

Egg Harbor Fire Department and First Responders Standard Operating Policy

SUBJECT: Blood Borne Pathogens

SOP 1201

PURPOSE: In accordance with the OSHA Blood Borne Pathogens Standard 29 CFR 1910.1030 and Wisconsin Department of Commerce 32, the following exposure control plan has been developed for the Egg Harbor Fire Department. The purpose of this exposure control plan is to:

1. Eliminate or minimize employee occupational exposure to blood or certain other body fluids;
2. Comply with the OSHA Blood Borne Pathogen Standard, 29 CFR 1910.1030 and the Wisconsin Department of Commerce 32.

SCOPE: This policy shall apply to all members of the Egg Harbor Fire Department.

I 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. The following Egg Harbor Fire Department job classifications are in this category of part-time employees of the fire department.

A list of tasks and procedures performed by employees in the above job classifications in which exposure to blood borne pathogens may occur may include, but are not limited to:

1. First responder care for emergency situations.
2. Maintenance and clean-up (decontamination) of emergency vehicles.
3. Cleaning tasks associated with body fluid spills.
4. Care of minor injuries that occur within a municipal setting, (i.e., lacerations, scrapes, minor cuts).

II Implementation Schedule and Methodology

OSHA also requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with that requirement:

1. Compliance Methods

Universal precautions will be observed by employees 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.

Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized

Hand washing facilities are available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily available after incurring exposure. Hand washing sinks or alternatives are available at both fire stations. Antibacterial soap is available at both stations and in the fire trucks, it does not replace hand washing, but should be used until proper hand washing facilities are available.

Employees shall ensure after the removal of personal protective gloves, that they wash their hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water. Supervisors shall ensure that employees comply with this standard.

2. Work Area Restrictions

In work areas where there is 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 beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

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All procedures will be conducted in a manner which will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

3. Contaminated Equipment

The crew is responsible for ensuring the equipment which has become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary unless the decontamination of equipment is not feasible.

4. Personal Protective Equipment (P.P.E.)

A. P.P.E. Provision

The Fire Chief is responsible for ensuring that the following provisions are met:

All personal protective equipment used by the fire fighters will be provided without cost to employees.

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 employee's 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.

The Fire Chief shall ensure that each employee uses appropriate P.P.E. unless the supervisor shows that the employee temporarily and briefly declined to use P.P.E. when under rare and extraordinary circumstances, it was the employees professional judgment that in the specific instance its use would have prevented the delivery of health care or posed an increase hazard to the safety of the worker or co-worker. When the employee makes this judgment, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

B. P.P.E. Cleaning, Laundering and Disposal

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to the employees. All repairs and replacements will be made by the employer at no cost to the employees.

All garments which are penetrated by blood shall be removed immediately or as soon as feasible. All P.P.E. will be removed prior to leaving the work area.

P.P.E. shall be disposed of in appropriate areas. If P.P.E. becomes regulated waste, it will be disposed of in red bags labeled with biohazard waste.

Work uniforms, if soiled with potentially hazardous material shall be changed as soon as feasible. Change of uniform will be available at the fire stations. Soiled uniforms will be left at the fire station to be laundered as soon as possible at a commercial laundry. Do not take soiled uniforms home to be washed in the family washing machine. The possibility exists for contaminating family items.

C. Gloves

Gloves shall be worn where it is reasonable anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes; when handling or touching contaminated items or surfaces.

Disposable gloves used by the fire department are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

D. Eye and Face Protection

Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, splatter, or droplets of blood or other potentially infectious materials may be generated, and eye, nose, or mouth contamination can reasonably be anticipated.

P.P.E. shall be worn during contact with persons who are at potential for spreading infectious disease. These include, but are not limited to:

1. Any signs of blood or fluid drainage.
2. Open flesh wounds, epidermal eruptions.
3. I.V. vannulation.
4. Airway control, use of adjuncts.
5. Persons vomiting, coughing, sneezing excessively.
6. Contact with urine or fecal materials.
7. Obstetrical deliveries.
8. Extrication.

