## I-C-8.1 Bloodborne Pathogens

**Section – Policy Number:** C: Property Management - 8.1  
**Supersedes:** I-C-8.1 (01/13)  
I-C-8.1 (11/08)  
I-C-8.1 (12/07)  
I-C-8.1 (03/02)  
**Effective Date:** 03/30/2017  
**Date of Last Review:** 02/06/2018

### Related Standards and References:
- [ORS 433.045](https://www.oregonlegislature.gov/billinfo/laws.cfm) (Consent to HIV test required; exceptions)
- [ORS 433.085](https://www.oregonlegislature.gov/billinfo/laws.cfm) (HIV and hepatitis testing at request of licensed health care provider or certain public officials; procedure)
- [OAR 437-002-1030](https://www.oregonlegislature.gov/rules/02 homosexuality_and_violence_at_work_bill.cfm) (Additional Oregon Rules for Bloodborne Pathogens)
- [OAR 437-002-1035](https://www.oregonlegislature.gov/rules/hivrules_bill.cfm) (Oregon Rule for Sharps Injury Log)
- [SAIF 801](https://www.safework.org/) Form (Report of Job Injury or Illness)
- [Infection Control Resource Guide](https://www.cdc.gov/)
- [OYA Bloodborne Pathogens Plan](https://www.oregon.gov/oyo/)
- [OYA Agency Pandemic Response Plan](https://www.oregon.gov/oyo/)
- [OYA policy: I-C-8.3 (Infection Control)](https://www.oregon.gov/oyo/)
- [II-A-1.2 (Preserving Chain of Evidence)](https://www.oregon.gov/oyo/)
- [OYA forms: YA 8300 (Incident/Accident/Hazard Report)](https://www.oregon.gov/oyo/)
  - YA 8400 (BBP Kit Contents)
  - YA 8401 (BBP List of Post-exposure Incident Forms)
  - YA 8402 (BBP Post-exposure Incident Report)
  - YA 8403 (Employee Information Post-exposure to BBP)
  - YA 8404 (Source Individual Informed Consent & Release of Information for HIV & HEP Testing Post-Exposure)
  - YA 8405 (Information for Source Individual Regarding Testing Following Blood & Body Fluid Exposure)
  - YA 8409 (State Vehicle Safety Kit Contents List)
  - YA 8410 (Rescue Kit Contents List)
  - YA 8411 (First Aid Kit Contents List)
  - YA 8501 (Hepatitis B Vaccination Program)

### Related Procedures:
- [Local Operating Protocols](https://www.oregon.gov/oyo/)

**Policy Owner:** Health Services Director  
**Approved:** Fariborz Pakseresht, Director
I. PURPOSE:

This policy addresses OYA’s Bloodborne Pathogens Plan. OYA is required by Occupational Safety and Health Administration (OSHA) regulations to publish a plan.

II. POLICY DEFINITIONS

**Bloodborne pathogens:** Pathogenic microorganisms present in human blood, which can cause disease in humans. These pathogens include, but are not limited to Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV).

**Occupational exposure:** Direct contact with an eye, mouth, other mucous membrane, non-intact skin, or parenteral (accidental exposure via needle stick or sharps) with blood or other potentially infectious materials that results from the performance of an employee’s duties.

**Universal Precautions:** An approach to infection control which treats all human blood and certain human body fluids as if they were infectious. Standard Precautions is the application of these features to all youth receiving care regardless of their diagnosis or presumed infection status.

III. POLICY:

OYA is committed to staff and youth safety, as reflected in OYA’s mission and values. To that end, the minimization of exposure to bloodborne pathogens by incorporating a prevention plan and engineering controls, with accompanying procedures in the workplace is critical. An effective response is also critical in the event of a bloodborne pathogen exposure.

This policy describes the essential elements of the OYA Bloodborne Pathogens Plan. The [OYA Bloodborne Pathogens Plan](#) will be reviewed, updated when necessary and published on the OYANet on an annual basis. This includes agency directives regarding prevention, engineering controls/work practices, responding to occupational exposure and medical recordkeeping. The plan includes template protocols for OYA facilities and field offices, and a list of post-exposure forms.

The Bloodborne Pathogens Plan is included in the OYA’s comprehensive Infection Control Plan. All parts of the plan are available for staff reference in OYANet on the [Health Services](#) site, under the “Infection Control” tab.

