BT Blood-Borne Pathogen Exposure Control Policy (Summary)

The purpose of the BT Blood-Borne Pathogen Exposure Control Policy is to “reduce occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV), and other blood-borne pathogens” that employees may encounter in the workplace.

There are several general principles to be followed when working with or exposed to blood-borne pathogens:

Minimize all exposure to blood-borne pathogens.

Never underestimate the risk of exposure to blood-borne pathogens.

Institute as many Work Practice and Engineering Controls as possible to eliminate or minimize employee exposure to blood-borne pathogens.

BT has implemented this policy to meet the letter and intent of the OSHA Blood-Borne Pathogens Standard codified as 29 CFR 1910.1030. The objective of this policy is twofold:

To protect BT employees from the health hazards associated with blood-borne pathogens.

To provide appropriate treatment and counseling should an employee be exposed to blood-borne pathogens.

Having well informed and educated employees is extremely important when attempting to eliminate or minimize employees' exposure to blood-borne pathogens. All employees who have the potential for exposure to blood-borne pathogens will undergo a comprehensive training program and receive appropriate health and safety information on this issue.

One of the keys to implementing a successful exposure control policy is to identify exposure situations employees may encounter. To facilitate this in BT operations, the following lists have been prepared:

Job titles of Electronic Installer, Pipe Fitter, Specialist, and Group Operations Supervisor will typically have exposure based on the type of job sites to which they are assigned. Hospitals, medical research labs, health emergency buildings, and prisons are examples of job sites with exposure occurring.

Job titles such as Project Engineer, Sales Engineer, or Supervisor may have occasional exposure, and should also be trained in minimizing occupational exposure to blood-borne pathogens.

The Exposure Control Officer will work with department managers and supervisors to revise and update these lists as BT tasks, procedures, and classifications change.

There are five areas that must be addressed in order to effectively eliminate or minimize exposure to blood-borne pathogens in company operations:

Using universal precautions

Establishing appropriate Engineering Controls

Implementing appropriate Work Practice Controls

Using necessary Personal Protective Equipment (PPE)

Implementing appropriate housekeeping procedures

Each of these is reviewed with BT employees during their blood-borne pathogens related training (see “Information and Training,” section 6.6). By rigorously following the requirements of OSHA’s Blood-Borne Pathogens Standard in these five areas, BT will eliminate or minimize employees’ occupational exposure to blood-borne pathogens as much as possible.

Universal Precautions

The branches have begun the practice of “Universal Precautions.” As a result, all human blood and body fluids such as semen and vaginal secretions are treated as if they are known to be infectious for HBV, HIV, and other blood-borne pathogens.

Where it is difficult or impossible to differentiate between body fluid types, it should be assumed all body fluids are potentially infectious.

The Exposure Control Officer is responsible for overseeing the BT Universal Precautions Program.

Engineering Controls

The use of Engineering Controls can eliminate or minimize employee exposure to blood-borne pathogens. Employees shall use cleaning, maintenance, and other equipment that is designed to prevent contact with blood or other potentially infectious materials.

The Exposure Control Office periodically works with department managers and supervisors to review tasks and procedures performed in BT operations where Engineering Controls can be implemented or updated. As part of this effort, a survey should be completed for identifying:

Operations where Engineering Controls are currently employed

Operations where Engineering Controls can be updated

Operations currently not employing Engineering Controls, but where these controls could be beneficial

Work Practice Controls

Branches shall use a number of Work Practice Controls to help eliminate or minimize employee exposure to blood-borne pathogens. The Exposure Control Officer is responsible for overseeing the implementation of these Work Practice Controls in conjunction with department managers, supervisors, and group training coordinators.

The following Work Practice Controls are part of the BT Blood-Borne Pathogens Compliance Program.

Employees must wash their hands immediately, or as soon as feasible, after removal of potentially contaminated gloves or other Personal Protective Equipment. Hand washing facilities shall be available for their use at customer sites and the office. If hand washing facilities are not available, BT will provide antiseptic solutions and towelettes for employee use.

Following any contact of body areas with blood or any other potentially infectious materials, employees must wash their hands and any other exposed skin with soap and water as soon as possible. They should also flush exposed mucous membranes with water.

Contaminated needles and other contaminated sharps are not to be bent, recapped, or removed unless:

there is no feasible alternative
the action is required by specific medical procedure
in the two situations above, the recapping or needle removal must be accomplished through the use of a medical device or a one-handed technique

Contaminated reusable sharps are to be placed in appropriate containers immediately or as soon as possible after use.

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses is prohibited in work areas where there is potential for exposure to blood-borne pathogens.

Food and drink must not be kept in refrigerators, freezers, on countertops, or in other storage areas where blood or other potentially infectious materials are present.

All procedures involving blood or other infectious materials must minimize splashing, spraying, or other actions generating droplets of these materials.

If outside contamination of a primary specimen container occurs, that container must be placed within a second leak-proof container, appropriately labeled, for handling and storage. (If the specimen can puncture the primary container, the secondary container must be puncture-resistant as well.)

Equipment which becomes contaminated must be examined prior to servicing or shipping, and decontaminated as necessary (unless it can be demonstrated that decontamination is not feasible).

