Blood Borne Pathogens Exposure Control Plan

SONOMA COUNTY SHERIFF’S OFFICE
DETENTION DIVISION
Learning Objectives:

What is the County BBP Program?

How does that impact Sheriff’s Dept. procedures?

Who is responsible for Sheriff’s program implementation?

How do we control our potential exposures?

What are the procedures if an employee reports an exposure?
Purpose

The purpose of this Exposure Control Plan is to minimize and eliminate employee occupational exposure to blood or other potentially infectious body fluids as required by CCR Title 8, Section 5193. The objective of this Plan and its implementation is two fold:

To protect employees from occupational exposure to blood, body fluids, and the potential hazards of blood borne pathogens.

To provide effective post-exposure treatment, follow-up, and counseling should an employee become exposed to blood borne pathogens.
This program applies to all County of Sonoma operations where employees are Occupationally exposed to blood or other potentially infectious bodily fluids as required by the California Code of Regulations, Title 8, Section 5193 “Blood borne Pathogens”.
Job classifications with reasonably anticipated exposures:

- **Category A:** Job classifications in which all employees may be exposed to blood borne pathogens, regardless of frequency.
  - Correctional Deputy, Patrol Deputy, Sergeants, Janitorial Staff, Detention Assistants, Detention Specialists.
- **Category B:** Job classifications in which some of the employees may be exposed to blood borne pathogens.
  - Sheriff, Asst. Sheriff, Captain, Lieutenant, Volunteers, etc.
What are blood borne pathogens?

Pathogenic microorganisms present in human blood that can lead to diseases

Examples of primary concern

◦ Hepatitis B (HBV)
◦ Hepatitis C (HCV)
◦ Human Immunodeficiency Virus (HIV)
**Facts about Ebola in the U.S.**

**You CAN'T get Ebola through WATER**
- The body fluids of a person who is sick with or has died from Ebola.
- Objects contaminated with body fluids of a person sick with Ebola or who has died of Ebola.
- Infected fruit bats and primates (apes and monkeys).
- And, possibly from contact with semen from a man who has recovered from Ebola (for example, by having oral, vaginal, or anal sex).

**You CAN'T get Ebola through FOOD grown or legally purchased in the U.S.**

**You CAN'T get Ebola through AIR**
- Use insect repellent.
- Wear long-sleeved shirts and long pants.
- Stay in areas with air conditioning or fans and avoid mosquito bites.
- Prevent mosquito bites around your home.

**Get the facts. Get tested. Get involved.**

Find out more about HIV, including where to get tested, at gettested.cdc.gov

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**Statistics**

**1981**

1 in 8 people with HIV don't know they have it.

**2014**

**2016**

**TOP 5 THINGS EVERYONE NEEDS TO KNOW ABOUT ZIKA**

1. Zika primarily spreads through infected mosquitoes. You can't get Zika through sex.
   - Use insect repellent.
   - Wear long sleeves and long pants.
   - Stay in areas with air conditioning or fans and avoid mosquito bites.
   - Prevent mosquito bites around your home.

2. The best way to prevent Zika is to prevent mosquito bites.
   - Use insect repellent.
   - Wear long sleeves and long pants.
   - Stay in areas with air conditioning or fans and avoid mosquito bites.
   - Prevent mosquito bites around your home.

3. Zika is linked to birth defects.
   - Pregnant women should not travel to areas with Zika.
   - If you need to travel to an area with Zika, talk to your healthcare provider about and verify if they need to prevent mosquito bites during your trip.

4. Pregnant women should not travel to areas with Zika.
   - If you need to travel to an area with Zika, talk to your healthcare provider about and verify if they need to prevent mosquito bites during your trip.

5. Returning travelers infected with Zika are not at risk for virus through mosquito bites.
   - If you return from an area with Zika and are pregnant, talk to your healthcare provider about and verify if they need to prevent mosquito bites during your trip.

WWW.CDC.GOV/ZIKA
Hepatitis B (HBV)

- Over 12 million Americans are infected (1 in 20)*
- Silent infection; symptoms include jaundice, fatigue, abdominal pain, loss of appetite, intermittent nausea, vomiting; may lead to chronic liver disease, liver cancer, and death
- HBV can survive for at least one week in dried blood
- Up to 40,000 people in US will become newly infected each year*

*Source: Hepatitis B Foundation

Reported cases of hepatitis B in the U.S. have generally declined from 1980 to 2014. Source: CDC
Hepatitis C is the most common chronic blood borne infection in the U.S.

- Symptoms include: jaundice, fatigue, abdominal pain, loss of appetite, intermittent nausea, vomiting
- May lead to chronic liver disease and death
Human Immunodeficiency Virus (HIV)

- HIV is the virus that leads to AIDS
- HIV affects the body’s immune system
- HIV does not survive well outside the body
- Estimated >1.1 million people living with HIV
- Infected for life
Other blood borne diseases

◦ Caused by viruses or bacteria
◦ Circulate in blood at some phase; capable of being transmitted
◦ Most are rare in the U.S.

Zika Virus (left) and Ebola Virus (right) can be spread to workers through contaminated blood or infectious body fluids.

