

Title:	<b>Bloodborne Pathogens</b>	
Purpose:	To establish a bloodborne pathogen control program for City and County of Honolulu employees to eliminate or control occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV) and other bloodborne pathogens.	
Issued by:	Industrial Safety and Workers' Compensation	Date: February 15, 2005
References:	Hawaii Administrative Rules (HAR), Title 12, Chapter 12-205.1, Bloodborne Pathogens; CS Circular 16-92 (10-15-92); CS Memo, Subject: Bloodborne Pathogen Policy Supplement (7-11-96)	

## I. **POLICY**

The City and County of Honolulu (City) will administer a continuing and effective safety program to control employee exposure to bloodborne pathogens to comply with the Hawaii Occupational Safety and Health Law, Chapter 12-205.1.

## II. **APPLICABILITY**

This policy is applicable to the Division of Health Services, Department of Human Resources (DHR); Honolulu Fire Department; Honolulu Police Department; Department of Parks and Recreation; Medical Examiner's Office; and the Department of Emergency Services. Other departments and agencies may be required to follow this policy if their employees are subject to occupational exposure to bloodborne pathogens in the performance of their duties.

## III. **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 and human immunodeficiency virus.

"Engineering controls" means controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineering sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogen hazard from the workplace.

"Licensed healthcare professional" means a person whose legally permitted scope of practice allows him or her to perform independently the activities required for HBV vaccination and post-exposure evaluation and follow-up.

"HBV" means hepatitis B virus.

"HIV" means human immunodeficiency virus.

“Needleless systems” means a device that does not use needles for:

1. The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established;
2. The administration of medication or fluids; or
3. Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.

“Other Potentially Infectious Materials” means:

1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluids, 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 (other than intact skin) from a human (living or dead); and
3. HIV-containing cell or tissue cultures, organ cultures and HIV or HBV containing culture medium or other solutions, and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

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

“Personal Protective Equipment (PPE)” means specialized clothing or equipment worn by an employee for protection against a hazard (e.g., gloves, eye protection, gowns, caps, and coats).

“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. Examples include, but are not limited to, hospital patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

“Universal precautions” means an approach to infection control where all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV and other bloodborne pathogens.

“Work control practices” means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

#### IV. **RESPONSIBILITIES**

Specific responsibilities for the bloodborne pathogen control program are established as follows:

##### **B. Department of Human Resources (DHR)**

1. Administer and monitor the bloodborne pathogen policy.
2. Review and update the program as changes occur in the law.
3. Advise and assist departments and agencies in implementing their programs.
4. Review and approve all department and agency Exposure Control Plans for compliance with Chapter 12-205.1, HAR.
5. Review department and agency programs periodically.

##### **C. DHR Division of Health Services; Honolulu Fire Department; Honolulu Police Department; Department of Parks and Recreation; Medical Examiner's Office; Department of Emergency Services; and other departments and agencies, as appropriate**

Department and agency heads are responsible to comply with the provisions of this policy and Chapter 205.1, HAR. Each department or agency shall have a written Exposure Control Plan designed to eliminate or control employee exposure to bloodborne pathogens. The plan shall be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure. The plan shall include at a minimum, the following:

1. An exposure determination of tasks and procedures where there is actual or anticipated occupational exposure to blood or other potentially infectious materials. The exposure determination shall be made without regard to the use of PPE and shall include:
  - a) A list of all job classifications where all employees have occupational exposure;
  - b) A list of job classifications where some employees have occupational exposure; and
  - c) A list of all tasks and procedures or groups of closely related tasks and procedures where occupational exposure occurs, the procedures that must be followed and PPE that must be worn (see Attachment A, Sample Worker Protection Against HIV and HBV Transmission).
2. Procedures requiring City employees to follow universal precautions when providing emergency care since medical history and examination cannot identify patients infected with HIV, HBV or other bloodborne pathogens.

3. Engineering and work practice controls and sound personal hygiene practices to minimize or eliminate employee exposure.
4. Provisions for use of PPE such as gloves, gowns, laboratory coats, face shields, masks, eye protection, mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. PPE shall be provided by the department or agency and used by the employee.
5. Provisions for maintaining the worksite in a clean and sanitary condition. A written cleaning and decontamination schedule shall be implemented based on the type of surface to be cleaned, type of soil present, and the tasks and procedures being performed. Warning labels shall be affixed to containers of infectious waste using the accepted biohazard label.
6. Provisions for training employees covered by this policy at the time of their assignment and annually thereafter. The training program shall be tailored to the tasks performed in the work environment and requirements of Chapter 12-205.1, HAR. Training records will include the name of instructor(s), names of persons attending the session, date(s) of training and contents or summary of the training material. Records shall be kept for three years.
7. Written reporting procedures for all exposure incidents. For each exposure incident, a report will be made to evaluate engineering controls, work practices, and PPE and clothing worn at the time of the incident; to identify control failures; and to recommend corrective measures. The department or agency head will approve the recommended corrective measures. A copy of the written evaluation will be placed in the exposed employee's medical record (see Attachment B, Post Exposure Evaluation and Follow-up).
8. A medical surveillance program implemented in coordination with the DHR Division of Health Services for employees covered under this policy. This program will require:
  - a) A medical evaluation prior to job assignment to ensure the employee's ability to wear PPE and receive vaccinations.
  - b) A HBV vaccination to be available within 10 working days of initial assignment. HBV vaccination declinations will be documented (see Attachment C, Hepatitis B Vaccination Declination).
  - c) A post exposure counseling program for any employee exposed to a source individual who has AIDS, who is found to be HIV positive and who refuses testing.
9. Provisions incorporating requirements of the Needlestick Safety and Prevention Act to select safer needle devices as they become available and to involve employees in identifying and choosing these devices. A sharps injury log must be maintained to record injuries from contaminated sharps while protecting the privacy of those employees who suffer these injuries.

