of transmission of infectious or communicable diseases.

### Management of Public Correctional Centres Service Specifications

Service specifications	Decency and respect Health services Safety and security
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## Scope

This section applies to all correctional centres and other facilities administered by or on behalf of CSNSW.

It also applies to all CSNSW employees, and where relevant to other personnel such as Justice Health & Forensic Mental Health Network (JH&FMHN), contractors, subcontractors, and visitors.

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# 1 Infectious and communicable diseases

## 1.1 Policy

CSNSW is committed to the prevention and control of infectious and communicable diseases in correctional centres, during transport, and in other areas under its control.

The spread of infectious and communicable diseases can be prevented or controlled by implementing a multi-modal strategy that includes:

- governance (all managers and officers must understand and implement their responsibilities as described in this policy)
- awareness and assessment (inmates should be assisted and encouraged to undergo assessment if an infectious/communicable disease is suspected; staff should also be mindful that they can also be a source of infections/communicable diseases)
- reporting within CSNSW and with the JH&FMHN
- implementing standard precautions
- implementing additional precautions, where required
- cleanliness
- treatment and vaccination.

## 1.2 Standard precautions

Staff are required to work safely and use standard precautions at all times to reduce risks of transmitting infectious/communicable diseases from recognised and unrecognised sources, including respiratory, blood –borne viruses, gastroenteritis, and blood-borne illness. This requires that staff assume everyone may be infectious, including inmates, visitors, contractors, and other staff.

Standard precautions must also be used to avoid contact with blood, all body fluids (including secretions and excretions (except sweat) regardless of whether or not they contain visible blood), non-intact skin, and mucous membranes.

Standard precautions involve safe work practices, and protective barriers, including:

- maintaining distance from splashes and sprays of blood and body fluids;
- wearing a mask and protective eyewear if contact with blood and bodily fluids is anticipated;
- not touching your eyes, nose, mouth with uncleaned hands or used gloves;
- protecting the body and clothing from contact with blood or body fluids, or wearing protective disposable overalls if contact with blood or body fluids is anticipated;
- wearing disposable gloves if contact with blood or body substances is anticipated, and disposing of the gloves as soon as task is completed. A clean pair of gloves must be used for each inmate during body searches;
- washing hands frequently with liquid soap and warm water, and drying them with paper towels. This should be done even if gloves are worn;
- not touching clothing or the body with uncleaned hands or used gloves;
- ensuring safe handling of soiled clothing and linen ([Australia/New Zealand Standard Laundry Practice 4146:2000](#));

- wearing clean uniforms and providing inmates with clean and dry clothes to that meet the Australian/New Zealand Standard for Laundry Practice;
- maintaining clean and dry workplaces and transport vehicles, and providing resources to inmates to clean their cells;
- cleaning equipment such as handcuffs, and other restraints after each use with *Fincol*;
- ensuring safe handling and disposal of sharps (**refer to COPP section 15.1 Safe work practices**).

### 1.3 Vaccinations

Many infectious/communicable diseases can be prevented by vaccination. All staff are encouraged to consult their General Practitioner about immunisation and vaccination against diseases, such as influenza and Hepatitis B.

CSNSW is responsible for the cost of vaccines if any kitchen worker has been identified by JH&FMHN staff as being recommended for Hepatitis A vaccine.

Governors must ensure inmates have access to the Health Centre to participate in vaccination programs.

Governors should also develop a plan with the Nurse Unit Manager (NUM) of the Health Centre to ensure inmates have access to the annual Winter Immunisation Program

### 1.4 Additional precautions

Additional precautions are used in addition to standard precautions to help prevent the transmission of infection.

JH&FMHN clinical staff are responsible for advising CSNSW staff about any inmates under their care who may have infectious/communicable disease-related health problems.

The confidentiality of the inmate's health must be protected under the duty of care for JH&FMHN and only the necessary information should be made available, unless the inmate(s) have given their informed documented consent (**refer to COPP section 22.4 Medical records and health information**).

