

**U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT  
ENFORCEMENT AND REMOVAL OPERATIONS  
ICE HEALTH SERVICE CORPS**

**ENVIRONMENTAL SAFETY DIRECTIVE**

**IHSC Directive: 05-04  
ERO Directive Number: 11779.1  
Federal Enterprise Architecture Number: 306-112-0002b  
Effective Date: October 10, 2023**

---

**By Order of the Assistant Director**

(b)(6),(b)(7)(C)

**DHSc, FACHE**

X

(b)(6),(b)(7)(C)

10/10/2023

(b)(6),(b)(7)(C)

---

1. **PURPOSE:** The purpose of this directive is to set forth policies and procedures for environmental safety.
2. **APPLICABILITY:** This directive applies to all U.S. Immigration and Customs Enforcement (ICE) Health Service Corps (IHSC) personnel, including but not limited to, U.S. Public Health Service (PHS) officers, civil service employees, and contract personnel. It applies to IHSC personnel supporting health care operations in ICE-owned and contracted detention facilities and to IHSC Headquarters (HQ) staff. This directive applies to contract personnel supporting IHSC in detention facilities and at HQ. Federal contractors are responsible for the management and discipline of their employees supporting IHSC.
3. **AUTHORITIES AND REFERENCES:**
  - 3-1. Title 29, Code of Federal Regulations, Part 1960, (29 C.F.R. 1960), Basic Program Elements for Federal Employee Occupational Safety and Health Programs and Related Matters.
  - 3-2. Title 29, Code of Federal Regulations, Section 1910.1030, (29 C.F.R. §1910.1030), Bloodborne Pathogens.
  - 3-3. Executive Order 12196, Occupational Safety and Health Programs for Federal Employees, 1980.
  - 3-4. Public Law 91-596, Occupational Safety and Health Act (OSH Act) of 1970.
  - 3-5. DHS Directive: 066-01, Safety and Health Programs, 2008.

- 3-6. Title 29, Code of Federal Regulations, Section 1910.1200 (29 C.F.R. §1910.1200), Hazard Communication.
  - 3-7. Title 10, Code of Federal Regulations, Part 20 (10 C.F.R. 20), Standards for Protection Against Radiation.
  - 3-8. Title 42, Code of Federal Regulations, Section 482.26 (42 C.F.R. § 482.26), Condition of Participation: Radiologic Services.
  - 3-9. State Medical Waste Programs Regulations.
  - 3-10. Rehabilitation Act of 1973; Public Law 93-112.
4. **POLICY:** IHSC performs environmental safety activities to promote staff, noncitizen workers, and patient safety within the facilities, while monitoring the impact on the environment. IHSC uses environmentally sound practices for proper handling and disposal of hazardous materials and waste management. IHSC inspects all IHSC-staffed facility medical clinics and is responsible for the prevention of pest infestation, radiation monitoring, construction and renovation projects, maintenance of the medical clinic environment and airborne infection isolation rooms.
5. **RESPONSIBILITIES:**
- 5-1. **The Public Health and Safety Program (PHSP) Chief**
    - 5-1.1 Oversees the national environmental program and provides guidance on all environmental safety requirements.
    - 5-1.2 Monitors implementation of all environmental safety requirements in IHSC-staffed facilities.
    - 5-1.3 Collects data for program improvement.
  - 5-2. **Health Services Administrator (HSA) or Designee, Facility Health Program Manager (FHPM), or Designee**
    - 5-2.1 Oversees the IHSC facility's:
      - 5-2.1.a. Management and disposal of sharps and biohazardous waste.
      - 5-2.1.b. Cleaning, decontamination, and sterilization of medical, dental, and laboratory instruments.
      - 5-2.1.c. Radiation safety, cleaning, and decontamination activities.
      - 5-2.1.d. Pest control.
      - 5-2.1.e. Infection isolation rooms.

