



DIVISION OF DEVELOPMENTAL DISABILITIES  
Olympia, Washington

---

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

---

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 Bloodborne Diseases  
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 contractors providing services funded by DDD.

### **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**

DDD shall adhere to DSHS Administrative Policy 6.09, *HIV/Acquired Immune Deficiency Syndrome (AIDS)*, in its entirety. All contracts with service providers shall include language that requires compliance with the provisions of DSHS Administrative Policy 6.09.

## **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-funded facilities and programs shall facilitate HIV/AIDS training and education for employees, volunteers, and clients. Such training must include information on the treatment of HIV/AIDS, the manner in which HIV is and is not transmitted, and transmission prevention practices.

Each DDD facility and program shall have an HIV/AIDS training plan on file and documentation of training provided to staff, clients, and volunteers.

C. 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.

- D. Standard Precautions shall 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 shall 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 shall wash their hands and skin surfaces immediately and thoroughly:
  - a. If contaminated with blood or other body fluids; and
  - b. After gloves are removed.
3. Staff shall 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 shall use appropriate equipment and safe medical devices to eliminate or minimize occupational exposure.
4. To prevent needle stick injuries, needles shall 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 shall place all used disposable syringes and needles, scalpel blades, and other disposable sharp items in puncture-resistant containers for disposal.
  - b. Staff shall place reusable needles in a puncture-resistant container for transport to the area for reprocessing after use. Staff shall 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 shall 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 shall use isolation precautions as necessary if associated conditions, such as diarrhea or other infectious conditions, are diagnosed or suspected.

7. Staff shall use protective isolation precautions to protect the HIV Positive client and those clients who have AIDS or HIV disease from exposure to nosocomial 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 April 1, 2003

DDD Policy 9.07  
Issued February 14, 1994

DDD Policy 9.07  
Issued February 26, 1993

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

Date: October 1, 2007