

**PASSED BY THE CALHOUN COUNTY BOARD OF SUPERVISORS**

**CALHOUN COUNTY  
Employee Protection Policy  
For  
Occupational Exposure to Bloodborne Disease**

DATE: Revised June 8, 1999; June 30, 2009; March 14, 2011; February 21, 2012;  
January 10, 2013, Reviewed February 4, 2014, Revised February 10, 2015,  
Reviewed August 30, 2016.

In efforts to comply with the Occupational Safety and Health Administrations health standards designed to protect workers from occupational exposure to Hepatitis B virus (HBV), Human Immuno-Deficiency Virus (HIV) which causes AIDS, and other bloodborne diseases, the Calhoun County Board of Supervisors has adopted the following policy.

Definitions:

Blood means human blood, human blood components, and products made from human blood.

Bloodborne Pathogens means 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).

Contaminated means the presence or the reasonably anticipated presence of blood or other potentially infectious materials, on an item or surface.

Contaminated Laundry means laundry which has been soiled with blood or other potentially infectious materials on an item or surface.

Contaminated Sharps means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Decontamination means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

Director means the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

Engineering Controls means controls (e.g., sharps disposal containers, self-sheathing needles), safe work practices that isolate or remove the blood borne pathogens hazard from the workplace.

Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

First Aid Provider Unvaccinated for Hep B means an employee who is not assigned to perform routine first aide and who, in the absence of or in addition to, the primary responder responds to an injury resulting from a workplace incident.

Handwashing Facilities means a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

HBV means hepatitis B virus.

HIV means human immunodeficiency virus.

Occupational Exposure means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

Other Potentially Infectious Materials means (1) the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial 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; (2) any unfixed tissue or organ from a human (living or dead); and (3) HIV-containing cell or tissue cultures.

Parenteral means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

Personal Protective Equipment is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts, or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

Regulated Waste means liquid or semi-liquid blood or other potentially infectious materials; contaminated 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; contaminated sharps; and pathological and microbiological wastes containing blood, or other potentially infectious materials.

Source Individual means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.

Sterilize means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

Universal Precautions is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Work Practice Controls means controls that reduce the likelihood of exposure by altering the manner in which a task is performed.

#### A. POLICY

The County will maintain procedures to protect employees from exposure to bloodborne infectious disease. The policy is based on the widespread nature of these viruses and the consequent risk to employees while recognizing testing limitations and the need to maintain confidentiality.

Calhoun County will not discriminate against any individual applicant, employee, customer, or client in compliance with the Americans Disabilities Act as it applies to services to and employment opportunities of disabled individuals.

Employees who believe that they may be at risk of acquiring infection due to working conditions that place them at increased risk should discuss their work responsibilities with their supervisors and personal physician. If it is determined the employee is at risk a written recommendation must be provided by the physician, to the supervisor for appropriate action in accordance with county policies and procedures. If it is determined that the employee is not at increased risk, and the employee refuses, after counseling to provide service or to work with any other employee as instructed, the refusing worker shall be disciplined in accordance with County policies for inappropriate behavior.

Information obtained by Calhoun County about any medical diagnosis, treatment, health or testing and antibody status of employee or clients is sensitive medical information that will be maintained on a confidential basis. Information on a person's medical status will be made available only to those individuals directly involved in the person's care or management and shall not be disclosed or reported to any other persons, except where required or permitted by law. Disciplinary action will be implemented against any employee who inappropriately discloses medical information about any other employee or client and is subject to civil liability for all resulting damage.

#### B. PROCEDURES:

HIV/AIDS, Hepatitis B, or other bloodborne infectious diseases are not transmitted by ordinary work place or social transmission. Persons who are occupationally exposed to blood and body fluids can be protected effectively from the recognized risks of infection of these diseases by the use of appropriate protective equipment and work practices.

## 1. Work Practice and Engineering Controls

- a. Universal Precautions will be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.
- b. Work practice and engineering controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after application of those controls, personal protective equipment shall also be used.
- c. Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure effectiveness.
- d. Proper hand washing is crucial to preventing the spread of infection. Hand washing facilities shall be provided which are readily accessible to employees. When hand washing facilities are not feasible, an antiseptic hand cleanser in conjunction with clean cloths/paper towels, or antiseptic towelettes will be used. Hands shall be washed with soap and running water as soon as feasible.
- e. Employees shall wash their hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of body areas with blood or other potentially infectious materials. Such contact will then be reported immediately to the supervisor and appropriate action taken (see Incident Report/Post Exposure Plan).
- f. Employees shall wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
- g. Contaminated materials shall not be bent, or recapped except as noted. Shearing or breaking of contaminated needles is prohibited. Other contaminated articles will be moved / manipulated as little as possible.

