

## ADMINISTRATIVE POLICY

### 1 Purpose

- 1.1 This document specifies the exposure control plan ("ECP") for OPTIONS required by paragraph (c) of the occupational health standard for blood borne pathogens (29 C.F.R. 1910.1030, "the Standard") promulgated by the Occupational Safety and Health Administration ("OSHA"), U.S. Department of Labor.
- 1.2 This ECP identifies the job classifications which have been determined to have potential exposure to blood and other potentially infectious materials at OPTIONS. Other potentially infectious materials are defined in the Standards as including the following 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.
- 1.3 The ECP also describes the methods of compliance with applicable requirements of the Standard, sets forth a compliance schedule for such methods, and describes a procedure for evaluating exposure incidents. The ECP for OPTIONS was completed May 5, 1992.
- 1.4 All personnel employed by OPTIONS are required to comply with this ECP and with the requirements of the Standard. Any failure to comply may be cause for disciplinary action.
- 1.5 In the event that the requirements of this ECP or the compliance requirements of the Standard should conflict with established infection control procedures, the more protective procedure will be followed to obtain the maximum protection for the supported person and the staff person. Questions concerning this ECP and compliance with the Standard should be directed to the Chief Operating Officer of OPTIONS.

### 2 Person Responsible for OSHA Compliance

- 2.1 The Chief Operating Officer of OPTIONS and contracted nurses have responsibility for implementing the ECP and ensuring compliance with it and the Standard.

### 3 Accessibility of the Exposure Control Plan

- 3.1 This ECP may be examined by employees of OPTIONS during employee's regular working hours or at other reasonable times.

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### 4 Review

- 4.1 This ECP will be reviewed and updated by OPTIONS whenever necessary to reflect new or modified tasks and procedures which affect employees' potential exposure to blood and other potentially infectious materials, and to reflect new or revised potential exposure to employees.

### 5 Exposure Determinations

- 5.1 All employees in the following job classifications are potentially exposed employees:

5.1.1 Registered Nurse Consultant.

- 5.2 Some but not all of the employees in the following job classifications have the potential to be exposed to blood and other potentially infectious materials:

5.2.1 Community Support Specialists: Tasks may involve the handling of contaminated laundry; i.e., individuals who sort laundry which may be soiled with blood or other potentially infectious materials. supported persons generally do their own laundry, however. Community Support Specialists also may occasionally apply first aid procedures.

### 6 Methods of Compliance

#### 6.1 Work Practices

6.1.1 Universal Precautions: OPTIONS will observe Universal Precautions throughout its programs to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid type is difficult or impossible, all body fluids will be considered potentially infectious materials.

6.1.2 Hand washing: OPTIONS requires all employees wash their hands using soap, running water, and friction in the following situations:

6.1.2.1 At the beginning and end of the work shift.

6.1.2.2 Before distributing medications.

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6.1.2.3 Immediately after or as soon as feasible following contact with blood or other potentially infectious materials (other skin areas will be washed with soap and water and mucous membranes flushed with water after such contact).

6.1.2.4 Before handling food or food preparation or storage equipment

6.1.2.5 Immediately or as soon as feasible after removal of gloves or other personal protective equipment.

6.1.2.6 After using the toilet.

6.1.3 Hand washing facilities are readily accessible to OPTIONS employees with soap, running water and paper towels located in restrooms at every site.

6.1.4 Procedures Involving Blood: Assistance with blood glucose monitoring.

6.1.5 Eating, Drinking, etc.: Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of potential exposure. All areas are considered work areas with the exception of patios for smoking and the offices at each site. Food and drink will not be kept in refrigerators, freezers, shelves, cabinets or on counter tops or bench tops where blood or other potentially infectious materials are present. Application of hand cream is permitted in work areas provided the hands are thoroughly washed prior to application.

6.1.6 These work practices will be examined for effectiveness during Safety Committee/Infection Control Meetings.

## 7 Use of Sharps

7.1 Disposable needles: OPTIONS generally does not use needles. If they are required, then only disposable needles will be used. Contaminated disposable needles will not be bent, recapped or removed. Shearing or breaking of contaminated needles is also prohibited.