All advice from JH&FMHN must be provided to CSNSW through a *Health Problem Notification Form* (HPNF), which will advise of any additional precautions and actions that should be implemented to reduce the risk of staff or an inmate being exposed to an infection risk (**refer to COPP section 6.1 JH&FMHN notifications**). These actions may include some or all of the following:

- use of certain types of Personal Protective Equipment (PPE), such as face masks or impervious, long sleeved gowns;
- assisting JH&FMHN to have access to other inmates to assess the risk of infection;
- restricting movement of inmates with an infectious/communicable disease;
- restricting movement of inmates who have been assessed as susceptible to, or who have been exposed to, that particular infectious/communicable disease;

- transfer of inmates to hospital;
- assisting JH&FMHN to implement a mass vaccination program for susceptible inmates, when required;
- liaising with JH&FMHN and other authorities for the mass vaccination of susceptible staff, when required;
- ensuring staff and inmates have access to appropriate hand washing facilities; (liquid soap (communal bars are not to be used), warm water and paper towels) at all times;
- increasing the frequency of cleaning in the accommodation areas;
- regular communication between CSNSW and JH&FMHN senior managers to share current information and coordinate appropriate management;
- establishing communication strategies for inmates, staff and visitors.

## 1.5 Health survival tips

The Health Survival Tips (HST) session is delivered by Offender Services and Programs (OS&P) within each correctional centre to assist inmates with information to maintain their health and reduce risks of contracting infections.

Inmates in NSW correctional centres must attend a HST session, and if required the Responsivity Provision Offender Services & Programs (RPOSP) Health Strategies course (Refer to *Offender Services & Programs CSNSW: Policy for Delivery in Custody of the Health Survival Tips Session and RPOSP Health Strategies Course*).

## 1.6 Procedure for transfer of information between CSNSW and JH&FMHN

	Procedure	Responsibility
1.	Advise Governor or Officer in Charge (OIC) of the correctional centre if an inmate reports a possible exposure to an infectious/communicable disease.	JH&FMHN staff
2.	Refer inmate to the Health Centre for assessment of the reported risk. If this occurs after hours, the JH&FMHN After Hours Nurse Manager (AHNM) should be contacted by telephone on 1300 076 267 (13000 ROAMS) ( <b>refer to COPP section 6.1 JH&amp;FMHN notifications</b> ).	Governor/OIC
3.	Notify the JH&FMHN Clinical Nurse Consultant, Infection Prevention & Communicable Diseases during business hours, or the AHNM if an inmate is suspected or confirmed to have any sickness that presents a threat to the welfare of any person. Follow advice provided regarding patient management.	Senior JH&FMHN staff
4.	Provide a report and issue a HPNF including advice and precautions for the management of the inmate to the Governor or OIC.	Senior JH&FMHN staff

	Procedure	Responsibility
5.	Implement advice and additional precautions that are consistent with the recommendations provided by JH&FMHN, and are to be used to protect staff, other inmates and visitors while one or more inmates are infectious.  Note that additional precautions must be implemented where advice has been received that inmate(s) have an infectious/communicable disease.	Governor/OIC
6.	Report the incident in line with <b>COPP section 13.2 Medical emergencies.</b>	Governor
7.	Issue a new HPNF after inmate(s) have been assessed as no longer being infectious.	JH&FMHN staff

## 2 Cleaning and hygiene

### 2.1 Policy

Cleanliness requires a high level of hygiene in both workplace and accommodation areas, including general hygiene practices, cleaning standards, and clean clothing, food, water, equipment.

JH&FMHN employ a Senior Environmental Health Officer (SEHO) who works with CSNSW Governors to assess and address environmental health issues such as:

- clean water, air and food
- infestations of pests
- incidents with sewers
- barbershops and hairdressers (**refer to COPP section 8.12 Hairdressing and hygiene**)
- food safety
- microbiological testing of air-conditioner cooling towers and warm water systems.