## 2. Personal Protective Equipment

- a. Provision: The County shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, face shields or masks and eye protection, and pocket resuscitation masks.
- b. Use: All employees shall receive orientation/instruction regarding protective equipment specific to their jobs.
- c. Accessibility: Appropriate personal protective equipment shall be readily accessible at the worksite or is issued to employees.
- d. Cleaning, Laundering, and Disposal: The County shall clean, launder, and dispose of personal protective equipment at no cost to the employee.

- e. Repair and Replacement: The County shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.
- f. If a garment is penetrated by blood or other potentially infectious materials, the garment shall be removed immediately, prior to leaving the workplace or as soon as feasible. It shall be placed in a designated area or container for storage, washing, decontamination or disposal.
- g. Gloves: Gloves shall be worn when it can be reasonably anticipated that the employee may have had contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin, and when handling or touching contaminated items or surfaces. After use, gloves will be discarded by the inside out method. Gloves will not be washed or disinfected. General purpose utility gloves (e.g., rubber household gloves) can be used for housekeeping chores, instrument cleaning and decontamination procedures involving potential blood contact. Utility gloves can be decontaminated and reused unless peeling, cracked, discolored, punctured, torn, or other deterioration and then should be discarded.

### 3. Housekeeping:

- a. The County shall ensure that the worksite is maintained in a clean and sanitary condition. A written schedule of cleaning and method of disinfection will be specified within the procedures performed by building maintenance staff.
- b. Cleaning and Decontaminating Spills of Blood and Body Fluids: Disposable gloves shall be worn during the cleaning and decontamination procedures. A chemical germicide approved for "hospital disinfectants" or a solution of one part household bleach to 10 parts water can be used to clean up the spill. Dispose of gloves, towels, and other waste in bags that prevent leakage and are labeled with Biohazard sign.
- c. Laundry. Risk of actual disease transmission from soiled linens is negligible. Hygienic and common sense processing of soiled linens is recommended. Handle as little as possible with minimum agitation. If transported and soiled with blood or body fluids, place and transport in bags that prevent leakage and are labeled with Biohazard sign.
- d. If surfaces or equipment are draped with protective coverings such as plastic wrap or aluminum foil, these coverings should be removed or replaced if they become obviously contaminated. Reusable receptacles such as bins, pails and cans, that are likely to become contaminated must be inspected and decontaminated on a regular basis. If contamination is visible, staff must clean and decontaminate the item immediately, or as soon as feasible.

- e. Should contaminated glassware break, staff needs to use mechanical means such as a brush and dustpan or tongs or forceps to pick up the broken glass - never by hand, even when wearing gloves.
- f. Containers used to store regulated waste must be closable and suitable to contain the contents and prevent leakage of fluids. Containers designed for sharps also must be puncture resistant. Containers must be closed before removal to prevent contents from spilling. If the outside of a container becomes contaminated, it must be placed within, a second suitable container.
- g. Regulated waste must be disposed of in accordance with applicable state and local laws.

#### 4. Communication of Hazards to Employees

- a. Labels and Warnings: Warning labels will be secured to containers of regulated waste containing blood or other potentially infectious materials. Required labels will be purchased and meet standards.

BIOHAZARD: These labels shall be fluorescent orange or orange-red or predominately so, with lettering or symbols in a contrasting color. Required labels are secured as close as feasible to the container by string, wire, adhesive, or others method that prevents their loss or unintentional removal; and red bags or red containers may be substituted for labels.

- b. Information and Training. All employees will participate in an annual training program which must be provided at no cost to the employee and during working hours.
- c. Training shall be provided as follows: Within the first 10 working days of employment but no later than prior to initial assignment to tasks where occupational exposure may take place; and at least annually thereafter.
- d. Annual training for all employees shall be provided within one year of their previous training. Additional training shall be provided when changes such as modification of tasks or procedures or new tasks or procedures affect the employee's occupational exposure. The additional training may be limited to addressing the new exposures created.
- e. Material appropriate in content and vocabulary to educational level, literacy, and language of employees shall be used.
- f. Persons conducting the training will be knowledgeable in the subject matter covered.
- g. Training and educational information will include but not be limited to: the epidemiology of bloodborne diseases, the modes of transmission, universal

blood and body fluid precautions, the types of protective clothing, equipment and work practices appropriate to the tasks, they will perform, where personal protective equipment is kept, how to properly use, handle and dispose of contaminated articles, corrective actions to be taken in the event of spills or personal exposure and the appropriate confidentiality and reporting requirements.

