North Carolina Division of Marine Fisheries

Bloodborne Pathogen Exposure Control Plan

June 2024

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Division of Marine Fisheries (DMF) Bloodborne Pathogen Exposure Control Plan

Facility names:

- Morehead City Headquarters (HQ) campus
- Morehead City Central District Office (CDO)
- South River
- Wilmington Regional Office and Belville (WIRO)
- Washington Regional Office (WARO)
- Manteo
- Elizabeth City

Date of original preparation: February 22, 2013

Dates of Annual Reviews: September 2017; June 2024

In accordance with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard, 29 CFR 1910.1030, the following exposure control plan has been developed.

1.0 Purpose

The purpose of this exposure control plan is to:

1. Eliminate or minimize employee occupational exposure to blood and/or certain other body fluids; and
2. Comply with the Occupation Safety and Health Administration (OSHA) Bloodborne Pathogens Standard, 29 CFR 1910.1030 and its Appendix A.

2.0 Exposure Determination

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials (OPIM). The exposure determination is made without regard to the use of personal protective equipment (i.e., employees are considered to be exposed even if they wear personal protective equipment). In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur exposure to blood or OPIM, tasks or procedures that would cause these employees to have

occupational exposure must also be listed in order to understand clearly which employees in these categories are considered to have occupational exposure. The exposure determination lists all job classifications in which all and some employees may be expected to incur such as occupational exposure, regardless of frequency. At these facilities, Table 1 lists the job classifications in this category.

Table 1. Job classifications and associated tasks.

Job Classification (General)	Position Titles (Specific)	Task/Procedure
Marine Patrol Officers	All law enforcement officers (all levels)	Law Enforcement/First Responder
Shellfish Sanitation and Recreational Water Quality Staff (field and lab)	Environmental Health Specialists, Environmental Specialist II, Environmental Program Supervisors, Environmental Technicians, Microbiological Lab Technicians	Works with equipment that may puncture the skin. May be exposed to wastewater pathogens.
Supervisors	Environmental Program Supervisors District Managers	Occasional conditions may exist resulting in exposure
Biologists	Marine Fisheries Biologists II (all) Marine Fisheries Biologists I (all)	Works in bodies of water where there is a possible level of contamination, including wastewater pathogens, and works with marine species and equipment that may puncture the skin. May also operate marine vessels, heavy equipment, and machinery
Technicians	Marine Fisheries Technicians II (all) Marine Fisheries Technicians I (all)	Works in bodies of water where there is a possible level of contamination, including wastewater pathogens, and works with marine species and equipment that may puncture the skin. May also operate marine vessels, heavy equipment, and machinery

Facility Maintenance Staff	Maintenance Supervisor General Utility Workers (all)	Perform maintenance on facilities and equipment. Operate marine vessels, heavy equipment, and machinery, during which, conditions may exist resulting in exposure.
Vessel Captains, Engineers, and Crew	R/V Captain (all) R/V Engineers (all) R/V Crewmembers (all)	Operates marine vessels, machinery, heavy equipment and works with marine species that may puncture the skin.

Potential Exposures: All employees who tag, dissect, or insert tracking units into fish are potentially exposed to sharps. Some of the specific sharps exposures at DMF include the following:

1) Surgical grade scalpel blades are used to tag Spotted Seatrout and Red Drum with internal anchor tags. Scalpel blades are also used in the surgical application of internal acoustic tags in species such as Atlantic Sturgeon and Striped Bass.
2) Stainless steel cannula (6-7" long), either hold or solid, are used to tag Southern Flounder with spaghetti tags.
3) Stainless steel dart tag applicators (4-5" long) are used to tag Red Drum with stainless steel dart tags.
4) Stainless steel billfish tag applicators (3-4" long) are used to tag Cobia with billfish dart tags.
5) T-bar guns are used to tag Atlantic Sturgeon and other species with T bars tags.
6) PIT tag syringe injectors and needles are used to tag Atlantic Sturgeon, Striped Bass, and other species with internal PIT tags.
7) The DMF's Marine Mammal Response Program uses hypodermic needles in field stranding response for live and recently dead animals to collect ocular fluids and blood.

