

Mental Health Association, Inc.  
995 Worthington Street  
Springfield, MA 01109



**BLOODBORNE PATHOGENS**

**EXPOSURE CONTROL PLAN**

## OSHA

The Occupational Safety and Health Administration (OSHA) has issued a standard that is designed to protect you from bloodborne pathogens. This standard provides a method whereby you and MHA can work together to substantially reduce your risk of contracting a bloodborne disease while on the job. It covers anyone who can reasonably anticipate contact with blood or other potentially infectious material (OPIM) on the job. OSHA's bloodborne pathogen training is based on recommendations from the Center for Disease Control (CDC).

A copy of the exposure control plan (ECP) is filed at each site and will also be available to employees by contacting the Human Resources Department office during business hours and on MHA's website.

### **In this training program you will become familiar with the following:**

- Contents of the OSHA Standard
- Bloodborne Diseases
- Preventing Exposure
- Personal Protective Equipment (PPE)
- Signs & Labels Associated with Bloodborne Pathogens
- Procedures to follow if exposed

### **EVERYONE NEEDS TO USE SAFE WORK PRACTICES WHICH WILL REDUCE THE CHANCE OF EXPOSURE.**

#### **CONTENTS OF THE OSHA STANDARD**

- The risk of exposure is relatively small however effects of exposure can lead to deadly consequences. In 1992 OSHA regulation standard 29 CFR 1910.1030 mandated the OSHA standards for all health care workers and in 2001 it was updated to include the needle stick act.

### **Bloodborne Pathogens**

Bloodborne pathogens (BBP) are disease causing organisms present in the blood as well as human blood components and products or other potentially infectious material (OPIM) which include any body fluid or unfixed tissue. These organisms cause diseases such as Hepatitis B & C, and HIV- AIDS. Exposure to bloodborne pathogens may occur in many ways. Needle stick injuries, contact with mucous membranes, and contact with non-intact skin are ways bloodborne pathogens may be transmitted.

- The plan includes a determination of each employee's potential exposure to BBP, based on their job duties. The purpose of this **STANDARD** is to limit the occupational exposure to blood and other potentially infectious material. The **STANDARD** covers all employees who could be "reasonably anticipated" to come in contact with blood and OPIM's as the result of performing their job duties. One of the key provisions of the standard requires that employers have a written plan that includes a job classification system, as well as specific tasks and procedures during which blood exposure may occur. Employees are grouped by categories and job descriptions and specific tasks that may be performed to determine the

category. A complete listing of job classes that have potential for exposure will be maintained and available by MHA.

- **Category 1** All procedures or job-related tasks that involve potential risk for mucous membrane or skin contact with blood, body fluids or tissues, or a potential for spills or splashes of blood or body fluids.
- **Category 2** Tasks in which the normal work practice involves no exposure to blood, body fluids or tissues, but exposure risk may occasionally be encountered in performance of assigned tasks.
- **Category 3** Tasks in which the normal work routine involves no exposure to blood, body fluids, or tissues. Persons who perform these duties are not called upon as part of their employment to perform or assist in emergency medical care or first aid or to be potentially exposed in some way.

### **BLOODBORNE DISEASES**

There are many bloodborne diseases but we will focus on three major diseases: HIV-AIDS, Hepatitis B, & Hepatitis C.

- **Human Immunodeficiency Virus, HIV-AIDS:** Over 1 million people are living with this virus in the U.S. with one quarter of them being undiagnosed. There is no cure or vaccine to combat this virus. Symptoms of HIV-AIDS vary but may include rapid weight loss; dry cough; recurring fever or profuse night sweats; profound and unexplained fatigue; swollen lymph glands in armpits, groin or neck; diarrhea that lasts for more than a week; white spots or unusual blemishes on the tongue or mouth; pneumonia; memory loss; depression; and other neurological disorders.
- **Hepatitis B:** HBV is a disease that can lead to liver failure in about 25% of individuals infected. This disease is targeted by OSHA due to its severe consequences, including death. 1.2 million people in the U.S. are infected with HBV with approximately 60,000 new cases each year. There is no cure for HBV but there is a vaccine available proven to be effective with a 95% rate of preventing the disease. This vaccine is so important; you are required to sign a form if you decline the vaccination. There is an “after the fact” vaccination available, but it may not always prevent the disease. Symptoms of HBV include: fatigue, abdominal pain, loss of appetite, nausea and vomiting, joint pain, and jaundice (yellowing of the skin).
- **Hepatitis C:** HCV is the leading cause of liver transplants and can lead to death in 5% of all cases. Currently approximately 4.1 million people in the U.S. are infected with HCV, with 26,000 new cases each year. Eighty percent of infected people show no symptoms, but the symptoms are similar to HBV. There is no cure or vaccine for HCV.

### **PREVENTING EXPOSURE**

- Most exposures occur through needle sticks, human bites, or skin abrasions or cuts that come into contact with potentially infectious material. Infectious material can include blood products as well as human tissue, semen, vaginal secretions, and other bodily fluid with blood in it.
- Avoid contact of infectious material with your eyes, mouth, non-intact skin and with mucous membranes.

