

**Policy:**

It is the policy of Thrive Behavioral Network, LLC to create a plan to eliminate or minimize employee and client exposure to blood or certain other body fluids through the use of universal precautions. Universal precautions are an approach considering all human blood and certain human body fluids as if to be known to be infectious for HIV, Hepatitis B and other bloodborne pathogens.

Another purpose of this policy is to comply with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030. Clients who are identified as having the HIV/Hepatitis B virus will be allowed access to treatment at Thrive facilities as long as the program is deemed appropriate for the individual's psychological and physical needs.

**Procedure:**

**405.10 Exposure Determination**

The primary job assignment of Thrive employees is to assist clients with independent living skills. Any first aid rendered by Thrive employees in all job classifications is rendered under the supervision of the facility nurse only as a collateral duty responding solely to injuries resulting from the work place incidents, generally at the location where the incident occurred.

**405.20 Implementation Schedule and Methodology**

This plan will include a schedule and method of implementation for the various requirements of the standard.

- **Compliance Methods**

- Universal precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious materials will be considered infectious regardless of the perceived status of the source individual.
- Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment will also be utilized.
- Hand washing facilities will be made available to the employees and clients. All employees and clients will be encouraged to wash hands prior to meals and after use of bathroom facilities.
- The Treatment/Program Director and/or facility nurse will ensure that if employees or clients incur exposure to their skin or mucous membranes, then those areas will be washed or flushed with water as soon as feasible following contact.

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- **Needles**

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken. Contaminated sharps are to be placed immediately, or as soon as possible, after use into appropriate sharps containers. The sharps containers are puncture resistant, labeled with a biohazard label and are leak proof.
- **Specimens**
  - Specimens of blood will not be collected by a Thrive employee or stored at a Thrive facility. Specimens of blood may be collected within the facility by a licensed laboratory technician.
  - Specimens of urine may be collected and temporarily stored in a Thrive facility according to the following precautions:
    - Must use laboratory approved collection container
    - Must be labeled clearly with client's first and last name, date of collection
    - Must have Licensed Independent Practitioner order for collection
    - Staff member handling specimen must wear gloves at all times
    - Must be stored in a locked refrigerator designated for medical purposes
- **Personal Protective Equipment**
  - **PPE Provision** - All personal protective equipment used at this facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials.
  - **PPE Accessibility** - The Treatment/Program Director and/or facility nurse will ensure that appropriate PPE in the appropriate sizes is readily accessible at the work site or is issued without cost to employees.
  - **PPE Cleaning, Laundering and Disposal** - All personal protective equipment will be disposed of by the employer at no cost to the employees.

All clothing which is penetrated by blood will be removed immediately or as soon as feasible. All PPE will be removed prior to leaving the work area.  
When PPE is removed, it will be placed in an appropriately designated area or container for disposal.
- **Gloves**
  - Gloves will be used where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin and mucous membranes. Disposable gloves used at this facility are not to be washed or decontaminated for reuse and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured or when their ability to function as a barrier is compromised.
- **CPR Masks**
  - Masks in combination with eye protection devices will be available at each Thrive facility for use in rendering CPR.

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## 405.30 Housekeeping

Decontamination will be accomplished by the staff on duty using a freshly mixed solution of one part bleach to nine parts water. All contaminated work surfaces will be decontaminated as soon as feasible after any spill of blood or other potentially infectious materials. Any broken glassware which may be contaminated will not be picked up directly with the hands.

## 405.40 Regulated Waste Disposal

Thrive employees will make necessary arrangements to have sharps containers disposed in an appropriate fashion such as outside public nurse, hospital personnel, etc.

## 405.50 Laundry Procedures

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Universal precautions will be used when handling contaminated laundry.