#### **D. DHR Division of Health Services**

Develop and implement a written Bloodborne Pathogen Surveillance Program to comply with this policy and Chapter 12-205.1, HAR.

1. Provide required medical evaluations under the supervision of a licensed health care professional and for laboratory tests conducted by an accredited laboratory.
2. Provide pre-assignment medical evaluations to employees prior to assignment to positions covered by this policy.
3. Help departments and agencies develop and implement HBV vaccination programs and supervise HBV vaccination of employees with occupational exposure in the performance of their duties.
4. Provide for post exposure counseling and treatment to any employee exposed to a source individual who has AIDS, who is found to be HIV positive or who refuses testing.
5. Maintain medical records for the duration of employment plus 30 years as required by Chapter 12-205.1, HAR.
6. Provide professional medical advice and assistance to departments and agencies implementing this policy.

#### **E. Employee**

1. Follow the procedures and practices for bloodborne pathogens established by the department to comply with this policy and Chapter 12-205.1, HAR.
2. Report exposure incidents promptly to the employer using the City's Report of Industrial Injury or Illness to preserve rights under workers' compensation.

#### **IV. GOOD SAMARITAN ACTS**

Employees exposed to blood or other potentially infectious materials while helping members of the public or fellow employees shall report the incidents promptly on form DHR-ISWC-WC-1, "Report of Industrial Injury or Illness." Departments shall make post exposure evaluation, counseling and treatment available to these employees as described in Paragraph IV, B, 7 and Attachment B of this policy. Employees performing "Good Samaritan Acts" are usually employees who are not members of a first-aid team or who are not expected to render medical assistance as a job duty.

#### **V. PROGRAM COSTS**

Each department and agency is responsible for covering costs associated with their program.

## ATTACHMENT A

### Sample Worker Protection Against HIV and HBV Transmission

#### EXAMPLES OF RECOMMENDED PERSONAL PROTECTIVE EQUIPMENT FOR WORKER PROTECTION AGAINST HIV AND HBV TRANSMISSION (1) IN PRE-HOSPITAL (2) SETTINGS

<i>Task or Activity</i>	<i>Disposable Gloves</i>	<i>Gown</i>	<i>Mask (3)</i>	<i>Protective Eyewear</i>
Bleeding control - spurting blood	Yes	Yes	Yes	Yes
Bleeding control - minimal bleeding	Yes	No	No	No
Emergency childbirth	Yes	Yes	Yes, if splashing likely	Yes, if splashing likely
Drawing blood	Yes	No	No	No
Starting intravenous line (IV)	Yes	No	No	No
Endotracheal intubation esophageal obturator use	Yes	No	No, unless splashing likely	No, unless splashing likely
Oral/nasal suctioning manually cleaning airway	Yes (4)	No	No, unless splashing likely	No, unless splashing likely
Handling and cleaning instruments with microbial contamination	Yes	No, unless soiling likely	No	No
Measuring blood pressure	No	No	No	No
Measuring temperature	No	No	No	No
Giving an injection	No	No	No	No

- (1) The examples provided in this table are based on application of universal precautions. They are intended to supplement rather than replace recommendations for routine infection control, such as hand washing and using gloves to prevent gross microbial contamination.
- (2) Defined as settings where delivery of emergency health care takes place away from a hospital or other health care facility.
- (3) Refers to protective masks to prevent exposure of mucous membranes to blood or other potentially contaminated fluids.
- (4) While not clearly necessary to prevent HIV or HBV transmission unless blood is present, gloves are recommended to prevent transmission of other agents (e.g., herpes simplex).

## **ATTACHMENT B**

### **Post-Exposure Evaluation and Follow-up Employee, Employer, Health Care Professional (HCP)**

When an exposure incident occurs:

#### **Employee**

- Reports incident to employer
- Receives copy of HCP's written opinion

#### **Employer**

- Directs employee to HCP
- Sends HCP:
  - A copy of the Bloodborne Pathogen Standard
  - Employee job description
  - Incident report (route, circumstances, etc.)
  - Source individual's HBV/HIV status (if known)
  - Employee's HBV vaccine status and other relevant information
- Documents events on OSHA and City workers' compensation forms (as applicable)
- Receives HCP's written opinion
- Provides copy of HCP's written opinion to employee (within 15 days of receipt of completed evaluation)

#### **Health Care Professional**

- Evaluates exposure incident (**CONFIDENTIAL**)
- Arranges for testing of employee and source individual, if not already known (**CONFIDENTIAL**)
- Notifies employee of results of all testing (**CONFIDENTIAL**)
- Provides counseling (**CONFIDENTIAL**)
- Provides post-exposure prophylaxis (**CONFIDENTIAL**)
- Evaluates reported illness (**CONFIDENTIAL**)
- Sends the HCP written opinion to employer documenting **ONLY** that employee was informed of evaluation results, of the need for further follow-up and whether HBV vaccine is indicated and received

**ATTACHMENT C**

**Hepatitis B Vaccination Declination**

**Mandatory**

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk to 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 the hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B virus, 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 the hepatitis B vaccine, I can receive the vaccination series at no charge to me.

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Signature of Employee

Date