1.1 PURPOSE

1.1.1 The purpose of this policy is to provide assurance that TERRY R PITT CONSTRUCTION employees exposed to occupational hazards associated with bloodborne pathogens are trained and have adequate resources to safely perform assigned duties without excessive risk or harm to themselves or others.

1.2 RESPONSIBILITIES

- 1.2.1 Safety department
 - 1.2.1.1 Review policy on an annual basis or more frequently as new information arises.
 - 1.2.1.2 Ensure employees are trained on this procedure and the exposure control plan.
 - 1.2.1.3 Ensure employee medical records are current and safeguarded in a secure location.
 - 1.2.1.4 Maintain training records and documentation.
- 1.2.2 Employee

1.2.2.1 Attend annual training of occupational exposure hazards.

1.2.2.2 Be familiar with company exposure control plan.

1.2.2.3 Follow procedure concerning bloodborne pathogen exposure.

1.3 TRANSMISSION AND EXPOSURE DETERMINATION

- 1.3.1 Anyone who may be exposed to blood, blood components, or products made from human blood, either directly or indirectly (contact with clothing or fluids containing blood), mucous, or saliva is at risk from bloodborne pathogens.
- 1.3.2 Bloodborne pathogens may enter your body and infect you through a variety of means including accidental injury with a contaminated sharp object (ex. sharps include needles, broken glass, anything that can pierce, puncture, or cut the skin), open cuts, nicks and skin abrasions, even dermatitis and acne, as well as the mucous membranes of your mouth, eyes, or nose and indirect transmission, such as touching a contaminated object or surface and transferring the infectious material to your mouth, eyes, nose, or open skin.
- 1.3.3 When determining if an employee is at risk of exposure, the assessment should be made without regard for the use of personal protective equipment.

1.3.3.1 Dressing application or change, or application of direct pressure to bleeding areas

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- 1.3.3.2 Wound or eye irrigation
- 1.3.3.3 Cardiopulmonary resuscitation (CPR), with noted visible blood
- 1.3.4 Handling and/or cleaning of possible contaminated materials including biological wastes, used medical supplies, or equipment and contaminated linen
 - 1.3.4.1 Use and proper disposal of sharp objects that have exposure to blood or other potentially infectious materials.
 - 1.3.4.2 Cleanup procedures involving surfaces that possibly are contaminated with blood or potentially infectious material.

1.4 EXPOSURE CONTROL PLAN

- 1.4.1 OSHA requires that all employers that can *reasonably anticipate exposure* of employees to infectious material to prepare and implement a written exposure control plan.
- 1.4.2 All employees have an opportunity to review this plan at any time during their workday by contacting their supervisor. TERRY R PITT CONSTRUCTION will provide a copy of the exposure control plan free of charge within 15 days of the request and will also notify employees of plan location.
 - 1.4.3 The safety department will review and update the exposure control plan annually or more frequently if necessary, to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.
 - 1.4.4 Controls and work practices will be examined regularly to ensure effectiveness and updated if necessary.
 - 1.4.5 Precautions will be taken to minimize splashing, spattering, or spreading of contaminated materials.
 - 1.4.6 Employees covered by the standard will receive an explanation of this exposure control plan during their initial training session. It will also be reviewed in their annual refresher training.
 - 1.4.7 Engineering and work practice controls will be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment will also be used. Hand-washing facilities that are readily accessible to employees will be provided. If not feasible, TERRY R PITT CONSTRUCTION will provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes.
 - 1.4.8 When there is occupational exposure, TERRY R PITT CONSTRUCTION will provide, at no cost to the employee, appropriate personal protective equipment. TERRY R PITT CONSTRUCTION will ensure that PPE is used unless employee temporarily and briefly declined to use PPE in rare circumstances. TERRY R PITT CONSTRUCTION will repair or replace PPE as needed to maintain its effectiveness.

1.5 PERSONAL PROTECTIVE EQUIPMENT

- 1.5.1 Proper PPE must be used when the potential exists for exposure to blood or infectious materials.
 - 1.5.1.1 Disposable surgical gloves
 - 1.5.1.2 Eye protection or face shield
 - 1.5.1.3 Gown, Tyvek jacket or suit (in cases involving significant contamination)
 - 1.5.1.4 Mouthpiece, resuscitation bag, pocket mask, or other ventilation device when there is an exposure to blood or other potentially infectious materials.
- 1.5.2 TERRY R PITT CONSTRUCTION will ensure PPE is provided, repaired, and replaced as needed to maintain its effectiveness at no cost to the employee.
- 1.5.3 PPE will be inspected, repaired, and replaced as necessary to maintain its effectiveness.
- 1.5.4 All PPE must be cleaned, laundered, or properly disposed of as circumstances dictate.
- 1.5.5 Precautions must be taken to eliminate contact with the injured person's body fluids and any objects or surfaces that could compromise the PPE being worn by the employee rendering help.

