

Exposure Control Program

General

The Board of Trustees' policy governing infection control in the Poughkeepsie Public Library District is based on guidelines from the New York State Department of Health, State Education Department, State Labor Department (Public Employee Safety and Health) guidelines and Federal Department of Labor Guidelines (Occupational Safety and Health Administration) that requires employers to write an exposure control plan, to provide training, and offer access to the Hepatitis B vaccine protocol to employees at risk.

Good Samaritan Acts are not covered by these guidelines and the Library District is not responsible for any exposure that occurs while performing such Acts. Good Samaritan Acts include, but are not limited to, the following:

- A. administering first aid to a staff member or the general public
- B. administering CPR/AED to a staff member or the general public
- C. spill clean-up of blood/body fluids resulting from illness or injury to a staff member or the general public

Only job titles listed in the Exposure Control Program and specifically assigned these duties are to perform them.

Screening: Bodily Fluids

- A. Not applicable.

Screening: Virus

- A. During period of pandemic, epidemic, or other local health emergency, all staff will complete a Daily Health Assessment prior to entering the work place. Data collection during such screening will be kept confidential. The Library District will review any guidelines or protocols recommended by the state or federal authorities relating to the pandemic, epidemic, or local health emergency and advise employees on the proper course of action.

Exposure Determination: Bodily Fluids - Classification By Job Title And Duties

The following list of job classes and exposure risks represents the most likely type of exposure possible in the Library District environment.

- A. Head Custodian/Custodian/Custodial Worker: direct contact with blood/body fluids while performing maintenance duties
- B. Librarian I/II - Youth Services: direct contact with blood/body fluid of children unaccompanied by parent, legal guardian, or caregiver injured or ill during programming activities duties prior to arrival of Head Custodian/Custodian/Custodial Worker
- C. Librarian I/II/III - Supervisors: direct contact with blood/body fluids while performing initial maintenance duties prior to arrival of Head Custodian/Custodian/Custodial Worker

Exposure Determination: Viruses - Classification By Job Title And Duties

The following list of job classes and exposure risks represents the most likely type of exposure possible in the Library District environment.

- A. All Classifications – All Departments: direct contact with patrons or co-workers demonstrating symptoms of a contagious virus.

Medical Recommendations

- A. Exposure to Blood/Bodily Fluids

The Library District will provide the Hepatitis B vaccination program to all custodial staff within ten days of employment. The Library District will make available post-vaccination to other employees upon an employee report of any incident where such will be required to control infectious disease.

Employees who elect to receive or who decline the vaccination regimen must complete the Consent/Waiver Form for Hepatitis B Vaccination. (Form G). If an employee wishes to be tested for prior immunity for Hepatitis B, the employee assumes the cost of the necessary test(s). The physician administering the regimen will explain its risks and benefits to the employee and complete the applicable section of the Form.

The signing of the waiver by an at-risk employee who is declining immunization will not relieve the Library District of the requirement to provide the vaccine at a later date if requested by an employee.

The Library District will also make accessible any booster doses recommended at a future date for the duration of active employment with the Library District.

- B. Exposure to Viruses

All staff are required to absent themselves from work when ill. In the event that staff report to work sick or during their shift present with viral symptoms, they will be immediately isolated from the rest of the staff. Upon an initial evaluation, which may include the taking of their temperature and the asking of health-related questions, the individual may be requested to leave work immediately and seek medical attention.

- C. Exposure Incidents

Any person involved in a blood/body fluid or virus exposure incident must report the incident as soon as possible. The appropriate form is found at <http://staff.poklib.org/wp-content/uploads/2020/05/Exposure-Incident-Report-5-13-20-2.pdf>.

Any person involved in a blood/body fluid or virus exposure incident will be referred to their personal physician for medical counseling, evaluation, and possible treatment.

Methods of Compliance - Engineering and Work Practice Controls

Standard Operating Procedures (SOPs) for blood/body fluid clean up and sanitizing after an exposure incident to a virus as described in Appendices A-2 through A-5 will be followed.

Materials and protective equipment will be provided, with training, to all employees. SOPs pertinent to each area will be available in an easily retrieved manner.