7.2 Disposable sharps: Generally, OPTIONS does not use any sharps. If they are required, then only disposable sharps will be used, and will be

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disposed of in containers that are close able, puncture-resistant, and leakproof on sides and bottom. The containers will either be red or will be affixed with a fluorescent orange or orange-red label with letters in contrasting colors and a bio-hazard symbol. The disposable sharps containers will be located in the office of the site of their use. The containers must be maintained upright throughout use, replaced routinely and not be allowed to overflow. Reusable containers are not to be opened, emptied or cleaned manually or in a manner which would expose employees to the risk of per cutaneous injury.

### 8 Specimens

8.1 Universal Precautions will be used by staff when required to collect stool or urine samples

### 9 Personal Protective Equipment

9.1 Use: When there is potential exposure, OPTIONS will provide appropriate personal protective equipment ("PPE") to employees at no cost to the employee. The employers of those persons who are independent contractors (e.g., physical therapists, occupational therapists, or dental health care workers) are to provide their employees with PPE. If they fail to do so, OPTIONS will have the necessary PPE available for use by such contracted personnel. All persons who may face exposure to blood or other potentially infectious materials will use PPE appropriate for the anticipated exposure.

9.2 Limited Exception for Use of PPE: OPTIONS will ensure that its employees use appropriate PPE unless an employee temporarily and briefly declines to use it.

9.3 In any circumstance where an employee makes a judgment not to use PPE and does not use it, OPTIONS will investigate and document the circumstances to determine whether changes in the PPE can be made to prevent such occurrences in the future.

9.4 Accessibility: Appropriate PPE will be kept in the office at each OPTIONS site for the Registered Nurse Consultant, Community Support Specialists, and consulting therapists.

9.5 If an employee refuses to wear appropriate PPE, the refusal will be reported to the individual responsible for OSHA compliance.

9.6 Gloves: Protective gloves must be worn whenever it is reasonably anticipated that an employee may have hand contact with blood, other

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potentially infectious materials, mucous membranes, and non-intact skin. They must also be worn whenever performing patient care procedures and when handling or touching contaminated items or surfaces. Disposable sterile gloves will be worn during invasive and aseptic procedures. The following employees and consulting medical service providers will wear gloves during any tasks which may result in contact with blood or other potentially infectious materials:

9.6.1 Attending Physician

9.6.2 Registered Nurse Consultant

9.6.3 Consulting Therapist

9.6.4 Community Support Specialists

9.7 Disposable (single use) gloves will be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. They will not be washed or decontaminated for reuse.

9.8 Hypo-allergenic and powderless gloves will be provided to staff who are allergic either to latex gloves or gloves with powder.

### 10 Laundry

10.1 Contaminated laundry, including supported person's bed linens, will be handled with a minimum of agitation; i.e. the laundry will not be shaken or unfolded. It will be bagged or containerized in the supported persons' rooms, treatment rooms or other locations of use. Contaminated laundry will not be sorted or rinsed in the location of use.

10.2 Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through or leakage from its bag or container, the laundry will be placed and transported in additional bags or containers to prevent soak-through and/or leakage.

10.3 All employees who have contact with contaminated laundry will wear disposable gloves issued by OPTIONS.

### 11 Housekeeping

11.1 OPTIONS will clean and decontaminate those work surfaces, environmental surfaces and equipment in the supported person's rooms and treatment/examining areas as set forth below. A written cleaning

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schedule specifying methods of decontamination. The schedule states the location of the areas to be cleaned, the types of surfaces to be cleaned, the soil present and the procedures performed in the area.

- 11.2 OPTIONS will clean and decontaminate all equipment, environmental surfaces and working surfaces in those areas where there is potential exposure, such as supported person rooms and treatment/examining areas, after any actual contact with blood or other potentially infectious materials.
- 11.3 All reusable bins, pails, cans, and similar receptacles having a reasonable likelihood for contamination will be inspected and decontaminated quarterly.
- 11.4 Broken glassware that may be contaminated will not be picked up directly with the hands. Instead, it will be removed using mechanical means such as a brush and dust pan, tongs, or forceps.

