

**BLOODBORNE INFECTIOUS DISEASES EXPOSURE CONTROL PLAN
FOR
LIMITED EMPLOYEE EXPOSURE**

May 2020



Note: This document is intended as compliance for MIOSHA Occupational Health rule 325.70001-70018, Bloodborne Infectious Diseases. The basis of this document was provided as an informational service under the authority of Public Act 154 of 1974, it has been updated and made specific for the purpose as the written plan of action related to bloodborne infectious diseases for Community Alliance. This plan is designed to be applicable across the organization and adapted to each individual worksite as needed by the specific needs of the consumers we provide care for. This document should be maintained by the Executive Director and reviewed at least annually. MIOSHA/CET-5230 (02/15) AUTHORITY: P.A. 154 of 1974

Company Name: Community Alliance, dba Community Residence Corporation

Date of Review May 28, 2020

EXPOSURE DETERMINATION

The following employee job classifications at Community Alliance are Category A due to anticipated occupational exposure to blood or other potentially infectious material (OPIM),* regardless of frequency. The exposure determination is made without regard to the use of personal protective equipment:

<u>Category "A" Job Classification</u>	<u>Task</u>
Site Supervisor (see attached job description)	Care of consumers under contract with Washtenaw County Community Mental Health
Direct Care Staff (see attached job description)	Care of consumers under contract with Washtenaw County Community Mental Health

*(*Category A employees have actual or reasonably anticipated exposure to blood or OPIM.)*

Compliance Methods

Universal precautions will be observed in the administrative office and at all field locations aka sites in the provision of first aid, and the housekeeping of any first aid area in order to prevent contact with blood or other potentially infectious material (OPIM*see footnote). All blood and OPIM will be considered infectious regardless of the perceived status of the source individual.

Engineering and work practice controls are limited to handwashing and housekeeping practices. Where scissors are used in a medical procedure and become contaminated they are classified as a contaminated sharp and discarded in approved sharps container or decontaminated.

* Other potentially infectious materials include: A) semen, B) vaginal secretions, C) amniotic fluid, D) cerebrospinal fluid, E) peritoneal fluid, F) pleural fluid, G) pericardial fluid, H) synovial fluid, I) saliva in dental procedures, J) any body fluid that is visibly contaminated with blood, K) all body fluids in situations where it is difficult or impossible to differentiate between body fluids. Urine, feces and vomit are not considered OPIM except in cases (J) or (K) above.

Handwashing facilities are available to the employees who incur exposure to blood or other

potentially infectious materials. MIOSHA requires that these facilities be readily accessible after incurring exposure. Community Alliance Administrative building, handwashing facilities are located: **Kitchen and bathrooms of all work sites.**

Upon providing first aid or incurring exposures when handwashing facilities are not feasible, Community Alliance provide either an antiseptic cleanser in conjunction with a clean cloth/paper towels or antiseptic towelettes found in the first aid kit. If these alternatives are used, then the hands are to be washed with soap and running water as soon as feasible.

After removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.

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 feasible following contact.

Needles

Are not used.

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.

Personal Protective Equipment

All first aid personal protective equipment used in consumer care, first aid or housekeeping involving blood or OPIM at this company 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 OPIM 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 following Personal Protection Equipment is used in this company:

<u>Personal Protective Equipment</u>	<u>Task</u>
Gloves	Medication management, first aid, changing briefs and or/toilet assistance, household cleaning, showering, personal assistance.
Pocket masks	CPR
Surgical Masks, N95 masks	Activities of daily living for clients that test positive for highly infectious diseases

All personal protective equipment will be disposed of by the employer at no cost to employees.

All repairs and replacements will be made by the employer at no cost to employees.

All personal protective equipment will be removed prior to leaving the work area. If visibly contaminated, the equipment shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal: IN THE LINED GARBAGE CONTAINER IN THE KITCHEN OR BATHROOM.

If an employee were to have another person's blood or Other Potentially Infectious Materials (OPIM) splash or soak their clothing, they would make arrangements to remove the contaminated clothing as soon as possible. This clothing would be laundered at the employer's expense. The clothing would be identified as contaminated and any employee, of any employer, exposed to it would be notified and protected from exposure.

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 ADMINISTRATIVE OFFICE. THE HEALTH AND SAFETY SPECIALIST IS RESPONSIBLE TO KEEP GLOVES AT THE WORKSITES AT ALL TIMES IN A LOCATION WELL KNOWN AND EASILY ASSIBLE.

Disposable gloves 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. Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibits other signs of deterioration or when their ability to function as a barrier is compromised.

All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or OPIM materials, as well as the end of the work shift if the surface may have become contaminated since the last cleaning.

Regulated Waste Disposal

All bins, pails, cans, and similar receptacles for regulated waste disposal in the first aid station or any area normally involved in first aid shall be appropriately colored or labeled as containing biohazards and shall be inspected, emptied and decontaminated on a regularly scheduled basis. Note: Disposal of feminine hygiene products and bandages or Kleenex used in self-administered first aid (bloody nose, small cut) are not considered regulated waste and will be disposed of in the normal waste stream. List location of designated biohazard disposal containers and areas:

Standard Operating Procedures

Standard operating procedures (S.O.P.'s) provide guidance and information on the anticipated first aid tasks assigned to our employees. They will be based on Health and Safety procedures and will be utilized in employee training.

Contingency Plans

Where circumstances can be foreseen in which recommended standard operating procedures could not be followed, the employer shall prepare contingency plans for employee protection, incident investigation and medical follow-up. See Appendix A.