## **STANDARD PRECAUTIONS**

- All employees are required to observe standard precautions for infection control. The standard precautions require that you consider every person, all blood, and all body fluids to be potential carriers of infectious diseases. Using the standard eliminates the uncertainty by requiring that you treat all human blood and body fluids as though they contain bloodborne pathogens.

## **PERSONAL PROTECTIVE EQUIPMENT (PPE)**

- Work Practice Controls include hand washing and the proper use of equipment. Hand washing facilities must be available for staff to use at all sites in the kitchen and bathrooms. Hand washing is to be done immediately after removing gloves.
- Keep the following in mind: If you will be touching or coming in contact with bodily secretions with your hands, wear gloves. If your clothes are likely to touch or come in contact with heavily soiled items, wear a gown and gloves. If you are likely to be splashed with bodily fluids wear a gown, gloves and a face shield.
  - MHA provides equipment needed, however, it is up to the employee to wear equipment properly.
- Decontamination of any surface areas will be done with a 1 part bleach to 9 parts water (10%) solution. This solution must be made within 24 hours prior to the decontamination procedure.
- If your clothing becomes contaminated with blood or other potentially infectious materials, it shall be removed as soon as possible and laundered appropriately.
- Contaminated protective clothing or equipment (PPE) must be disposed of in biohazard containers provided by MHA.

## **SIGNS AND LABELS ASSOCIATED WITH BLOODBORNE PATHOGENS**

- Sharp containers must be puncture resistant, must close, be leak proof and either be red in color or have a biohazard symbol and labeled “sharps”. All containers must be in an upright position and securely closed prior to moving for placement in a regulated waste container. All equipment that has visible contamination will be disposed of and/or decontaminated as soon as possible.

## **PROCEDURES TO FOLLOW IF EXPOSED**

- If exposure occurs, you should immediately wash exposed skin with antibacterial soap and water. Flush eyes, nose and mouth with water.
- The area containing the spill will need to be cleaned using absorbent material and disinfected with a germicide or 10% bleach solution. Dispose of material as required using a red bag.
- The process for disposal of a red biohazard bag is as follows: The supervisor of the shift will call Stericycle at 1-800-335-8773, identify themselves as an MHA employee, give the address of the program, and request a pick-up for biohazardous material as soon as possible. The company will pick up the red bag in 24 – 48 hours.

- Report the incident immediately to your supervisor and complete an incident report.
- You will be referred for follow up with a health care professional for appropriate treatment in accordance with U.S. Public Health Service recommendations. A written report will be provided to the employee.
- All incidents of exposure will be documented on an employee accident report form. MHA will conduct an evaluation of the incident. An evaluation of the policies and failure of the work practice controls or PPE used will be performed. (The primary focus of the evaluation is to identify and correct problems to prevent recurrences).

### **HEPATITIS B VACCINE FOR EMPLOYEES**

- MHA will encourage and make available the Hepatitis B Vaccination series to all employees who are at risk for occupational exposure.
- The Hepatitis B vaccination series will be made available after an employee has received the required training and within ten (10) working days of an employee's initial assignment to a category 1 or 2 position. Exceptions are made if the employee has already received the Hepatitis B Vaccination series, if antibody testing shows that the employee is immune or if the vaccine is not indicated for medical reasons. All affected employees will be counseled and provided with required information on all components of the Hepatitis B Vaccination program. This will include an informational package and training summary attached to the Hepatitis B vaccine consent form, whereby such employees can make a well informed, educated decision in regards to their involvement with the Hepatitis B Vaccination program.
- The vaccine is recommended for all health care workers who are exposed to blood and other potentially infectious material.
- The vaccine is prepared from recombinant yeast cultures, rather than human blood or plasma.
- The vaccine is given in three injections in the arm at day 0, 1 month, and 6 months.
- The vaccination is provided free of charge.
- If you would like to receive the vaccination, you will be asked to sign a consent form.
- If you decide not to receive the vaccination, you will be asked to sign a declination form.
- If you have received the vaccination previously, you will be asked to sign a declination form noting the prior vaccination.
- If you decline, you may later decide to receive the vaccine.

### **Contraindications**

- Hypersensitivity to yeast or any component of the vaccine
- Active stages of Hepatitis B infection

## **Pregnancy**

- Limited data is available on the safety of the vaccine to the developing fetus

## **Breastfeeding**

- It is not known whether the vaccine is excreted in human milk

## **Adverse Reactions (minimal)**

- Injection site reactions, including erythema (redness of the skin), soreness, and swelling; fatigue/weakness; headache; fever; malaise; irritability; diarrhea; vomiting; diminished appetite; and insomnia.

## **Post Vaccine Titer**

- Not recommended on a routine basis
- Should be obtained after an exposure incident

## **Training Program Requirements**

- A learning package, which includes a video and written material that addresses all aspects of the Bloodborne Pathogens Standard, is presented to all employees. A consent/declination form for the Hepatitis B vaccine is available as part of the learning package.
- Upon completion, all documentation forms included with the learning package and related materials become part of the employee's personnel file located at MHA.

