

BLOODBORNE PATHOGENS

EXPOSURE CONTROL PLAN

1. **PURPOSE**

The purpose of this exposure control plan is to eliminate or minimize employee occupational exposure to blood or other potentially infectious materials as detailed in the Bloodborne Pathogens standard.

2. **EXPOSURE DETERMINATION**

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e. employees are considered to be exposed even if they wear personal protective equipment.) This exposure determination is required to list all job classifications in which all employees may be expected to incur such occupational exposure, regardless of frequency. At this facility the following job classifications are in this category: All positions

3. **IMPLEMENTATION SCHEDULE AND METHODOLOGY**

OSHA also requires that this plan also include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement:

COMPLIANCE METHODS

Universal precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Handwashing facilities are also available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure. At this facility handwashing facilities are located: restroom

After removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.

If employees incur exposure to their skin or mucous membranes then those areas shall be washed or flushed with water as appropriate as soon as feasible following contact.

WORK PRACTICES

All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials. Methods that will be employed at this facility to accomplish this goal are:

- Assume that all blood is human blood.
- Clean up broken glass using broom and dust pan. Do not touch broken glass with hands. Do not dispose of broken glass in trash bag unless taking the bag to the dumpster immediately. A trash bag can easily be cut open with broken glass.
- Use PPE when using bleach and other chemicals.
- Wash hands thoroughly for 20 seconds using soap and warm water.

PERSONAL PROTECTIVE EQUIPMENT

All personal protective equipment used at this facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

Protective clothing will be provided to employees in the following manner: office. The Store Manager and Operations Supervisor is responsible for supplying the first aid station.

PERSONAL PROTECTIVE EQUIPMENT	TASK
Gloves	Giving first-aid, where blood is present, touching soiled clothing/items
Protective eye wear (with solid side shield)	Giving first-aid if splashing of blood or body fluid is possible
Resuscitation Devices	Giving mouth to mouth

All garments, which are penetrated by blood, shall be removed immediately or as soon as feasible. All personal protective equipment will be removed prior to leaving the work area. The following protocol has been developed to facilitate leaving the equipment at the work area:

Place the items in a red biohazard bag. Tie the bag tightly or just a rubber band to secure. Be careful to not expose the outside of the bag to blood. If the outside of bag

is exposed to blood, double bag the item. The items will be thrown away or disinfected properly by the Store Manager or Operations Supervisor.

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Gloves will be available from: Manager on Duty – location of gloves: office/meat & produce department

Gloves will be used for the following procedures:

Cleaning restrooms, giving first-aid, touching any possible bloodily fluids

Disposable gloves used at this facility are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

HOUSEKEEPING

Decontamination of areas that have been contaminated with blood or other potentially infectious materials will be accomplished by utilizing the following materials: bleach

All contaminated work surfaces will be decontaminated as soon as feasible.

For disinfecting hard, smooth, non-porous surfaces (e.g. tables, chairs, floors) which have been contaminated with blood or other body fluids containing visible blood the employee shall:

- a. Put on gloves.
- b. Wipe up all visible material with absorbent towels and place in a red plastic biohazard bag.
- c. Spray contaminated area with an Agency provided disinfectant according to manufacturer's instructions – allow to sit for 10 minutes.
- d. Wipe up with absorbent disposable towels and place in red plastic bag.
- e. Apply an Agency provided disinfectant to the contaminated area – clean area 2nd time.
- f. Let stand for one minute, wipe clean and dry.
- g. Liquid waste (blood vomitus, etc.) will be disposed of into the public sewer system. Materials (bandages, gauze pads, paper towels) contaminated with blood or other body fluids containing visible blood will be placed into a red plastic bag. The materials will then be chemically disinfected by through dousing of the blood-soiled articles with a full strength (5.25%) sodium hypochlorite (bleach) solution. After saturating the articles with bleach, the bag will be tied off with a twist tie and placed in a second plastic bag that is tied off with a twist tied. The combined thickness of both bags will be at least 3 mil. This double bag will then be disposed of immediately into the dumpster.