Hepatitis B Vaccine

***HBV Vaccination Option for Employers with employees trained to render first aid Category A employees:**

According to OSHA and MIOSHA policies, an employer may elect to postpone offering and administering the HBV vaccine series to Category A designated first aid trained employees if the following conditions exist:

- The primary job assignment of the first aid provider is not the rendering of first aid.
- Any first aid rendered by such persons is rendered only as a collateral duty responding solely to injuries resulting from workplace incidents, generally at the location where the incident occurred.
- Full training and personal protective equipment shall be provided to these employees.
- Provision for a reporting procedure that ensures that all first aid incidents involving the presence of blood or OPIM will be reported to the employer before the end of the work shift during which the first aid incident occurred. The report must include the names of all first aid providers who rendered assistance, regardless of whether personal protective equipment was used and must describe the first aid incident, including the time and date. The description must include a determination of whether or not, in addition to the presence of blood or OPIM, an exposure incident, as defined in the standard.
- Provision for the full HBV vaccination series is to be made available as soon as possible, but no later than 24 hours following an event, to all unvaccinated first aid providers who have rendered assistance in any situation involving the presence of blood or OPIM regardless of whether or not a specific "exposure incident," as defined by the standard, has occurred.
- In the event of a bonafide exposure incident, the portion of the standard relating to post-exposure evaluation and follow-up would apply.

We elect to:

Offer the HBV vaccine series to our designated first aid responder employees at hire.

***Note:** The above HBV vaccine exception does not apply to designated first aid providers who render assistance on a regular basis, for example, at a first aid station, clinic, dispensary or other location where injured employees routinely go for assistance; nor does it apply to any healthcare, emergency, or public safety personnel who are expected to render first aid in the course of their work. These employees must be offered the vaccine prior to exposure

Post-Exposure Evaluation and Follow-Up

When an employee experiences an exposure incident, it must be reported to:

- **Tiffany Daniel-Hill, Health and Safety Specialist**
- **Michele Benson, Supported Living Program Coordinator**
- **Naomi Kennedy, HR Coordinator**

All employees who experience an exposure incident will be offered post-exposure evaluation and follow-up by a licensed physician in accordance with Centers for Disease Control and Prevention guidelines as specified in MIOSHA standard.

This follow-up will include the following:

- documentation of the route of exposure and the circumstances related the incident.
- if possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity.
- results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
- The employee will be offered the option of having their own blood collected for testing of their HIV/HBV serological status. The blood sample will be preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV serological status.
- The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service in consultation with a licensed healthcare professional.
- The employee will be given appropriate, confidential counseling concerning precautions to take during the period after the exposure incident. Counseling on risk reduction and the risks and benefits of HIV testing. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.
- The following person(s) has been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to this policy:

Katherine Grant, Executive Director, Naomi Kennedy, Human Resources Coordinator, Tiffany Daniel-Hill, Health and Safety Specialist

Interaction with Health Care Professionals

An employer shall ensure that the health care professional who is responsible for the hepatitis B vaccination is provided with a copy of these rules and appendices. A written opinion shall be obtained from the health care professional who evaluates employees of this facility. Written opinions will be obtained in the following instances:

- 1) When the employee is sent to obtain the Hepatitis B vaccine.
- 2) Whenever the employee is sent to a health care professional following an exposure incident.

Health care professionals shall be instructed to limit their written opinions to:

- 1) Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident;
- 2) A statement that the employee has been informed of the results of the evaluation, and;
- 3) A statement that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. (Note: The written opinion to the employer is not to reference any personal medical information.)

Training

Training for all Category A 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 an explanation of:

- The MIOSHA standard for Bloodborne Infectious Disease
- Epidemiology and symptomatology of bloodborne diseases
- Modes of transmission of bloodborne pathogens
- This Exposure Control Plan, (i.e. points of the plan, lines of responsibility, how the plan will be implemented, access to the plan, etc.)
- Procedures which might cause exposure to blood or other potentially infectious materials at this facility.
- Control methods which will be used at the facility to control exposure to blood or other potentially infectious materials.
- Personal protective equipment available at this facility and who should be contacted concerning its use.
- Post Exposure evaluation and follow-up
- Signs and labels used at the facility
- Hepatitis B vaccine program at the facility

Training sessions shall afford employees ample opportunity for discussion and the answering of questions by a knowledgeable trainer. The training will be conducted using the Washtenaw County Community Mental Health online training Bloodborne Pathogens, written materials in the staff Tool Box which is administered by the Human Resources Department, port training specific at sites by the Site Supervisor for the consumers served, and annually through the Human Resources Department.

All Category A employees will receive annual refresher training. Note: This training is to be conducted within one year of the employee's previous training.

Recordkeeping

Community Alliance maintains a record for each employee with occupational exposure to include:

- Name
- Social Security Number
- Hepatitis B vaccine from status
- A copy of all results of examinations, medical testing, and follow-up procedures required as part of vaccinations and postexposure follow-up.- Employer shall ensure record confidentiality
- Kept for duration of employment plus 7 years

Training Records:

- Date(s)
- Summary of Contents
- Names and qualifications of trainers
- Names and job titles of all trainees
- Maintain records for three (3) years

Training records shall be kept by **Naomi Kennedy Human Resources Coordinator**

APPENDIX B

Organization and Address

Community Alliance
301 W Michigan Avenue, Ste 102
Ypsilanti, Michigan 48197

HEPATITIS B

Vaccination Declination

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 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 materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Print Name: _____

Job Classification: _____

Signature

Date: _____

Note: Non-material updates to this plan include names and titles of responsible employees.