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Bloodborne Pathogen Exposure Plan

Purpose

Hurt & Proffitt, Inc. recognizes that our employees are our most valuable asset and the most important contributors to our continued growth and success. Hurt & Proffitt, Inc. is firmly committed to the safety of our employees. We will try to prevent workplace accidents and emergency situations and are committed to providing a safe working environment for all employees.

This Bloodborne Pathogen Exposure Control Plan has been established to ensure a safe and healthful working environment and act as a performance standard for all employees. This program applies to all occupational exposure to blood or other potentially infectious materials. The content of this plan complies with OSHA Standard 29 CFR 1910.1030 (Occupational Exposure to Bloodborne Pathogens).

Scope and Types of Bodily Fluids Employees May be Exposed To

This program addresses the types of bodily fluids employees may be exposed to. The Exposure Control Plan must state the types of bodily fluids employees can reasonably expect to be exposed to at work. This includes, but is not limited to, blood and other potentially infectious materials (OPIMs), such as saliva and mucous.

Key Responsibilities

The Safety Manager has overall responsibility for developing and implementing the Exposure Control Procedure for all facilities.

Project Managers are responsible for exposure control in their respective areas.

Employees shall:

- Know what tasks they perform that have occupational exposure.
- Plan and conduct all operations in accordance with our work practice controls.
- Develop good personal hygiene habits.


Training

Employees are provided training on Bloodborne Pathogens. Employees who may be exposed to bodily fluids must be trained on bloodborne pathogens when they start their job and every year thereafter. Training must be documented and maintained for a minimum of 3 years. Training shall include:

- What bloodborne pathogens are; how to protect themselves from exposure
- Methods of warnings (signs, labels, etc.)
- The OSHA requirements of bloodborne pathogens
- The Hepatitis B vaccine is provided to all employees with occupational exposure and must be made available to all employees that have occupational exposure at no cost to the employee(s).



Biohazard Label

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Availability of Plan to Employees

The Bloodborne Pathogen Exposure Control Plan is readily available to employees. The Exposure Control Plan may be obtained from <http://my.handp.com> or externally from apps.handp.com

Reviews and Update of the Procedure

The procedure is reviewed annually and updated whenever we establish new functional positions within our facility that may involve exposure to biohazards.

Exposure Determination

- There are no job classifications in which some or all employees have occupational exposure to bloodborne pathogens that may result from the performance of their routine duties.
- Designated employees are trained to render first aid and basic life support. Rendering first aid or basic life support will expose employees to bloodborne pathogens and will require them to adhere to this program.
- In addition, no medical sharps or similar equipment is provided to, or used by, employees rendering first aid or basic life support.
- This exposure determination has been made without regards to the Personal Protective Equipment that may be used by employees.
- A listing of all first aid and basic life support trained employees in this work group shall be maintained at each work site and at each first aid kit.

Methods of Compliance

Universal Precautions


Universal precautions are used for all materials possibly infectious. All bodily fluids should be considered infectious. Universal precautions involves the use of PPE and sanitary procedures (such as handwashing and cleaning work surfaces) to limit potential for exposure.

Engineering Controls

Engineering and work practice controls shall be used to eliminate or minimize employee exposure. Engineering controls should be examined and maintained or replaced on a regular schedule to ensure their effectiveness. Handwashing facilities or antiseptic hand cleansers/towelettes are available at the work site. Employees must have a way to clean their hands. If handwashing facilities are not available, antiseptic hand cleanser with disposable towels or antiseptic towelettes must be provided.

Containers for contaminated reusable sharps that our clients provide have the following characteristics: Puncture-resistant; Color-coded or labeled with a biohazard warning label; Leak-proof on the sides and bottom.

Secondary containers which are: Leak-proof; Color-coded or labeled with a biohazard warning label; Puncture-resistant, if necessary.

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Work Practice Controls

- Employees shall wash their hands immediately, or as soon as feasible, after removal of potentially contaminated gloves or other personal protective equipment.
- Following any contact of body areas with blood or any other infectious materials, employees wash their hands and any other exposed skin with soap and water as soon as possible.
- Contaminated needles and other contaminated sharps should not be handled if you are not AUTHORIZED or TRAINED to do so. Contaminated needles and other contaminated sharps are not bent or recapped.
- Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses is prohibited in work areas where there is potential for exposure to biohazardous materials.
- Food and drink should not be kept in refrigerators, freezers, on countertops or in other storage areas where potentially infectious materials are present.
- Equipment and/or working surfaces shall be cleaned after contact with blood or other infectious material. All equipment and surfaces must be cleaned if they come into contact with blood or other infectious material.
- Specimens of blood or other potentially infectious materials must be put in leak proof bags for handling, storage and transport.
- If outside contamination of a primary specimen container occurs, that container is placed within a second leak proof container, appropriately labeled for handling and storage.
- Bloodborne pathogens kits are located on top of first aid kits and are to be used in emergency situations by the caregiver. Once the seal is broken on kit and any portion has been used it is not to be reused. Pathogen Kits shall be ordered and replaced promptly. Biohazard bags are identified by stickers and located in the first aid area. Contaminated supplies are to be disposed at once.


Personal Protective Equipment

Personal protective equipment (PPE) is provided to employees. When the possibility of an occupational exposure to a bodily fluid is present, PPE must be provided at no cost to employees. Examples of PPE used to protect workers from bloodborne pathogens include, but are not limited to, gloves, gowns, and masks.

All PPE shall be of the proper size and readily accessible.

