



## Occupational Health Connections

Reviewed Jan 2024

### Bloodborne Pathogen Exposure Control Plan

#### I. Policy:

This Exposure Control Plan has been developed in accordance with the OSHA Bloodborne Pathogens Standard 29 CFR 1910.1030. This plan is specifically designed to eliminate or minimize employee occupational exposure to blood or certain other body fluids.

#### II. Scope:

This plan affects all employees including management.

#### III. Definitions:

**Bloodborne Pathogen:** Microorganisms in the human blood which can cause disease in humans. These pathogens include but are not limited to hepatitis B virus (HBV), hepatitis C virus and human immunodeficiency virus (HIV).

**Exposure incident:** A specific eye, mouth, other mucous membrane, or non-intact skin contact with blood or other potentially infectious material that results from the performance of an employee's duties.

**Occupational exposure:** Reasonable anticipated skin, eye, mucous membrane or parenteral contact with blood or other potentially infectious material that may result from the performance of employee's duties.

**Other potentially infectious materials:** Human body fluids including but not limited to breast milk, urine, feces, vomitus if they contain visible blood or any unidentifiable body fluids.

**Regulated Waste** means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.



## Occupational Health Connections

### IV. Responsibility:

The OHC management team is responsible for ensuring that all the necessary resources are provided to implement and maintain this plan and for the implementation of all required training in support of this procedure. They are also responsible for annually reviewing this program, its effectiveness, and for updating this program as needed.

The OHC management team will be responsible for employees' initial training, annual retraining, and exposure determination.

The OHC management team in conjunction with employees is responsible for the daily administration of practices and procedures.

### V. Procedure:

#### 1. Exposure determination:

Job classification in which all employees have occupational exposure:

Nursing (NP, RN & LPN's), MD, EMT, MA, medical techs, phlebotomist

#### 2. Implementation schedule:

##### A. Universal Precautions:

Universal precautions shall be observed by all employees to prevent contact with blood or other infectious material. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

#### 3. Engineering Controls:

a) Sharps containers: Puncture resistant, labeled with a biohazard label and leakproof shall be used for all needles, broken glass or any sharps that may be contaminated with blood or other potentially infectious material.

The sharps container will be located on site. The site shall be responsible for the inspection and proper disposal of the sharp's container.

b) Eye wash stations should be available on site in case of exposure to the eyes.

If eye wash stations are not available a regular faucet may be used to flush the eyes.

#### 4. Work Practice Controls:

Work practice controls will be utilized to eliminate or minimize exposure to all employees.

\*\*Employees must wash their hands or other skin with soap and water, or flush mucous membranes with water, as soon as possible following an exposure incident (such as a splash of blood to the eyes or an accidental needle stick).



## Occupational Health Connections

\*\*Employees must wash their hands or use hand sanitizer immediately (or as soon as feasible) after removal of gloves or other personal protective equipment.

\*\*Employees shall familiarize themselves with the nearest hand washing facilities for the buildings in which they work. Because most buildings are public access, they will have available hand washing facilities in public restrooms and custodial / janitorial closets. If hand washing facilities are not available, OHC will provide, if notified either an antiseptic cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. If these alternatives are used, then the hands are to be washed with soap and water as soon as feasible.

OHC employees who encounter improperly disposed needles shall notify the site of the location of the needle - i.e. security, site contact, EH&S. Needles shall be disposed of in labeled sharps containers provided at the location. If sharps containers are not available at that location, OHC will provide one if notified.

Needles should never be recapped.

Unprotected needles may be moved only by using a mechanical device or tool (forceps, pliers, broom, and dustpan).

Breaking or shearing needles is prohibited.

Re-using blood-tube holders is prohibited to protect workers from being exposed to contaminated needles.

No eating, drinking, smoking, applying cosmetics or lip balm, or handling contact lenses is allowed in a work area where there is a reasonable likelihood of exposure.

No food or drinks shall be kept in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or other potentially infectious materials are present.

