



EXPOSURE CONTROL PLAN & BLOODBORNE PATHOGENS

A. Purpose

The purpose of this exposure control plan is to minimize employee occupational exposure to blood or other potentially infectious materials (OPIM), identify employees occupationally exposed to blood or OPIM in the performance of their regular job duties, provide information and training to employees exposed to blood and OPIM, and comply with relevant federal and state laws.

B. Scope

This policy covers all elected officials, employees, applicants, interns, and volunteers. To the extent any applicable collective bargaining agreement differs from the conduct and procedures set forth in this policy, employees represented by that bargaining unit will be subject to the terms set forth in that agreement. To the extent that police department specific policies differ from the conduct and procedures set forth in this policy, employees who work at the police department (both sworn and nonsworn) will be subject to the terms set forth by their department policies.

C. Definitions

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

Blood Borne Pathogens (BBP): Any 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: The presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Exposure Incident: 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.

Sharps: Any object that can penetrate the skin including, but not limited to, needles, IV

tubing with needles attached, scalpel blades, lancets, broken glass, broken capillary tubes and exposed ends of dental wires.

D. Responsibilities

Risk Management

- Administer a comprehensive Exposure Control Plan, review annually and update as needed based on OR-OSHA regulations
- Provide support to department managers, supervisors, and employees in the implementation and maintenance of this program

Human Resources

- Administer the Hepatitis vaccination program and track records in the employee medical files
- Maintain training and exposure records for all City of Woodburn employees
- Ensure the annual blood borne pathogen training is scheduled and offered to the employees.

Managers and Supervisors

- Oversee safe operations and ensure safety procedures are being followed.
- Monitor personnel to insure compliance and the proper use of PPE. If deficiencies are noted, appropriate counseling or retraining shall be provided.
- Provide at no cost to the employees, the equipment and PPE necessary to minimize the risk of disease exposure

Employees

- It is every employee's responsibility to ensure that appropriate personnel protective equipment is being worn and appropriate safety procedures are being followed
- Report exposures or potential exposures to their supervisor or designee immediately

E. Exposure Determination

The City of Woodburn is required to determine the probability of exposure based on job positions and requirements and determine the necessary level of training for each employee. The Exposure Determination table below categorizes the departments probability of being exposed based on job position and general job tasks, and the level of training each employee will receive.

*Collateral Duty – If in the event a Category 2 or 3 employee is potentially exposed to an incidental clean-up situation or removes a discarded needle, the employee will be offered the same hepatitis vaccinations and post exposure follow up outlined in this plan.

F. Procedures, Equipment and Training

1. Compliance Methods:

Universal precautions will be observed in the respective departments to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Work practice controls will be utilized to eliminate or minimize exposure to employees. Where occupational exposure remains after implementation of these controls, personal protective equipment shall also be utilized. The following controls will be utilized:

Category	Probability of Exposure	Departments/Job Positions	Job Tasks	Level of Training
<p>1 - All procedures or job-related tasks may very likely involve an inherent potential for mucous membrane or skin contact with blood, body fluids, or tissues, and/or a potential for spills or splashes of infectious materials.</p>	High Risk	<p>Police Department Chief Sworn Officers Police Evidence Techs Public Works - Sewer</p>	<p>Emergency Response, First Aid/CPR, Handling of crime scene/accident, evidence, Unruly Subjects, Accident Scenes, Clean up activities, Motor Vehicle Accidents</p>	
<p>2 - Under normal work conditions, employees are not exposed to BBP's. However, due to the nature of the department, employees may be exposed to blood or OPIM if an accident or an injury occurs or if BBP materials are identified such as a needle. *Collateral Duty Category</p>	Moderate Risk	<p>Parks and Recreation Department Aquatics Center Parks Maintenance Public Works Street Traffic Fleet Water Operations/ Water Treatment Plant Facilities Maintenance</p>	<p>First Aid/CPR Containment, clean up, or disposal activities</p>	BBP Training
<p>3 (Non "At-Risk" Employees) Involve no exposure to blood, body fluids, or tissues, and Category 1 Tasks are not a condition of employment. *Collateral Duty Category</p>	Low Risk	All other City of Woodburn Departments	If employees in this category identify a BBP spill, needles, or OPIM, they shall notify supervisor immediately.	If employees in this category are selected to be trained, they will receive BBP.

