### **Wood County Board of Developmental Disabilities**

### **PROCEDURE**

Procedure #:

02-ALL-ALL-0425 (MD)

Subject:

Bloodborne Pathogens

**Effective Date:** 

12-15-94

**Last Revision:** 

03-04-2025

Person Responsible:

Health & Safety Coordinator

Approvals/Date:

Superintendent, WCBDD

Department Director/Coordinator

Date

3/4/2025

The following definitions will apply:

Acute Exposure - A situation where one person's blood and/or body fluids can enter another person's bloodstream through non-intact skin, mucous membranes, or a wound breaking the skin.

Date

AIDS (Acquired Immune Deficiency Syndrome) - A disease caused by the HIV virus which fatally compromises the body's immune

Appendix A – Summary of the Bloodborne Pathogens Procedure

Bloodborne Pathogens - Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include but are not limited to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).

<u>Contaminated Sharps</u> – A sharp object previously used on an individual's tissues such as a needle or razor.

Consumer/Enrollee - Any person who receives or who is eligible to receive services provided by the WCBDD.

Employee - An employee of the WCBDD, a person under contract with the board, or a volunteer, when such persons do not have a license as a health care professional acting within their scope of practice.

Engineering Controls - Includes all control measures that isolate or remove a hazard from the workplace, such as Sharps disposal containers, self-sheathing needles, personal protective equipment, and work practice controls.

Exposed Individual - The individual who was exposed to another individual's blood and/or body fluids.

Hepatitis - An infection caused by a virus which is transmitted through human blood and body fluids. This infection affects the liver. Hepatitis B Antibodies - Substances which develop in the blood of a person after having been infected with Hepatitis B or after being vaccinated for Hepatitis B. These antibodies protect the individual from acquiring or reacquiring the disease. An individual with Hepatitis B Antibodies cannot transmit the disease.

Hepatitis B Antigens - Substances in the bloodstream of an individual who currently is infected with the Hepatitis B Virus and can transmit the disease even if symptom free.

HIV (Human Immunodeficiency Virus) - A virus which can cause AIDS, a disease which fatally compromises the immune system. Needleless Systems - Devices which provide an alternative to needles for various procedures to reduce the risk of injury involving contaminated Sharps.

**OPIM** – Other potentially infectious materials.

Reviewer – The Supervisor or Nurse who assists with the determination of a potential exposure.

Sharps with Engineered Sharps Injury Protection - Includes non-needle Sharps or needle devices containing built in safety features that are used for collecting fluids or administering medications or other fluids, or other procedures involving the risk of Sharps injury. <u>Source Individual</u> - The individual (employee or enrollee) who blood and/or body fluids exposed another individual.

- 1. The Health & Safety Committee will review this procedure annually. Consideration will be given to more effective and/or safer equipment, products, or practices that could lessen the chance of an exposure to bloodborne pathogens.
- 2. In the event of an actual or possible exposure to blood, body fluids, or other potentially infectious material (OPIM): (See Appendix A for Summary).
  - a. Immediately clean and/or flush the exposed area;
  - Initiate appropriate first aid, as needed (see below)
    - Treatment follow-up with Employer Services at Falcon Health Center.
  - Contact a Supervisor, or other designated person as identified through department practices.
- 3. The Supervisor will:
  - a. Determine immediately, by speaking with the employee, if an injury occurred that requires treatment regardless of the status of an exposure. If so, the supervisor will provide intervention as described below;
  - b. Evaluate the responses on the Blood and Body Fluids Exposure Report form 03-ALL-ALL-0269 and determine if an exposure occurred or is possible to have occurred to any involved individuals;
  - Assure an Incident Report (IR) is completed and routed.
  - Exposed staff shall complete Wood County's Worker's Compensation/PERRP Accident/Injury Investigation Report.
  - Identify the "source individual(s)" and the "exposed individual(s)";
  - Assure that both the exposed and source individual(s) are provided with forms and information necessary for follow-up (see Appendix B for routing and distribution of forms) if those individual(s) choose to undergo testing;
  - Distribute and route forms as indicated in Appendix B;
  - Work within the practice of the department to obtain consent for testing when applicable.

