

Bloodborne Pathogen Program

Purpose:

An infection control plan must be prepared for all persons who handle, store, use, process, or dispose of infectious medical wastes. This infection control plan complies with OSHA requirement, 29 CFR 1910.1030, Blood Borne Pathogens. The plan includes requirements for personal protective equipment, housekeeping, training, and a procedure for reporting exposures.

Responsibilities:

- The Safety Director will conduct the Bloodborne Pathogen Program and maintain records of training and inspections for this program.
- Management will ensure proper conduct of the program through inspections, record keeping and periodic audit.

Definitions:

Biological Hazard. The term biological hazard or biohazard is taken to mean any viable infectious agent that presents a risk, or a potential risk, to the well being of humans.

Medical Wastes/Infectious Wastes. All waste emanating from human or animal tissues, blood or blood products or fluids. This includes used first aid bandages, syringes, needles, sharps, material used in spill cleanup and contaminated PPE or clothing.

Universal Precautions. Refers to a system of infectious disease control that assumes that every direct contact with body fluids is infectious and requires every employee exposed to be protected as though such body fluids were infected with blood-borne pathogens. All infectious/medical material must be handled according to Universal Precautions (OSHA Instruction CPL 2-2.44A)

Hazards:

Unprotected exposure to body fluids presents the possible risk of infection from a number of bloodborne pathogens notably Hepatitis and HIV.

Hazard Control:

Engineering Controls - prevention of exposure to bloodborne pathogens engineering controls include proper storage facilities and containers, syringes designed to prevent accidental needle sticks, autoclaves and disinfectant equipment.

Administrative Controls - prevention of exposure to bloodborne pathogen administrative controls include universal precautions, assignment of PPE,

employee training, use of spill kits specifically designed for blood and body fluids, restricted access to waste collection points and waste disposal procedures.

Reporting and Record Keeping:

Any reports required by OSHA will be maintained by the Occupational Health Department. All reports (Training Certificates, Notice of HBV Vaccinations, exposure reports) will be maintained for 30 years. Occupationally contracted HBV or HIV will be recorded on the OSHA 300 Log of Occupational Injuries and Illnesses as an illness. Exposures to blood-borne pathogens from contact with sharps will be recorded on the OSHA 300 Log of Occupational Injuries and Illnesses if treatment such as gamma globulin, hepatitis B immune globulin or hepatitis B vaccine is prescribed by a Physician.

Transfer and Availability of Records:

Whenever an employee separates employment SAVARD LABOR & MARINE STAFFING, INC. will transfer all medical records subject to 1910.1020(h) to the successor employer.

Employee medical records kept shall be provided upon request for examination and copying to the subject employee, to anyone having consent to subject employee, and to OSHA as required by 1910.1030(h)(3)(iii).

Training:

All personnel assigned duties as EMT, Paramedics, First Aid Station Staff, HAZMAT responders; Custodial Employees (those that clean rest rooms, etc.) will receive initial and annual training by a qualified medical practitioner on the Bloodborne Pathogen Program. Additionally, personnel trained in First Aid shall be offered this annual training.

All new and current affected Employees will be trained initially and annually thereafter. The content of the training program will include:

1. SAVARD LABOR & MARINE STAFFING, INC. Policy
2. Types and transmission of Blood-Borne Pathogens
3. General Safety Rules
4. Universal Precautions
5. Use of Personal Protective Equipment
6. Medical Waste Disposal Procedures
7. Post Exposure Treatment and Procedures
8. HBV Vaccinations

All Employees not affected by this Program will receive an overview of the program requirements during scheduled department Safety Meetings with documentation by Safety Meeting Report Form.

Hepatitis-B Virus (HBV) Vaccinations:

Occupational Health Professionals and those required to provide first aid or emergency response duties or medical care on a routine basis will be offered Hepatitis-B Virus (HBV) Vaccinations at SAVARD LABOR & MARINE STAFFING, INC. expense. Employees that transfer to a job or their job is reclassified to include exposure to blood-borne pathogens will be offered HBV Vaccinations within 10 working days of the transfer or reclassification.

The choice for HBV vaccination is not mandatory. If an affected Employee chooses not to have the vaccination at the initial offering, they will have the opportunity to be vaccinated when they are ready. The SAVARD LABOR & MARINE STAFFING, INC. will document the offer, acceptance or declination, and vaccination dates with the Notice of HBV Vaccinations Form.

Post Exposure Treatment and Notification Procedures:

Should an affected Employee or an Employee acting as a "Good Samaritan" be occupationally exposed to HIV/HAV/HBV the affected Employee will report the exposure to the Safety Director. The SAVARD LABOR & MARINE STAFFING, INC. will provide for the Employee to be tested for HIV/HAV/HBV at SAVARD LABOR & MARINE STAFFING, INC. expense. Following the initial blood test at time of exposure, seronegative Employees will be retested at 6 weeks, 12 weeks and 6 months to determine if transmission has occurred. During this period, the Employee will follow the recommendations provided by the Physician or the U. S. Public Health Service.

An "occupational exposure" is defined as blood or body fluid contact from an injured or ill Employee to the affected Employee or injury by a contaminated sharp object.

Following the report of exposure, Infection Control Officer also Safety Director will contact the exposure source and request that person be tested for HIV/HAV/HBV at SAVARD LABOR & MARINE STAFFING, INC. expense. The request is not mandatory and if refused will not effect that Employee's future employment.