Materials and protective equipment will be provided to implement and sustain an effective control program in the public library environment.

Responsibilities**A. Program Administrator (Library Director or Human Resources Officer)**

A qualified person will be designated to coordinate, implement, and provide education and training for all employees. This designated person will have on-going education in order to keep current in regard to any new regulations, medical updates, or other pertinent information.

In addition, this person will be responsible for the medical management program for the Library District. These responsibilities include:

1. coordinating the education program concerning exposure to blood borne pathogens and viruses
2. coordinating the availability of the HBV vaccination for employees, as needed
3. insuring the confidentiality of employees' medical records
4. informing the Administrative Office of additions to the OSHA Illnesses and Injuries log

B. Head Custodian/Custodian/Custodial Worker

The custodial staff will be the first response team for incidents, when possible. They will assume the responsibility of responding in a timely and professional fashion to any situation dealing with the spill of blood/bodily fluids.

C. Supervisors

The supervisors are responsible for insuring that their staff have easy access to personal protective equipment and that such is used as necessary when handling blood/bodily fluids or during periods of viral contagion. Supervisors are to determine if the incident requires a response from custodial staff and to insure that, if such is needed, it is handled in a timely manner to meet the safety needs of their staff. Supervisors at sites without on-site custodial staff are the first response team for that site. If emergency services are required, supervisors are to use prescribed Library District policy. Supervisors are required to complete a Blood/Body Fluids Incident Form (<http://staff.poklib.org/wp-content/uploads/2020/05/Exposure-Incident-Report-5-13-20-2.pdf>) or to instruct involved staff to complete the form and submit it to the Administrative Office within 24 hours.

D. All Other Staff

Staff are responsible for following all procedures relating to this policy.

Training

The Library District will provide training for all staff upon initial assignment for all new employees.

The training will include:

- an explanation and an accessible copy of related OSHA standards
- a general explanation of the epidemiology and symptoms of blood borne and viral diseases
- an explanation of the mode of transmission of blood borne pathogens and viral diseases
- an explanation of the Exposure Control Plan and an accessible copy of that Plan
- an explanation of the methods for recognizing tasks and activities that may involve exposure

- an explanation of work practices, engineering controls and personal protective equipment selection and use
- complete information on the Hepatitis B vaccine
- information on the appropriate actions to take and person to contact in an emergency
- incident reporting and follow up
- signs and labels used

Biomedical/Infectious Waste

For small amounts of non-regulated waste, custodial staff will double bag and dispose of waste as described in Appendix A - 4, Item #4. As defined by New York State Department of Environmental Conservation, non-regulated waste includes sanitary napkins, razors, gauze and band aids used under normal circumstances.

Biomedical/infectious waste will be disposed of by responding emergency services crew.

Labeling

Large quantities of biomedical/infectious waste will be red-bagged and disposed of by the emergency services crew.

Program Evaluation

The Program Administrator will review the Infection Control Program, training, implementation and all other procedures on an annual basis.

Appendix A – 1: General Guidelines For Infection Control

These guidelines and procedures should be followed by all staff at all times to eliminate and minimize transmission of all infectious disease.

Handwashing - Handwashing is the single most important procedure for preventing transmission of infectious organisms. Proper handwashing procedures follow:

1. Use soap and warm running water. Soap suspends easily removable soil and micro-organisms, allowing them to be washed off. Dispenser-style liquid soap is recommended.
2. Wet hands thoroughly under warm running water and dispense soap into wet hands.
3. Rub and scrub hands together for approximately 25 seconds to work up a lather.
4. Scrub knuckles, back of hands, nails and between fingers.
5. Rinse hands under warm running water. Running water is necessary to carry away debris and dirt.
6. Use paper towels to thoroughly dry hands.
7. After drying hands, use the towel to turn off the faucet.
8. Discard paper towels into appropriate plastic lined waste receptacle.
9. Allow sufficient time for handwashing:
 - after using the toilet
 - before meals, snacks and preparing food
 - after handling soiled garments, menstrual pads, soiled diapers
 - after blowing nose
 - after touching potentially contaminated objects, soiled materials, etc.
 - after removing disposable gloves
 - after contact with blood or other body fluids

The Library District must assure convenient and accessible handwashing facilities for all staff. Handwashing materials should always be available: dispenser-style liquid soap, paper towels, and plastic lined baskets for disposal.