- h. First Aid providers unvaccinated for Hep B will be informed and trained with the above information follow up procedures if an exposure occurs.

#### 5. Classification of Employees by Risk of Exposure

- a. Employees will be categorized according to job related risk exposure.
- b. Category I: Tasks That Involve Exposure to Blood, Body Fluids, or Tissues. All procedures or other job-related tasks that involve an inherent potential for mucous membrane or skin contact with blood, body fluids, or tissues, or a potential for spills or splashes of them are Category I tasks. Use of appropriate protective measures should be required for every employee engaged in Category I tasks.

Employees included in Category I are RN's and Home-health aides and their supervisors and all EMS personnel.

- c. Category II: Tasks That Involve No Exposure To Blood, Body Fluids, Or Tissues, But Employment May Require Performing Unplanned Category I Tasks. The normal work routine involves no exposure to blood, body fluids, or tissues, but exposure or potential exposure may be required as a condition of employment. Appropriate protective measures should be readily available to every employee engaged in Category II tasks.

Employees included in Category II are law enforcement personnel, Homemakers, Maintenance personnel, Physical Therapy, Speech Therapy, Occupational Therapy, Environmental and Conservation workers, Social Services, Landfill personnel, Engineer and Secondary Road personnel.

- d. Category III: Tasks That Involve No Exposure To Blood, Body Fluids, Or Tissues, And Category I Tasks Are Not A Condition Of Employment. The normal work routine involves no exposure to blood, body fluids, or tissues (although situations can be imagined or hypothesized under which anyone, anywhere, might encounter potential exposure to body fluids). Persons who perform these duties are not called upon as part of their employment to perform or assist in emergency medical care or first aide or to be potentially exposed in some other way. Tasks that involve handling of implements or utensils, use of public or shared bathroom facilities or telephones, and personal contacts such as handshaking are Category III tasks. Employees in this category are to report a first aide incident involving the presence of blood or others potentially

infectious materials immediately to their supervisor and initiate an incident report form before the end of the work shift in which the incident occurred.

Employees included in Category III are Board of Supervisors, Auditor, Recorder, Attorney, Treasurer, Departmental Deputies, and all clerical personnel.

## 6. Hepatitis B Vaccine

- a. Regardless of classification/category of the employee by risk of exposure, all employees will be offered the Hepatitis B vaccine, at no cost to the employee. If the employee is uninsured or underinsured, the Hepatitis B vaccine will be paid for by the employee's department.
- b. Hepatitis B vaccine shall be made available when the employee has received the required training and within 10 working days of initial assignment of occupational exposure unless the employee has previously received the Hepatitis B vaccination series, antibody testing has revealed immunity or the vaccine is contraindicated for medical reasons. Participation in a prescreening program is not a prerequisite for receiving the Hepatitis B vaccination.
- c. Employees who initiate the series and separate from employment before the series completion must assume payment responsibility - if they choose to complete the vaccine series.
- d. Employees who refuse the opportunity to be vaccinated with the Hepatitis B vaccine may elect to be vaccinated at a later date.
- e. Employees refusing the Hepatitis B vaccine shall be asked to sign a statement that the vaccine was made available.
- f. If a routine booster dose(s) of Hepatitis B vaccine is recommended by the United States Public Health Service at a future date, such booster dose(s) shall be made available.

## 7. Post Exposure Evaluation and Follow-Up – Look at 7c

- a. Immediately report the exposure to your Supervisor/Department Head, Human Resource Manager or Workers Comp. designee. The Supervisor/Department Head, Human Resource Manager or Workers Compensation designee must immediately implement the post-exposure procedures:
  - If the client suffers an exposure, an Incident Form is completed, following normal guidelines for an Incident Report.
  - If the exposure involves an employee:

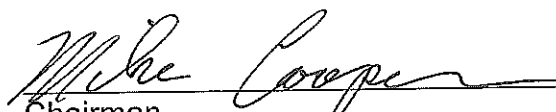


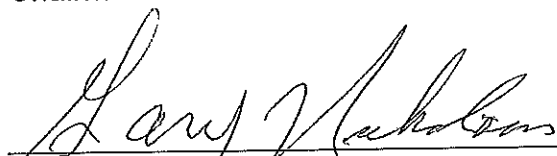
- o Report of Exposure to HIV or Other Infectious Disease is to be completed and
- o A call is made to Company Nurse at 888-770-0928, Code IA012; giving a report of the exposure.
- Necessary forms identified above will be completed as soon as possible but no later than end of the work shift.
  