Our employees adhere to the following practices when using their personal protective equipment:

- Any garments penetrated by blood or other infectious materials are removed immediately.
- All potentially contaminated personal protective equipment is removed prior to leaving a work area.
- Gloves are worn whenever employees anticipate hand contact with potentially infectious materials or when handling or touching contaminated items or surfaces.
- Disposable gloves are replaced as soon as practical after contamination or if they are torn, punctured or otherwise lose their ability to function as an "exposure barrier".
- Masks and eye protection (such as goggles, face shields, etc.) are used whenever splashes or sprays may generate droplets of infectious materials.
- Any PPE exposed to bloodborne pathogens shall be disposed of properly.
- PPE shall be used unless employees temporarily declined to use PPE under rare circumstances.

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- PPE should be cleaned, laundered & properly disposed of if contaminated.
- HURT & PROFFITT, INC. will repair and replace PPE as needed to maintain its effectiveness.

Housekeeping

Our staff employs the following practices:

- All equipment and surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials.
- Protective coverings (such as plastic trash bags or wrap, aluminum foil or absorbent paper) are removed and replaced.
- All trash containers, pails, bins, and other receptacles intended for use routinely are inspected, cleaned and decontaminated as soon as possible if visibly contaminated.
- Potentially contaminated broken glassware is picked up using mechanical means (such as dustpan and brush, tongs, forceps, etc.).

Post-Exposure and Follow Up

Post-Exposure Evaluation & Follow-Up

If there is an incident where exposure to bloodborne pathogens occurred, we immediately focus our efforts on investigating the circumstances surrounding the exposure incident and making sure that our employees receive medical consultation and immediate treatment.

The HURT & PROFFITT, INC. Safety Manager/ Supervisor investigates every reported exposure incident and a written summary of the incident and its causes is prepared and recommendations are made for avoiding similar incidents in the future. We provide an exposed employee with the following confidential information:


- Documentation regarding the routes of exposure and circumstances under which the exposure incident occurred.
- Identification of the source individual (unless not feasible or prohibited by law).

Once these procedures have been completed, an appointment is arranged for the exposed employee with a qualified healthcare professional to discuss the employee's medical status. This includes an evaluation of any reported illnesses, as well as any recommended treatment.

Information Provided to the Healthcare Professional. We forward the following:

- A copy of the Biohazards Standard.
- A description of the exposure incident.
- Other pertinent information.

Healthcare Professional's Written Opinion

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After the consultation, the healthcare professional provides our facility with a written opinion evaluating the exposed employee's situation. We, in turn, furnish a copy of this opinion to the exposed employee. The written opinion will contain only the following information:

- Whether Hepatitis B Vaccination is indicated for the employee.
- Whether the employee has received the Hepatitis B Vaccination.
- Confirmation that the employee has been informed of the results of the evaluation.
- Confirmation that the employee has been told about any medical conditions resulting from the exposure incident which require further evaluation or treatment.
- All other findings or diagnoses will remain confidential and will not be included in the written report.

Record Keeping

All records shall be made available upon request of employees, OSHA's Assistant Secretary and the Director of OSHA for examination and copying. Medical records must have written consent of employee before released. HURT & PROFFITT, INC. shall meet the requirements involving transfer of records set forth in 29 CFR 1910.1020(h).

Human Resources shall maintain Bloodborne Pathogen exposure records.

Employee medical records shall be kept confidential and are not to be disclosed without the employee's written consent, except as required by 29 CFR 1910.1030 or other law.

Accurate medical records for each employee with occupational exposure must be maintained for at least the duration of employment plus 30 years and shall include at least the following:


- Employee's name, Social Security number and HURT & PROFFITT, INC. employee number.
- Employee's Hepatitis B vaccination status, including vaccination dates.
- All results from examinations, medical testing and follow-up procedures, including all health care professional's written opinions.
- Information provided to the health care professional.
- Any Hepatitis B Vaccine Declinations.

Training records shall be maintained for 3 years from the date on which the training occurred and shall include at least the following:

- Outline of training program contents.
- Name of person conducting the training.
- Names and job titles of all persons attending the training.
- Date of training.

Labels and Signs


Biohazard warning labeling shall be used on containers of regulated waste; Sharps disposal containers; contaminated laundry bags and containers; contaminated equipment.

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Information

Information provided to our employees includes:

- The Biohazards Standard itself.
- The epidemiology and symptoms of bloodborne diseases.
- The modes of transmission of bloodborne pathogens.
- Our facility's Exposure Control Procedure (and where employees can obtain a copy).
- Appropriate methods for recognizing tasks and other activities that may involve exposure.
- A review of the use and limitations of methods that will prevent or reduce exposure.
- Selection and use of personal protective equipment.
- Visual warnings of biohazards within our facility including labels, signs and "color-coded" containers.
- Information on the Hepatitis B Vaccine.
- Actions to take and persons to contact in an emergency involving potentially infectious material.
- The procedure to follow if an exposure incident occurs, including incident reporting.
- Information on the post-exposure evaluation and follow-up, including medical consultation.

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VACCINATION DECLINATION FORM

Date: _____

Employee Name: _____

Employee ID#: _____


I understand that due to my occupational exposure to blood or other potential infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline the Hepatitis B vaccination 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, 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 Signature

Date

Facility Representative Signature

Date

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POST-EXPOSURE EVALUATION AND FOLLOW-UP CHECKLIST

The following steps must be taken, and information transmitted, in the case of an employee's exposure to bloodborne pathogens:

ACTIVITY

COMPLETION DATE

Employee furnished with documentation
regarding exposure incident.

Source individual identified.

(_____) Source individual

Appointment arranged for employee
with healthcare professional.

(_____) _____

Professional's name

Documentation forwarded to healthcare professional

_____ Bloodborne Pathogens Standard

_____ Description of exposed employee's duties

_____ Description of exposure incident, including routes of exposure