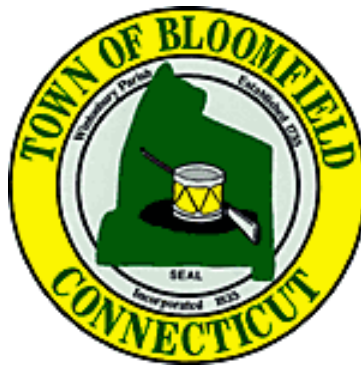


**TOWN OF BLOOMFIELD
AND
BLOOMFIELD BOARD OF EDUCATION**



**BLOODBORNE PATHOGENS
EXPOSURE CONTROL PLAN**

September 5, 2006

POLICY

The Town of Bloomfield and the Bloomfield Board of Education are committed to providing a safe and healthful work environment for our entire staff. In pursuit of this endeavor, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document to assist our Town/BOE in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- * Determination of employee exposure
- * Implementation of various methods of exposure control, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping
- * Hepatitis B vaccination
- * Post-exposure evaluation and follow-up
- * Communication of hazards to employees and training
- * Recordkeeping
- * Procedures for evaluating circumstances surrounding an exposure incident

The methods of implementation of these elements of the standard are discussed in the subsequent pages of this ECP.

PROGRAM ADMINISTRATION

*The BBP Program Administrator is responsible for the implementation of the ECP and will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures to include safer medical devices, work practices, administrative controls and personal protective, which are evaluated by users. Review and update of the plan also reflects changes in technology that eliminate or reduce exposures to bloodborne pathogens.

Contact person/phone number: EMS Coordinator, 860-243-3482, ext. 10

* Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

* Departmental BBP Coordinators will maintain and provide all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard and will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

Departmental BBP Coordinators are:

BOE Facilities Services	Director of Facilities	860-769-4224
BOE Athletic Dept.	Athletic Director	860-286-2630
BOE Pupil Services	Director of Pupil Services	860-769-4262
Early Learning Center	Executive Director	860-243-2665
EMS	EMS Coordinator	860-243-3482, ext. 10
Leisure Services	Administrative Analyst	860-243-2923
Facilities Services	Director Facilities Operations	860-769-3596
Police	EMS Coordinator	860-243-3482, ext. 10
Public Works	Public Works Superintendent	860-242-3439
Social and Youth Services	Senior Social Worker	860-242-1895, ext. 112

* Town and BOE respective Human Resource Depts. will be responsible for ensuring that appropriate OSHA records are maintained.

Town contact location/phone number: Personnel Assistant, (860) 769-3584.

BOE contact location/phone number: Benefits Coordinator, (860) 769-4246.

* Departmental BBP Coordinators will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives. Contact locations/phone numbers are listed above.

EMPLOYEE EXPOSURE DETERMINATION

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

DEPARTMENT	JOB TITLE
Board of Education	Registered Nurses
Board of Education	Athletic Coaches
Board of Education	Athletic Trainers
Board of Education	Paraprofessionals
Board of Education	Special Education Teachers
Board of Education	Custodians
Board of Education	Security

DEPARTMENT

JOB TITLE

Early Learning Center
Early Learning Center
Early Learning Center
Early Learning Center
Early Learning Center
Early Learning Center

Director
Assistant Director
Teacher
Assistant Teacher
Teacher's Aide
Office Manager

EMS

All

Leisure Services
Leisure Services
Leisure Services
Leisure Services
Leisure Services
Leisure Services
Leisure Services
Leisure Services

Director of Leisure Services
Supervisor of Recreation
Administrative Analyst
Administrative Clerk
Pool Staff
Tennis Staff
Community Center Supervisors
Summer Camp Staff

Facilities Services
Facilities Services
Facilities Services

Manager of Facilities
Custodians
General Maintenance

Police
Police
Police
Police
Police
Police

Chief
Captain
Lieutenant
Sergeant
Detective
Patrol Officer

Public Works
Public Works

Fleet Services Employees
Field Operations Employees

Social and Youth Services
Social and Youth Services
Social and Youth Services
Social and Youth Services
Social and Youth Services