The source individual's blood is tested as soon as possible and after consent is obtained to determine HBV and HIV infectivity. (Hepatitis B surface Antigen, Hepatitis C Antibody and HIV Screen)

The exposed employee's blood shall be collected as soon as feasible and tested for HBV (Hepatitis Bs Antibody, Hepatitis C Antibody) and HIV serological status after consent is obtained (Employee Consent for HIV Antibody Testing). During all phases of Post Exposure, the confidentiality of the affected Employee and exposure source will be maintained on a "need to know basis". The Blood-Borne Pathogens Exposure and Treatment form is used to document the exposure and offer of medical assistance to the affected Employee and use the Medical Consent for Blood-Borne Pathogens Testing form for the exposure source. The results of any HIV/HAV/HBV tests conducted will be provided to the exposed and source Employees within 5 business days of receipt.

Personal Protective Equipment for Protection Against HIV and HBV Transmission

SAVARD LABOR & MARINE STAFFING, INC. will pay for and provide all Personal Protection Equipment (PPE) to protect workers from contact with blood or other potentially infectious materials.

TASK	GLOVES	APRON	MASK	EYEWEAR
Control of Bleeding w/ spurting blood	X	X	X	X
Bleeding control with minimal bleeding	X			
Emergency Child Birth	X	X	X	X
Blood Drawing	X			
Handling & Cleaning Instruments	X			
Cleaning Bio Spills	X			
Taking Temperature				
Giving Injection	X			
Measuring Blood Pressure				

The examples provided in this table are based on application of universal precautions. Universal precautions are intended to supplement rather than replace recommendation for routine infection control, such as hand washing and using gloves to prevent gross microbial contamination of hands (e.g., contact with urine or feces).

Blood-Borne Pathogen Control Universal Precautions and General Safety Rules For Posting

Exposure Determination: THIS SAVARD LABOR & MARINE STAFFING, INC. will not perform invasive medical treatment or provide intravenous medication. Therefore, the exposure to Blood-Borne Pathogens, as defined in item # 3 below, is determined to be from routine and emergency first aid treatment of common workplace injuries. The following Universal Precautions and General Safety Rules have been established to prevent the spread of viral and bacterial organisms (namely HIV/HAV/HBV). In all cases, the Universal Precautions and General Safety Rules should be followed.

1. Before and immediately after providing patient care, wash exposed areas (hands, arms, etc.) with antibacterial soap.
2. We will provide hand washing facilities with flowing water and antibacterial soap for use in cleaning after medical care is given.
3. Don and use the required personal protective equipment for the medical care given as outlined in the Personal Protective Equipment for Worker Protection Poster.
4. Treat all human body fluids and items soiled with human body fluids (blood, blood products, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid, concentrated HIV/HAV/HBV, and saliva (in dental settings) as if contaminated with HIV/HAV/HBV.
5. No smoking, eating, drinking or storage of food products are permitted in patient treatment areas. Non-medical items, such as clothing and personal effects, should not be stored in the treatment facility.
6. Patient treatment areas will be maintained in a near sanitary condition at all times. Daily and at least once per shift, the Occupational Health Facility will be disinfected with antibacterial/viral solution (at least 10% Chlorine Bleach or equivalent). All medical and personal protective equipment contaminated with human body fluids will be disinfected before being returned for use again.
7. To avoid special handling, all clothing contaminated with human body fluid will be presoaked (sprayed on the affected areas) with the antibacterial/viral solution before being sent to the laundry. (**Note:** Gloves and eye protection should be worn when handling contaminated clothing until presoaked for 10 minutes)
8. Any spills of body fluid will be presoaked (sprayed on the affected area) with antibacterial/viral solution for 10 minutes before being removed. (**Note:** Gloves and eye protection should be worn when handling spills of body fluids)

9. Medical Wastes (those soiled with covered human body fluids) will be treated following the Medical Wastes Treatment and Disposal Procedures before being discarded as ordinary wastes.

10. Any suspected exposure to HIV/HAV/HBV by human body fluid contact (via broken skin, human bites, needle sticks, etc.) should be reported to your Supervisor immediately.

Control of Blood-Borne Pathogens Program

Medical Waste Treatment and Disposal Procedures

1. All Medical Wastes (those soiled with covered human body fluids) will be placed in a red leak-proof container marked either Biohazard or Medical Waste. All other wastes will be discarded following customary procedures. (**Note:** Soiled feminine hygiene/sanitary napkins, soiled facial tissues, etc. are not considered a biohazard or medical waste. Pretreatment is not necessary; however, Employees should wear personal protective equipment and wash hands with antibacterial soap afterwards)
2. Don and use the required personal protective equipment when handling medical wastes as outlined in the Personal Protective Equipment for Worker Protection Poster.
3. At the end of each shift, all accumulated medical wastes will be treated to remove biohazards using the following procedure:
 - Prepare a solution of 10 percent chlorine bleach to water (approximately 2 cups chlorine bleach to 1 gallon of water)
 - Pour solution over the medical wastes and thoroughly saturate
 - Let stand for 10 minutes and then drain into sink
 - Discard as ordinary wastes

Caution: Sharp objects (broken glass, hypodermic needles, etc.) should not be handled by hand to prevent accidental punctures and lacerations

4. Rinse medical wastes container and return for use again.
5. Wash hands and exposed areas with antibacterial soap.

Sharps Injury Log

The employer shall establish and maintain a sharps injury log for the recording of percutaneous injuries from contaminated sharps.

The information in the sharps injury log shall be recorded and maintained to protect the confidentiality of the injured employee.

The sharps injury log shall contain:

- The type of device involved in the incident
- The brand of device
- The department or work area where the exposure incident occurred
- An explanation of how the incident occurred.

The sharps injury log shall be maintained for the period required by 29 CFR 1904.6.

Type of Sharp that caused injury	Brand of Sharp that caused injury	Department or Work Area of occurrence	Explanation of how incident occurred