- Sharps Containers shall be examined and maintained on a regular schedule.
- Hand washing facilities shall be made available to the employees who incur exposure to blood or other potentially infectious materials. After removing gloves, hands and other affected skin surfaces shall be washed thoroughly. Personnel should scrub hands briskly for at least 20 seconds with warm water and non-abrasive soap. Hand washing in food preparation areas is prohibited. When facilities are not available, personnel should use a waterless hand cleaner according to manufacturer's directions.

The supervisor shall ensure that after the 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.

The supervisor shall ensure that if employees incur exposure to their skin or mucous membranes, then those areas shall be washed or flushed with water as soon as possible.

Shower facilities are available to city personnel located at the Police Department, Waste Water Treatment Plant, City Hall, and the Aquatic Center. A full shower is highly recommended when there is extensive splash by blood or other potentially infectious materials in hair, on clothing, etc. Thoroughly wash in warm, not hot, water with a non-abrasive soap.

2. Needles

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken. OSHA allows an exception to this if the procedure would require that the contaminated needle be recapped or removed and no alternative is feasible and the action is required by the medical procedure. If such action is required, then the recapping or removal of the needle must be done by the use of a mechanical device or a one-handed technique.

If a needle is found on City property by an individual who does not have training nor is equipped to pick it up, report it to your supervisor immediately.

3. Containers For Reusable Sharps

Contaminated sharps that are reusable are to be placed immediately, or as soon as possible after use, into appropriate sharps containers. The City shall provide sharps containers, which are puncture resistant, labeled with a biohazard label, and are leak proof.

4. 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. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

All procedures will be conducted in a manner, which will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

5. Specimens

Specimens of blood or other potentially infectious materials will be placed in a container, which prevents leakage during the collection, handling, processing, storage, and transport of the specimens.

The container used for this purpose will be labeled or color-coded in accordance with the requirements of the OSHA standard. Any specimens, which could puncture a primary container, will be placed within a secondary container, which is puncture resistant. If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container, which prevents leakage during the handling, processing, storage, transport, or shipping of the specimen.

6. Personal Protective Equipment (PPE)

All personal protective equipment used at the City will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated hazard exposure. The selection of protective equipment will consider exposure to blood or other potentially infectious materials and will be considered appropriate only if it does not permit blood or other potentially infectious materials 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 respective department supervisor shall ensure that appropriate PPE in the appropriate sizes to fit the needs of employees to have occupational exposure is readily accessible at the work site or is issued without cost to identified employees. Hypoallergenic gloves, glove liners, powder less gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

All PPE will be cleaned, laundered, and disposed of by the employer at no cost to the employees. The employer will make all repairs and replacements at no cost to employees.

An employee who requires repair or replacement of the PPE assigned to them shall notify their supervisor as soon as they first become aware of the need for repair or replacement.

An employee is responsible for each of the following:

- All garments that are penetrated by blood shall be removed immediately or as soon as feasible.
- All PPE will be removed prior to leaving the work area.
- When PPE is removed, it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.
- 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; when performing vascular access procedures and when handling or touching contaminated items or surfaces.
- 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 barrier is compromised.

Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, spray matter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

Situations that would require such protection are as follows:

- Suspected illicit drug manufacturing sites
- Retrieving evidence
- At lift station, manhole or sewer where spray from flush truck
- At lift station if pipe broke

7. Housekeeping

Facilities personnel shall be responsible for coordinating the cleaning and decontamination of the facilities and Fleet shall be responsible for coordinating the cleaning and decontamination of the vehicles.

The City may utilize restoration services for BBP clean-up that is out of the cities scope. Such instances may include when blood or OPIM has saturated carpeting, upholstery, or other fabric materials, or if walls, wood, or concrete have been affected by large amounts infectious materials. The department supervisor, manager, or designee shall initiate and authorize the additional services as needed.

All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or other potentially

infectious materials, as well as the end of the work shift if the surface may have become contaminated since the last cleaning.

All bins, pails, cans, and similar receptacles shall be inspected and decontaminated on a regular scheduled basis or as needed by the respective building's facilities coordinator.

Any broken glassware that may be contaminated will not be picked up directly with the hands.

8. Regulated Waste Disposal

Disposable sharps

Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are closable, puncture resistant, leak proof on sides and bottom and labeled or color coded.

During use, containers for contaminated sharps shall be easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found.

