

# Bloodborne Pathogen Exposure Control Plan

## Purpose

The purpose of the Bloodborne Pathogen Program is to inform and educate employees of \_\_\_\_\_ County (hereby referred to as “the county”) regarding safe procedures to follow when coming in contact with bodily fluids which employees of the county may encounter during the course of their duties. The county desires to establish a workplace free of hazards, and is committed to the safety and security of its employees.

Additionally, this program will establish the person or people responsible for program review, discipline, record retention, and training requirements for employees of the county.

This program is intended to comply with the Occupational Safety and Health Act standard 29CFR 1910.1030.

## Definitions

*Bloodborne Pathogens* means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

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

*HAV* means hepatitis A virus.

*HBV* means hepatitis B virus.

*HCV* means hepatitis C virus.

*HIV* means human immunodeficiency virus.

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

*Personal Protective Equipment* is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

*Source Individual* means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.

## Scope & Exposure Determination

This Hazard Communications Program applies to all departments within the county, all full-time, part-time employees, and volunteers who have been determined to have an *occupational exposure* to bloodborne pathogens.

The county has determined that the following positions within the county have an occupational exposure:

- Custodial staff
- Emergency Medical Services: EMT's and paramedics
- Jail guard staff
- Sheriff's deputies
- Health Department: nursing staff

## Distribution and Review

The Bloodborne Pathogen Program shall be included with the county's employee handbook, and shall be reviewed with all new full-time and part-time employees prior to their potential exposure to bloodborne pathogens. Volunteers not receiving an employee handbook shall be given a copy of this Bloodborne Pathogen Program, and it shall be reviewed with them prior to their potential exposure to bloodborne pathogens. It shall be the responsibility of the employee's department head to ensure that the employee has received this document, and has reviewed it with the employee. The employee or volunteer shall sign and date this document, the department head shall place the original in the employee's file and a copy shall be distributed to the employee or volunteer.

## Training

It shall be the responsibility of the employee or volunteer's department head to provide all training regarding this Bloodborne Pathogen Program. Training shall be provided to all full-time employees, part-time employees, and volunteers. Training shall be provided to new employees and volunteers prior to their potential exposure to bloodborne pathogens and at least annually to all employees and volunteers.

Training shall cover, at a minimum, the following topics:

- A review of this program
- Types of bloodborne pathogens and transmission methods
- General safety precautions
- Safe work practices
- Use of personal protective equipment

- Medical waste disposal procedures
- Cleanup procedures for bodily fluids
- Post-exposure treatment and procedures
- Hepatitis-B vaccinations

All employees attending periodic training shall be required to sign an attendance sheet. The attendance sheet shall be maintained with other employment records by the Human Resources Director.

## Safe Work Practices

County employees with an occupational exposure to bloodborne pathogens are required to follow these safe work practices:

- Avoid direct contact with the patient during resuscitation activities by using the ventilation equipment provided by the county.
- Treat all human blood and other potentially infectious materials as if they were known to be infectious for bloodborne pathogens. Consider difficult- or impossible-to-identify body fluids as potentially infectious.
- Do not store food or drinks in areas where blood or other bodily fluids are stored.
- Do not eat, drink, smoke, apply cosmetics, or handle contact lenses in locations where exposure to bloodborne pathogens is possible.
- Wear disposable latex or vinyl gloves if any of the following apply:
  - You have open sores, cuts, or dermatitis.
  - You are examining a patient with skin wounds or active bleeding.
  - You are handling contaminated materials.
- Wear gowns or aprons where there is the possibility of splashing bodily fluids.
- Take precautions to avoid splashing bodily fluids.
- Wear appropriate PPE when entering an area where bodily fluids are present.
- Wash your hands with hot water and soap immediately after handling infectious materials or removing infected PPE. In an emergency, if soap and water are not immediately available, use disposable antiseptic towelettes or germicidal gels to clean hands after removing gloves. Employees must wash their hands with soap and water as soon as possible.
- Remove contaminated clothing and PPE before leaving the exposure area and dispose of properly.

## Cleanup and Disposal

Disposable medical waste and disposable PPE shall be bagged at the place of use/origin in disposable red bags (double-bagged and sealed) marked with the biohazard symbol *except for sharp objects that may penetrate the bags.*

Sharp objects such as needles shall be disposed of in the provided sharps containers.

Place all infected materials that have been bagged into the designated bins marked with the biohazard symbol for disposal by the contracted disposal company.

Re-usable clothing shall be washed in the sanitation cycle in the washing machines provided by the county before being re-worn. Employees are not allowed to wash potentially infected clothing at home.

Reusable equipment that has been exposed shall be cleaned in a water/bleach solution of 9:1 ratio before being reused.

