



BLOODBORNE PATHOGENS

Integrated Water Services, Inc.
(the Company)



Purpose

This Bloodborne Pathogen Exposure Control Plan has been established to ensure a safe and healthful working environment and act as a performance standard for all Integrated Water Services (the Company) employees and contractors. This program applies to all occupational exposure to blood or other potentially infectious materials. The content of this plan complies with OSHA Standard 29 CFR 1910.1030 (Occupational Exposure to Bloodborne Pathogens).

Scope

This program addresses all occupational exposure to blood or other potentially infectious materials exposure potentials at the Company. This plan applies to all employees and contractors while working in service to the Company.

When work is performed by a subcontractor on a company site, the contractor's written safety program shall take precedence for their employees. However, subcontractors may adopt this procedure for their use.

Key Responsibilities

Exposure Control Officer (Safety Director)

Has overall responsibility for developing and implementing the Exposure Control Procedure for all facilities.

Site Project Manager and Supervisors

Site project manager and supervisors are responsible for exposure control in their respective areas.

Employees

- Don't provide first aid to co-workers who are able to self-render first aid.
- Don't clean up the bodily fluids of another co-worker without proper training and personal protective equipment (PPE).
- Plan and conduct all operations in accordance with Company requirements.
- Develop good personal hygiene habits.

Procedure

Training

All employees will be trained in the basic requirements of bloodborne pathogens exposure and prevention. Training shall include:

- What bloodborne pathogens are and how to protect oneself from exposure.
- The OSHA requirements of bloodborne pathogens.

Availability of This Procedure to Employees

All employees and contractors will have access to a copy of this procedure by going to www.iws.support.

Exposure Determination

- At Integrated Water Services there are no job classifications in which any employees or contractors have occupational exposure to bloodborne pathogens that may result from the performance of their routine duties.



- Injuries are the only potential accidental exposures an employee of the Company could encounter. Employees are not allowed to clean up another employee's release of bloodborne pathogens unless the donor employee is incapacitated and unable to clean their own biological spill. In such a case the cleaning employee shall be properly trained, follow this procedure, and use all required PPE.
- Rendering first aid or basic life support may expose employees or contractors to bloodborne pathogens and will require them to adhere to protection procedures as noted in this procedure. Although some designated employees and contractors may be trained to render first aid and basic life support, no employee is required to provide first aid if they choose not to do so.
- No medical sharps or similar equipment is provided to or should be used by employees or contractors rendering first aid or basic life support unless the role of that employee is that of an emergency care provider.

Methods of Compliance

Universal Precautions

Under circumstances in which the differential between body fluids and other non-biological fluids is difficult or impossible to discern, all fluids will be considered potentially infectious.

Engineering Controls

Hand washing facilities shall be readily available at all work locations. If provision of hand washing facilities is not feasible, then an appropriate antiseptic hand cleanser in conjunction with cloth/paper towels or antiseptic towelettes shall be provided by the Company.

Containers for contaminated reusable sharps are not provided for use by employees. Employees who use sharps for self-administration of medicine are required to dispose of the sharps in a way that presents no risk to other employees.

Work Practice Controls

- Employees shall wash their hands immediately, or as soon as feasible, after removal of potentially contaminated gloves or other personal protective equipment.
- Following any contact with bloodborne pathogens of another person, employees must wash their hands and any other exposed skin with soap and water as soon as possible.
- All equipment or environmental surfaces shall be cleaned and decontaminated after contact with blood or other infectious materials.
- Specimens of blood or other potentially infectious materials must be put in leak proof bags for handling, storage, and transport.
- Bloodborne pathogens kits are located on top of first aid kits and are to be used in emergency situations only. Once the seal is broken on a kit and any portion of the kit has been used, it is not to be reused.

Personal Protective Equipment

When the possibility of occupational exposure is present, PPE is to be provided at no cost to the employees such as gloves, gowns, etc. PPE shall be used by employees who clean up the biological release of another employee. All PPE shall be made readily accessible.

Our employees and contractors adhere to the following practices when using their personal protective equipment:

- Any garments penetrated by blood or other infectious materials are removed immediately.
- All potentially contaminated personal protective equipment is removed prior to leaving a work area.



- Gloves are worn whenever employees and contractors anticipate hand contact with potentially infectious materials or when handling or touching contaminated items or surfaces.
- Disposable gloves are replaced as soon as practical after contamination or if they are torn, punctured or otherwise lose their ability to function as an "exposure barrier".
- Masks and eye protection (such as goggles, face shields, etc.) are used whenever splashes or sprays may generate droplets of infectious materials.
- Any PPE exposed to bloodborne pathogens shall be disposed of properly.
- The Company will repair and replace PPE as needed to maintain its effectiveness.

Housekeeping

The Company employs the following practices:

- All equipment and surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials.
- Potentially contaminated broken glassware is picked up using mechanical means (such as dustpan and brush, tongs, forceps, etc.).

Post-Exposure and Follow Up

Post-Exposure Evaluation & Follow-Up

If there is an incident where exposure to bloodborne pathogens occurred, we immediately focus our efforts on investigating the circumstances surrounding the exposure incident and making sure that our employees receive medical consultation and immediate treatment. Contractors are required to arrange for their own medical consultation and treatment.

The Company Safety Director investigates every reported exposure incident and a written summary of the incident and its causes is prepared and recommendations are made for avoiding similar incidents in the future. We provide an exposed employee with the following confidential information:

- Documentation regarding the routes of exposure and circumstances under which the exposure incident occurred.
- Identification of the source individual if it is known and not in violation of HIPAA law.

Once these procedures have been completed, an appointment is arranged for the exposed employee with a qualified healthcare professional to discuss the employee's medical status. This includes an evaluation of any reported illnesses, as well as any recommended treatment.

Information Provided to the Healthcare Professional.

The Safety Director will forward the following information:

- A description of the exposure incident.
- The identity and contact information of the donor.
- Other pertinent information.

Healthcare Professional's Actions

The care provider will take the following actions:

- Interview the donor and ask lifestyle questions.
- Request a blood sample from the contamination donor.
- Test the donor blood sample for infectious diseases and other non-specified biological threats.



- Report back to the exposed employee, the Company, and the donor any actions that will be required.
- All findings or diagnoses will remain confidential and will not be included in a written report.

If the donor refuses to provide a blood sample for testing, the care provider will test the exposed employee's blood every week for six months.

Record Keeping

All records of employees shall be made available to OSHA's Assistant Secretary and the Director of OSHA for examination and copying upon request. It must be understood that Integrated Water Services will only maintain the records of employees and not those of contractors- it is expected that contractors will maintain their own records. The Company will not release medical records of any employee. The Company shall meet the requirements involving transfer of records set forth in 29 CFR 1910.1020(h).

The Company Human Resources department shall maintain Bloodborne Pathogen exposure records.

Accurate medical records for each employee with occupational exposure must be maintained for at least the duration of employment plus 30 years and shall include the following:

- Employee's name and Social Security number.
- Employee's Hepatitis B vaccination status, including vaccination dates.
- All results from examinations, medical testing, and follow-up procedures, including all health care professional's written statement on the exposure.
- Information provided to the health care professional by the Company.
- Any Hepatitis B Vaccine declinations.

Training records shall be maintained for 3 years from the date on which the training occurred and shall include at least the following:

- Outline of training program contents.
- Name of person conducting the training.
- Names and job titles of all persons attending the training.
- Date of training.

Labels and Signs

Biohazard warning labeling shall be used on containers of regulated waste, Sharps disposal containers, contaminated laundry bags and containers, contaminated equipment.