Employees must perform all procedures involving blood or other potentially infectious materials in such a manner as to minimize splashing, spraying, splattering, and generation of droplets of these substances.

a) Personal protective equipment shall be used during all cleanup of blood and other potentially infectious material. These are to include but not limited to gloves, goggles, face shields, waterproof garments. These items are located on site. If they are not available at your site, please notify OHC and we will make arrangements to have them available.



## Occupational Health Connections

b) If an employee incurs an exposure to their skin, eyes, or mucous membranes those areas shall be washed or flushed with water as soon as feasible following contact.

### HOUSEKEEPING:

Decontamination will be accomplished by utilizing the following materials:

10% (minimum) solution of chlorine bleach or other EPA-registered disinfectants.

All contaminated work surfaces, tools, objects, etc. will be decontaminated immediately or as soon as feasible after any spill of blood or other potentially infectious materials.

The bleach solution or disinfectant must be left in contact with contaminated work surfaces, tools, objects, or potentially infectious materials for at least 10 minutes before cleaning.

Equipment that may become contaminated with blood or other potentially infectious materials will be examined and decontaminated before servicing or use.

Broken glassware will not be picked up directly with hands. Sweep or brush material into a dustpan.

Known or suspected contaminated sharps shall be discarded immediately or as soon as feasible in containers that are closeable, puncture-resistant, leak-proof on sides and bottom, and marked with an appropriate biohazard label. If sharps container is not pre-labeled, biohazard labels are available through OHC.

When containers of contaminated sharps are being moved from the area of use, the containers shall be closed immediately before removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping. Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner that would expose employees to the risk of percutaneous injury.

Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.

OHC employees usually do not have input on supplies purchased for the site but if you have suggestions on the identification, evaluation, and selection of effective engineering and work practice controls for a site please bring it to the OHC management team attention and they will speak to the site.



## Occupational Health Connections

Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials.

### 6. Personal Protective Equipment:

All personal protective equipment used on site will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious material. The protective equipment will not permit blood or other potentially infectious material to pass through or reach the employee's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions and duration of time that the personal protective equipment will be used.

Personal protective equipment will be provided to employees on the site or if notified by OHC.

Personal protective equipment will be used for these tasks: See appendix A and any task that there is a reasonable anticipation of exposure.

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to employees. All repairs and replacements will be made by the employer at no cost to employees. Please notify OHC if your personal protective equipment has become contaminated, needs to be cleaned, laundered, or disposed of.

All personal protective equipment will be removed before leaving the work area.

Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin, when performing vascular access procedures and when handling or touching contaminated items or surfaces.

Disposable gloves used at the facility shall not be washed or decontaminated for re-use and are to be replaced as soon as feasible if they are contaminated, torn, or punctured. Utility gloves may be decontaminated for re-use.

Masks in combination with eye protection devices such as goggles or glasses with solid side shield or chin-length face shield are required to be worn whenever splashes, spray, splatter or droplets of blood or other potentially infectious materials may be generated and eyes, nose, mouth contamination can reasonably be anticipated.



## Occupational Health Connections

All bins, pails, cans, and similar receptacles shall be inspected and decontaminated as needed by the site.

Any broken glass, needles or sharps that may be contaminated will not be picked up directly with the hands. The following procedure will be used: bring the sharps container to the site, wear gloves, use a brush and dustpan to sweep up the material then place it in the sharp's container. Decontaminate the brush and dustpan after use or dispose of properly.

The employer shall ensure that the employee uses appropriate personal protective equipment unless the employer shows that the employee temporarily and briefly declined to use personal protective equipment when, under rare and extraordinary circumstances, it was the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety services or would have posed an increased hazard to the safety of the worker or co-worker. When the employee makes this judgment, the circumstances shall be investigated and documented to determine whether changes can be instituted to prevent such occurrences in the future.

### 7. Regulated Waste Disposal:

Regulated waste shall be bagged or placed in containers constructed to contain all contents and prevent leakage of fluids during handling, storage, transport, or shipping. This container shall be properly labeled.

Company that will pick up waste: determined by the site.

### 8. Laundry:

All garments that are penetrated by blood shall be removed as soon as feasible. These garments are to be placed in red biohazard bags and laundered. Biohazard bags are located in the unit or at OHC.

