PATHWAYS ABILITIES SOCIETY

PROCEDURE: EXPOSURE CONTROL PLAN FOR BLOOD BORNE PATHOGENS

Applies to: All Personnel, Volunteers and Persons Served

Original Effective Date: March 22, 2004 Effective Date: December 3, 2025

Replaces Procedure Dated: March 29, 2021

Health Protection (Post-exposure health management procedure)

Exposure to blood and Other Potentially Infectious Materials (OPIM) includes:

- Percutaneous injury (injury through the skin from a contaminated sharp item such as a needle).
- Contact with the mucous membranes of the eyes, nose or mouth.
- Contact with non-intact skin (healing wound less than 3 days old or lesion disrupting the outer skin layer).
- Bites.

For the initial management of an exposure incident to blood or OPIM's, the employee:

- 1. Immediately seeks first aid. If necessary, they administer first aid to themselves.
- 2. Report the exposure to the area supervisor, then go to the nearest hospital within two hours of the exposure for a medical evaluation (the reporting must not cause delay in seeking medical attention).
- 3. If the person exposed is a person served by the agency, a Critical Incident Report is completed, and a First Aid Incident Report form is filled out in ShareVision.
- 4. If the person exposed is an employee, they document in the Employee Report of Injury or Occupational Disease list in ShareVision by 10:00 am the following day and document in the First Aid Incident Report list on ShareVision. If the person is unable to complete the form, the First Aid attendant completes the form with input from the persons who witnessed the exposure by 10:00 am the following day.

Disposition of Sharp Objectives

- 1. Although first aid kits and equipment contain only a few items that could break through the skin, employees must always look for other sharp objects that may be encountered or that would pose a risk of injury that breaks the skin (i.e. contaminated broken glass at an accident site).
- 2. Sharps disposal containers are located in all Pathways facilities for discarding disposable, contaminated sharp items. The location of sharps disposal containers are identified on facility evacuation plans.

Pocket Masks

1. Pocket masks with one-way valves are available in first aid kits in all facilities. These masks should not be shared before being washed and disinfected, or the valves should be changed between uses by different individuals.

Using Disposable Gloves

- 1. Replace gloves as soon as possible if they are torn, cut, punctured or leaking and when they become contaminated or damaged such that their ability to function as a barrier is in question.
- 2. Do not wash or decontaminate disposable gloves for re-use.
- 3. Follow the procedures as outlined in first aid training for glove removal and hand washing.
- 4. Follow the cleanup procedures outlined in the Universal Precautions and Infectious Disease Procedure for spills of blood and OPIMs that minimize splashing.
- 5. Only first aid supplies and equipment are to be stored in first aid areas.
- 6. Follow the procedures for post-exposure health management, outlined at the beginning of this procedure if they have an exposure incident to blood or OPIMs.

Personal Protective Equipment

All personal protective equipment for blood-borne pathogens used at worksites that are owned, rented or leased will be provided by the company at no cost to our employees.

- 1. Waterproof, disposable medical examination gloves are available at all Pathways facilities.
- 2. They will be worn and used as specified in first aid training, and the safe work practices and written work procedures outlined above.
- 3. Pocket masks for artificial respiration are available in first aid kits at all Pathways facilities and in all agency-owned vehicles. Employees will wear them when it is necessary to perform artificial respiration.

Housekeeping, Laundry and Waste

- 1. All reusable items such as mops and cloths used for cleaning up environmental working surfaces such as counters and floors will be decontaminated as soon as possible after contamination with blood or OPIMs.
- 2. Contaminated cloths and mops will be placed in a bucket containing bleach for a minimum period of 30 minutes.
- 3. Sharps disposal containers are securely closed and replaced when they are twothirds full. The area supervisor delegates who is responsible for taking the sharps container to an Interior Health site for disposal.

- 4. First aid waste items (e.g. disposable gloves, pads and dressings) that are NOT dripping, saturated or grossly contaminated with blood or OPIMs are considered general waste. They are discarded in waterproof waste bags for disposal at a landfill.
- 5. Items that are dripping, saturated or grossly contaminated with blood or OPIMs are considered biomedical waste. They must be sealed in a bag. The area supervisor contacts Stericycle at 1-866-783-7422 for the disposal of material.

<u>Hygiene Facilities and Decontamination Procedures</u>

- 1. Hand washing facilities are located in the washrooms and are available to employees for hand washing. Hands will be washed as specified in the Universal Precautions Policy.
- 2. Waterless hand cleansers are also provided for use if hand-washing facilities are not immediately available. Gel antiseptic hand cleanser is available in all Pathways facilities. Antiseptic wipes are in the first aid kits in the company vehicles. Employees must wash their hands with mild soap and running water as soon as possible after the use of the cleanser
- 3. If an employee has an exposure incident to blood or OPIM's, the post-exposure health management procedure will be followed for decontamination.
- 4. If you are exposed:
- After allowing the injury site (i.e. needle stick) to bleed freely, wash the affected area with soap and water.
- Flush splashes to nose, mouth or skin with water.
- Irrigate eye with clean water, saline or sterile wash.