The containers shall be maintained upright throughout use and replaced routinely and shall not be allowed to overfill. When moving containers of contaminated sharps from the area of use, the employee performing the task shall ensure that the containers shall be closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

The container shall be placed in a secondary container if leakage of the primary container is possible. The secondary container shall be closeable, constructed to contain all contents and prevent leakage during handling, storage and transport, or shipping. The second container shall be labeled or color-coded to identify its contents.

Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner, which would expose employees to the risk of percutaneous injury.

Other Regulated Waste: Shall be placed in containers, which are closeable, constructed to contain all contents and prevent leakage of fluids during handling, storage, transportation or shipping. The waste must be labeled or color-coded and closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport or shipping.

9. Laundry Procedures

Laundry contaminated with blood or other potentially infectious material will be handled as little as possible. Such laundry will be placed in appropriately marked bags at the location where it was used. Such laundry will not be sorted or rinsed in the area of use. Contaminated clothing should not be taken home to be washed. The department supervisor shall coordinate cleaning or disposal of contaminated laundry.

10. Hepatitis B Vaccine and Post-Exposure Evaluation and Follow-up

The City will offer select immunizations to reduce the risk of contracting certain communicable diseases. This program is based on individual risk and job duties.

Hepatitis B vaccination is free of charge to all “high risk employees”. Other City employees who are not required to perform high or moderate risk activities, such as provide first aid or clean-up BBP spills, will have available to them the Hepatitis B vaccination series free of charge if they have a work-related exposure to blood or other potentially infectious material. Although the City of Woodburn cannot require anyone to receive the immunization, it is strongly recommended.

Any at risk or exposed employee who does not wish to have the vaccination when offered will be required to sign a waiver specifying his/her decision. At any time thereafter, the employee may revoke the waiver and receive the indicated vaccination.

Those who receive the vaccination series may receive Hepatitis B Antibody testing to ensure vaccination coverage and Hepatitis B booster doses when appropriate at no cost to the employee.

11. Follow-up Procedures

An Employee shall notify his/her supervisor immediately if an accidental needle stick or cut occurs, exposing the worker to body fluids, or whenever blood exposure occurs. Employees’ supervisor will refer the employee to their private physician or to our local health care facility for a complete medical evaluation. The employee shall complete an Incident/Accident report and a Bloodborne Pathogens Post-Exposure Medical Evaluation and Follow-Up Consent/Declination Form.

The treating physician or healthcare facility will be provided with:

- A copy of the Bloodborne Pathogens rule, CFR 1910.1030.
- A copy of the Incident/Accident Report.
- Any medical records on the exposed employee regarding HBV vaccine status.

Healthcare Professional’s Written Opinion

The employer shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation. The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:

- Whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination;
- That the employee has been informed of the results of the evaluation; and
- That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.

All other findings or diagnoses shall remain confidential and shall not be included in the written report.

Treatment will be sought as soon as practical but at least within 24 hours of the incident.

- Treatment involves information, if possible, about the source person and employee's medical condition and vaccination status.
- Once an exposure has occurred, a blood sample will be drawn after consent is obtained from the source individual unless identification is infeasible. The blood will be tested for hepatitis B and antibody to HIV as soon as feasible. The arrangement to obtain consent and testing will be performed by the Human Resource Department in conjunction with hospital, coroner or treating Physician. (The physician or clinic will provide the consent form.)
- Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity of the infectious status of the source individual. This will be done by the health care professional treating the employee.
- An exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained. If baseline blood is drawn, but the employee does not consent for HIV serologic testing, the sample shall be preserved for at least 90 days. If within 90 days of the exposure incident, the employee elects to have the sample tested, such testing will be done as soon as feasible. Additional HIV follow-up testing shall be offered based on U.S. Public Health Services recommended schedule. Currently that includes a 6 week, 12 week and 6 month HIV test.

12. Recordkeeping

A confidential record concerning employee exposure to HIV and/or HBV will be kept in

the employee's medical files for the duration of employment plus 30 years law.

All information regarding individual exposure, possible exposure, or positive results of HIV and/or HBV shall be considered confidential. Employees will be informed on a need to know basis only by medical personnel.

13. Information and Training

Training shall be provided for all employees that may have occupational exposure to blood borne pathogens. This training is mandatory and shall be repeated annually. Each employee taking part in the training shall sign a verification of attendance at the end of the course.

14. Review of Policy and Procedures

This policy shall be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

G. Forms

BPP Post Exposure Consent/Declination Form

H. References

OSHA Bloodborne Pathogen standard, CFR 1910.1030

Adopted: January 2023