

SAFETY PROGRAM



*Towns of Mapleton,
Castle Hill, and Chapman*

*(207) 764-3754
www.mapleton.me*

Bloodborne Pathogens Exposure Control Plan

Purpose

The purpose of this policy is to assure that Town Personnel cited below perform their duties in accordance with OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030.

Definitions

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

Bloodborne Pathogen - pathologic microorganisms that are present in human blood and can cause disease in humans.

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

Contaminated Sharps - any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, capillary tubes, and blood tubes.

Decontamination - the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item rendered safe for handling, use or disposal.

Occupational Exposure - 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 (OPIM) - the following body fluids: semen, vaginal fluid, synovial fluid, peritoneal fluid, amniotic fluid, saliva, fluid visibly contaminated with blood, and all body fluids in situations where it is impossible to differentiate between body fluids. Any unfixed tissue or organ from a human either living or dead.

Parenteral - piercing the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

Safety Coordinator – That individual designated by the Town Manager to serve as the coordinator of all safety related improvements and initiatives.

Personal Protective Equipment - equipment or clothing worn by an employee for protection against a hazard such as eye wear with side shields, surgical gloves, exam gloves, gowns or aprons. Protective equipment shall not be considered appropriate if it does not prevent blood or OPIM from passing through to reach the employee's work clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of the time which the protective equipment will be needed.

Universal Precaution - according to the concept of universal precaution, all human blood and certain human body fluids are treated as if known to be infectious for human immunodeficiency virus (HIV), hepatitis B virus (HBV), and other bloodborne pathogens.

Applicability

This Policy will apply to all Town Staff, Highway Department and Recreation Department personnel, excepting members of the Fire and Rescue Department. Policies governing Fire and Rescue personnel will be adopted by that department separately.

Administration

The Town's Safety Coordinator will be responsible for the implementation of this policy. This will include the responsibility to revise this policy as necessary and the obligation that all Department Heads/Supervisors are made aware of its requirements. Department Heads or Supervisors will be responsible for insuring that all employees receive proper training and that the necessary safety equipment is available.

Exposure Determination

Should an employee have parenteral or mucous membrane exposure to human blood or OPIM they shall immediately, or as soon as feasible, notify their supervisor. The employee shall then be instructed to seek, if necessary, medical attention. The employee shall complete a statement describing the incident which shall include time, date, what precautions were taken, and source of exposure. This incident report will be submitted to the Safety Coordinator as soon as possible.

The following is a list of all job classifications at our establishment in which all employees have a risk of occupational exposure:

<u>Job Title</u>	<u>Department/Location</u>	<u>Task/Procedure</u>
Lifeguards	Recreation/Pool	First Aid/CPR
Recreation Director	Recreation/Pool	First Aid/CPR

The following is a list of job classifications in which some employees at our establishment have a risk of occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

<u>Job Title</u>	<u>Department/Location</u>	<u>Task/Procedure</u>
Highway - First Responders	Highway/Garage	First Aid/CPR Response

Methods of Compliance/Cleanup

In general, universal precautions will be observed to prevent contact with blood or OPIM. All blood or OPIM will be considered infectious regardless of the perceived status of the source individual.

Cleanup of body fluids will comply with the following procedures:

1. Remove all personnel from contaminated area without having them come into contact with any of the body substance.
2. Put on applicable splash mask and gloves.
3. Apply floor dry. After fluid is absorbed, scoop up floor dry and place both scoop and substance in red biohazard bag.
4. Remove gloves and place in bag.
5. Cover the entire area with a cleaning solution and allow solution to stay in place for approximately 10 minutes.
6. Put on new pair of rubber gloves.
7. Wipe area dry with paper towels and place towels, gloves, and splash mask in the biohazard bag and tie bag securely.
8. Spray with a disinfectant.
9. Wash hands thoroughly with soap and warm water.
10. Bring bag to Fire Department for disposal.
11. Rewash hands.

Required Equipment

1. Disposable rubber gloves
2. Splash mask
3. Floor dry absorbent
4. Disposable floor scoop such as a piece of thin cardboard
5. Floor cleaning solution
6. Disinfectant spray
7. Biohazard bag

Disposal of Contaminated Clothing

1. Remove all contaminated clothing without touching any part of your skin with contaminants if possible. Use rubber gloves.
2. Place clothing and then gloves in a biohazard bag.
3. Wash hands and any part of body that may have come into contact with any of the body substances.
4. If you wish to keep clothes, wash in hot water with a good detergent. Rinse twice, and dry in a hot dryer.
5. If you do not wish to keep clothes, bring to the Fire Department, sealed in biohazard bag.
6. Wash hands or shower as needed.

Hand Washing

Hand washing is still the best method of preventing the spread of germs. All personnel shall wash their hands as soon as possible after removing gloves, either with soap and water or with an antiseptic hand cleaner. If personnel use the antiseptic hand cleaner, they should still wash with soap and water as soon as possible.

Hepatitis B Vaccine

The Towns of Mapleton, Castle Hill and Chapman will offer the Hepatitis B vaccine to all personnel identified by the Safety Coordinator as having a potential exposure risk. This will be offered free of charge to the employee. Personnel declining the shots must sign a waiver indicating such. Personnel who refuse may still receive the shots at a later date if they change their mind. The Fire Chief has the responsibility for offering the vaccine to their respective personnel. The vaccine will be administered by a physician chosen by the Towns.

Training

Training for all employees will be conducted prior to initial assignment where exposure may occur according to the requirements as outlined in the OSHA Standard 1910.1030. Training records shall be kept with the personnel files at the Town Office.

Responsibility of Town Employees

It is the responsibility of each employee to become familiar with the procedures as outlined in this exposure control plan. Disregard for this policy will result in disciplinary action as provided for in the Town's Personnel Policy.

Implemented June 16, 2008 by Town Manager Martin Puckett
Revised June 17, 2014 by Town Manager Jon Frederick

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HEPATITIS B VACCINE DECLINATION (MANDATORY)

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 vaccine, at no charge to myself. However, I decline 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.

Signed: _____

Printed Name: _____ Date: _____

Bloodborne Pathogens Exposure Control Program

ANNUAL ADMINISTRATIVE REVIEW

Date _____

The Bloodborne Pathogens Exposure Control Program has been reviewed for necessary changes.

Responsible Manager: _____

The following changes have been made (if no changes, write "None"):
