



Eric Hawkins
Chief of Police

ALBANY, NEW YORK

POLICE DEPARTMENT

165 HENRY JOHNSON BOULEVARD
ALBANY, NEW YORK 12210



1789

VEHICLE DECONTAMINATION GENERAL ORDER NO: 3.3.15

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PURPOSE: The purpose of this policy is to establish procedures to be utilized in the event that an Albany Police Department vehicle becomes contaminated by bio-hazardous material or other form of harmful materials.

POLICY: It is the policy of the Albany Police Department to maintain a safe working environment for all employees. The Department shall provide the necessary services for the proper cleaning and decontamination of police vehicles.

DEFINITIONS: **Contamination** – Contamination occurs when the passenger compartment or trunk becomes exposed to a substance or pest that causes an unclean or impure condition that poses a potential health risk or nuisance.

Bio-Hazard Contamination – Bio-hazard contamination occurs when the interior of the police vehicle becomes contaminated with blood, urine, excrement, vomit, or other bodily fluid that may pose a bio-hazard risk.

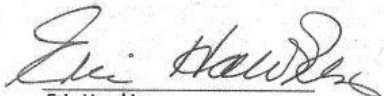
Decontamination Vendor – A decontamination vendor is an approved vendor who is responsible for the decontamination and cleaning of Department vehicles that have been contaminated.

I. VEHICLE DECONTAMINATION

A. When a Department vehicle has been contaminated, including bio-hazard contaminations, the following procedures shall be followed:

1. Universal precautions shall be deployed by employing personal protective equipment (i.e. latex gloves, face mask), as needed.
2. The vehicle operator shall complete an [Albany Police Department Vehicle Repair Form](#), APD Form # 436 shown on page 4 of this order, in accordance with the guidelines set forth in [General Order 3.3.05 – Repairs to Department Vehicles](#).
3. The vehicle shall be processed for evidentiary purposes, when applicable (i.e. prisoner injures self while breaking vehicle window).
4. The level/type of contamination shall be assessed and a determination shall be made as to whether the vehicle is safe or practical for operation.

5. The operator's supervisor shall be notified of the incident and shall request that the vehicle be brought to an authorized vendor for decontamination.
6. The Communications Center shall be informed if the vehicle requires to be towed due to the decontamination and the type of contaminant.
 - a. The Communications Center shall contact the vendor to determine if they are open for business and if they are prepared/properly staffed to work on the vehicle.
 - b. The Communications Center shall maintain the current business hours of the vendor.
 - c. Communications shall notify the operator whether the vehicle can be towed to the vendor or towed to the Third Street lot opposite Headquarters, depending on the time of day or business hours of the vendor.
7. The building maintenance supervisor shall be notified in the event of a pest contamination, and if the interior/trunk of the vehicle shall be fogged, as needed.
 - a. When a pest contamination (i.e. fleas) of a Department vehicle occurs, the vehicle shall be towed to the Third Street lot opposite Headquarters.
8. When a biohazard contamination of a Department vehicle occurs, the vehicle shall ultimately be brought to the decontamination vendor.
 - a. The vehicle shall be towed to the vendor or to the Third Street lot when the contamination is such that it becomes unsafe or impractical for the vehicle operator to drive the vehicle (i.e. copious amounts of vomit).
9. The lieutenant of the Administrative Services Bureau (ASB) shall maintain a liaison with building maintenance supervisor and/or vendor as to the vehicle's status.
10. The lieutenant of ASB shall coordinate vendor services through the purchasing department and shall publish and/or post the name and address of the current approved decontamination vendor in a manner that makes the information available to all department personnel. A copy of authorized vendors shall also be sent to the Communications Center for notification purposes.


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REPAIR REQUEST FOR POLICE UNIT

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DATE/TIME: _____ VEHICLE CONTROL # _____
(7 digit # affixed to vehicle)
 MILEAGE: _____ UNIT: _____
 TOWED BY: _____ TOWED TO: _____

PROBLEM

_____ RADIO	_____ CRASH
_____ EMERGENCY LIGHTS/SIGNALMASTER	_____ MUFFLER/EXHAUST
_____ WILL NOT START	_____ TIRES
_____ MOTOR	_____ TRANSMISSION

EXPLAIN IN FULL: _____

AUTHORIZING SUPERVISOR: _____ OPERATOR: _____

DO NOT WRITE BELOW THIS LINE - FLEET TRACKING

- | | |
|--|---|
| <input type="checkbox"/> ALBANY DODGE | <input type="checkbox"/> ORANGE FORD |
| <input type="checkbox"/> DEPAULA CHEVROLET | <input type="checkbox"/> GEORGE'S UPHOLSTERY |
| <input type="checkbox"/> WATKINS SPRING | <input type="checkbox"/> HARMON GLASS |
| <input type="checkbox"/> QUALITY TRANSMISSION | <input type="checkbox"/> SUPER SONIC CAR WASH |
| <input type="checkbox"/> MOTOROLA | <input type="checkbox"/> COLE MUFFLER |
| BODY SHOP <input type="checkbox"/> COLLISION EXPERTS | <input type="checkbox"/> ALBANY DODGE |
| <input type="checkbox"/> QUAIL AUTO | |