Director of Social and Youth Services
Senior Social Worker
Social Worker
Youth Services Coordinator
Part-Time Youth Services Staff

The following is a list of areas in which **some** employees at our establishment have occupational exposure

Board of Education
Board of Education
Board of Education

Teachers
Tutors
Food Service Workers

The following is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

DEPARTMENT	TASK/PROCEDURE
Board of Education Coaches	First Aid
Board of Education Custodians	Clean Up
Board of Education Food Services	Clean Up
Board of Education School Nurses	First Aid
Board of Education Security	Altercation Intervention
Board of Education Teachers, Tutors and Paraprofessionals	Personal Care of Special Needs Students
Early Learning Center	First Aid/CPR Medication Administration
EMS	Patient Care
Leisure Services	First Aid
Leisure Services	Clean Up
Facilities Services	Clean Up
Police	First Aid/Medical Care
Police	Altercation Intervention
Public Works	Working with Contaminated Equipment (Vehicles)
Public Works	Trash Collection
Social and Youth Services	Home Visits
Social and Youth Services	Supervision of Youth Activities and Trips

Part-time, temporary, contract, per diem employees and volunteers are covered by the standard.

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions

All at-risk employees will utilize universal precautions.

Exposure Control Plan

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees have an opportunity to review this plan at any time during their work shifts; the plan will be available and accessible at the at-risk employees' respective workplaces, as well as on the Town of Bloomfield website, www.bloomfieldct.org. If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

Engineering Controls and Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

Engineering Controls

- Handwashing facilities (or antiseptic hand cleansers), which are readily accessible to all employees who have the potential for exposure.
- Containers for contaminated sharps have the following characteristics:
 - Puncture-resistant.
 - Color-coded or labeled with a biohazard warning label
 - Leak-proof on the sides and bottom.

Sharps disposal containers are inspected and maintained or replaced by Departmental BBP Coordinators and monitored continuously to prevent overfilling.

- Secondary containers which are:
 - Leak-proof
 - Color-coded or labeled with a biohazard warning label.
 - Puncture-resistant, if necessary
- Self-sheathing needles and safer medical devices are used when commercially available.

Work Practice Controls

- Employees wash/cleanse their hands immediately, or as soon as feasible, after removal of potentially contaminated gloves or other personal protective equipment.
- Following any contact of body areas with blood or any other potentially infectious materials, employees wash their hands and any other exposed skin with soap and water as soon as possible. They also flush exposed mucous membranes with water.
- Contaminated needles and other contaminated sharps are not bent, recapped or removed unless:
 - It can be demonstrated that there is no feasible alternative.
 - The action is required by specific medical procedure.
 - In the two situations above the recapping or needle removal is accomplished through the use of a mechanical device or a one-handed technique.
- We do not use reusable sharps at this time.
- Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses is prohibited in work areas where there is potential for exposure to bloodborne pathogens.
- All procedures involving blood or other infectious materials minimize splashing, spraying or other actions generating droplets of these materials.
- If outside contamination of a primary specimen container occurs, that container is 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 is 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 is attached to any contaminated equipment, identifying the contaminated portions.
 - Information regarding the remaining contamination is conveyed to all affected employees, the equipment manufacturer and the equipment service representative prior to handling, servicing or shipping.
- When a new employee comes to work for our Town/BOE, or an employee changes jobs within the Town/BOE, the respective Human Resources department must notify the BBP Program Administrator of hires/transfers to at-risk locations.

The following process takes place to ensure that he/she is trained in the appropriate work practice controls:

- The employee's job classification and the tasks and procedures that will be performed are checked against the job classifications and task lists which are identified in the Exposure Control Plan as those in which occupational exposure occurs.
- If the employee is transferring from one job to another within the Town/BOE, the job classifications and task lists pertaining to his/her previous position are also checked against these lists.
- Based on this "cross-checking", the new job classifications and/or tasks and procedures which will bring the employee into occupational exposure situations are identified.
- Notification is made to the Departmental BBP Coordinator, who arranges training for the employee regarding any work practice controls with which the employee is not experienced.