- 4. An exposed individual opting to pursue follow-up will be expected to complete the following unless otherwise instructed by the contracted physician.
  - a. Go to Employer Services at Falcon Health Center/ER for treatment and follow-up as instructed.
- 5. Human Resources is responsible for:
  - a. OSHA Labor form numbers 300 and 301:
  - b. Processing any worker's comp claims for injuries sustained notwithstanding the exposure;
  - c. Review Bloodborne Pathogen Evaluation of Exposure Incident form 03-ALL-ALL-0269d and file in confidential medical file.
- 6. The contracted Agency is responsible for:
  - a. Completing all necessary treatment as recommended by the Centers for Disease Control;
  - b. Complete and return to Human Resources within 15 days of incident, the Health Care Professional's Written Opinion Post Exposure form 03-ALL-ALL-0269c.
- 7. The information that the contracted Agency relays to WCBDD is confidential and will be maintained in the confidential files in the contracted Agency's office.
- 8. Employees will complete an Employee Emergency Contact Form 03-ALL-ALL-0067 upon hire, information changes, and annually thereafter. The Employee Emergency Contact Forms will be in a central location at the employee's primary work site. If the employee is unable to communicate the information, the form will be sent with the employee if transported for emergency treatment (copies are maintained by personnel).
- 9. If a reasonable potential for exposure exists when providing services outside the usual programming sites and the distance or length of time or other factors make it not possible to return to the area within 24 hours of an acute exposure. Supervisor or administrator will be contacted for further direction.
- 10. The cost of all testing and counseling above is assumed by WCBDD. All time expended by an employee is paid time as per the employee's usual rate of pay. Any additional treatment such as x-rays, sutures, or tetanus injections shall be billed to Worker's Comp or to the individual, as appropriate.
- 11. Each department is responsible for reviewing/investigating the incident and completing the Bloodborne Pathogen Evaluation of Exposure incident form. Department is to implement any changes, interventions, or training necessary as indicated at the conclusion of the review
- 12. Documentation of exposure incident will be filed as follows:
  - a. Employees of the WCBDD involved in an exposure incident will have that information filed in the employee's confidential medical files;
  - Persons receiving services from WCBDD involved in an exposure incident will have that documentation filed in that individual's confidential medical file with limited access:
  - Any documentation of an acute exposure involving a volunteer, visitor, or contracted individual who has no personnel file will be maintained by the appropriate supervisor.

References:

Occupational Safety and Health Administration Hepatitis B Vaccination Protection Sheet

Occupational Safety and Health Administration Bloodborne Pathogen Standard 29 CFR part 1910.1030

US Department of Labor-OSHA # 300 & 301

Attachments:

Appendix A-Summary

Appendix B-Routing Directions for Forms

Procedures:

02-ALL-ALL-0393 (MD)

Forms:

Wood County's Worker's Compensation/PERRP Accident/Injury Investigation Report

03-ALL-ALL-0269 03-ALL-ALL-0269c 03-ALL-ALL-0269d 03-ALL-ALL-0067

tar\procedure\md0425

Reviewed: 03/2025

Revised: 05-30-2024

# Wood County Board Developmental Disabilities BLOODBORNE PATHOGENS PROCEDURE

## Appendix A - Summary

- 1. Exposure occurs
  - \*Area cleaned
  - \*Supervisor notified
  - \*Blood and Body Fluids Exposure Report (03-ALL-ALL-0269)
  - \*IR completed
  - \* Wood County's Worker's Compensation/PERRP Accident/Injury Investigation Report, as needed
- 2. Report reviewed by supervisor

Review report for completeness and correctness

If no exposure occurred sign off and route to Human Resource Department

If exposure possibly occurred – Go to Employer Services at Falcon for treatment and follow-up. Take copy of Exposure Report to Employer Services at Falcon and forward Original to HR

- 3. Supervisor investigates incident, completes any needed follow up, completes "Evaluation of Exposure Incident Report" (complete thoroughly including changes indicated and made) and routes report to Human Resource Department within 2 weeks of exposure.
- 4. Agency reviews Exposure Report, completes any needed follow up, signs, and routes to Human Resources to file in confidential medical file.

Reviewed 03/2025

Revised: 05-30-2024

# Wood County Board of Developmental Disabilities ACUTE EXPOSURE TO BLOOD AND BODY FLUIDS

# Appendix B – Routing Directions for Forms

COPIES TO	• N/A	<ul> <li>HR will copy and route to exposed individual and file original in individual's personnel file.</li> </ul>	• N/A	As Usual	• N/A
ORIGINAL COPY	Supervisor or Nurse route to Physician. Physician will review and return to Human Resources.	Employer Services at Falcon will complete and return to Human Resources.	Completed form is sent to Human Resources within 2 weeks of the incident.	Employee completes an IR in Brittco regarding the incident or injury of any individual receiving services	Exposed employee requests from HR only if seeking medical treatment (not needed if only going for a blood test).
FORM	Blood and Body Fluids Exposure Report form 03-ALL-ALL-0269	Health Care Professional's Written Opinion Post Exposure form 03-ALL-ALL-0269c	Bloodborne Pathogen Evaluation of Exposure Incident form 03-ALL-ALL-0269d	Incident Report completed on Brittco	Wood County's Worker's Compensation/PERRP Accident/Injury Investigation Report

Reviewed 03/2025