3.0 Implementation Schedule and Methodology

OSHA requires that this plan include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement.

3.1 Compliance Methods

Universal precautions will be observed at these facilities in order to prevent contact with blood or OPIM (other potentially infectious materials). All blood or OPIM will be considered infectious, regardless of the perceived status of the source individual.

Engineering and work practice controls will be used to eliminate or minimize exposure to employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used. At each of these facilities, the following engineering controls will be utilized:

- Dustpan and broom
- Latex Gloves
- Broken glassware container
- Goggles
- Bloodborne Pathogen kits are available at:
  - Morehead City Headquarters – first floor, second floor, shellfish sanitation lab, and shop
  - Morehead City Central District Office—Office No. 18
  - Wilmington Regional Office – Shellfish Sanitation Lab
  - Wilmington Regional Office – Belville Facility
  - Washington Regional Office—Wet Lab
  - Manteo Office—Aging Lab & Shellfish Sanitation Lab
  - Elizabeth City Office—Scientific sampling supplies cabinet
- Bloodborne Pathogen disposal bucket 'Stericycle' (if used, picked up or mailed back to vendor for proper disposal) and available at the Morehead City Headquarters Shop.
- Red contaminated materials plastic bags carried in each Marine Patrol vehicle.

The above controls will be examined and maintained on a regular schedule. The schedule for reviewing the effectiveness of the controls will be quarterly during the division's facility safety inspection. Those responsible are listed in Table 2.

Table 2. Facility and responsible party for maintaining engineered exposure controls.

Facility	Responsible Party
Morehead City HQ	Maintenance Supervisor (Jeremy Taylor)
Morehead City CDO	Maintenance Supervisor (Jeremy Taylor)
South River	Maintenance Supervisor (Jeremy Taylor)
Wilmington Regional Office and Belville	Marine Fisheries Biologist Supervisor (Chris Stewart)
Washington Regional Office	Marine Fisheries Technician II (Chris Braddy)
Manteo	Marine Fisheries Technician II (Kathleen Boylan)

Elizabeth City	Marine Fisheries Technician II (Robert Corbett)

The process for evaluating existing controls and potential changes in engineering controls and work practices involves consultation with non-management direct-care employees through the division's safety committee. This committee is the highest-level safety committee at the division level. It is chaired by the Division Director or designee. It includes the Deputy Director or designee and at least one member from each operational section. The committee is to be composed of supervisory and non-supervisory members and be rotated (review membership and provide an opportunity to rotate annually). This safety committee meeting will be held at least 6 times per year. A written summary of committee actions shall be provided to the Secretary's Safety Subcommittee every two months.

Hand washing facilities are to be made available to employees who experience exposure to blood or OPIM at all DMF facilities. These facilities are readily accessible after experiencing exposure.

For staff working in the field (i.e., vessels or vehicle), antiseptic cleanser is provided on the vessel in conjunction with clean cloth/paper towels or antiseptic towelettes. When these are used in conjunction when exposure to blood or OPIM occurs, employees are to wash with soap and running water as soon as feasible. Antiseptic, cloth/paper towels or antiseptic towelettes are available in the DMF Morehead City HQ warehouse. Those in charge of vessel/vehicles are to acquire and maintain these items on the vessel/vehicle.

Any equipment exposed to blood or OPIM is to be thoroughly cleaned with a strong bleach solution to be mixed for each incident (5 tablespoons bleach per gallon of water or 4 teaspoons bleach per quart of water). This is the most cost-effective means or EPA registered germicides. Another more expensive option is to purchase and use "Steris Coverage Plus" detergent. Information on Steris can be found at:

https://www.sterislifesciences.com/products/surface-disinfectants/pharmaceutical-disinfectants/coverage-plus-npd-one-step-cleaner-disinfectant

Table 3. Those responsible for ensuring potential exposure to bloodborne pathogens and OPIM on vessels and vehicles comply with these procedures.