## 405.60 Bloodborne Pathogens - Post Exposure Evaluation and Follow-Up

All exposure incidents will be reported, investigated and documented on Form 1003 – Accident/Incident Report. When the employee incurs an exposure incident, it will be reported to the Treatment/Program Director and facility nurse. Following a report of an exposure incident, the exposed employee will immediately receive a confidential medical evaluation and follow-up at the nearest hospital or clinic, including at least the following elements:

- Documentation of the route of exposure and the circumstances under which the exposure incident occurred.
- Identification and documentation of the source individual by a release of information from the suspected source.
- The source individual's blood will be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the Treatment/Program Director will establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, will be tested and the results documented.
- When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.
- Results of the source individual's testing will be made available to the exposed employee, and the employee will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- The exposed employee's blood will be collected as soon as feasible and tested after consent is obtained.

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## 405.70 Information Provided to the Licensed Independent Practitioner

The Treatment/Program Director will ensure that the Licensed Independent Practitioner responsible for the employee's post exposure evaluation is provided with the following:

- A copy of OSHA Bloodborne Pathogens Standard 29 CFR 1910.1030
- A written description of the route of exposure and circumstances under which exposure occurred
- Written documentation of the route of exposure and circumstances under which exposure occurred
- Results of the source individual's blood testing if available
- All medical records relevant to the appropriate treatment of the employee including vaccination status

## 405.80 Licensed Independent Practitioner's Written Opinion

The Licensed Independent Practitioner doing the post exposure evaluation and follow-up will provide the employee with a copy of the evaluating Licensed Independent Practitioner's written opinion within 15 days of the completion of the evaluation.

The Licensed Independent Practitioner's written opinion for HBV vaccination will be limited to whether HBV vaccination is indicated for an employee, and if the employee has received such vaccination or other procedures for HIV.

The Licensed Independent Practitioner's written opinion for post exposure follow-up will be limited to the following information:

- A statement that the employee has been informed of the results of the evaluation
- A statement that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment

## 405.90 Information and Training

### Subpart 1 -Staff Information and Training

The Treatment/Program Director and facility nurse will ensure that training will be provided at the time of orientation, and that it will be repeated within 12 months of the previous training. Training will be tailored to the education and language level of the employee and offered during the normal work shift. The training will be interactive and cover the following:

- A copy of the policy and an explanation of its contents
- A discussion of the epidemiology and symptoms of bloodborne diseases
- An explanation of the modes of transmission of bloodborne pathogens
- An explanation of the Thrive bloodborne pathogen exposure control plan and a method for obtaining a copy
- The recognition of tasks that may involve exposure
- An explanation of the use and limitations of methods to reduce exposure - for example, engineering controls, work practices and personal protective equipment (PPE)

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- Information on the types, use, location, removal, handling, decontamination and disposal of PPEs.
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- An explanation of the procedures to follow if an exposure incident occurs including the method of reporting and medical follow-up.
- Information on the evaluation and follow-up required after an employee exposure incident.

The facility nurse conducting the training will be knowledgeable in the subject matter.

Additional training will be provided to employees when there are any changes of tasks or procedures affecting the employee's occupational exposure.

## Subpart 2 - Client Education

Staff will discuss safe health habits with clients on an as needed basis and will include, but not limited to the following:

- How to clean up spills of any body fluids safely
- How to store and dispose of sharps safely
- How to obtain and use PPE

## 405.100 Record Keeping

### Medical Records

Post exposure evaluation and follow-up medical records will be maintained by the facility. The records will include the following:

- The name and social security number of the employee
- A copy of the employee's HBV vaccination status including the dates of vaccination if available or service given
- A copy of all results of examinations, medical testing and follow-up procedures
- A copy of the information provided to the Licensed Independent Practitioner including a description of the employee's duties as they relate to the exposure incident and documentation of the routes of exposure and circumstances of the exposure

### Training Records

These records will be kept in the personnel file or client case file. The following information will be documented:

- The dates of the training sessions
- An outline describing the material presented
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions

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## **Availability**

All employee records will be made available to the employee in accordance with Thrive policy.

All employee records will be made available to the Assistant Secretary of Labor for the Occupational Safety and Health Administration and the Director of the National Institute for Occupational Safety and Health upon request.

## **Transfer of Records**

If this facility is closed or there is no successor employer to receive and retain the records for the prescribed period, the Director of the NIOSH will be contacted for final disposition.

## **405.110 Evaluation and Review**

Thrive is responsible for reviewing this program and its effectiveness and for updating this program as needed.