- 5-2.1.f. Clinic inspections.
- 5-2.1.g. Construction, renovation, or repair work.
- 5-2.1.h. Staff safety.
- 5-2.1.i. Staff orientation and training.
- 5-2.2 Communicates with ICE stakeholders for site-specific environmental safety concerns.
- 5-2.3 Implements and documents facility health services staff orientation and annual training on environmental safety topics.
  - 5-2.3.a. Ensures health service staff receive initial orientation and annual training on environmental safety.
  - 5-2.3.b. Trains staff prior to initial assignment and before exposing them to new chemicals.
  - 5-2.3.c. The HSA, FHPM, or designee documents orientation and annual trainings that include environmental safety.
- 5-2.4 Files all reports federal, state, and local laws and regulations require.
- 5-3. Clinical director (CD) or designated physician** reviews and approves the local exposure plan in collaboration with the local triad annually.
- 5-4. Health Services Staff**
  - 5-4.1 Comply with all national and local policies, procedures, and requirements.
  - 5-4.2 Report safety concerns to the HSA.
  - 5-4.3 Dispose of sharps and biohazardous waste properly.
  - 5-4.4 Ensure patients do not handle sharps or biohazardous waste.
  - 5-4.5 Participate in national performance measures, internal audits, external accreditation reviews, and external performance improvement benchmark activities.
- 6. PROCEDURES:** Procedures specific to hazardous materials management and disposal, radiation safety, cleaning and decontamination activities, pest control, airborne infection isolation rooms, clinic inspections, construction renovation and repair work, staff safety, and staff orientation and training are detailed in IHSC 05-04 G-01, *Environmental Health Guide*; and IHSC 05-04 G-02, *Environmental Health Guide: Radiation Safety Program*, found in the IHSC Policy Library.

- 6-1. Radiation Safety Management.** Health services staff must adhere to safety protocols and applicable laws and regulations, when using radioactive materials and stored or discarded waste products in or around medical and dental service areas.
- 6-1.1 The HSA, FHPM, or designee coordinates with the contracting officer representative:
- 6-1.1.a. To exchange quarterly or monthly information to monitor staff who are pregnant.
- 6-1.1.b. To receive annual dosimetry reports containing an employee's exposure to radiation-emitting equipment outside of IHSC. The report must account for cumulative occupational exposures to radiation during each period.
- 6-2. Cleaning and decontamination.** Health services staff must adhere to cleaning, decontaminating, and sterilizing of surfaces, equipment, and instruments in the medical or dental clinic or examination rooms, in accordance with applicable laws and regulations.
- 6-3. Pest control.** Health services staff maintain a high level of cleanliness to minimize the presence of pests or vermin within the medical clinic.
- 6-4. Airborne infection isolation (All) rooms.** HSAs, FHPMs, or designees use the Health and Safety Tracking Tool in the monitoring and periodic maintenance of airborne infection isolation rooms performed by contractors. All rooms provide isolation from suspected or actual airborne threats.
- 6-5. Clinic inspections.** HSA, FHPM or designee perform monthly medical clinic inspections to identify health and safety deficiencies that require corrective action. During inspections, the HSA, FHPM, or designee inspect equipment, evaluate the medical clinic cleanliness, and identify occupational or environmental hazards. The HSA, FHPM or designee implement corrective actions when they find hazards.
- 6-6. Construction, renovation, and repair work.** HSA or designee coordinates renovation and repair activities to maintain the facility.
- 6-7. Staff safety.** Health services staff refer to the administrative practices that ensure safety for staff working within the facility - Safety Tool for Staff Injuries.
- 6-7.1 Health services staff use appropriate personal protective equipment (PPE) and safety equipment for all clinic duties as outlined in IHSC 05-02 G-02, *Occupational Health Guide: Personal Protective Equipment Program*, found in the IHSC Policy Library.

- 6-7.2 Health services staff must inventory hazardous sharps and instruments at least every shift.
- 6-7.3 The HSA, FHPM or designee communicates hazardous sharps and instruments discrepancies to ICE stakeholders.
- 6-7.4 Health services staff communicate with custody for safety concerns in the facility by telephone, radio, or other means.

**7. HISTORICAL NOTES:** This directive replaces IHSC Directive 05-04, *Environmental Health Services*, November 20, 2018.

**7-1. Summary of Changes:**

- 7-1.1 Title changed from “environmental health” to “environmental safety” to reflect the purpose of the directive.
- 7-1.2 Updated Department of Homeland Security applicable laws and regulations in Authorities and References section.
- 7-1.3 Revised responsibilities section to clarify roles.
- 7-1.4 Replaced “compliance officer” title with “facility health care program manager” throughout the document to accurately name the position title.
- 7-1.5 Removed the information about Clearance for Food Service Workers found in IHSC Directive 05-06, *Infectious Disease Public Health Actions*.
- 7-1.6 Moved detailed procedures to the Environmental Safety Guide.
- 7-1.7 Updated definitions to align with directive.
- 7-1.8 All compliance indicators for J-C-06 are in IHSC Directive 01-55, *Facility Operations*.
- 7-1.9 Renumbered J-B-01 now J-B-02: Infection Control Program. Directive updated to reflect the 2018 NCCHC Standards compliance indicators.
- 7-1.10 Renumbered J-B-03, now J-B-09: Staff Safety-Directive updated to reflect the 2018 NCCHC Standards compliance indicators.

**8. DEFINITIONS:** Definitions are found in the 11-00 IHSC Glossary and in respective guides related to environmental safety in the IHSC Policy Library.