Laundry contaminated with blood or other potentially infectious material will be handled as little as possible. Such laundry shall be placed in red biohazard bags where it was used. All employees who handle this laundry shall use personal protective equipment to prevent contact with blood or other potentially infectious material.

Laundry at this facility will be cleaned by site's laundry or employee choice. The offsite laundry service is to be notified that this laundry is contaminated.



## Occupational Health Connections

### 9. Hepatitis B Vaccine:

All employees who have been identified as having exposure to blood or other potentially infectious material will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine will be offered within 10 working days of their initial assignment to work involving the potential for occupational exposure to blood or other potentially infectious material unless the employee has previously had the vaccine.

Employees who decline the Hepatitis B vaccine will sign a waiver. See appendix C.

Employees who initially decline the vaccine but who later wish to have it while still covered under the standard may then have the vaccine provided at no cost.

The OHC management team will be responsible for assuring that the vaccine is offered.

Hepatitis B vaccines will be administered on-site or at a clinic.

### 10. Post-exposure evaluation and follow-up:

When the employee incurs an exposure incident, it should be reported immediately to the site contact and the OHC management team.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up.

This follow-up will include:

- \* Documentation of the route of exposure and circumstances related to the incident.
- \* If possible, the identification and status of the source individual. If consent is given the blood of the source individual will be tested for HIV/HBV infectivity.
- \* The employee will be offered the option of having their blood collected for HIV/HBV testing. The blood sample will be preserved for 90 days to allow the employee to decide if the blood should be tested for HIV status. If the employee decides before that time that testing will or will not be conducted, then the blood will be tested or discarded.
- \* The employee will be offered post-exposure prophylaxis in accordance with current recommendations.
- \* The employee will be given appropriate counseling.

The OHC management team has been designated to assure that the above is carried out and to maintain records.



## Occupational Health Connections

### 11. Training:

Training will be conducted before initial assignment to tasks where occupational exposure may occur.

All employees will receive annual refresher training.

Training will be conducted by either lecture, video, online and/or written information.

Training is offered at no cost to the employee and during regular work hours.

Training will include: see appendix D

### 12. Recordkeeping

All records required by the OSHA standard will be kept by the president.

Training records shall be maintained for 3 years from the date on which the training occurred.

Training records shall include:

- The dates of training

- Summary of the training

- Names and qualifications for the person conducting the training

- Names and job titles of all persons attending the training

Occupational exposure incident records shall be maintained for at least the duration of employment plus 30 years. These records must be kept confidential.

All provisions of this plan will be implemented by the OHC management team.

## Appendix A

<b>TASK</b>	<b>Personal Protective Equipment (PPE)</b>
First aid	As necessary: gloves, goggles, gown, and other equipment needed to perform duties
CPR	gloves, barrier device
Venipuncture	gloves
Injections	gloves if exposure is anticipated.





## Occupational Health Connections

### Appendix B

#### Personal Protective Equipment (PPE)

##### PPE under employee's control:

- lab coats, scrubs or uniform
- safety shoes
- safety goggles/safety glasses

##### PPE provided as required:

- latex or non-latex gloves
- face shields
- barrier device

##### Organizational equipment:

- mops & brooms
- sharps container
- biohazard bags
- disinfectant
- other material as determined by site

### Appendix C

#### Hepatitis B Vaccine Declination

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B Virus (HBV) infection. I have been given the opportunity to be vaccinated with the Hepatitis B vaccine at no charge to myself. However, I decline the Hepatitis B vaccine at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If, in the future, and if I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_



## Occupational Health Connections

### **Appendix D**

Bloodborne Pathogen Training shall include an explanation of the following:

1. The OSHA Standard for Bloodborne Pathogens
2. What are bloodborne pathogens.
3. Modes of transmission.
4. The exposure control plan and where to find it.
5. Incidents that might cause exposure to blood or other potentially infectious material.
6. Control methods to be used to control exposures.
7. Personal protective equipment and how to use it.
8. Exposure reporting.
9. Post exposure evaluation and follow-up.
10. Signs and labels.
11. Hepatitis B vaccine program.
12. Questions and answers.