

TREMONT VOLUNTEER FIRE DEPARTMENT  
September 1, 2013  
EXPOSURE CONTROL PLAN

The Tremont Volunteer Fire Department (TVFD) is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to blood borne pathogens in accordance with OSHA standard 29 CFR 1910.1030.

The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
  - Universal precautions
  - Engineering and work practice controls
  - Personal protective equipment
  - Housekeeping
- Hepatitis B vaccinations
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding exposure incidents

Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

### PROGRAM ADMINISTRATION

**The Department Chief** is responsible for implementation of the ECP, and will maintain, review and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact information for the Chief and Officers is found on the current department roster posted at each station and provided each member when changed.

- Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.
- The department Medical Officer (MO) will provide and maintain all necessary personal protective equipment (PPE), engineering controls, labels and red bags as required by the standard. The MO will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

- The Chief will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.
- The MO will be responsible for training, documentation of training and making written ECP available to employees, OSHA and NIOSH representatives.

### **EMPLOYEE EXPOSURE DETERMINATION**

The following is a list of all job classifications at our establishment in which all employees have occupational exposure:

- All members of the TVFD could be potentially exposed to blood/bodily fluids when assisting the ambulance company or at medical incidents where we are called to assist.
- Junior Fire Fighters are NOT allowed to assist on medical calls.

### **METHODS OF IMPLEMENTATION AND CONTROL**

Universal Precautions: ALL employees will utilize universal precautions.

Exposure Control Plan: Employees covered by the blood borne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work shifts by contacting any Officer. If requested, we will provide an employee with a copy of the ECP within 15 days of the request.

The Chief is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Engineering Controls and Work Practices: Engineering controls and work practice controls will be used to prevent or minimize exposure to blood borne pathogens. The specific engineering controls and work practice controls used are listed below.

Sharps disposal containers are inspected and maintained or replaced by:

- No member of the TVFD will handle any sharps and or sharps containers

Personal Protective Equipment (PPE):

- PPE is provided to our employees at no cost to them.
- Training in the use of the appropriate PPE for specific tasks or procedures is provided by the Training Officer (TO), MO or other officer designated in writing.

Types of PPE available to employees are as follows:

- Medical gloves (Latex, nitrile etc.): Structural, extrication forestry or general purpose work gloves will not protect a wearer from pathogens.
- Eye shield / Face shield: The shield or goggles on the firefighting helmet, and approved safety glasses are sufficient to meet this requirement in most cases. The MO or other on-scene officer will determine if additional protection is called for.
- Protective Suit (for large incidents)
- CPR Mask
- Structural and forestry PPE will provide limited protection only

\*All other PPE is located in the First Aid Kit on all FFD apparatus in the engineers' compartment.

NOTE: Each member's turnout gear will contain a pouch with a set of medical gloves and each member's fire helmet has a face shield or goggles to further protect from blood/bodily fluids. Utility/structural and forestry gloves must be used in conjunction with medical gloves if there is a potential for medical glove failure due to working conditions.

All employees that have an exposure incident must observe the following precautions:

- Wash Hands with warm soap and water immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
  - Used / soiled PPE may be disposed of in the red biohazard bag in each first aid kit for decontamination.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or if their ability to function as a barrier is compromised.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters or droplets of blood or OPIM pose a hazard to the eye, nose or mouth.

**LAUNDRY:** All contaminated articles of clothing (including and turnout coats, pants and liners) will be laundered by the service in use by the Southwest Harbor/Tremont Ambulance Service at the time of the event. The following pre-laundering requirements must be met:

- Handle contaminated laundry as little as possible, with minimal agitation.
- Place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use the red biohazard bag for handling contaminated gear and for transportation to the laundry facility.
- **Contaminated Equipment** (tools, shovels, brooms, etc.) shall be decontaminated by a solution of one part bleach and 10 parts water and shall be washed off and be air dried prior to reuse. Let the solution remain on contaminated equipment for 10-15 minutes.

## **HEPATITIS B VACCINATION**

The MO or TO will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, methods of administration and availability.

The hepatitis B vaccination series is available at no cost after initial employee training and prior to initial assignment for all employees identified in the exposure determination section of this plan. Vaccination is encouraged unless:

1. documentation exists that the employee has previously received the series
2. antibody testing reveals that the employee is immune
3. the member refuses the shot series

However, if an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept in the member's file.

Vaccinations will be provided by:

Maine Coast Memorial Hospital Primary Care  
50 Union Street, Ellsworth, Maine 04605  
Phone # (207) 664-5311

Following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. It will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

## **POST-EXPOSURE EVALUATION AND FOLLOW-UP**

**\*\*Should an exposure incident occur, contact Chief or any TVFD Officer at the numbers listed on the department roster posted at the station communications desk.**

**\*The receiving officer must follow this section if there is a reported exposure incident:**

- An immediately available confidential medical evaluation and follow-up will be conducted by Maine Coast Memorial Hospital Occupational Medicine (during business hours) following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), and the following activities will be performed:
- Document the routes of exposure and how the exposure occurred by using the Infectious Exposure Form.
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.

- If the source individual is already known to HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident and test blood for HBV and HIV serological status.
- If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as possible.

**NOTE: IF AN EXPOSURE INCIDENT OCCURS AFTER HOURS, THE EXPOSED EMPLOYEE SHALL GO TO THE EMERGENCY ROOM AT MDI HOSPITAL OR MAINE COAST MEMORIAL HOSPITAL AS MAY BE APPROPRIATE.**

#### **ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP**

The Chief ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard.

The Chief ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- A description of the employee's job duties relevant to the exposure incident
- Route(s) of exposure
- Circumstances of exposure
- If possible, results of the source individual's blood test
- Relevant employee medical records, including vaccination status

#### **PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT**

The Chief, MO or other designated officer will review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed

- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident
- Procedure being performed when the incident occurred
- Employee's training

If revisions/changes to this ECP are necessary the Chief will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, changes in medical providers, laundering services etc.)

### **EMPLOYEE TRAINING**

All employees who have occupational exposure to blood borne pathogens receive initial and annual training conducted by the MO, TO or designee using the Maine Bureau of Labor Standards training materials and recommendations.

All employees who have occupational exposure to blood borne pathogens receive training on the epidemiology, symptoms and transmission of blood borne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA blood borne pathogen standard
- An explanation of our Exposure Control Plan and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident.
- An explanation of the use and limitations of engineering controls, work practices and PPE
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated and that the vaccine will be offered free of charge.
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- An explanation of the procedure to follow if an exposure incident occurs, including the method the method of reporting the incident and the medical follow-up that will be made available.
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident.

- An opportunity for interactive questions and answers with the person conducting the training session.

### **RECORDKEEPING**

Records are completed for each employee upon completion of training. The documents will be kept for at least three years in the individual training files.

The training records include:

- The dates of the training sessions
- The contents or a summary of the training sessions
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training session

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the MO, TO or other officer.

The MO is responsible for maintenance of the required medical records. These confidential records are kept in the file cabinet for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the MO.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets DOL's Recordkeeping Requirements (12-179 CMR). The reporting and recording activities are done by the MO.

### Annual review of the ECP

DATE REVIEWED	SIGNATURE

TREMONT VOLUNTEER FIRE DEPARTMENT

HEPATITIS B VACCINE DECLINATION (MANDATORY)

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring hepatitis B virus (HBV) infection. 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, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Signed: (Employee Name) \_\_\_\_\_

Date: \_\_\_\_\_