1.6 UNIVERSAL PRECAUTIONS

- 1.6.1 The *universal precaution* is an approach to infection control to treat all human blood and body fluids as if they were known to be infectious for HIV, Hepatitis B virus (HBV), and other bloodborne pathogens.
- 1.6.2 Employees must take specific actions to minimize the risk for everyone when it is unclear who may be affected. These measures are to be used when providing care to all individuals, whether or not they appear infectious or symptomatic.
- 1.6.3 Under circumstances in which differential between bodily fluids is difficult or impossible, all bodily fluids will be considered potentially infectious.
- 1.6.4 Warning labels and signs will be used to warn employees of items containing blood or other potentially infectious material.

1.7 INFECTIOUS WASTE

- 1.7.1 *Infectious waste* are any disposable materials which have come in contact with blood including PPE, bandages, towels, or cleaning materials used in removing blood from contaminated surfaces.
- 1.7.2 All infectious waste must be placed in leak-proof bags, color-coded, and labeled *Biohazard* to indicate their contents.
- 1.7.3 If bag itself becomes contaminated, it will be placed into a second, non-contaminated bag.

- 1.7.4 Hand-washing facilities will be available, if possible, to employees who may incur exposure to blood. Where hand-washing facilities are not available, antiseptic solutions/towelettes will be available for use.
- 1.7.5 After removal of personal protective gloves, all employees will wash their hands and any other potentially contaminated skin area immediately with soap and water.
- 1.7.6 Supervisors or medical responders will ensure that if employees incur exposure to their skin or mucous membranes, then those areas will be immediately washed or flushed with water.
- 1.7.7 Activities such as applying makeup, handling contact lenses, smoking, or hand and eye, mouth, nose, ear, or other body part contact is prohibited in areas where biohazard exposure is possible.
- 1.7.8 Storage areas such as pantries, freezers, refrigerators, and others that may contain potentially infectious materials will not contain food or drink.
- 1.7.9 All equipment and surfaces that have had contact with blood or other infectious materials must be properly cleaned and decontaminated.
- 1.7.10 Regulated waste will be placed in containers that are closeable, constructed to contain all contents and prevent leakage, and will be appropriately labeled with the word *Biohazard* along with the biohazard red label. The container will be closed prior to removal to prevent spillage or protrusion of contents during handling.
- 1.7.11 In cases where the exterior surface of the container is contaminated; the container must be placed into another leak-proof container that will be labeled as FOR HANDLING AND STORAGE.
- 1.7.12 Only trained and authorized personnel are allowed to handle sharps, sharps containers, and any other potentially sharp and infectious needles or equipment.
- 1.7.13 Employees should notify the safety department if they discover regulated waste containers, refrigerators containing blood or other potentially infected materials, contaminated equipment, etc. without proper labels. The safety department will contact a 3rd party company for pickup and disposal.

1.8 MEDICAL EVALUATIONS AND VACCINATIONS

- 1.8.1 All TERRY R PITT CONSTRUCTION employees who have contact with potentially infectious body fluids must be immunized against HBV or be able to demonstrate immunity. TERRY R PITT CONSTRUCTION is responsible for establishing procedures for all employees who have occupational exposure to obtain HBV vaccinations at no cost to them.
- 1.8.2 TERRY R PITT CONSTRUCTION will provide the HBV vaccination series for all employees who have occupational exposure and post-exposure follow up to employees who have had an exposure incident. Employees who want the HBV vaccination must sign a consent form. All medical evaluations and procedures including the HBV vaccination series and post-exposure follow up are:

- 1.8.2.1 Made available at no cost to the employee.
- 1.8.2.2 Made available to the employee at a reasonable time and place.
- 1.8.2.3 Performed by or under the supervision of a licensed physician. All laboratory tests will be conducted by an accredited laboratory.
- 1.8.3 The HBV vaccination will be made available after the employee has received the training in occupational exposure and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee:
 - 1.8.3.1 Previously received the complete HBV vaccination series
 - 1.8.3.2 Has antibody testing results that reveal that the employee is immune
 - 1.8.3.3 States that the vaccine is contraindicated for medical reasons
 - 1.8.3.4 Initially declines the vaccination. However, if the employee later, while still covered under the standard, decides to accept the vaccination, it will then be made available.
- 1.8.4 All employees who decline the HBV vaccination offered will sign the OSHA required waiver indicating their refusal.

1.9 POST EXPOSURE

- 1.9.1 Following treatment of an injured employee and possible contamination, employees will remove and place all PPE in designated containers for disposal and thoroughly wash hands with a nonabrasive soap and running water.
 - 1.9.1.1 If running water is not available, an antiseptic hand cleanser or antiseptic towelette should be used until soap and running water are available.
- 1.9.2 Any contaminated surfaces of equipment or material should be washed with soap and water. Cleaning materials such as sponges, rags, etc. must be disposed of in designated containers.
- 1.9.3 A written description of the incident should be completed and faxed to the safety department within 24 hours.
- 1.9.4 The safety department will ensure proper procedures have been followed and employees who have been affected receive necessary treatment to minimize the impact of exposure by performing an investigation.
 - 1.9.4.1 A detailed report of the incident outlining root cause, corrective actions, and current status of affected employees will be completed and reviewed to help prevent reoccurrence.
 - 1.9.4.2 Additional documentation will be developed, if necessary, indicating the route of exposure and details of the incident.

