**BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN**

To assure safe and healthful working conditions for Library employees, Library Administration hereby implements a Bloodborne Pathogens (BBP) Exposure Control Plan (ECP) and will develop needed procedures to follow guidelines from the Ohio Public Employer’s Risk Reduction Program (PERRP).

This ECP will apply to employees in affected positions that are required to handle, dispose of, or clean up blood, blood products, or Other Potentially Infected Materials (OPIM). This ECP includes information on training, use of protective equipment, proper housekeeping procedures, and recordkeeping.

**AFFECTED POSITIONS**

For purposes of the ECP, affected positions are those where employees are required to perform clean-up tasks following incidents where patrons may have left blood, blood products, or OPIM on library property. Affected positions are:

Custodians Director/Asst. Director

Clerks Genoa Branch Manager

Programming Librarian Outreach Storytime Specialist

**UPDATING**

This ECP will be reviewed and updated annually as administrative policy. Such review and updating will include participation of non-management staff. This review shall be led by the Library Director. Additionally, this team shall develop needed written procedures and select new protective equipment as needed to implement this ECP as policy.

**DEFINITIONS**

* Bloodborne Pathogens: micro-organisms that can cause disease such as HIV or Hepatitis B which are spread through contact with blood or blood products.
* Infected Waste: blood, blood products, bodily fluids, or any waste from human tissues.
* Universal Precautions: preventing exposure by assuming that all blood and bodily fluids are infectious and thus taking appropriate protective measures at all times.

**TRAINING**

All employees in affected positions shall be trained in proper techniques to limit exposure to BBP. This training shall be done upon hire and then annually. Training will be coordinated or led the Library Director and/or the Genoa Branch Manager. Other qualified personnel, as needed depending on the topic will be brought in for training.

Training shall include: general policy review, types of BBP, safety rules and procedures, universal precautions, use of protective equipment, proper disposal procedures, and offering of Hepatitis B vaccinations (HBV).

**PROTECTIVE EQUIPMENT AND PROPER HOUSEKEEPING**

1. Wearing of disposable, powder-free nitrile gloves shall be done when:
   1. providing first-aid to a patron or staff person with an open wound or active bleeding
   2. handling blood, blood products, body secretions, or OPIM
   3. involved in the cleaning up of an area – to avoid splashing, spraying, or spreading of blood or OPIM.
2. Biohazard clean-up kits are provided in every library building. Follow all written instructions. A training video is located at:
3. Biohazardous Waste and Regulated Medical Waste (RMW):

The following are considered Biohazardous Waste:

• Blood

• Clothing or Linens Contaminated With Blood

All of the above MUST be disposed of in a Biohazardous bag and given to custodial staff for proper disposal.

The following are NOT regulated as Biohazardous Waste Unless Contaminated with Blood:

• Urine

• Vomit

• Feces, Stool

• Nasal Secretions

All of the unregulated substances can be discarded in the regular trash dumpster (But, do please double-bag to contain odors.).

DO NOT place them in a Biohazardous waste bag.

**See Also: Appendix B.**

1. Used Sharps, needles, syringes, lancets, razor blades, or broken glass (with blood on it) shall be placed in puncture-proof, leak-proof containers labeled Biohazard. All sharps containers must be permanently closed and disposed of when ¾ full or whenever items do not freely fall into the container. The container shall be given to custodial staff for proper disposal.
2. Disinfect all reusable equipment before washing it for reuse.

**HEPATITUS B VIRUS PLAN**

The library, at its own cost, shall provide all employees in affected positions with Hepatitis B vaccinations through the Local Hospital and who choose to be vaccinated. The library will document that it offered the vaccine, and well as the employee’s decision of accept or decline and the date of such acceptance or declination. Additionally, any post-exposure testing will be offered and coordinated with the Local Hospital staff as needed.

**RECORDKEEPING**

Training records and HBV records shall be kept in the Director’s office.

**Appendix A**

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| Blood and Body Fluid Clean-Up Kit Instructions:  The following instructions are located in each kit throughout the facilities.   1. Open the kit and put on the protective equipment (gloves, face mask, and apron). 2. Open kitty litter (not in kit) and sprinkle 1 cup evenly over bodily fluid spill (will absorb quickly). 3. After the fluid clumps (1-2 minutes), use the scoop/scraper to pick-up material and put in trash bag and tie shut. Place this bag in another trash bag. Keep protective equipment on. 4. Apply provided disinfectant (not in kit) over the spill area and thoroughly wipe down with disposable paper towel. Follow all directions on the disinfectant you use. 5. Discard used paper in the second bag. 6. Place all used protective equipment in second bag as well, being sure to only touch equipment with gloved hands. Remove gloves last by carefully peeling them off your hands and turning them inside out. Close bag. 7. Deliver sealed bags to trash dumpster. If biohazard bags had to be used, deliver these to the custodial staff for proper disposal according to local regulations. 8. Wash hands thoroughly. 9. If the spill soaked into carpet or fabric with blood or OPIM, then keep area sealed off from patrons or staff until Custodial staff can arrive to properly sanitize area a second time. If spill was only on non-porous surfaces, area may be reopened for use. |

**Appendix B**

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| **WHAT IS THE DEFINITION OF REGULATED MEDICAL WASTE (RMW)?**  Medical waste becomes regulated when it contains enough blood or other potentially infectious materials (OPIM) to potentially spread bloodborne pathogens. Therefore, if there is not enough contamination with blood OPIM, it is not a regulated medical waste. Occupational Safety and Health Administration (OSHA) defines RMW in its BBP Standard as follows:   * Liquid or semi-liquid blood or OPIM, this includes: Blood in blood tubes, blood or OPIM in suction canisters * Contaminated items that would release blood or OPIM in a liquid or semi-liquid state if compressed, this includes: Blood-soaked gauze * Items that are caked with dried blood or OPIM and are capable of releasing these materials during handling, this includes: Blood-soaked gauze that has dried and the blood could flake off and also Bloody gloves or other items that have not absorbed the blood * Contaminated sharps, including: needles, syringes with needles attached   **Other Potentially Infectious Materials (OPIM) means:**    (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any bodily 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 human tissue or organ from a human.  Note: Urine and feces, among other body fluids not listed above, are NOT OPIM, and therefore, items contaminated with any amount of these body fluids do not carry enough BBP to be considered RMW.  In spite of the definition of RMW, some facilities still believe they must dispose of all items that have been merely “contaminated” with blood or OPIM as RMW, regardless of the amount of contamination. OSHA and state and local regulations do not require this. OSHA uses the term “contaminated” or “potentially contaminated” to refer to anything that has or could have any amount of blood or OPIM on it. “Contaminated” is NOT necessarily the same as “regulated.”  Items that are simply contaminated with small, absorbed amounts of blood or OPIM may be placed in a regular plastic-lined trash container. Items such as this include: used band-aids, napkins and paper towels.  Found May 10, 2020 at: <https://blog.sharpsinc.com/whats-going-into-that-red-bag> |

**Approved by the Harris-Elmore Public Library Board of Trustees on**

**February 8, 2021**