When handwashing facilities are not available a waterless antiseptic hand cleaner should be used. The manufacturer's recommendations for the product should be followed.

Additional ways to control infections are as follows:

1. Cover mouth when coughing or sneezing.
2. Dispose of used tissues in plastic-lined waste receptacle.
3. Keep fingers out of eyes, nose, mouth.
4. Stay home when sick. i.e., fever, diarrhea, vomiting, excessive sneezing, coughing.
5. Dry feet after taking a shower.
6. Refrain from sharing personal care items. i.e. combs, brushes, makeup, razors, toothbrushes.
7. Cover open, draining lesions.
8. Maintain updated immunizations.
9. Refrain from sharing eating utensils, drinking cups or water bottles.

Appendix A – 2: Clean-Up Materials

Blood/body fluid clean up-materials will be readily accessible in every Library District location. These materials will be packaged into a readily accessible container.

Clean-up materials include:

1. Disposable latex gloves
2. Disposable paper towels
3. Sanitary absorbent material
4. Zip lock plastic bags
5. Alcohol towelettes
6. Gauze pads
7. Band-Aids - assorted sizes

Materials for areas requiring sanitizing will be held and maintained by custodial staff.

Appendix A – 3: Standard Operating Procedures (SOPs): Clean-Up**Blood Borne Pathogens**

1. If an accident involving a blood/body fluid spill occurs, the individual should be encouraged to tend to his/her own injury. Staff in the immediate area should notify a custodian. On the occasions that custodial staff are not available, follow the blood/body fluid procedures listed below:
 - a. wear disposable latex gloves and disposable towels/clean gauze for each injury
 - b. any blood-stained first aid supplies should be placed in a sealable plastic bag
 - c. follow proper glove removal procedures and place in a sealable plastic bag
 - d. wash hands thoroughly with soap and water using proper procedures
2. Wear disposable latex gloves whenever faced with a situation involving blood/body fluid. When disposable latex gloves are not available or unanticipated contact occurs, hands and all other affected areas should be washed with dispenser soap and water immediately after contact.
3. While wearing gloves, clean and disinfect all soiled, washable surfaces (i.e., tables, chairs, floors) immediately, removing soil before applying a disinfectant.
 - a. use paper towels or tissues to wipe up small soiled areas; after the spill is removed, use clean paper towels and soap and water to clean area
 - b. apply sanitary absorbent agent for larger soiled areas; after the spill is absorbed, vacuum or sweep up materials; immediately discard materials in sealable plastic bag
 - c. disinfect area with an EPA-approved disinfectant according to manufacturer's instructions
4. Clean and disinfect soiled rugs, carpets, and upholstered furniture immediately.
 - a. apply sanitary absorbent agent, let dry and vacuum; discard material in a sealable bag
 - b. apply a sanitary shampoo with a brush or an extractor and re-vacuum; discard material in a sealable bag
 - c. spray with an EPA-approved disinfectant according to manufacturer's instructions
5. Clean equipment and dispose of all disposable materials:
 - a. soiled tissues and flushable waste can be flushed in a toilet; discard paper towels and vacuum bag or sweep into plastic bag, seal and dispose of according to procedure
 - b. rinse broom and dustpan in disinfectant solution after removing debris
 - c. soak mop in disinfectant solution for a minimum of twenty minutes and rinse thoroughly
 - d. used disinfectant solution should be promptly poured down a drain
 - e. remove disposable gloves and discard in a sealable plastic bag; avoid touching skin with soiled gloves
 - f. wash hands thoroughly with soap and water using handwashing procedures.
 - g. plastic bags containing contaminated waste should be secured and disposed of daily according to procedure
 - h. store all disinfectants in safe areas inaccessible to patrons
 - i. all staff should take precautions to prevent injuries by needles, razor blades, broken glass, and any other sharp instruments for devices that have potential for penetrating the skin; a tool such as pliers, forceps or tweezers should be used to pick up sharp items.

