MONTANA STATE PRISON
OPERATIONAL PROCEDURE

Procedure:	**MSP HS B-02.2 BLOOD-BORNE PATHOGENS**
Effective Date:	11/01/2020 Page 1 of 5
Revision Date(s):	10/01/2020; 06/30/2026
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I. PURPOSE

Protect employees from infection from blood-borne pathogens, utilizing Occupational Safety and Health Administration (OSHA) standards as a guide for managing occupational exposure to blood, blood products, and other potentially infectious materials (OPIM).

Provide guidelines for implementation of written and enforceable blood-borne pathogen processes and establishing responsibilities for the systemic review and monitoring of compliance.

II. DEFINITIONS (see Glossary)

III. GENERAL REQUIREMENTS

A. Requirements

1. Post exposure evaluation and follow-up of employees should occur immediately through:
   a. Deer Lodge Medical Center's Emergency Room (primary);
   b. Community Hospital of Anaconda's Emergency Room (back up), or
   c. their primary physician.
2. Any employee involved in an exposure incident should immediately report the incident to their supervisor.
   a. Post exposure treatment, counseling, and follow-up will be made available to all employees at no expense to the employee through the Workers' Compensation system.
3. The exposed employee's blood should be tested as soon as possible, within hours, as indicated in community standard of care.
4. Information regarding exposure incidents will be reported to and retained confidentially by MSP's Workers' Compensation coordinator.
5. The list of reporting contacts for confidential documentation is as follows:
   a. immediate supervisor;
   b. designated Workers' Compensation physician;
   c. MSP Workers' Compensation coordinator; and
   d. Health Services Bureau Chief.

6. Human Resources will be responsible for maintaining a separate confidential medical file on all employees who have occupational exposure.
   a. These confidential employee records include:
      1) name;
      2) SSN;
      3) Hep B vaccination status including:
         a) dates of vaccinations; and
         b) medical records relative to the employee's ability to receive vaccinations;
      4) the results of examinations, medical testing, and follow-up processes as a result of an employee's exposure to blood-borne pathogens; and
      5) the information provided to the consulting physician as a result of any exposure to blood-borne pathogens.
   b. The file will be maintained for the period of employment plus 30 years.

7. The MSP Safety Committee will review all accident reports related to exposures of inmates and staff at its monthly meeting.
   a. Recommendations for changes in unsafe work practices and suggestions for safety equipment will be discussed by the committee.

B. Training

1. Any staff involved with employee training will develop and approve all training curricula in standard precautions, the use of PPE, and other necessary requirements for assuring prevention of contamination as part of every new employee's pre-service training program.

2. All staff will be trained on or have access to:
   a. the regulatory text of blood-borne pathogen standards and an explanation of its content
   b. a general explanation of the epidemiology and symptoms of blood-borne diseases
   c. an explanation of the modes of transmission of blood-borne pathogens
   d. an explanation of the employer's exposure control plan and how to obtain the plan
   e. an explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood or Other Potentially Infectious Materials (OPIM)
   f. an explanation of the use and limitations of methods that will prevent or reduce exposure, including appropriate controls, work practices, and PPE
   g. information about the types, proper use, location, removal, handling, decontamination, and disposal of PPE
   h. an explanation of the basis for selection of PPE
   i. information about the hepatitis B virus (HBV) vaccine, including information about its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge
   j. information about the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
   k. an explanation of the processes to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be available
   l. information about the post-exposure evaluation and follow-up that the employer is required to provide for the employee after the exposure incident
   m. an explanation of the signs and labels and/or color coding for contaminated laundry specified by OSHA regulation 1910.1030(g)(vii)(1)
   n. an opportunity for interactive questions and answers with the person conducting the training sessions

3. Training records for employees will be maintained for at least 3 years and are not confidential.

C. Standard Precautions

1. Standard precautions will be followed throughout MSP according to the Centers for Disease Control.

2. A standardized list of personal protective equipment (PPE) will be provided to all areas within MSP.

3. Protective equipment will be used by all staff when it can be reasonably anticipated that skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials may result from the performance of their duties.

4. Hands and other skin surfaces that have been contaminated should be washed immediately and thoroughly.
   a. Hand washing should be used in conjunction with PPE.
   b. Hands should be washed before putting on gloves and after taking them off, and after making hand-to-skin contact with any person.

