## **BLOODBORNE PATHOGENS**

In accordance with the OSHA Bloodborne Pathogens standard, 29 CFR 1910.1030, as adapted by 803 KAR 2:320, the following exposure control plan has been developed.

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 Tri-State the following job classifications are in the category.

- Sorters and Soiled Cart Dumpers

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in this category would be expected to incur exposure to blood or other potentially infectious materials, tasks or procedures that would cause these employees to have occupational exposure are also required to be listed in order to clearly understand which employees in these categories are considered to have occupational exposure.

The Job classifications and associated tasks for these categories are as follows:

Housekeeping/Janitorial	When working in the soiled area.
Maintenance	When working in the soiled area.
Drivers	When coming into contact with soiled linen.
Washroom Personnel	When coming into contact with soiled linen.

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 Tri-State 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.

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Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at Tri-State. Any exposure incident will be investigated and reviewed by the Director of Operations, Plant Manager and Production Manager. Circumstances surrounding the exposure shall be examined to see what additional engineering changes or preventative measures can be taken. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized. At Tri-State the following engineering controls will be utilized:

- sharps container
- Method of handling regulated waste if found

The above controls will be examined and maintained on a regular schedule. The schedule for reviewing the effectiveness of the controls is as follows:

- sharps container checked daily by staff, reported to supervisor when <sup>3</sup>/<sub>4</sub> full
- regulated waste reported by staff to supervisor when any regulated waste is found

Hand washing 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 Tri-State the hand washing facility is located in the soiled area, along side the cart wash area. This is the hand washing facility that you must use when preparing to leave the soiled side. After removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin areas IMMEDIATELY or soon as possible following contact.

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 feasibly possible following contact.

#### Needles:

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared, or purposely broken.

#### **Containers for Reusable Sharps:**

The sharps containers are located on the sorting deck and at the dump station. These containers are puncture resistant, labeled with a biohazard label, and leak proof. Never try to remove an object once it has been placed in a sharp's container. Never discard the

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### Work Area Restrictions:

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverage are not to be stored on shelves, cabinets, counter tops, or bench tops where blood or other potentially infectious materials are present. These areas are the dumping station, soiled sorting area, and the soiled area of the washroom, and soiled linen holding areas. In short, the soiled side of the plant.

All procedures will be conducted in a manner which will minimize exposure to infectious materials.

### **Regulated Waste:**

If any infectious material is found in the soiled linen, it should immediately be placed in a (red plastic biohazard bag) then place the bag in the red biohazard waste container found in the soiled side area. The container used for this purpose will be labeled or color coded in accordance with the requirements of the OSHA standard. All contaminated sharps shall be discarded as soon as feasibly possible in sharps containers which are located on the sorting deck and at the dump station.

## Personal Protective Equipment:

All personal protective equipment used at Tri-State will be provided without cost to the employee. 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 required of all employees coming into contact with any soiled linen: The required clothing is:

#### Gloves Gowns

For employees work on the sorting deck, Shoe Covers and Hair Nets are also required.

All garments which are penetrated by blood shall be removed immediately or as soon as feasibly possible. All personal protective equipment will be removed prior to leaving the work area and placed in the appropriate container.

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 the rack located in the locker room.

Disposable gloves used at this facility are not to be washed or decontaminated for reuse and are to be replaced as soon as practical when they become contaminated or as soon as feasibly possible if they are torn, punctured, or when their ability to function as a barrier is compromised.

Face masks and eye protection devices, such as goggles or glasses are optional to be worn when working with soiled linen.

The OSHA standard requires appropriate protective clothing to be used. Tri-State requires that each employee working with soiled linen wear gloves, gowns, and shoe covers if working on the sorting deck.

All employees who handle contaminated laundry will utilize personal protective equipment to prevent contact with blood or other potentially infectious materials.

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at not cost to the employees. All repairs and replacements will be made by the employer at no cost to employees.

## Housekeeping:

Written schedules for cleaning and methods of decontamination are located in the plant manager's office.

## 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 to work involving the potential for occupational exposure to blood or other potentially infectious materials unless the employee has previously had the vaccine or who wish to submit to antibody testing which shows the employee to have sufficient immunity.

Employees who decline the Hepatitis B vaccine will sign a waiver. Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided at no cost.

# **Post-Exposure Evaluation and Follow-Up:**

When an employee incurs an exposure incident, it should be reported to the supervisor immediately. All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with OSHA standards.

The follow-up will include the following:

- Documentation of the route of exposure and the circumstances related to the incident.
- The employee will be taken to the nearest open healthcare facility for Evaluation. (Business Health if it is open, St. Elizabeth hospital if it is not.)
- The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident.
- The Human Resource Department has been designated to assure that the Policy outlined here is effectively carried out as well as to maintain records related to this policy.

## <u>Training:</u>

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:

Training for employees will include the following:

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

## Recordkeeping:

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A Sharp's Injury log shall be maintained for all percutaneous injuries from contaminated sharps. This list must include the date of injury, the type and brand of device involved, where the incident occurred, and how the incident occurred. The log shall be reviewed as part of the annual program evaluation and will be kept for 5 years following the end of the calendar year. The name of the employee will not be included to maintain confidentiality.

## Dates:

All provisions required by the standard will be implemented as soon as possible upon a job offer. Training will be conducted by the Quality Control Recruiting Manager or Human Resources with the aid of video tapes and written material. All employees will receive annual refresher training. The outline for the training material is available in the Human Resource Department.