### 2.2 Fincol

Within the correctional centre environment there are general cleaning products available for everyday use, however, Fincol is the only disinfectant approved by CSNSW. Fincol should be used for and not limited to cleaning:

- Blood and bodily fluid spills;
- handcuffs, anklets, helmets and other restraints;
- cells, toilets and shower areas;
- barbering and hairdressing equipment;
- injecting drug use equipment and tattooing equipment;
- any other situation which may prevent the spread of blood-borne infections.

**Note:** Dishwashing liquid is not suitable and must not be substituted for Fincol for these cleaning purposes.

Fincol must be used at the correct concentration from the dispensers provided and must not be poured directly from the container as it is dangerous. Inmates are not to be issued with undiluted Fincol or other concentrated caustic products to clean their cells.

Fincol must be available to inmates at **all times**. Staff and inmates must have ready access to it:

- during out of cell hours: dispensers in wings, yards and work locations etc.;
- during in cell hours: inmates are permitted to take a cup or other container of Fincol to their cell.

Undiluted Fincol containers must not be placed in any location other than inside a locked dispenser.

Inmate workers (Sweepers) are not permitted to keep containers of undiluted Fincol or other cleaning supplies/equipment in their cells. Access to undiluted Fincol containers and other cleaning supplies/equipment will be issued to inmate workers (Sweepers) by officers and locked away until required. The keys to these locks must be kept by correctional officers and must not be provided to inmates.

Management and supervising staff must be familiar with safe work practices generally required under the work health and safety legislation. Information on these practices can be found on [CSNSW WHS intranet](#).

Reference should also be made to *Hazardous chemical information – WHS procedure*.

Local Operating Procedures (LOP) must be implemented to ensure management of Fincol conforms with this policy.

## 2.3 Procedures for using Fincol

	Procedure	Responsibility
1.	Purchase and install Fincol dispensers in all accommodation, industrial and common areas of the correctional centre.	Governor/ Authorised officer
2.	Display Safety Data Sheet and posters describing the use of Fincol and safety precautions next to dispensers. Obtain these posters from the Fincol supplier Jasol.	Governor/ Authorised officer
3.	Supervise inmate cleaners (Sweepers) to ensure the appropriate amount of Fincol is dispensed from approved dispensers into buckets and containers, for the immediate job at hand.	OIC/Authorised officer



	<b>Procedure</b>	<b>Responsibility</b>
4.	Monitor and ensure cleaning procedures are performed regularly: <ul style="list-style-type: none"> <li>• cells must be cleaned and disinfected by inmates weekly</li> <li>• common areas must be cleaned and disinfected weekly</li> <li>• cells must be thoroughly cleaned and disinfected by inmates when they move cells</li> <li>• all showers and toilets must be cleaned and disinfected daily.</li> </ul>	Governor/OIC
5.	Monitor and ensure availability of Fincol (ensure controls are in place which must include Local Operating Procedures (LOPs)).	Governor/OIC

## 2.4 Procedure for distributing and collecting disposable razors

Officers are accountable for the safe collection and disposal of razors within their area of responsibility. The following procedures must be implemented:

	<b>Procedure</b>	<b>Responsibility</b>
1.	Issue gloves and sharps containers to inmates employed as hygiene workers in correctional centres when they are required to clean showers and toilet blocks. This will ensure the inmates' safety and allow for safe disposal of used razors left in these areas. Sharps containers must be deposited by an authorised officer in a sharps bin located at the Health Centre.	Authorised officer
2.	Ensure that educational material (posters and pamphlets) on infection control, safe use and disposal are displayed and made available to all inmates.	Governor/ Authorised officer

## 2.5 Procedures for respiratory hygiene

	<b>Procedure</b>	<b>Responsibility</b>
1.	Cover a cough or sneeze with a tissue. If a tissue is not available, cough or sneeze into the elbow so that the hands do not become contaminated. One metre distance, at least, should be maintained from people who are coughing, sneezing or spitting, where possible.	All staff and inmates
2.	Discard the tissue and wash hands thoroughly before touching the eyes, nose or mouth.	All staff and inmates

## 3 Management of blood and body substance spills

### 3.1 Policy

The Emergency Response Kit (ERK) is essential equipment for officers responding to incidents involving blood or body substance spills to reduce the risk of staff being exposed to communicable diseases or risk of injury.

