



DIVISION OF DEVELOPMENTAL DISABILITIES  
Olympia, Washington

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TITLE: HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND POLICY 9.07  
ACQUIRED IMMUNE-DEFICIENCY SYNDROME (AIDS)

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Authority: Section 504 of the Rehabilitation Act of 1973  
Americans with Disabilities Act 1990  
[Chapter 70.24 RCW, Control and Treatment of Sexually Transmitted Diseases](#)  
[Chapter 246-100 WAC, Communicable and Certain Other Diseases](#)  
[Chapter 296-823 WAC, Occupational Exposure to Bloodborne Pathogens](#)

Reference: DSHS Administrative Policy No. 6.09, *HIV/Acquired Immune Deficiency Syndrome (AIDS)*  
DSHS Administrative Policy 9.06, *Prevention and Control of Occupational Exposure to Blood or Other Potential Infectious Materials that may Contain Bloodborne Pathogens*  
DSHS Administrative Policy 7.02, *Equal Access to Services for Individuals with Disabilities*

### **PURPOSE**

This policy provides direction for employees and contractors of the Division of Developmental Disabilities (DDD) to provide education and training focused on elimination of HIV/AIDS.

### **SCOPE**

This policy applies to all DDD organizational units, employees, and volunteers.

### **DEFINITIONS**

**Blood** means human blood, human blood components, and products made from human blood.

**Contaminated** means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

**Contaminated Sharps** means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

**HIV (Human Immunodeficiency Virus)** means a virus which damages the human immune system and causes acquired immunodeficiency syndrome (AIDS).

**HIV Positive or HIV Seropositive** means the presence of antibodies to HIV in an individual as determined by laboratory testing. "Asymptomatic (without symptoms) seropositive" individual is assumed to be infected with HIV. The term commonly refers to a stage of HIV infection which lacks the significant symptoms associated with AIDS.

**Occupational Exposure** means reasonably anticipated skin, eye, mouth, other mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

**Standard Precautions** (formerly known as Universal Precautions) means an approach to infection control whose concept is that all human blood and body fluids as well as other potentially infectious materials are to be handled as if infected with bloodborne pathogens.

## **POLICY**

- A. DDD shall adhere to DSHS Administrative Policy 6.09, *HIV/Acquired Immune Deficiency Syndrome (AIDS)*, in its entirety.
- B. All DDD contracts with service providers shall include language that requires compliance with the provisions of DSHS Administrative Policy 6.09, *HIV/Acquired Immune Deficiency Syndrome (AIDS)*, specifically nondiscrimination in employment practices or delivery of services on the basis of disability.

## **PROCEDURES**

- A. DDD organizational units shall develop procedures related to HIV/AIDS that address their particular needs, issues, and settings, as necessary. Such additional procedures must be consistent with DSHS Administrative Policy 6.09.
- B. DDD facilities and offices shall provide HIV/AIDS education and training tailored to the employee's job responsibilities.
  - 1. Each employee must receive instructions regarding HIV disease and AIDS including, but not limited to, its transmission, prevention, and treatment options. These instructions must include the Department's specific HIV/AIDS education and training policies (i.e., DSHS Administrative Policies 6.09 and 9.06).

2. Each DDD facility and regional office will maintain documentation of HIV/AIDS training provided to its employees and volunteers.
- C. DDD employees must maintain strict confidentiality of information about clients and employees diagnosed with HIV disease or having AIDS, since such information is medical in nature, personal and confidential and subject to HIPAA rule (see also DSHS Administrative Policy 5.01: Privacy Policy – Safeguarding Confidential Information).

A breach of confidentiality will be considered a violation of the laws against discrimination and the laws relating to HIV/AIDS and constitutes a gross misdemeanor in Washington State.

D. Protection of Client Rights

1. DDD clients shall be presumed competent and have the ability to give informed consent for the HIV antibody test unless declared otherwise by a court of law.
2. When a client is clinically or legally incompetent to give an informed consent to test for HIV antibodies, consent shall be obtained per [RCW 7.70.065](#), in the following order of descending priority:
  - a. The appointed guardian of the client;
  - b. The individual to whom the client has given a durable power of attorney encompassing the authority to make health care decisions;
  - c. The client's spouse;
  - d. Children of the client;
  - e. Parents of client;
  - f. Adult brothers and/or sisters of the client; or
  - g. Superintendent.
3. Clients and/or their legal representatives shall be provided pre-test and post-test counseling.
4. DDD will release results of HIV tests only to the person who is tested, or his/her legal representative and to medical facilities in accordance with state statutes and regulations. If the person tested is under 14 years of age or is determined

incompetent, RCW 7.70.065 determines who obtains the test results. Disclosure of any test results should be conducted in person and accompanied by post-test counseling, including information regarding the confidential nature of the test results.

5. If a client assaults another person and HIV testing is requested to determine risks, refer the case to the local public health department. When testing of the source is required by statute and the client's legal representative refuses consent, the Superintendent at the facility may consent to testing.
- E. Standard Precautions must be used when providing care to clients to prevent contact with human blood and other potentially infectious materials. The underlying concept of Standard Precautions is that all human body fluids are considered to be potentially infectious material. Refer to DDD Policy 9.03, *Employee Protection from Bloodborne Pathogens*, for additional information.
1. Staff working with clients must routinely:
    - a. Use appropriate barrier precautions to prevent skin and mucous membrane exposure when anticipating contact with a client's blood and body fluids; and
    - b. Wear gowns or aprons during procedures that are likely to generate splashes of blood or other body fluids.
  2. Staff must wash their hands and skin surfaces immediately and thoroughly:
    - a. If contaminated with blood or other body fluids; and
    - b. After gloves are removed. Hand hygiene with hand sanitizer is effective after glove removal, if hands are not visibly soiled.
  3. Staff must take precautions to prevent injuries caused by needles, scalpel blades, and other sharp instruments or devices contaminated with blood or body fluids from a client or other staff. Staff must use appropriate equipment and safe medical devices to eliminate or minimize occupational exposure.
  4. To prevent needle stick injuries, needles must not be recapped (unless no other means is appropriate and then by one-hand method), purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand.

- a. Staff must place all used disposable syringes and needles, scalpel blades, and other disposable sharp items in puncture-resistant containers for disposal.
  - b. The safety devices on disposable needles and sharps are activated immediately after use and before disposal in the puncture-resistant container.
  - c. Staff must place reusable needles in a puncture-resistant container for transport to the area for reprocessing after use. Staff must label such containers sent to the reprocessing area as "Items Contaminated with Blood or Body Fluids."
5. To minimize the risk of mouth contamination, staff must assure that mouthpieces, resuscitation bags, or other ventilation equipment and devices are available for use in areas where the need for resuscitation is predictable.
  6. Staff must use isolation precautions as necessary if associated conditions, such as diarrhea or other infectious conditions, are diagnosed or suspected.
  7. Staff must use protective isolation precautions to protect the HIV Positive client and those clients who have AIDS or HIV disease from exposure to nosocomial (i.e., hospital acquired) infections.

### **EXCEPTIONS**

No exceptions to this policy may be made without the prior written approval of the Division Director.

### **SUPERSESSION**

DDD Policy 9.07  
Issued October 1, 2007

Approved: /s/ Linda Rolfe  
Director, Division of Developmental Disabilities

Date: June 15, 2010