

| Division:             | All Divisions                   |
|-----------------------|---------------------------------|
| Department:           | All Departments                 |
| Position:             | All Employees                   |
| Subject:              | Safety – Biohazard Cleanup - PP |
| Issue Date:           |                                 |
| Revised Issued Dates: |                                 |
| Revised Dates:        |                                 |
| Recurrent Training:   | Yearly                          |

# **POLICY:**

It is the policy of the Golden Nugget Las Vegas (GNLV) to conform to the Occupational Safety & Health Administration (OSHA) and the Southern Nevada Health District (SNHD) standards for proper biohazard clean up and decontamination procedures to ensure the safety and welfare of employees, guest, and customers of this establishment.

### **PURPOSE:**

The purpose of the Biohazard Cleanup Policy is to provide general guidelines for the proper procedure for biohazard cleanup and decontamination of any affected GNLV area.

### **Applicable Departments:**

- 1. The following Departments are required to complete Biohazards cleaning procedures due to their respective job duties and/or work assignments:
  - a. Housekeeping (HSK)
  - b. Public Area Department (PAD)
- 2. All other departments will clear the area of personnel, guest and customers and contact:
  - a. Security at extension 8117
    - i. Security will contact PAD or HSK
  - b. PAD extension 8669
  - c. HSK extension 8112

#### Procedure

- 1. Biohazard cleanup
  - a. Biohazards will be blocked off with stanchions and ropes or a minimum of 3 wet floor signs as soon as reasonably possible in order to prevent the spread of potentially infectious material.
  - b. Biohazards will be decontaminated as soon as reasonably possible.
    - i. The department member PAD or HSK will use the necessary and appropriate Personal Protective Equipment (PPE).
    - ii. Contain biohazard or incident by using absorbent materials, such as cleaning rags and emergency powder. To remove larger debris, use a pan and broom.

- iii. An appropriate disinfectant will be sprayed on the contaminated area.
  - When using an EPA registered disinfectant, the department member should follow the directions listed on the container for proper decontamination.
- iv. After decontamination, carefully collect the contaminated materials and place them in a red biohazard bag. Remove your PPE and place in biohazard bag.
  - Don't hold bag against your body during handling.
- v. The biohazard bag will be disposed of immediately in the Bio Bin.
  - Don't compress garbage or reach into Bio Bin container.
- vi. Wash your hands thoroughly with soap and water.

# Responsibilities

- 1. It is the responsibility of the Employee to:
  - a. Complete an annual Biohazard training.
  - b. Become familiar with engineering controls, PPE, and actively use safe work practices.
  - c. Complete department specific training.
- 2. It is the responsibility of the Department Management/Supervision for assuring that their employees have received annual training regarding:
  - a. Proper segregation, storage, treatment, and disposal of biohazard waste.
  - b. Potential Bloodborne pathogens risk specific to their job.
  - c. What to do in an exposure incident

## **Policies and Procedures Receipt**

I acknowledge:

- 1) that I have read and understand the training for the Golden Nugget **All Divisions** Policy: **Safety Biohazard Cleanup PP**
- 2) that there may be department-level procedures that may require additional training.
- 3) that violations of this policy may result in disciplinary action as described up to and including termination, and
- 4) that receipt of this Policy does not create or constitute an express or implied contract of employment or warranty of any benefits.
- 5) that if I have any concerns or need assistance in adhering to the safety protocols and practices as presented, I will contact my immediate Supervisor and/or Department Head.
- 6) that I may contact the Safety Office at extension 8190 to discuss any concerns.

Name (Please Print)

Employee Signature

Employee Number

Date