5. Mucous membranes that have been contaminated should be immediately flushed with water.

D. Personal Protective Equipment (PPE)

1. MSP will ensure that protective equipment, in appropriate sizes, will be readily accessible to the employee whether issued to the employee or at work sites.
   a. This equipment will include gloves, gowns, face masks, eye wear, and mouth pieces, and for health services, laboratory coats.
   b. Staff will not be discouraged from using any PPE.

2. MSP will provide any cleaning, laundering, or disposal of contaminated PPE at no cost to the employee for this service.

3. MSP will replace or repair any PPE that becomes damaged (torn, broken, leaks, etc.) and/or loses its original effectiveness.

4. Staff will remove all PPE before leaving the facility and place it in an appropriate area or storage container for laundering, storage, decontamination, or disposal. This includes:
   a. gloves will be worn when it can be reasonably anticipated that staff may have hand contact with body products, contaminated items, or surfaces that would result in an occupational exposure, including:
      1) disposable (single use) gloves shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn or punctured or when their ability to function as a barrier is compromised; and
      2) disposable (single use) gloves shall **not** be washed or decontaminated for re-use;
   b. gowns and appropriate protective clothing will be worn in occupational exposure situations; the type and characteristics will depend upon the task and degree of exposure anticipated;
   c. masks, in combination with eye protection devices, such as goggles, or glasses with solid side shields, will be worn whenever splashes, spray, splatter, or droplets of blood or OPIM may be generated and nose or mouth contamination can be reasonably anticipated; and
   d. all employees will have easily accessible respiratory equipment, resuscitation bags, or one-way valve pocket masks to be used any time mouth-to-mouth resuscitation is required.

E. Regulated Waste Management

1. Cleanup of medical infectious waste will be completed with appropriate PPE and approved solutions.
2. MSP will have containers that are:
   a. compliant with standards for medical waste disposal;
   b. closable;
   c. constructed to contain all contents and prevent leakage of fluids during handling, storage, transport, or shipping;
   d. color-coded and labeled with the official biohazard seal; and
   e. labeled, locked, and stored in a designated area for pick-up and disposal.
3. MSP will maintain the services of a licensed medical waste disposal company for appropriate infectious waste disposal.
4. Prior to leaving the work area, all used disposable PPE will be removed and placed in a color-coded and labeled biohazard container for proper disposal.
5. Inmate clothing and linen that are contaminated will be placed in a color-coded and labeled biohazard bag.
   a. The closed bag will be placed for collection by the laundry service:
      1) the bag will be opened and the contents deposited in a washing machine without handling; and
      2) if the contents must be handled, protective equipment will be worn by laundry staff.

F. Housekeeping

1. Equipment and work surfaces that have become contaminated with blood or OPIM shall be cleaned and disinfected as soon as feasible as well as at the end of the work shift if the surfaces have become contaminated since the last cleaning.
2. Protective coverings used to cover equipment and/or surfaces shall be removed and replaced when overtly contaminated or after treatment of a patient.
3. All pails, cans, bins, or similar receptacles intended for reuse shall be inspected, cleaned, and decontaminated immediately or as soon as feasible when visibly contaminated.
4. Broken glass shall not be picked up by hand but shall be swept up or picked up with tongs.
5. Bags to be used for regulated waste are red and/or have the biohazard symbol on them, or a placard, slip, or tag shall be affixed to the bag pursuant to OSHA regulation 1910.1030(g)(1)(i)(e).

IV. CLOSING

Questions about this procedure should be directed to the Medical Health Services Manager.

V. REFERENCES

A. *NCCHC Standard P-B-02*
B. *Occupational Safety and Health Administration (OSHA) standards*

VI. ATTACHMENT

MSP HS B-02.2 Attachment A: Management of Occupational Blood Exposures

ATTACHMENT A: MANAGEMENT OF OCCUPATIONAL BLOOD EXPOSURES

1. MSP Infirmary staff will provide immediate care to the exposure site.
   - ☐ Wash wounds and skin with soap and water
   - ☐ Flush mucous membranes with water
   - ☐ Supervisor will give Workers' Compensation paperwork to employee
2. The Deer Lodge Medical Center Emergency Room (primary), Community Hospital of Anaconda Emergency Room (back up), or the employee's primary care physician will determine risk associated with exposure by:
   - ☐ Type of fluid (for example, blood, visibly bloody fluid, other potentially infectious fluid or tissue, and concentrated virus)
   - ☐ Type of exposure (for example, percutaneous injury, mucous membrane or nonintact skin exposure, and bites resulting in blood exposure).