

WESTCHESTER PUBLIC LIBRARY

BLOOD BORNE PATHOGENS EXPOSURE CONTROL PLAN

(January 16, 2003)

INTRODUCTION

In accordance with the OSHA Blood borne Pathogens Standard, 29 CFR 1910.1030, the following exposure control plan has been developed.

Under section (f) (2) of the standard, hepatitis B vaccination must be offered to all employees who have occupational exposure to blood or other potentially infectious materials (OPIM). (OPIM includes semen, vaginal secretions, brain or spinal fluid, fluids from around the joints, tendons or muscles, fluids from around the heart, lungs or abdominal region, amniotic fluid, any fluid visibly contaminated with blood, or any unidentified fluid.) However, as a matter of policy, violations will be considered de minimis and citations will not be issued when designated employees who have occupational exposure are not offered pre-exposure hepatitis B vaccine if the following conditions exist:

The primary job assignment of such designated employees is not one where occupational exposure is anticipated.

The employer's Exposure Control Plan specifically addresses the provision of the hepatitis B vaccine to all unvaccinated employees who have rendered assistance in any situation involving the presence of blood or OPIM, post-exposure evaluation, prophylaxis and follow-up.

The employer implements a procedure to ensure that all the provisions are complied with if pre-exposure hepatitis B vaccine is not to be given.

EXPOSURE DETERMINATION

Any employee who assists in a medical emergency may incur exposure to blood or OPIM.

COMPLIANCE METHODS

Universal precautions will be observed in order to prevent contact with blood or OPIM. All blood or OPIM will be considered infectious regardless of the perceived status of the source individual.

Work practices will be utilized to eliminate or minimize exposure to employees. Hand washing facilities are available. After removal of protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately, or as soon as feasible, with soap and water for at least 10 seconds. If employees incur exposure to their skin or mucous membranes, those areas shall be washed or flushed with water as appropriate as soon as feasible following contact.

PERSONAL PROTECTIVE EQUIPMENT

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, OPIM, non-intact skin, and mucous membranes. Gloves are to be replaced when torn or punctured or the ability to function as a barrier is compromised. Disposable gloves are not to be reused. Utility gloves may be decontaminated for reuse provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration.

All gloves used at the library will be provided without cost to employees. Gloves will be chosen based on the anticipated exposure to blood or OPIM. The gloves will be considered appropriate only if they do not permit blood or OPIM to pass through or reach the employee's skin, under normal conditions of use and for the duration that they are used.

Gloves are available in the staff supply closet on the main floor of the library. Glove stock can be maintained by placing supply orders with the director.

DECONTAMINATION

All contaminated surfaces (i.e. carpet, shelf) will be decontaminated with an appropriate disinfectant immediately or as soon as feasible after any spill of blood or OPIM.

HEPATITIS B VACCINE

All employees who have been identified as having exposure to blood or OPIM will be offered the hepatitis B vaccine at no cost to the employee unless the employee has previously had the vaccine or prefers to submit to antibody testing which shows the employee to have sufficient immunity.

Employees may go to their personal health provider if available to provide Gamma Globulin* within 4 hours after exposure. Otherwise, employees should go to a local emergency room within 4 hours of exposure. Services can be billed to the library, or the employee can be reimbursed.

* Gamma Globulin provides immediate passive immunity and is not the same as the hepatitis B vaccine.

Employees who decline the hepatitis B vaccine must sign a waiver. Employees who initially decline the vaccine but who later want to have it may then have the vaccine provided at no cost.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

When an employee incurs an exposure incident, it should immediately be reported to the person in charge of the library using an incident report form.

Follow-up to an exposure incident will include the following steps, taken with the aid of health care professionals:

The incident of exposure and the circumstances related to the incident will be documented.

The employee will be offered post-exposure hepatitis B vaccine in accordance with the current recommendations of the U.S. Public Health Service within 24 hours following exposure.

The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.

INTERACTION WITH HEALTH CARE PROFESSIONALS

A written opinion shall be obtained from the health care professional who evaluates an employee in the following instances:

when an employee is sent to a health care professional following an exposure incident
when an employee is sent to obtain the hepatitis B vaccine.

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

whether the hepatitis B vaccine is indicated and if the employee has received the vaccine
whether the employee has been told about any medical conditions resulting from exposure to blood or OPIM.

TRAINING

Training for all employees will be repeated annually and will consist of an explanation and review of this Exposure Control Plan.

RECORD KEEPING

All records required by OSHA will be maintained in the Director's office.