- 1.9.5 The exposed employee will be requested to undergo a free, confidential medical evaluation to determine HIV and/or HBV status. Repeat HIV testing will be offered 6 weeks post exposure and periodically thereafter (12 weeks and 6 months).
- 1.9.6 Medical counseling will be provided to the exposed employee for the exposure incident and any reported acute illnesses developing after the exposure.
- 1.9.7 TERRY R PITT CONSTRUCTION will provide the healthcare professional with a copy of the biohazard standard, detailed description of the exposure incident, and any additional information that is relevant to the healthcare professional.
- 1.9.8 Upon completion of the post exposure evaluation, the healthcare professional will provide TERRY R PITT CONSTRUCTION and the exposed employee with information regarding:
 - 1.9.8.1 Whether or not the HBV vaccination is recommended
 - 1.9.8.2 Whether the exposed employee has received the HBV vaccination since the incident
 - 1,9.8.3 Verification that the exposed employee has received results of the medical evaluation
 - 1.9.8.4 Verification that the exposed employee was made aware of medical conditions caused by the exposure incident that require additional medical evaluation or treatment. Any other medical info is confidential and will not be a part of the report.

1.10 REPORTING AND RECORDKEEPING

- 1.10.1 Any employee who has suffered a cut, needle stick, or mucous membrane exposure to another person's bodily fluids or who has been exposed to human blood and blood products must report the incident immediately to the company safety department.
- 1.10.2 Employees covered under this program or employees acting as Good Samaritans who have been exposed on the job to HIV, HAV, HBV, or HCV will be tested at the time of exposure to determine if the virus has been transmitted. Affected employees will be retested at six weeks, twelve weeks, and six months after exposure. All testing will be performed at the expense of TERRY R PITT CONSTRUCTION and at no cost to employees. The exposure source will be contacted along with a request that they obtain testing at company expense. Testing is not mandatory and refusal will not affect their employment.
- 1.10.3 TERRY R PITT CONSTRUCTION will ensure that medical records will only be released after written consent is received from the employee.
- 1.10.4 TERRY R PITT CONSTRUCTION will ensure that medical records for each employee with occupational exposure will be maintained for the duration of employment and 30 years thereafter (at the main office). The medical records will include:
 - 1.10.4.1 HBV vaccination status, including the dates of vaccination.

- 1.10.4.1.1 Hepatitis B or HIV contracted on the job will be recorded on the OSHA 300 log as an illness. Exposure to bloodborne pathogens from contact with sharps will be recorded on the OSHA 300 log if a doctor prescribes treatment with gamma globulin, HBV immune globulin, or HBV vaccine.
- 1.10.4.2 Copy of all results of post exposure medical evaluations.
- 1.10.4.3 Copies of any information provided to the healthcare professional performing medical evaluations related to this policy and the OSHA bloodborne pathogens standard.
- 1.10.5 Access to a copy of the exposure control plan and a copy of required records will be provided in a reasonable time, place, and manner to employees and assistant secretary upon request.

1.11 TRAINING

- 1.11.1 Training will be provided at the time of initial assignment and within one year of employee's previous training. All employees will receive training upon transfer or initial assignment into a job function where there is a potential for occupational exposure and will receive annual retraining thereafter.
- 1.11.2 Training will include:
 - 1.11.2.1 A copy of the exposure control plan standard and an explanation of its contents
 - 1.11.2.2 A copy of the company exposure control plan
 - 1.11.2.3 A general explanation of the epidemiology and symptoms of bloodborne diseases
 - 1.11.2.4 An explanation of the modes of transmission of bloodborne diseases
 - 1.11.2.5 The recognition of tasks that may involve exposure
 - 1.11.2.6 An explanation of the use and limitations of methods to reduce exposure (ex. engineering controls, work practices, and PPE)
 - 1.11.2.7 Information on the types, uses, locations, removal, handling, decontamination, and disposal of PPE
 - 1.11.2.8 Information on equipment and environmental surface decontamination after coming into contact with blood or other hazardous materials
 - 1.11.2.9 An explanation of the basis of selection of PPE
 - 1.11.2.10 Information on the HBV vaccination, including efficiency, safety, method of administration, benefits, and that it will be offered free of charge
 - 1.11.2.11 Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
 - 1.11.2.12 Information on the evaluation and follow up required after an exposure incident

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- 1.11.2.13 An explanation of the signs, labels, and color-coding system
- 1.11.2.14 An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow up
- 1.11.3 The following information will be documented:
 - 1.11.3.1 Date(s) of training sessions
 - 1.11.3.2 Outline describing the material presented
 - 1.11.3.3 Name of the instructor
 - 1.11.3.4 Name and job title of all persons attending the training sessions
- 1.11.4 The safety department will be responsible for maintaining the training records. These records will be kept at the corporate office and will be maintained for 3 years from the date of training.