Stocks for the ERK must be adequately maintained. All equipment should be ordered through 'NSWBuy' in accordance with NSW Procurement requirements. The Governor should identify an authorised officer to access stock lists and order the equipment (**refer to COPP section 15.1 Safe work practices**).

Further information about what should be contained in an ERK can be accessed in *Emergency response kit (ERK) and other protective work equipment*.

Note that first aid must be performed immediately if any exposed skin becomes contaminated with blood or body substances by washing the area thoroughly with liquid soap and water (after removing gloves) (**refer to COPP section 13.2 Medical emergencies**).

### 3.2 Procedure for blood and body substance spills

Whenever there are spills of blood or body substances, all staff involved in the management of spills should immediately:

	Procedure	Responsibility
1.	Use the ERK to manage the spill.	Staff involved
2.	Put on protective clothing, including eyewear, mask, overalls, booties and three pairs of disposable gloves.	Staff involved
3.	Sprinkle granules over the spill (leave for 2 minutes to set).	Staff involved
4.	Assemble scoop and scraper.	Staff involved
5.	Scoop up solidified spill, place into clinical waste bag.	Staff involved
6.	Mop floor with Fincol (use mop with red head, and a red bucket).	Staff involved
7.	Empty the bucket and refill with Fincol. Remove gloves and place in general rubbish unless visibly contaminated with blood or body substances then dispose in clinical waste bag.	Staff involved
8.	Wash hands thoroughly and put on disposable gloves again.	Staff involved
9.	Empty the buck, refill with Fincol and mop the floor again.	Staff involved
10.	Remove one pair of gloves and place in the clinical waste bag.	Staff involved

	Procedure	Responsibility
11.	Disinfect the mop and bucket. Mop heads must be removed and sent to the laundry for cleaning.	Staff involved
12.	Secure the neck of the clinical waste bag and place it into another clinical waste bag.	Staff involved
13.	Place the clinical waste bag in a yellow clinical waste bin	Staff involved
14.	Remove gloves, mask, overalls and booties and place in a clinical waste bag and place in a yellow clinical waste bin.	Staff involved
15.	Wash hands thoroughly and dry.	Staff involved

## 4 Catering hygiene and kitchen safety

CSNSW is required to comply with the NSW *Food Act 2003* and *Food Regulation 2015*.

### 4.1 Responsibilities of Governor

Governors of correctional centres are responsible for ensuring that:

- all staff and inmates involved in any part of the food preparation chain follow all safety and hygiene standards as set out in the Corrective Services Industries (CSI) Policy Manual section 1.6 *Offender food services*;
- all staff and inmates have access to hand basins, liquid soap, and paper towels so that they can comply with the requirement to wash and dry their hands;
- all long-term kitchen workers have been screened for Hepatitis A through the JH&FMHN Health Centre;
- all staff and inmates meet uniform requirements, including that they wear clean uniforms, consisting of:
  - long white trousers
  - a clean white T-shirt
  - a clean white apron every day
  - footwear that consists of a rigid sole with leather uppers (gym boots, thongs or athletic shoes are not acceptable).

### 4.2 Staff and inmates working in food preparation areas

OICs of accommodation or work areas must:

- ensure that both staff and inmates working under their supervision practice proper infection prevention and control procedures and are maintaining safe, hygienic work habits during the course of their duties;
- ensure all staff and inmates meet uniform requirements;
- monitor supplies and access to hand basins, liquid soap, and paper towels.

Staff working in food preparation areas must ensure that they and inmates:

- wash their hands whenever there is any risk that they might contaminate food;
- do everything they can to ensure they do not contaminate food, for example, they must not cough, sneeze or eat over unprotected food;
- tell their supervisor if they believe food has been contaminated.