Viruses

1. If an area requires sanitizing due to exposure from an individual presenting with viral symptoms, the area will be sanitized with an agent meeting the current criteria of the EPA as being effective against viruses. Responding staff will conduct sanitizing in accordance with the directions for use provided by

the manufacturer. Staff will wear gloves and, if desired, a mask while sanitizing the area. Mask and glove removal will be done in accordance with current infection control standards.

Appendix A – 4: Standard Operating Procedures (SOPs): Head Custodian/Custodian

1. Gloves: Latex, rubber or vinyl gloves must be worn when cleaning restrooms and for other activities where custodians may come in contact with blood/body fluids during regular or emergency cleaning tasks. Household rubber gloves can be used. However, they should be discarded if they are peeling, cracked or discolored or if they have punctures, tears or other evidence of deterioration.
2. Mop Water: Generally, mop water should be changed when the mop is not visible through the solution. Mop water must be changed after is has been use to clean blood/body fluid spills. Dirty mop water should be carefully poured down the drain to prevent spilling or splashing onto clean areas. After use, mops should be soaked in a disinfectant solution for twenty minutes.
3. Restroom Cleaning: Floors, toilets and sinks of all restrooms should be cleaned and disinfected daily with an EPA-approved disinfectant. Toilet paper, paper towels and dispenser soap should be restocked on a daily basis. Busy restrooms should be checked throughout the day and restocked when necessary. Overflowing toilets or blocked drains should be placed “out of service” until repaired and cleaned. These repairs should be given high priority.
4. Garbage and waste receptacle: All garbage cans and waste paper baskets should have plastic liners and must be changed daily. Plastic liners should be tied as part of that removal and disposal process. Any plastic liner that contains blood/body fluid waste should be double bagged and then discarded in the normal trash.
5. Disinfectant: Select an intermediate level disinfectant which will kill vegetative bacteria, fungi, tubercle bacillus, and virus. Select an agent that is registered with the US Environmental Protection Agency (EPA) for use as a disinfectant in places of public assembly (such as schools or other public buildings). Use all products according to the manufacturer’s instructions. Agents should belong to one of the following classes of disinfectants:
 - a. sodium hypochlorite (1:10 dilution of household bleach); this solution must be made fresh for each use; effective against HIV and Hepatitis B
 - b. ethyl or isopropyl (70% - 90%)
 - c. quarternary ammonium germicidal detergent solution (2% aqueous solution)
 - d. iodopher germicidal detergent (500 ppm available iodine)
 - e. phenolic germicidal detergent solution (1% aqueous solution)
6. Frequently wash hands in accordance with outlined procedure (Appendix A) and especially after removing gloves.
7. When responding to an incident resulting in a blood/body fluid spill, follow SOP for Clean-Up (Appendix A-3). Adherence to the SOP is critical for decreasing transmission of infectious disease.

Appendix A – 5: Standard Operating Procedures (SOPs): Librarian I/II - Youth Services,
Librarian I/II/III - Supervisors

Staff in these job classes should always direct or help an individual involved with blood/body fluid incident to care for him/herself with minimal contact to the staff person. However, there are situations when a staff person will need to intervene and provide assistance that requires contact. Staff should always implement a barrier between him/herself and the individual in need of assistance, using clean materials or gloves. In most instances, staff should not be expected to clean up the blood/body fluid spill or the environment. Custodial staff should be called for clean up.

When staff intervene and implement “universal precautions” they do so from an informed, voluntary response under the Good Samaritan Act and should use prudent public health protective procedures.

On the occasions that custodial staff are not available, follow the blood/body fluid procedures listed below:

- a. wear disposable latex gloves and disposable towels/clean gauze for each injury
- b. any blood-stained first aid supplies should be placed in a sealable plastic bag
- c. follow proper glove removal procedures and place in a sealable plastic bag
- d. wash hands thoroughly with soap and water using proper procedures
- e. immediate notify custodial staff

Keep other staff and patrons from the area of blood/body fluid spill until the areas is cleaned and disinfected.