**8-1. Environmental safety.** Guidance, policies, and practices that ensure the surrounding environment is free from hazards.

They ensure the safety and well-being of workers and employees, residents near industrial operations, as well as the prevention of accidental environmental damage.

- 8-2. **Exposure.** Reasonably anticipated skin, eye, mucus membrane, or parenteral contact with blood or other infectious materials that may occur while an employee performs their duties.
- 8-3. **Hazardous materials management.** Hazardous materials are substances, chemicals, tools, and other materials used and stored in or around medical and dental service areas. Health services staff manage hazardous waste in accordance with applicable laws and regulations.
- 8-4. **Hazardous waste.** Waste from a hazardous substance that will or may result in adverse effects in the health and safety of staff, patients, or the environment.
- 8-5. **ICE stakeholders.** Include the Immigration and Customs Enforcement (ICE), Enforcement and Removal Operations (ERO), the field office director (FOD) or facility administrator, and custody officials.
- 8-6. **Radioactive material.** Nuclear material and other radioactive substances that may cause death, serious bodily injury, or substantial damage to property or to the environment.
- 8-7. **Personal protective equipment (PPE).** Equipment worn to minimize exposure to hazards that cause workplace injuries and illnesses.
- 8-8. **Pests.** Pests are any organisms, including plants or animals, that pose health, environmental, economic, or aesthetic risks.

## 9. APPLICABLE STANDARDS:

### 9-1. Performance-Based National Detention Standards (PBNDS 2011, rev. 2016).

9-1.1 Part 1: Safety, 1.2 Environmental Health and Safety.

9-1.2 Part 7: Administration and Management; 7.3 Staff Training.

### 9-2. ICE Family Residential Standards.

9-2.1 Part 1: Overview and Safety; 1.2 Environmental Health and Safety.

9-2.2 Part 7: Administration & Management; 7.3 Staff Training.

### 9-3. American Correctional Association (ACA): Performance-Based Standards for Adult Local Detention Facilities, 4th edition.

9-3.1 4-ALDF-1A-01: Sanitation.

- 9-3.2 4-ALDF-1A-02: Sanitation.
- 9-3.3 4-ALDF-1A-03: Sanitation.
- 9-3.4 4-ALDF-1A-04: Housekeeping.
- 9-3.5 4-ALDF-4A-13: Health Protection.
- 9-3.6 4-ALDF-4A-15: Health Protection.
- 9-3.7 4-ALDF-7B-09: Training and Staff Development.

**9-4. National Commission on Correctional Health Care: Standards for Health Services in Jails 2018.**

- 9-4.1 J-B-02: Infectious Disease Prevention and Control.
  - 9-4.1.a. Compliance indicator #8 is in IHSC 05-06, G-03 *Infectious Disease Public Health Actions guide: Management of Ectoparasites*.
  - 9-4.1.b. Compliance indicators #2c-2e are addressed in IHSC Directive 05-06, *Infectious Disease Public Health Actions*.
- 9-4.2 J-B-09: Staff Safety.

**10. PRIVACY AND RECORDKEEPING:** ICE uses noncitizen health records and information maintained in accordance with the DHS/ICE-013 Alien Health Records System of Records to provide for the care and safety of detained noncitizens. IHSC limits access to detained noncitizen health records and information to those individuals who need to know the information for the performance of their official duties, and who have appropriate clearances or permissions. IHSC secures paper records in a locked cabinet or room when not under the direct control of an officer or employee with a need for the paper record to perform their duties.

- 10-1.** IHSC staff complete annual training on the protection of patient health information and Sensitive Personally identifiable information.
- 10-2.** IHSC staff reference the Department of Homeland Security Handbook for Safeguarding Sensitive PII (Handbook) at DHS Handbook for Safeguarding Sensitive PII for additional information concerning safeguarding sensitive PII.
- 10-3.** All relevant documents produced or provided in accordance with this Directive must be maintained in accordance with an applicable National Archives and Records Administration (NARA) General Records Schedule (GRS) or a NARA-approved agency-specific records control schedule.

If the records are not subject to a records schedule, they must be maintained indefinitely by the agency. In the event the records are subject to a litigation hold, they may not be disposed of under a records schedule until further notification. Prior to the disposition of any records referenced in this directive, ICE Records Officer approval must be obtained.

- 11. NO PRIVATE RIGHT STATEMENT:** This directive is an internal policy statement of IHSC. It is not intended to, and does not create any rights, privileges, or benefits, substantive or procedural, enforceable against the United States; its departments, agencies, or other entities; its officers or employees; or any other person.
- 12. POINT OF CONTACT:** Chief, Public Health, Safety, and Preparedness Unit.