This facility identifies the need for changes in engineering control and work practices through regular review of the BBP exposure control plan and exposures.

We evaluate new procedures or new products regularly to determine if they meet OSHA standards and are applicable to our operations.

Both front line workers and management officials are involved in this process.

The BBP Program Administrator will ensure effective implementation of these recommendations.

Personal Protective Equipment (PPE)/Body Substance Isolation (BSI)

PPE is provided to our employees at no cost to them. Training is provided by Departmental BBP coordinators in the use of the appropriate PPE for the tasks or procedures employees will perform.

The types of PPE available to employees are as follows:

- Gloves
- Safety glasses
- Masks and respirators
- Goggles
- Face shields/masks
- Protective jump suits/gowns

Hypoallergenic gloves, glove liners and similar alternatives will be made readily available to employees who are allergic to the gloves normally used.

PPE is located in the various departments and may be obtained through the Departmental BBP Coordinators. Departmental BBP Coordinators are responsible for ensuring that all appropriate work areas and vehicles have necessary personnel protective equipment available to employees.

To ensure that personal protective equipment is not contaminated and is in the appropriate condition to protect employees from potential exposure, the following practices are followed:

- All personal protective equipment is inspected and periodically repaired or replaced as needed to maintain its effectiveness.
- Reusable personal protective equipment is cleaned, laundered and decontaminated as needed.
- Single-use personal protective equipment (or equipment that cannot, for whatever reason, be decontaminated) is disposed of in biohazard containers (red bags).

All employees using PPE must observe the following precautions:

- * Wash hands immediately or as soon as feasible after removal of gloves or other PPE.
- * Remove PPE after it becomes contaminated, and before leaving the work area.
- * Used PPE may be disposed of in the red bags located in each department in which there are at-risk employees.
- * Wear appropriate gloves when it can be reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, contaminated, or if their ability to function as barrier is compromised.
- * Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- * Never wash or decontaminate disposable gloves for reuse. 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”.
- * Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- * Remove immediately or as soon as feasible any garment contaminated by blood

or OPIM, in such a way as to avoid contact with the outer surface.

* All potentially contaminated personal protective equipment is removed prior to leaving a work area or accident/incident site, if possible (or as soon as is feasible).

* Protective clothing (such as a jump suit) is worn whenever extensive exposure is anticipated.

Housekeeping

Maintaining equipment and facility in a clean and sanitary condition is an important part of the Bloodborne Pathogens Compliance Program.

The Town/BOE employs the following practices:

Cleaning:

- All equipment and surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials:
 - Immediately (or as soon as feasible) when surfaces are overtly 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. (In designated Special Ed. Rooms, changing pads are cleaned every day and after every use.)
 - Disinfecting is done using a 1:10 bleach solution or a disinfectant spray/wipe.
- Ambulances are disinfected after transporting any patient to the hospital.
- Protective coverings (such as linens, plastic trash bags or wrap, or absorbent paper) are removed and replaced:
 - As soon as it is feasible when overtly 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.).
- . Reusable sharps are not used at this time

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see Labels), and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling **sharps** is that they are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak-proof on sides and bottoms, and labeled or color coded appropriately. Sharps disposal containers are available at the following locations:

- BOE: All schools, nurses' offices
- Early Learning Center: Office
- EMS: Apparatus bay under the stairway in the Ambulance Building
- Leisure Services: N/A
- Plant Services: N/A
- Police: Sally port and booking area
- Public Works: Locker room at Town Garage
- Senior Services: N/A
- Social and Youth Services: N/A

Regulated waste (including used bandages, disposed personal protective equipment and other potentially infectious materials) is handled very carefully in accordance with the following procedures:

- 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 locations in vehicles and facilities within easy access of our employees and as close as possible to the sources of the waste.
- Waste containers are maintained upright, routinely replaced and not allowed to overfill.
- Receptacles for biohazard waste are located at the following locations:

- BOE: All Schools, Nurses' Offices
- Early Learning Center: Office
- EMS: Apparatus bay under the stairway in the Ambulance Building
- Leisure Services: Printer Room, Parks Storage Room, Wilcox Park Garage, Pool First Aid Room

Facilities Services: N/A
Police: Sally port
Public Works: Locker room at Town Garage
Senior Services: Nurse's Office
Social and Youth Services: N/A

- Whenever employees move containers or 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.
- BOE locations contact Facilities Director to pick up biohazard waste.
- Stericycle Inc. (1-800-633-9278) is responsible for the collection and handling of our operation's contaminated waste. When containers are full, the respective Departmental BBP Coordinator shall notify the EMS Coordinator, who will notify Stericycle Inc. for disposal and replacement of biohazard containers.

Laundry

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

When an employee's clothing becomes contaminated with blood or potentially contaminated body fluids, the procedure to be followed is:

- Contaminated clothing is removed (jump suits are available).
- The clothing is placed in leak-proof, red containers before transport and is marked with the employee's name and department.
- The Departmental BBP Coordinator is responsible for arranging delivery to Beautiful Cleaners, 812 Park Ave., Bloomfield, CT, where the clothing is cleaned and disinfected.
- If the clothing cannot be cleaned, it is replaced by the Town/BOE.

Labels

The following labeling method is used in this facility:

ITEMS TO BE LABELED

Contaminated equipment
Containers of regulated waste
Sharps disposal containers
Other containers used to store,
transport or ship blood and
other infectious materials
Laundry bags with contaminated
laundry

LABEL



Departmental BBP Coordinators will ensure warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify Departmental BBP Coordinators if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc. without proper labels.

HEPATITIS B VACCINATION

Departmental BBP Coordinators will provide training to employees on hepatitis B vaccinations, addressing the safety, benefits, efficacy, methods of administration, and availability.

The hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified in the exposure determination section of this plan. Vaccination is encouraged unless:

- 1) documentation exists that the employee has previously received the series,
- 2) antibody testing reveals that the employee is immune, or
- 3) medical evaluation shows that vaccination is contraindicated.

Employees who have ongoing contact with patients and blood and are at on-going risks for injuries with sharp instruments or needlesticks will be tested for antibodies to hepatitis B surface antigen one to two months after completion of the three-dose vaccination series. Employees who do not respond to the series must be revaccinated with a second three-dose vaccination series and retested. Non-responders must be medically evaluated.

However, if an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is forwarded by Departmental BBP Coordinators to the respective Human Resources Dept.

Vaccination for Town and BOE employees will be provided by West Hartford-Bloomfield Health District. The vaccination program consists of a series of three inoculations over a six-month period.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, contact the respective Departmental BBP Coordinator at the phone number listed on page 3. Efforts are immediately focused on:

- Making sure that employee receives medical consultation and treatment (if required) as expeditiously as possible.
- Investigating the circumstances surrounding the exposure incident.

An immediately available confidential medical evaluation and follow-up will be conducted by a medical facility within the Town/BOE workers' compensation medical network. Following the initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- * Document the routes of exposure and how the exposure occurred.
- * Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- * Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- * If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- * Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- * After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV, HIV and HCV serological status.
- * If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

Following the medical evaluation, a copy of the health care professional's Written Opinion will be obtained and provided to the employee. It will be limited to whether the employee requires the hepatitis vaccine, and whether the vaccine was administered.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

The Departmental BBP Coordinator ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard.