Report incident to the Administrative Office following the procedures of Appendix Form F.

Appendix A – 6: Documentation of an Incident of Exposure

Documentation is extremely important as a follow-up to any exposure incident. Having a written record of what occurred protects both the employee and employer. It can also aid in identifying unsafe conditions and practices.

Staff are to report an Exposure Incident using the Savannah Reporting System found on the Staff Web Page.

Form F: Exposure Incident Report

Name:	Title:	Employee Number:
Address:	Phone (H):	Phone (W)
	Department:	Supervisor:

Date of Incident:

Description of Incident: Briefly describe what happened.

Wounds

- Did the incident involve a wound? yes no
- Did the wound result in visible bleeding? yes no
- Identify the cause of the wound needle human bite
- other sharp instrument (specify):
- other (specify):

Blood/Body Fluid Exposure

- Did the individual's blood/body fluids come in contact with your body? yes no
- What was the substance to which you were exposed? not exposed blood
- feces emesis (vomit)
- sputum sexual fluids
- If the substance was anything other than blood, was there any blood in the fluid? not exposed yes
- no unknown
- What part of your body was exposed to the substance? (check all that apply) none mouth
- eyes ears
- skin (specify location):
- other (specify):
- Duration of exposure:
- If the exposure was to your skin, was your skin bruised in any way? yes no
- What was the condition of your skin in the immediate area of exposure? no abrasion(s) acne
- dermatitis cracks due to dry skin
- unhealed cuts or scratches
- other (specify):
- Which of the following procedures/PPE were being used at the time of the incident? (check all that apply) no PPE
- wounds/cuts covered with bandages
- mask
- gloves
- glasses/goggles
- other (specify):

- After exposure, what first line intervention did you perform on yourself? (check all that apply)
- nothing
 - washed hands and exposed area
 - changed clothes
 - flushed eyes/rinsed mouth
 - showered
 - other (specify):

Supervisor notified as follows:

Medical Intervention: In the event of contact with blood and/or body fluid it is suggested that you discuss the following with your health professional:

- a. HBV antibody or previous vaccination status for HBV
- b. the need for HBV/HIV antibody testing

Virus Exposure

Where was the exposure? staff area public area

When and how was the area sanitized? With which product?

How were sanitizing materials discarded?

Return this completed form to the Administrative Office within 24 hours of exposure.

_____	_____
Employee Signature	Date
_____	_____
Supervisor Signature	Date

This form maintained for duration of employment plus 30 years.

Form G: Consent/Waiver Form for Hepatitis B Vaccination

I understand the benefits and risks of Hepatitis B vaccination. I understand that I must receive at least three intramuscular doses of vaccine in the arm over a six-month period to confer immunity. However, as with all medical treatment, there is no guarantee that I will become immune or that I will not experience an adverse side effect from the vaccine.

Hepatitis B vaccine will be made available at no charge to employees who are qualified under this policy .

I have had an opportunity to ask questions and all my questions have been answered to my satisfaction. I believe that I have adequate knowledge upon which to base an informed consent.

I understand that pre-vaccine blood testing for immunity is available at my own cost.

I understand that participation is voluntary and my consent or refusal of vaccination does not waive any employment rights. In addition, I can withdraw from the vaccination regimen at any time.

- I wish to be tested for prior immunity for Hepatitis B before proceeding with the vaccination.
- I grant permission for _____ to administer the three doses of Hepatitis vaccine.
- I understand that due to my occupational exposure to blood/body fluids I may be at risk of acquiring Hepatitis B. I have been given the opportunity to be vaccinated with Hepatitis B vaccine at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine I continue to be at risk of acquiring Hepatitis B. If in the future, I continue to have occupational exposure to blood/body fluids and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination regimen at no charge to me.
- I decline to be immunized at this time. In the event of an accidental exposure, I will report the incident immediately to the Administrative Office and consult with my health care provider regarding post-exposure prophylaxis.

Date

Signature

To be Completed by Administering Physician

I certify that I have explained the reasonable risks and benefits of Hepatitis B vaccine to _____ (*insert name of patient*) in a manner which permits the patient to make a knowledgeable decision.