### 12 Regulated Waste

- 12.1 Regulated waste includes items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; and pathological and microbiological wastes containing blood or other potentially infectious materials. If there is potential for any item, such as bandages, gauze, or linens, to be covered with or contain liquid or dried blood or other potential infectious materials, then that item will be handled as regulated waste.
- 12.2 If a need for disposal of regulated waste becomes evident, OPTIONS will provide containers that can be closed, constructed to contain all contents and prevent leakage of fluids, and red in color. The containers will be closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.
- 12.3 OPTIONS will place containers for regulated waste at each program site as needed.
- 12.4 Disposal of all regulated wastes will be in accordance with applicable regulations and laws.

### 13 Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up

- 13.1 OPTIONS will make available at no cost the hepatitis B vaccine to all

employees who have potential exposure as listed in Section 6. OPTIONS will require that independent contractors who have potential exposure to blood or other potentially infectious materials while providing services to OPTIONS supported persons supply proof of protection against hepatitis B (vaccination or antibody test revealing immunity).

13.2 OPTIONS will provide post-exposure evaluation and follow-up for any employee of OPTIONS who has an exposure incident; defined as specific eye, mouth, or other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials as a result of occupational duties.

13.3 All medical evaluations and procedures related to the hepatitis B vaccination and post-exposure evaluation and follow-up, including prophylaxis, that are provided by OPTIONS will be:

13.3.1 Available at no cost to the employee.

13.3.2 Performed by or under the supervision of a Family Care Clinic of San Luis Obispo physician or licensed health care professional.

13.3.3 Provided according to U.S. Public Health Service recommendations. OPTIONS will stipulate that the contracting licensed health care professional will use an accredited laboratory at no cost to the employee for all laboratory tests conducted. OPTIONS will further ensure that the laboratory is accredited.

13.4 Hepatitis B Vaccination

13.4.1 OPTIONS will offer the hepatitis B vaccination after the employee has received training as set forth below and within ten (10) days of initial assignment to a position with potential exposure, unless the employee has previously received the complete hepatitis B vaccination series, or antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons. At such time as the U.S. Public Health Service recommends booster doses, they will be made available. OPTIONS is considered low risk unless a carrier of hepatitis B is admitted to one of its programs. Universal precautions will be utilized at all times.

13.4.2 Proof of the hepatitis B vaccination will be submitted to the Human Resources Manager.

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13.4.3 If an employee initially declines the vaccination but later while still covered under the Standard decides to accept the vaccination, OPTIONS will make the vaccine available at that time, at no cost to the employee. If an employee chooses not to be vaccinated, he/she must sign a form required by the Standard containing the following statement:

"I understand that due to my occupational exposure to blood or other potentially 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 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 material and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me."

13.5 Post-Exposure Evaluation and Follow-up: If any employee has an exposure incident as defined in section 14.2, he/she should immediately report this event to the individual responsible for OSHA compliance. OPTIONS will immediately make available during working hours from 9:00 am to 5:00 p.m., Monday through Friday, a confidential medical evaluation and follow-up performed by a licensed health care professional, which will include the following:

13.5.1 Documentation of the route of exposure and circumstances under which the exposure incident occurred as set forth in Section 14.6.

13.5.2 The blood of the source individual with respect to an exposure incident will be tested. OPTIONS will obtain written consent from the supported persons to test his/her blood for this purpose. If it is impossible to identify the source individual, or if the source individual does not consent to testing, OPTIONS will document this. If the source individual's infectious status is found to be positive, blood testing need not be repeated.

13.5.3 Any OPTIONS employee who experiences an exposure incident will be informed by the evaluating licensed health care professional of the infectious status for blood-borne

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pathogens of the source individual's blood, to the extent that the law permits. The employee will also be informed that the information provided to him/her about the infectious nature of the source individual may be protected from any disclosure by law and any disclosure made by the licensed health care professional to the exposed employee is to be held confidential. Any breach of confidentiality will expose the employee to disciplinary actions up to and including dismissal.