If there is any expectation that blood or fluid may drain or splash, goggles and mask along with impervious gown and gloves must be worn.

5. Housekeeping

Cleaning and decontamination will primarily be done on an as-needed basis, certainly as soon as possible.

Decontamination will be accomplished by utilizing the following materials:

Solution of bleach and water - 10% bleach or an equivalent.

6. Regulated Waste Disposal

Regulated waste shall be placed in containers which are closeable, constructed to contain all contents and prevent leakage of fluids during handling, storage, transportation or shipping.

The waste must be labeled and placed in color coded red bag and closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

Note: Disposal of all regulated waste shall be in accordance with applicable United States and local regulations. (The DNR is the controlling agency in Wisconsin.)

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7. Laundry Procedures

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will be placed in appropriately marked (biohazard labeled, or color coded red bag) bags at the location where it is used. Such laundry will not be sorted or rinsed in the area of use. Laundry is to be turned over to Door County Emergency Services for cleaning or disposal.

8. Hepatitis B Vaccine and Post-Exposure Evaluation and Follow-Up

A. General

The Egg Harbor Fire Department shall make available the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post exposure follow-up to employees who have had an exposure incident.

The Fire Chief shall ensure that all medical evaluations and procedures including the Hepatitis B vaccine and vaccination series and post exposure follow-up, including prophylaxis are:

- a. Made available at no cost to the employee;
- b. Made available to the employee at a reasonable time and place;
- c. Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed health care professional; and
- d. Provided according to the recommendations of the United States Public Health Service.

All laboratory tests shall be conducted by an accredited laboratory at no cost to the employee.

B. Hepatitis B Vaccination

The Fire Chief is in charge of the Hepatitis B vaccination program. Hepatitis B vaccine shall be obtained from the Door County Public Health Director.

Hepatitis B vaccination shall 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 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.

Participation in a pre-screening program shall not be a prerequisite for receiving Hepatitis B vaccination.

If the employee initially declines Hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, the vaccination shall be made available.

All employees who decline the Hepatitis B vaccination offered shall sign the OSHA required waiver indicating their refusal. If a routine booster dose of Hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such doses shall be made available at no cost to the employee.

C. Post Exposure Evaluation and Follow-Up

All exposure incidents shall be reported, investigated, and documented. When an employee of the Fire Department incurs an exposure incident, it shall be reported to the Infection Control Nurse at Door County Memorial Hospital.

Following a report of an exposure incident, the exposed employee shall immediately receive confidential medical evaluation and follow-up, including at least the following elements:

1. Documentation of the route of exposure, and the circumstances under which the exposure incident occurred;
2. Identification and documentation of the source individual, unless it can be established that identification is infeasible or prohibited by state or local law.
3. The source individual's blood shall be tested as soon as feasible, at the expense of the County and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the Corporate Counsel shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.

4. When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.
5. Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

Collection and testing of blood for HBV and HIV serological status will comply with the following:

1. The exposed employee's blood shall be collected as soon as feasible and tested after consent has been obtained;
2. The employee will be offered the option of having their blood collected for testing of the employees HIV/HBV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological status.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard. All post exposure follow-up will be preformed by Door County Memorial Hospital.

D. Information Provided to the Health Care Professional

The Fire Chief shall ensure that the health care professional responsible for the employee's Hepatitis B vaccination is provided the following:

1. A copy of OSHA Standard 29 CFR 1910.1030;
2. A written description of the exposed employee's duties as they relate to the exposure incident;
3. Written documentation of the route of exposure and circumstances under which exposure occurred;
4. Results of the source individuals blood testing, if available;
and
5. All medical records relevant to the appropriate treatment of the employee including vaccination status.

E. Health Care Professional Written Opinion

The Fire Chief shall obtain and provide the employee with a written copy of the evaluating health care professional's written opinion within 15 days of the completion of the evaluation.