Bodily fluids on surfaces shall be cleaned up using a water/bleach solution of 9:1 ratio as soon as possible, and access to the area restricted until the cleanup is complete. The following procedure shall be used for cleanup:

1. Put on disposable vinyl/latex gloves.
2. Spread the absorbent material on the spilled body fluids, (e.g., paper towels).
3. Neutralize the potential pathogens with a 10% bleach-with-water solution. Cover the spill for 15 minutes.
4. Use paper towels to pick up material as best possible. Place all potentially contaminated materials the designated biohazard bag (double-bag and seal).
5. Sweep/mop-up any additional neutralized/absorbed fluids and place in the biohazard bag.
6. Clean sweep/mop materials with hot, soapy water. Lastly, remove gloves from inside-out and place in the bag.
7. Secure the bag and discard it in the biohazard bin for disposal.
8. Wash hands thoroughly in hot, soapy water.

## Hepatitis-B Vaccinations

At the county's expense, Hepatitis-B vaccinations shall be provided to all employees with an occupational exposure to bloodborne pathogens. Although employees are not required to receive this vaccination, the county strongly encourages the employees to be vaccinated. The employee's department head shall document when the vaccine was offered, the employee's acceptance or decline, and the date of the vaccination. This information shall remain in the employee's file for thirty years after termination of their employment.

## Exposure Reporting & Testing

*Any employee* who has suffered a cut, needle stick, or mucous membrane exposure to another person's bodily fluids shall report the exposure immediately to their department head.

Whenever an exposure occurs, wash the contaminated skin immediately with soap and water. Immediately flush contaminated eyes or mucous membranes with copious amounts of water.

The employee and the department head shall complete the form at the end of this document titled "Bloodborne Pathogens Exposure Incident Report". A copy of this report shall be sent with the employee to the treating physician and the original maintained in the employee file for 30 years after the employee terminates employment with the county.

*Any employee* who has been exposed to HIV, HAV, HBV, or HCV shall be tested for exposure immediately, at six-weeks, 12-weeks, and 6 months after exposure to determine if the employee has been infected with the virus. The county shall also contact the exposure source individual and request that the person also be tested. All testing shall be at the county's expense. All test results shall be provided to the employee and the exposure source individual within five days of receipt and confidentiality of the test results will be maintained. All test results shall be documented in the employee file and maintained for 30 years after the employee terminates employment with the county.

## Discipline

Violations of this policy shall be dealt with according to the county's progressive discipline policy. It shall be the responsibility of the employee's department head to apply these disciplinary procedures.

## Record Retention

Human Resources shall retain all training documentation relating to this program for the period of three years. Department heads shall retain the employee signature page of this document in the employee's file for a period of ten years.

## Program Review

This Bloodborne Pathogen Program shall be reviewed at least annually in January of each year by the county Safety Committee and the Board of County Commissioners. This program will also be reviewed whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure or when there are new or revised employee positions with occupational exposure.

The review of this program shall include changes in technology that may reduce potential exposure to bloodborne pathogens, and shall document the review and implementation of safer technologies. The review shall also document that employees with occupational exposure to bloodborne pathogens have been consulted for their advice in the purchasing and implementation of safer technologies for the reduction in occupational exposure.

If changes are made to this program, it will be re-distributed to all employees and volunteers by their department head and reviewed with the employee or volunteer. The employee or volunteer shall sign and date this document, the original shall be placed in the employee's file and a copy distributed to the employee or volunteer.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

# Bloodborne Pathogens Exposure Incident Report

## Employee Instructions

You are completing this form because you have experienced an actual or a potential exposure to blood or other potentially infectious material. An evaluation of this exposure is required by regulation.

Please complete all the information below. Take this form with you when you go to a physician or other healthcare provider for the evaluation of the exposure. The information contained on this form is crucial to a proper evaluation of the exposure. Please take the time and care in completing the form to insure that the information is clear and accurate. If you need information on where to have this medical evaluation performed, please contact your supervisor.

The medical evaluation for a suspected exposure to blood or other potentially infectious material should be done *as soon as possible* after the exposure. The effectiveness of certain vaccines or other medication which might prevent any illness resulting from these exposures is greatest if given shortly after the exposure.

Complete the appropriate accident report for your supervisor.

## Employee's Statement: (Please Print)

Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Work Location: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

## Description of Exposure Incident

Date: \_\_\_\_\_ Time: \_\_\_\_\_ am / pm

City/Town: \_\_\_\_\_ State: \_\_\_\_\_

Describe Incident (Please include the type of infectious material to which you were exposed and the circumstances of the exposure):

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the source person is known to have or test positive for hepatitis B or human immunodeficiency virus (HIV), please indicate this fact. The source person must be tested for these agents unless such testing is not legally possible.

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