Source: CDC / C. Goldsmith

Source: CDC / F. Murphy
Blood Borne Pathogen Examples

- Hepatitis D (HDV)
- Syphilis
- Malaria
- Babesiosis
- Brucellosis
- Leptospirosis
- Arboviral Infections

- Relapsing fever
- Creutzfeldt-Jakob Disease
- Human T-Lymphotropic Virus Type I
- Viral Hemorrhagic Fever
Contamination sources:

Blood

Other potentially infectious materials (OPIM)
- Human body fluids
- Any unfixed tissue or organ from human
- Cultures, culture mediums, or other solutions
- Tissues, or organs infected with HIV or HBV
Spread of blood borne pathogens occurs through:

- Direct contact
- Indirect contact
- Respiratory transmission
- Vector-borne transmission
- “Sharps” injuries
  - Contaminated needles, razors, broken glass, knives penetrate the skin
  - Human bites that break the skin

Source: NIOSH
BBP Exposure Control Plan

Establish an Exposure Control Plan

Review and update plan

Required elements of Exposure Control plan include:

Exposure determination

Schedule and method of implementation

Procedure for evaluation of exposure incidents
Universal Precautions

Treat all blood and bodily fluids as if they are infectious for HIV, HBV, HCV and other bloodborne pathogens.
Sheriff’s Control Methods

*Universal Precautions approach to infection control* - Individuals are assumed to be infectious for HIV, other BBP

Uncontrolled emergency situations, or encounters with combative suspects

Unable to determine if body fluids (saliva, vomit, feces) are contaminated with blood

Assume potentially infectious – wear gloves or equipment where possible, follow up on exposures
PPE examples

Gloves
Masks
Aprons/Smocks/Gowns
Face shields
Safety glasses
PPE Selection

PPE selection
- Safe design and construction
- Fit comfortably

Required PPE training
- When it is necessary
- What kind is necessary
- Proper donning, adjusting, wearing, doffing
- Limitations
- Proper care, maintenance, disposal

Source: CDC
Sheriff’s Control Methods

Cal/OSHA Definition of Regulated Waste

Liquid or semi-liquid blood or OPIM

Items contaminated with blood or OPIM that would release these substances in a liquid or semi-liquid state if compressed

Items that are caked with dried blood or OPIM and are capable of releasing these materials during handling
EPA Registered Disinfectant
Regulated Waste Disposal:

**Sharps Disposal:** Stericycle contract for sharps containers at all Sheriff’s facilities picked up at Coroner’s and Detention

Close container during transport, ensure BIOHAZARD label in place

**Other Regulated Wastes:** Close inside leak proof containers, BIOHAZARD label on all bags and containers
Sharps Handling & Containers

Handling
- Location
- Immediately put in container
- Replacement

Containers
- Rigid
- Puncture Resistant
- Leak proof
- Portable
- Labeled
- Closable/ Sealable
Sharps Injury Log

- California Sharps Injury Control program

- Records incidents for analysis and preventive action

- Only required for injury by a sharp (cuts with knives, broken glass, razors, needle sticks or human bites)

- Do not include individuals name or other personal information
Hepatitis B Vaccination:

- All personnel in Category A will be offered Hepatitis B vaccinations
- Available at no cost within 10 days of initial assignment
- Vaccination authorizations / declinations kept in Personnel files in Sheriff’s Admin.
- Kaiser Occupational Health administers HBV vaccination program

Source: OSHA DTE
No Vaccinations For:

Hepatitis C

HIV

** 3D illustration of a virus in the bloodstream
Sheriff’s Exposure Determination

POTENTIAL EXPOSURES:

- Encounters with combative inmates
- Searching Cells
- Searching Arrestees
- First aid procedures including CPR
- Handling of contaminated items
- Cleaning contaminated area
Exposure Incident Determination

COMMON EXPOSURE INCIDENTS

◦ Sharps injuries: Skin penetrated with a needle, razor, knife or a human bite that breaks the skin

◦ Blood or OPIM splashing on non-intact skin, eyes or mucous membranes

◦ Includes saliva or vomit visibly contaminated with blood
Exposure Incident Determination

Two step process:

◦ Is it an “Exposure Incident”?

◦ Specific eye, mouth, mucous membrane, non-intact skin or sharps injury with blood or OPIM

◦ If unsure, contact Kaiser Occupational Health for guidance
Exposure Incident - Employee

What to do if you contact blood or OPIM?

1. Immediately wash the affected area
2. Make wound bleed, if appropriate
3. Report to Supervisor ASAP
   - Determine if Occupational Exposure Incident
   - If unsure, call and consult with Kaiser Occ Med
4. Go to Kaiser Occupational Health **Immediately**
Exposure Incident - Supervisor

If an exposure incident has occurred:

- Complete required forms
- Send employee for evaluation immediately or AS SOON AS POSSIBLE!
- Kaiser Occupational Health must receive forms on Supervisor checklist
Employer’s Responsibilities

Perform hazard assessment
Identify and provide appropriate PPE to employee at no cost
Train employees on use and care
Maintain/replace PPE
Review, update, evaluate PPE program
Employee’s Responsibilities

- Properly wear PPE
- Attend training
- Care for, clean, and maintain
- Notify when repairs/replacement needed
Potential Source Screening

- Complete DHS 8479 form
- Employee who has been exposed to blood or body fluids of an inmate, person arrested or in custody, or on probation or parole
- May request HIV test following procedures in California Penal Code (Section 7500-7514)
- County Chief Medical Officer may order the test within 24 hours of receiving report
BBP Training Program

Initial Training
- New Sheriff’s employee
- Transferred employee (new collateral duty assignment, new to the unit or facility)
- Within 10 days and prior to BBP tasks

Annual Refresher