- 13.5.4 Employees who have experienced an exposure incident will have their blood tested for HBV and HIV serologic status. In the event an employee declines testing or refuses to be tested, he/she will be required to sign a declination form.
- 13.5.5 If the source individual is HBV or HIV positive or has refused testing, employee should be retested if seronegative at 6 weeks, 12 weeks and 6 months past exposure, as recommended by the U.S. Public Health Service.
- 13.5.6 It is recommended that employees who have experienced an exposure incident receive counseling that include advice to seek medical attention for any febrile illness that occurs within 12 weeks of exposure.
- 13.5.7 The licensed health care professional evaluating the employee after an exposure incident is required by the Standard to provide a written opinion stating that (1) the employee has been informed of the results of the evaluation; and that (2) the employee has been told about any medical conditions resulting from the incident that require further evaluation or treatment. The licensed health care professional is also required to omit from the written report any other findings or diagnosis and to keep them confidential. The licensed health care professional will also be directed to provide OPTIONS with a copy of the written opinion within 15 days of the completion of the post-exposure evaluation, so that OPTIONS can provide the employee with a copy of the written opinion within 15 days of the completion of the evaluation as required by the Standard.

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### 13.6 Documentation of Circumstances Surrounding Exposure Incidents

13.6.1 The medical evaluation and follow-up will include, as set forth above, documentation of the circumstances under which the exposure incident occurred. The goal is to identify and correct problems in order to prevent recurrence of similar incidents.

13.6.2 The documentation and investigation of the circumstances surrounding an exposure incident will include, at minimum, the following :

13.6.2.1 Documentation of the time, place and procedure engaged in by the employee of OPTIONS at the time of the exposure incident.

13.6.2.2 Documentation of the personal protective equipment in use at the time of the exposure incident.

13.6.2.3 Documentation of work practices and any other requirement of the Standard that was not being followed at the time of the exposure incident.

13.6.2.4 An evaluation by the individual responsible for OSHA compliance and the exposed employee of what could have been done to avoid the incident.

13.6.2.5 Identification of policies or procedures that should be followed or revised to avoid similar exposure incidents in the future.

13.6.2.6 OPTIONS implemented the above procedures for evaluating exposure incidents in May 5, 1992.

13.7 OPTIONS implemented the above requirements regarding hepatitis B vaccination and post-exposure evaluation and follow-up, except for the documentation of the circumstances surrounding exposure incidents.

## 14 Hazard Communication

14.1 OPTIONS may at times be required to store or transport stool or urine samples.

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### 15 Training

15.1 All OPTIONS employees with potential exposure as listed in Section 6, including part-time and per diem employees, will be required to participate in a training program addressing Universal Precautions during the NEPO. This ensures that employees are trained prior to being placed in positions where exposure may occur.

### 16 Records

16.1 Medical Records : OPTIONS will maintain medical records for each employee with potential for exposure. These medical records will contain:

16.1.1 The employee's name and social security number;

16.1.2 A copy of the employee's hepatitis B vaccination status, including the dates of all vaccinations and any medical records related to ability to receive the vaccine. Employees who claim they have been vaccinated but who are unable to obtain copies of their vaccination records will be required to submit a statement for their medical record indicating their immune status to HBV.

16.1.3 A copy of all results of examinations, medical testing, and follow-up procedures, including documentation of the circumstances of an exposure incident.

16.1.4 A copy of the licensed health care professional's written opinion.

16.1.5 A copy of the information provided to the licensed health care professional. These medical records will be maintained at least for the duration of employment plus 30 years.

16.2 Confidentiality: OPTIONS will keep all medical records required by the foregoing paragraph confidential and they will not be disclosed or reported without the employee's express written consent to any person in or outside OPTIONS except as required by law.

16.3 Training Records: OPTIONS will maintain training records which will include:

16.3.1 The dates of training sessions.

16.3.2 The contents or summary of the sessions.

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- 16.3.3 The names and qualifications of trainers.
- 16.3.4 The names and job titles of attendees.
- 16.4 Training records will be maintained three years from the date on which training occurred.
- 16.5 Availability: OPTIONS will make available upon request to appropriate OSHA officials all records required by this ECP. Medical records will be made available only upon presentation of a proper access order issued pursuant to the requirements of 29 C.F.R. Part 1913 and after notification to the employees of OPTIONS. Employee training records and medical records required by the ECP will be provided to an employee upon request for examination and copying. Medical records will also be available to anyone having the written consent of the subject employee.
- 16.6 Transfer of Records: If OPTIONS closes with no successor employer to receive or retain the records, OPTIONS will notify OSHA at least three months prior to disposal and transmit all records to OSHA within the three-month period if required by OSHA to do so.

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