IV. GENERAL STANDARDS:

A. OYA maintains a Bloodborne Pathogens Plan to guide all staff in the prevention, control, and response to occupational exposure of bloodborne pathogens.

B. The Bloodborne Pathogens Plan will be reviewed and updated annually by the Infection Control Committee.
C. The Training Academy will provide staff annual training on bloodborne pathogens. The OYA safety manager and Human Resource nurse will collaborate with the Training Academy to ensure staff complete the training.

D. Managers who have staff who are involved in direct patient care must review engineering and work practice controls, as well as safer medical sharps with these staff on an annual basis in accordance with OAR 437-002-1030 (Additional Oregon Rules for Bloodborne Pathogens).

1. The reviews must be documented and sent to the OYA Infection Control Committee chairperson.

2. The Infection Control Committee must review the information. The review will be documented in committee’s meeting minutes. Meeting minutes are located on the Health Services OYANet webpage under the Infection Control tab.

E. The Bloodborne Pathogens Plan contains:

1. Information regarding exposure to bloodborne pathogens.

2. Prevention activities, including participation in a Hepatitis B Vaccination (HBV) Program.

3. Eligibility criteria for the HBV Program.

4. Engineering controls and work practices to be performed by OYA staff.

5. Response to occupational exposure, including:

   a) Staff responsibilities;
   
   b) Manager/supervisor responsibilities;
   
   c) Safety manager responsibilities; and
   
   d) Health care staff responsibilities.

6. Medical recordkeeping.

7. Training.

8. A list of post-exposure forms.


E. Youth engaging in facility work programs will be provided bloodborne pathogen training prior to engaging in work activities. Youth will employ Universal Precautions if risk for exposure exists.
F. Testing of youth/source individuals refusing to consent to bloodborne pathogen testing

1. An exposed staff may petition the court to compel the testing of a youth/source individual, when an exposure occurs on the job.

2. The OYA safety manager or designee will designate a staff person to assist the exposed staff in filling out the appropriate petition to the court.

3. The petition submitted to the court must set forth the facts and circumstances of the contact and the reasons the petitioner and a medically-trained person representing the petitioner (if available), believe the exposure was substantial and the testing would be appropriate. The petition must also include information sufficient to identify the alleged source person and the location of the alleged source person, if known.

4. Costs associated with filing the petition will be the responsibility of OYA.

5. If the court orders a test, the court will direct the youth/source individual to allow the required test to be performed. The court order will be directed to the agency with custody of, or to the person with legal control over, the source individual. The youth/source individual will be provided a copy of the court order. The agency or other person in control of the source individual will ensure the required test is performed.
   a) Testing of youth will be performed by Health Services staff.
   b) The petitioner will designate a health care professional to receive the test results.
   c) The court order will be served on the source person in the manner directed by the court.
   d) The results of any test ordered by the court are confidential and subject to the confidentiality provisions of ORS 433.045 (3).
   e) If the test results are negative, the court may order the source person to submit to additional testing six months after the first test was conducted.
   f) The cost of any testing ordered will be the responsibility of OYA.
   g) A copy of the information will be provided to the health care professional. OYA's safety manager or Human Resources
nurse will also include a description of the staff’s duties as they relate to the exposure incident and documentation of the routes of exposure and circumstances of the exposure.

(1) Staff medical records will be kept confidential and will not be disclosed without the staff’s written consent, except as required by OR-OSHA or the Americans with Disabilities Act, Title 1.

(2) Upon written request, the staff’s medical record will be made available to the staff.

V. LOCAL OPERATING PROTOCOL REQUIRED: YES

A. Each OYA facility will have a written local protocol that addresses the following topics in relation to bloodborne pathogens:
   1. Universal precautions
   2. Personal Protective Equipment (PPE)
   3. Labels and signs
   4. Housekeeping
   5. Clean-up procedure
   6. Bloodborne Pathogens Kits
   7. Laundry
   8. Medical procedures involving blood or OPIM
   9. Sharps containers
   10. Responding to exposure

B. Each OYA field office will have a written local protocol that addresses the following topics in relation to bloodborne pathogens:
   1. Universal precautions
   2. Personal protective equipment (PPE)
   3. Labels and signs
   4. Workplace housekeeping
   5. Clean-up of blood or OPIM
   6. Bloodborne Pathogens Kits
   7. Youth clothing and personal property
8. Sharps containers

9. Responding to exposure

C. Template protocols are available for facility and field office use.