- b. For accidental percutaneous (needle stick, laceration or bite) or permucosal (ocular or mucous membrane) exposure to blood or body fluids, the decision to provide prophylaxis must include consideration of several factors: 1) whether the source of blood is available, 2) the HBV/HIV status of the source, and 3) the Hepatitis B vaccination and vaccine response status of the exposed person.
  
- c. **Following any such exposure: These next steps should be done immediately. Contact Occupational Health immediately. They will want to see the employee within the hour if possible!**
  
- Contact UnityPoint-Trinity Corporate Health at 515-574-6810 & provide details of the exposure.
- If the source is known, contact and obtain consent from the source to obtain a blood sample to be tested for:
  - o HBsAg (Hepatitis B surface antigen)
  - o HIV (HIV antibodies)
  - o Antigen HCV (Hepatitis C surface antigen)
  - o Ideally this should be done immediately after exposure (if HIV +, exposed person should begin anti-viral treatment within 2-3 hours).
  - o If the source does not consent, continue on to the procedures for the exposed person.
- The exposed person:
  - o Verify Hepatitis B vaccination record.
  - o Verify, has the exposed person ever had a Hepatitis B titer?
  - o Verify has the exposed person had a recent Td or Tdap?
  - o Obtain a blood sample to be tested for: (If the exposed person is a County employee, he/she will be sent to Trinity Corporate Health for the following tests.
  - o After hours, after discussion with supervisor and employee, the employee could seek medical care at Trinity ER. If judgment of employee and supervisor is that exposure is lower risk, could contact Trinity Corporate Health by telephone next working day.
    - HBs (Hepatitis surface antibody and antigen)
    - Baseline HIV
    - HCV (Hepatitis C antibody)

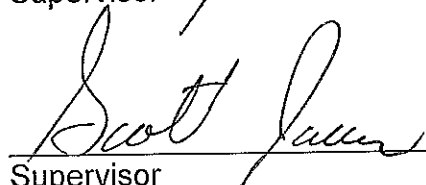
- Liver enzyme / ALT
  - If source is positive for HIV, ideally exposed person would need to begin anti-viral medication within 2-3 hours of the exposure. If prophylactic medication is started, recommend baseline hepatic panel be drawn on employee.
- d. All first aid providers unvaccinated for Hep B who rendered first aid involving the presence of blood or other potentially infectious materials, regardless of whether an actual exposure incident as defined by the standard occurred, shall be offered:
1. The full Hep B vaccination series as soon as possible, but no later than twenty four (24) hours following the exposure, and,
  2. The appropriate post exposure evaluation, prophylaxis and follow-up procedures.
- e. The health care professional responsible for the employee's Hepatitis B vaccination and follow-up evaluation when an exposure incident has occurred will be provided information specified in the standard.
- f. The County shall obtain and provide the employee with a copy of the evaluating health care professional's written opinion within 15 days of the completion of the evaluation.
- g. The Sharps Injury Log will be completed. This is located in the top file cabinet with Health Records at Calhoun County Public Health.
8. Recordkeeping
- a. Medical Records: The County will establish and maintain an accurate record for each employee with occupational exposure, including a record of all first aid incidents involving blood or OPIM in their personnel file. This record will include the employees name who was exposed due to occupation or first aid provision, regardless whether PPE was used and must describe the incident, including date and time. The description must include a determination of whether or not, an "exposure incident" as defined by the standard occurred in addition to the presence of blood or OPIM. Per IDPH direction, Report of Exposure to HIV or Other Infectious Disease form will be completed. These personnel records will be maintained at least 30 years past the duration of employment.
  - b. Training Records: Training records will include: dates of training sessions, contents of sessions, names and qualifications of persons conducting the training, names of persons attending the training, these records will be maintained in personnel files for at least three (3) years from the date the training occurred.

- c. Availability: The County will ensure that all records required to be maintained shall be available upon request to the Assistant Secretary and the Director for examination and copying. Employee training records shall be provided upon request for examination and copying to employees and/or their representatives, to the Director and to the Assistant Secretary upon request, and to anyone having written consent of the employee.

Approved by Calhoun County Board of Supervisors Tuesday, August 30, 2016.

  
Chairman

  
Supervisor

  
Supervisor