The Departmental BBP Coordinator ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- * a description of the employee's job duties relevant to the exposure incident
- * route(s) of exposure
- * circumstances of exposure
- * if possible, results of the source individual's blood test
- * relevant employee medical records, including vaccination status

The Departmental BBP Coordinator provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The Departmental BBP Coordinator will review the circumstances of all exposure incidents to determine:

- * engineering controls in use at the time
- * work practices followed
- * a description of the device being used (including type and brand)
- * protective equipment or clothing that was used at the time of the exposure incident (*gloves, eye shields, etc.*)
- * location of the incident
- * procedure being performed when the incident occurred
- * employee's training

All percutaneous injuries from contaminated sharps are recorded in a sharps injury log located in the respective Town/BOE Human Resources departments.

If it is determined that revisions need to be made, the BBP Program Administrator will ensure that appropriate changes are made to this

ECP. Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc)

EMPLOYEE TRAINING

All employees who have occupational exposure to bloodborne pathogens receive training conducted by or arranged by the Departmental BBP Coordinator.

All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- * an explanation of the standard
- * an explanation of our ECP and how to access/obtain a copy (available and accessible at respective work places, Town of Bloomfield website, Human Resources department; also included with Personnel Rules and Regulations given to new employees.
- * an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- * an explanation of the use and limitations of engineering controls, work practices, and PPE
- * an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- * an explanation of the basis for PPE selection
- * information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- * information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- * an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- * information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- * an explanation of the signs and labels and/or color coding required by the

standard and used at this facility

- * an opportunity for interactive questions and answers with the person conducting the training session.

Training materials for this facility are available at the respective departments' locations.

RECORDKEEPING

Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least **three years** by the Departmental BBP Coordinators.

The training records include:

- * the dates of the training sessions
- * the contents or a summary of the training sessions
- * the names and qualifications of persons conducting the training
- * the names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the respective Departmental BBP Coordinator.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records."

Departmental BBP Coordinators are responsible for maintenance of the required medical records. These **confidential** records are kept at the respective departments' locations for at least the **duration of employment plus 30 years**.

Employee medical records are provided upon request of the employee, or to anyone having written consent of the employee, within 15 working days. Such requests should be sent to the respective departments.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by the respective Department BBP Coordinators.

Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded by the Departmental BBP Coordinator in the Sharps Injury Log. All incidences must include at least:

- the date of the injury

- the type and brand of the device involved

- the department or work area where the incident occurred

- an explanation of how the incident occurred.

This log is reviewed at least annually as part of the annual evaluation of the program and is maintained for at least five years following the end of the calendar year that it covers. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

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: (Employee Name)

Date: _____

SUMMARY OF RESPONSIBILITIES

Position(s):

Bloodborne Pathogens Program Administrator

Responsibilities:

Responsible for implementation of the Plan. Maintains, reviews and updates the Plan at least annually to include new or modified tasks and procedures.
Reviews new hires and transfers to assure appropriate levels of training.
Ensures effective implementation of new procedures and products for determination of OSHA compliance and applicability to Town operations.

Positions:

Departmental BBP Coordinators

Responsibilities:

Maintains and provides all necessary personal protective equipment, engineering controls, labels.
Responsible for bloodborne pathogen exposure and hepatitis B vaccination training, documentation of training, making Plan copies available.
Ensures that at-risk employees either receive hepatitis B vaccination or complete declination form.
Responsible for training in the use of personal protective equipment.
Responsible for ensuring that all appropriate work areas and vehicles have necessary personal protective equipment.
Inspects, maintains and continuously monitors department's sharps containers, if applicable.
Ensures proper labeling of department's regulated waste or contaminated equipment.
Organizes movement of hazard waste within the system.
Acts as department's contact for exposure incidents, making sure employee receives medical consultation/treatment; responsible for incident investigation.
Ensures that health care professional responsible for vaccinations and post-exposure evaluation/follow-up is given a copy of OSHA's BBP standard.
Ensures that health care professional evaluating an employee after an exposure incident receives relevant exposure information.
Ensures that appropriate employee health records (including vaccination declination, if any) are maintained.
Responds to proper requests for employee medical records

Departments:

Human Resources (Town), Human Resources (BOE)

Responsibilities:

Ensures that OSHA-required records are maintained.
Distributes Bloodborne Pathogens Exposure Control Plan to new hires.