The health care professionals written opinion for HBV vaccination shall be limited to whether HBV vaccination is indicated for an employee, and if the employee has received such vaccination.

The health care professional's written opinion for post exposure follow-up shall be limited to the following information:

- A. A statement that the employee has been informed of the results of the evaluation; and
- B. A statement that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.

Note: All other findings or diagnosis shall remain confidential and shall not be included in the written report.

9. Information and Training

The Fire Chief shall ensure that training is provided at the time of initial assignment to tasks where occupational exposure may occur, and that it shall be repeated within twelve months of the previous training. Training shall be tailored to the education and language level of the employee, and offered during normal work shift. The training will be interactive and cover the following:

- A. A copy of the standard and an explanation of its contents;
- B. A discussion of the epidemiology and symptoms of blood borne diseases;
- C. An explanation of the modes of transmission of blood borne pathogens;
- D. An explanation of the Egg Harbor Fire Department blood borne Pathogen Exposure Control Plan (SOP 1201), and a method of obtaining a copy.
- E. The recognition of tasks that may involve exposure.
- F. An explanation of the use and limitations of methods to reduce exposure, for example engineering controls, work practices and personal protective equipment (P.P.E.).
- G. Information on the types, use, location, removal, handling, decontamination, and disposal of P.P.E.'s.
- H. An explanation of the basis of selection of P.P.E.'s.

- I. Information on the Hepatitis B vaccination, including efficacy, safety, method of administration, benefits, and that it will be offered free of charge.
- J. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- K. An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow-up.
- L. Information on the evaluation and follow-up required after an employee exposure incident.
- M. An explanation of the signs, labels, and other color coding systems.

The person conducting the training shall be knowledgeable in the subject matter.

Employees who have received training on blood borne pathogens in the twelve months preceding the effective date of this policy shall only receive training in provisions of the policy that were not covered.

Additional training shall be provided to employees when there are any changes of tasks or procedures affecting the employee's occupational exposure.

10. Record Keeping

A. Medical records for Occupational Exposed Employees

The Fire Chief is responsible for maintaining medical records as indicated below. These records will be kept in the Fire Chief's office in a separate medical file.

Medical records shall be maintained in accordance with OSHA Standard 29 CFR 1910.20. These records shall be kept confidential, and must be maintained for at least the duration of employment plus 30 years. The records shall include the following:

1. The name and social security number of the employee.
2. A copy of the employee's HBV vaccination status, including the dates of vaccination.
3. A copy of all results of examinations, medical testing, and follow-up procedures.
4. A copy of the information provided to the health care professional including a description of the employee's duties as they relate to the exposure incident, and documentation of the routes of exposure and circumstances of the exposure.

B. Training Records

The Fire Chief is responsible for maintaining the following training records. These records will be kept in the computer of the Fire Department clerk.

Training records shall be maintained for three years from the date of training. The following information shall be documented:

1. The dates of the training;
2. An outline describing the materials presented;
3. The names and qualifications of the persons conducting the training;
4. The names and job titles of all persons attending the training sessions.

C. Availability

All employee records shall be made available to the employee in accordance with OSHA Standard 29 CFR 1910.20.

All employee records shall be made available to the Assistant Secretary of Labor for the Occupational Safety and Health Administration and the Director of the National Institute for Occupational Safety and Health upon request.

11. Enforcement

All Egg Harbor Fire Department employees are subject to this plan and are required to follow its precautionary provisions. Employee's who violate the provisions of this plan by failing to follow precautionary procedures may be subject to disciplinary procedures as outlined in the department's Rules and Regulations or applicable labor agreement.

12. Evaluation and Review

The Door County Emergency Services Director and the Egg Harbor Fire Chief are responsible for annually reviewing this program, and its effectiveness, and for updating this program as needed.

All provisions required by this standard will be implemented as prescribed by regulations.