An appropriate biohazard warning label must be attached to any contaminated equipment, identifying the contaminated portions.

Information regarding the remaining contamination must be conveyed to all affected employees, the equipment manufacturer, and the equipment service representative prior to handling, servicing, or shipping.

For new employees or when an employee changes jobs within the branch, the following process takes place to ensure that they are trained in the appropriate Work Practice Controls:

The employee's job classification and the tasks and procedures that they will perform are checked against the job classification and task lists identified in this policy (section 6.1).

Based on this "cross-checking," the new job classifications and/or tasks and procedures which may bring the employee into occupational exposure situations are identified.

The employee is then trained by the Branch Safety Coordinator or another instructor regarding any Work Practice Controls with which the employee is not familiar.

Personal Protective Equipment

The Branch Safety Coordinator, working with department managers and supervisors, is responsible for ensuring that all vehicles and work areas have appropriate Personal Protective Equipment available to employees.

BT employees must be trained in the use of appropriate Personal Protective Equipment for their job classifications and the tasks/procedures they perform. Initial training about Personal Protective Equipment is completed in the branch office at time of hire. Additional training is provided, when necessary, if an employee takes a new position or new job functions are added to their current position.

To ensure that Personal Protective Equipment is not contaminated and is in the appropriate condition to protect employees from potential exposure, BT adheres to the following practices:

All Personal Protective Equipment is periodically inspected, and repaired or replaced as needed to maintain its effectiveness. BT provides all Personal

Protective Equipment to employees at no cost as appropriate for customer sites that require same. The only exception is safety shoes, which, if required, will be partially paid for by the company up to $75 per pair per year.

Reusable Personal Protective Equipment is cleaned, laundered, and decontaminated as needed (by BT branch at branch expense).

Single-use Personal Protective Equipment (or equipment that cannot, for whatever reason, be decontaminated) is disposed of by leaving it at the job site where it was used and disposing of it in the proper waste stream.

BT employees must adhere to the following practices when using their Personal Protective Equipment:

Any garments penetrated by blood or other infectious materials are removed immediately, or as soon as feasible.

All potentially contaminated Personal Protective Equipment is removed prior to leaving a work area or accident/incident site if possible (or as soon as feasible).

Gloves are to be used for work in the following circumstances: whenever employees anticipate hand contact with potentially infectious materials when handling or touching contaminated items or surfaces

Disposable gloves are replaced as soon as practical after contamination or if they are torn, punctured, or otherwise lose their ability to function as an “exposure barrier.”

Utility gloves are decontaminated for reuse unless they are cracked, peeling, torn, or exhibit other signs of deterioration, at which time they are disposed of.

Masks and eye protection (such as goggles, face shields, etc.) are used whenever splashes or sprays may generate droplets of infectious materials.

Protective clothing (such as a coat) is worn whenever there is potential exposure to the body.

Housekeeping

Maintaining equipment and the facility in a clean and sanitary condition is an important part of the Blood-Borne Pathogens Compliance Program. To facilitate this, the Branch Safety Coordinator shall set up a written schedule for cleaning and decontamination of equipment and the appropriate areas of the facility. The schedule shall provide the following information:

The equipment or area to be cleaned/decontaminated

Day and time of scheduled work

Cleansers and disinfectants to be used

Any special instructions that are appropriate

Using this schedule, BT employees shall perform the following housekeeping tasks:

All equipment and surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials:
after completion of medical procedures
immediately (or as soon as feasible) when surfaces are overly contaminated
after any spill of blood or infectious materials
at the end of the work shift if the surface may have been contaminated during that shift

Protective coverings (such as linens, plastic trash bags or wrap, aluminum foil, or absorbent paper) are removed and replaced:
as soon as it is feasible when overly contaminated

at the end of the work shift if they may have been contaminated during the shift

All trash containers, pails, bins, and other receptacles intended for use routinely are inspected, cleaned, and decontaminated as soon as possible if visibly contaminated.

Potentially contaminated broken glassware is picked up using mechanical means such as dustpan and brush, tongs, forceps, etc.

Contaminated reusable sharps are stored in containers that do not require “hand processing.”

The Branch Safety Coordinator is responsible for setting up the cleaning and decontamination schedule and making sure it is carried out within BT operations.

BT employees must also be very careful in handling regulated waste (including used bandages, disposed of Personal Protective Equipment, and other potentially infectious materials). The following procedures are used with all of these waste types:

They are discarded or “bagged” in containers that are:
closeable
puncture-resistant if the discarded materials have the potential to penetrate the container
leak-proof if the potential for fluid spill or leakage exists
red in color or labeled with the appropriate biohazard warning label

Containers for this regulated waste are placed in appropriate job site locations within easy access of employees and as close as possible to the sources of the waste.

Waste containers are maintained upright, routinely replaced, and not allowed to overfill.

Contaminated laundry is handled as little as possible and is not sorted or rinsed where it is used.

Whenever employees move containers of regulated waste from one area to another, the containers are immediately closed and placed inside an appropriate secondary container, if leakage is possible from the first container.