## **Record Keeping Requirements**

- Confidential medical records for all employees with occupational exposure will be kept for the duration of their employment, plus an additional 30 years. These records will consist of a copy of the employee's Hepatitis B vaccination status and the results of all examinations, medical testing and post-exposure follow-up procedures. The Massachusetts Laws of Confidentiality protect these medical records. Employee medical and exposure records will be made available according to the (29 CFR 1910.20) – Access to Employee Exposure and Medical Records. All training records will be maintained for a period of 3 years and will include the date, content of the training, the trainer's name and qualifications. Also included are the names and job titles of all employees attending the sessions. The Human Resource office will maintain copies of all annual training documentation.

## **Enforcement**

In order to offer the best possible protection for the health of employees, it is the policy of MHA to ensure that all procedures for infection control and exposure control are strictly followed. Non-compliance with these procedures will be subject to disciplinary action in accordance with MHA's personnel policy.

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Concentra Medical Center  
140 Carando Drive  
Springfield, MA  
(413) 746-4006

To obtain the Hepatitis B (3 part) vaccination, you will need to go to Concentra Medical Center. They accept **WALK-INS ONLY- NO APPOINTMENTS**. You will need to bring the completed Employer's Authorization for Examination or Treatment Form with you. This form **MUST** be signed by the Human Resource department. You will need to bring your pay stub with you to identify your employee ID number. After your appointment, please bring proof of the vaccination dates to the agency office.

The breakdown of categories and related tasks are described below. Annually this list will be reviewed and compared with all duties in relation to exposure and OSHA requirements.

- **Category 1** Routine performance of tasks that involve potential risk for mucous membrane or skin contact with blood, body fluids or tissues, or a potential for spills or splashes of blood or body fluids.

#### **Direct Care Residential:**

- Assisting with or bathing participants.
- Assisting or completing shaving of participants.
- Blood sugar testing and assisting participants with this practice. Disposing of needles and/or lancets.
- Changing of bedding that may be soiled.
- Cleaning of bedrooms, bathrooms and common areas.
- Collection of urine for laboratory review.
- Dressing and assisting participants to dress.
- Exposure to working with participants who may scratch, bite, spit or swipe at employees.
- Feeding and assisting participants during meals.
- Laundering of soiled clothing and / or bedding.
- Medication Administration including, but not limited to, the use epi-pens, eye drops, suppositories, salves, and creams.
- Moving of participants' personal items during relocation, apartment and home moves.
- Nail cutting and foot care.
- Performing prescribed home care practices in which all affected employees will receive additional training and oversight.
- Providing one to one supervision to participants during hospital stays or emergency care.
- Teeth brushing and oral care.
- Basic First Aid practices and CPR.

#### **Nursing**

- Training staff on prescribed home care practices that will be performed by direct care staff.
  - Basic First Aid practices and CPR.
- **Category 2** Tasks in which the normal work practice involves no exposure to blood, body fluids or tissues, but exposure risk may occasionally be encountered in performance of assigned tasks.

#### **Outreach, Support Workers, Clinical Case Coordinators, Program Directors & Directors of Clusters**

- Assisting participants with laundering of soiled clothing and / or bedding.
- Assisting participants with cleaning bedrooms, bathrooms and other living areas.
- Assisting participants with cooking and performing home-maintenance duties that may increase exposure to possible minor nicks and scrapes.
- Moving of participants' personal items during relocation, apartment and home moves.
- Basic First Aid practices and CPR.

## Homeless Outreach

- Increased exposure due to working in the community with participants with limited or no health care. Providing transportation of said participants.
- Increased exposure of sub-par living conditions such as shelters, make-shift shelters such as tents, squalors and squatters in areas that have increased drug use and with such possible exposure to drug paraphernalia i.e. needles as well as increased exposure to poor living arrangements that may include higher incidents of exposure to feces, urine, garbage and other body fluids.
- Moving of participants' personal items during relocation, apartment and home moves.

## Reception

- Receiving of sharps containers, spent epi-pens to be picked up by contracted biohazard waste disposal company.
- **Category 3** Tasks in which the normal work routine involves no exposure to blood, body fluids, or tissues. Persons who perform these duties are not called upon as part of their employment to perform or assist in emergency medical care or first aid or to be potentially exposed in some way.

## Administration

- **Assistant Executive(s) Director**
- **Clerical**
- **Employee Trainer**
- **Executive Director(s)**
- **Fiscal**
- **Human Resources**
- **IT**

## **Definitions**

**Blood** means human blood, human blood components, and products made from human blood.

**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.

**Contaminated Laundry** means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

**Contaminated Sharps** means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

**Decontamination** means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

**Exposure Incident** means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

**HBV** means hepatitis B 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.

**Other Potentially Infectious Materials** means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

**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.

**Sterilize** means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

**Universal Precautions** is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

**Work Practice Controls** means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).