Inmates working in food preparation areas, such as food handlers, are required declare to the OIC or supervisor if they have:

- been diagnosed with an illness that can be transmitted through food;
- any infected skin lesions on their hands or arms or discharges from their ears, nose or eyes, as these could contaminate food. Any cuts, abrasions or skin lesions must be covered with a waterproof occlusive covering. Any cuts or wounds on hands must be covered with a suitable dressing. Any bandages or dressings must be completely covered by clothing;
- any of the following symptoms: diarrhoea, nausea, abdominal pain, vomiting, sore throat, cough, fever, or jaundice.

### 4.3 Procedures for inmates temporarily declared unfit to work

Inmates must notify the OIC or supervisor if they have been declared temporarily unfit for work in the kitchen.

	Procedure	Responsibility
1.	Issue a medical or nursing certificate if an inmate has a temporary medical condition that affects their ability to attend to their work duties ( <b>refer to COPP section 6.1 JH&amp;MHN notifications</b> ).	JH&FMHN staff
2.	Manage and monitor the health condition of any inmate declared temporarily unfit for work.	JH&FMHN staff
3.	Provide certificate of clearance to return to work, if assessed as appropriate.	JH&FMHN staff
4.	Sight the certificate of clearance from JH&FMHN if an inmate is returning to work. Only allow inmates to return to work if they have been assessed and declared fit for work by JH&FMHN.	OIC/ Wing officer

## 5 Quick links

- [Related COPP](#)
- [Forms and annexures](#)
- [Related documents](#)

## 6 Definitions

Additional precautions	Additional precautions are additional work practices in situations where standard precautions alone may be insufficient to prevent transmission of infection. For example, these may be used in addition to standard precautions when dealing with people suspected or known to have an infectious condition, and may vary depending on the condition and control necessary.
AHNM	After Hours Nurse Manager
Authorised Officer	The officer authorised by the Governor to perform the functions set out in this part of the Custodial Operations Policy and Procedures.
COPP	Custodial Operations Policy and Procedures
CSI	Corrective Services Industries
Communicable disease	A disease that spreads from one person to another through direct or indirect transmission of the infectious agent in a variety of ways including: <ul style="list-style-type: none"> <li>• contact with blood or bodily fluids</li> <li>• breathing in an airborne virus</li> <li>• being bitten by an insect</li> </ul>
CSNSW	Corrective Services NSW
ERK	Emergency Response Kit
Hand washing	The practice of using liquid soap (not a communal bar of soap) and warm water, washing all surfaces of both hands thoroughly, rinsing and then drying with paper towels, when required.
HPNF	Health Problem Notification Form
HST	Health Survival Tips
Infectious Disease	Any disease produced by the action of a microorganism in the body, which may or may not be communicable.
JH&FMHN	Justice Health & Forensic Mental Health Network
LOP	Local Operating Procedure
NUM	Nurse Unit Manager
OIC	Officer in Charge
OS&P	Offender Services & Programs
PPE	Personal Protective Equipment
RPOSP	Responsivity Provision Offender Services & Programs
SEHO	Senior Environmental Health Officer
Standard precautions	Represent the minimum infection prevention measures, such as wearing non-porous protective equipment as barriers, which apply to all people, regardless of the suspected or confirmed infection status of the person. In this, it is to assume that everyone may be infectious.

## 7 Document information

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<b>Business centre:</b>	Custodial Operations
<b>Approver:</b>	Kevin Corcoran
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<b>Version</b>	<b>Date</b>	<b>Reason for amendment</b>
1.0		Initial publication ( <i>Replaces section 7.5, 12.1.7.2 of the superseded Operations Procedures Manual</i> )
1.1	05/04/19	Additional requirement for mandatory LOP for the management of Fincol supplies at 2.2 and 2.3
1.2	12/03/20	General formatting update and improvements
1.3	18/08/23	Updates in line with CSNSW restructure: deletion of reference to Security and Intelligence (S&I).

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