- h. All mops and brushes will be cleaned with detergent solution then decontaminated by soaking in a fresh 1:10 hypochlorite solution for 30 minutes.

For disinfecting carpet or porous material which has been contaminated with blood or other body fluids containing visible blood, the employee shall:

- a. Put on gloves.
- b. Wipe up all visible material with absorbent towels and place in a plastic bag.
- c. Apply disinfectant – let sit 10 minutes.
- d. Soak with absorbent towels.
- e. Cover area with disposable towel to dry.
- f. Dispose of contaminated materials as stated previously.
- g. Use carpet cleaner/stain remover on area when dry.

HEPATITIS B VACCINE

All employees who have been identified as having exposure to blood or other potentially infectious materials 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 as a first aid responder unless the employee has previously had the vaccine or who wishes to submit to antibody testing which shows the employee to have sufficient immunity.

Employees who decline the Hepatitis B vaccine will sign a waiver that uses the wording in Appendix A (Hepatitis B Vaccine Declination) of the OSHA standard.

Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided at no cost. The HR Department and Store Manager are responsible for assuring that the vaccine is offered. The local hospital will administer the vaccine.

4. EVALUATION OF CIRCUMSTANCES SURROUNDING EXPOSURE INCIDENTS

When the employee incurs an exposure incident, it should be reported to The Store Manager and HR Department and noted on the Incident Report form.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard.

This follow-up will include the following:

- *Documentation of the route of exposure and the circumstances related to the incident;
- *If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity;
- *Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.

- *The employee will be offered the option of having their blood collected for testing of the employees' HIV/HBV serological status. The blood sample will be preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV serological status. However, if the employee decides prior to that time that testing will be conducted then the appropriate action can be taken and the blood sample discarded;
- *The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service. These recommendations are currently as follows: Contact the HR Department at 270-465-8675.
- *The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.
The following person(s) has been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to this policy:
Store Manager and HR Department

INTERACTION WITH HEALTH CARE PROFESSIONALS

Certain information is required to be provided to the health care professional responsible for providing an employee with the Hepatitis B vaccine and also certain information is required to be provided to the health care professional who conducts an evaluation of an employee following an exposure incident. This informational requirement is listed in paragraph (f)(4) of the standard. The HR Department has the reasonability of reporting.

A written opinion shall be obtained from the health care professional who evaluates employees of this facility. Written opinions will be obtained in the following instances:

- 1) When the employee is sent to obtain the Hepatitis B vaccine.
- 2) Whenever the employee is sent to a health care professional following an exposure incident.

Health care professionals shall be instructed to limit their opinions to:

- 1) Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident
- 2) That the employee has been informed of the results of the evaluation, and
- 3) That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. (Note that the written opinion to the employer is not to reference any personal medical information)

TRAINING

Training for all employees will be conducted prior to initial assignment to tasks where occupational exposure may occur. Training will be conducted in the following manner: watch a video at the beginning of employment.

Training for employees will include the following explanation of:

- 1) The OSHA Bloodborne Pathogens Standard.
- 2) Epidemiology and symptomatology of bloodborne diseases.
- 3) Modes of transmission of bloodborne pathogens.
- 4) This Exposure Control Plan, i.e. points of the plan, lines of responsibility, how the plan will be implemented, etc.).
- 5) Procedures which might cause exposure to blood or other potentially infectious materials at this facility.
- 6) Control methods that will be used at the facility to control exposure to blood or other potentially infectious materials.
- 7) Personal protective equipment available at this facility and who should be contacted concerning.
- 8) Post Exposure evaluation and follow-up.
- 9) Signs and labels used at the facility.
- 10) Hepatitis B vaccine program at the facility.

All employees will receive annual refresher training. (Note that this training is to be conducted within one year of the employee's previous training.)

The outline for the training material is located: in the office

RECORDKEEPING

All records required by the OSHA standard will be maintained by (insert name or department responsible for maintaining records and for ensuring that the confidentiality requirements of the standard will be met): The Store Manager and HR Department

Store Manager's Signature

Date