



21.1 Policy Statement

- All States Materials Group is committed to providing a safe and healthy work environment for our employees. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize potential occupational exposure to Bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

21.2 Exposure Determination

- At All States Materials Group, there are occasional construction job site locations where an emergency facility is not nearby, and the response time of the local emergency medical personnel may not be within the acceptable OSHA response times. In these instances, the assigned ASMG jobsite supervisor will be designated as the First Aid provider.
- Those personnel who are designated as a site First Aid provider and those personnel who work in Wastewater Treatment Plants have been determined to have occupational exposure and will be provided with appropriate training in Bloodborne Pathogens and issued personal protection equipment.

21.3 Methods of Implementation & Control

■ Universal Precautions

- Universal precautions will be observed by all employees in order to prevent contact with blood or other potentially infectious materials (OPIM).
- All blood and OPIM will be considered infectious regardless of the perceived status of the source individual.

■ Exposure Control Plan

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■ Personal Protective Equipment

- All personal protective equipment (PPE) (except boots) used at ASMG will be provided without cost to employees.
- PPE will be chosen based on the anticipated exposure to blood or other potentially infectious materials (OPIM).
- Protective latex gloves shall be worn where it is reasonably anticipated the employees will have hand contact with blood, other potentially infectious materials, non-intact skin and mucous membranes. Latex gloves, eye and face protection, and other PPE are available in the First Aid Kits assigned to supervisors.



- Wash hands immediately or as soon as feasible after removing gloves or other PPE. In accordance with OSHA and CDC guidelines, where handwashing facilities are not feasible, an alcohol-based hand sanitizer containing at least 60% alcohol will be provided and maintained in a readily accessible location for employee use.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in a way to avoid contact with the outer surface.
- Warning labels must be affixed to blood and OPIM waste containers, and other containers used to store, transport or ship blood or other potentially infectious materials.
- These labels shall be fluorescent orange or orange-red or predominantly so, with lettering and symbols in a contrasting color:



Decontamination

- Sharps (needles, broken glass, etc.) must not be picked up with hands (gloved or not). Tweezers, dustpans and sweepers or other tools must be used.
- Decontamination will be accomplished using a bleach solution of 1 part household bleach to 10 parts water.
- All contaminated work surfaces will be decontaminated after completion of procedures and immediately, or as soon as feasible, after any contamination with blood or OPIM.

Hepatitis B Vaccine

- All employees who have been designated in section the Exposure Determination section above will be offered the Hepatitis B vaccine, at no cost to the employee.
- The vaccine will be offered within 10 working days of their initial assignment, unless the employee has previously had the vaccine or who wishes to submit to antibody testing which shows the employee to have sufficient immunity.
- Employees who decline the Hepatitis B vaccine must sign an ASMG waiver form that uses the same wording that is found in Appendix A of the OSHA standard.
- Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided to them at no cost.

Post-Exposure Evaluation & Follow Up



- If an employee incurs an exposure incident, it should be reported to the employees' immediate Supervisor who shall make notification to the Human Resources Manager.
- Any employee who incurs an exposure incident will be offered post-exposure healthcare evaluation and follow-up in accordance with the OSHA standard.
 - The confidential follow-up will include the following:
 - Documentation of the route of exposure and the circumstances related to the incident.
 - If possible, the identification and status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity.
 - Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed as to the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
 - The employee will be offered the option of having blood collected for testing the employee's HIV/HBV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological status. However, if the employee decides prior to that time that testing will or will not be conducted, the appropriate action can be taken and the blood sample discarded.
 - The employee will be offered post-exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Services. These recommendations are currently as follows.
 - The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.
 - The Safety Manager has been designated to ensure that the policy outlined here is effectively carried out as well as maintain training records related to this policy.

Interaction with Health Care Professionals

- A confidential written opinion shall be obtained from the health care professional who evaluates employees of ASMG.
- Whenever the employee is sent to a health care professional following an exposure incident.
- Health care professionals shall be instructed to limit their confidential opinions to:



- Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident;
- 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 potential infectious materials. (Note that the written opinion to the employer is not to reference any personal medical information.)

21.4 Training

- ▣ Training for all employees is conducted during the initial assignment to tasks where occupational exposure may occur. Training for employees will include the following: an explanation of:
 - The OSHA standard for Bloodborne Pathogens.
 - Modes of transmission of Bloodborne pathogens.
 - This Exposure Control Plan (e.g., points of the plan, lines of responsibility, how the plan will be implemented, etc.) and how to obtain a copy.
 - Scenarios and tasks that might cause exposure to blood or other potentially infectious materials at this facility.
 - Personal Protective Equipment available at this facility and who should be contacted concerning PPE.
 - Post-exposure evaluation and follow-up.
 - Hepatitis B vaccine program.
 - All covered employees receive annual refresher training.

21.5 Record Keeping

- ▣ As required by this standard, the following confidential records will be maintained by The Human Resources Manager.
 - Medical Record
 - Training Record
 - Confidential Records will be maintained in accordance with 29 CFR 1910.1020 and 29 CFR 1904.