Responsible for ensuring antiseptic, cloth/paper towels or antiseptic wipes are available at all times	Responsible for ensuring after the removal of personal protective gloves, employees wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.	Responsible for ensuring if employees incur exposure to their skin or mucous membranes, those areas shall be flushed with water as soon as feasible following contact.
Marine Fisheries Technicians (all those assigned a vehicle or vessel and for each assigned) Marine Patrol Officers (all those assigned a vehicle or vessel and for each assigned) R/V Captains (all those assigned a vehicle or vessel and for each assigned) Accounting Clerk IV in charge of DMF travel for vehicles in the motor pool	The person in charge (supervisor of the operation where the potential exposure occurred). The supervisor of the person who may have had potential exposure. DMF management will ensure all employees are aware of responsibilities of varies parties through communication of this exposure plan.	Employees who have incurred possible exposure. The person in charge (supervisor of the operation where the potential exposure occurred). The supervisor of the person who may have had potential exposure. DMF management will ensure all employees are aware of responsibilities of varies parties through communication of this exposure plan.

3.2 Needles

All DMF employees who tag or dissect fish or apply internal acoustic tags to fish are exposed to sharps. All needles and scalpel blades will be treated with universal precautions, meaning that employees assume they are all contaminated. Whenever feasible used sharps will be immediately disposed of in a suitable sharps container and not re-capped or re-used. Persons who may use needles for their personal health must maintain control of the needles, not expose others to needles, and dispose of needles at their homes.

The DMF's Marine Mammal Response Program does use hypodermic needles in field stranding response for live and recently dead animals to collect ocular fluids and blood. When using needles, responders take a field sharps container in the field and then take them to North Carolina State University College of

Veterinary Medicine for proper disposal based on the University's policies.

If DMF operations change requiring use of needles, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented:

> Contaminated needles or other contaminated sharps will not be bent, recapped, removed, sheared, or purposely broken. OSHA allows an exception to this prohibition if the procedure would require that the contaminated needle be recapped or removed and no alternative is feasible, and the action is required by the medical procedure. If such action is required, the recapping or removal of the needle must be done by the use of a mechanical device or a one-handed technique. At this facility, recapping or removal is permitted only for the following procedures: *(List the procedures and specify either the mechanical device to be used or that a one-handed technique will be used.)*
>
> Where feasible, sharps with engineered sharps injury protection (such as self-sheathing needles or needleless systems) will be used.

Recapping Needles:

1) When possible, needles will be used once and not recapped. They will be ejected into a suitable sharps container after use.

2) When needles must be reused, they can be recapped in two ways:
   a) Scoop method: In this method the needle is recapped using only one hand. The cap is placed on or against a surface, scooped onto the needle, and then pressed in place.
   b) Two hand method: In this method the cap is held with hemostats, needle nose pliers, or a similar tool.

At no time should any employee recap a needle while holding the cap in his or her hand. That method is unsafe and can result in needlesticks. Cut gloves and chain metal gloves do not provide protection from needlesticks. Needles are so small they can penetrate between the weaves of either of these glove types.

3.3 Work Area Restrictions

In work areas where there is reasonable likelihood of exposure to blood or OPIM, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, ice coolers, or on counter tops where there is blood or OPIM.

All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or OPIM. At this facility, the following methods will be employed to accomplish this goal:

- Food and ice for human consumption will be kept in 'food only' ice coolers or refrigerators (i.e., not maintained in the same cooler with samples)
- Food will not be placed on counters or lab space where OPIM may be placed.

3.4 Specimens

DMF's operations do not require use or storage of specimens of blood or OPIM and any possible indirect contamination through recreational water sampling programs will follow standard operating procedures in the section on sample collection and processing standard operating procedures. If DMF operations change storage of specimens of blood or OPIM, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented

Specimens of blood or OPIM will be placed in a container that prevents leakage during the collection, handling, processing, storage, and transport of the specimens. The container used for this purpose will be labeled or color-coded in accordance with requirements of the OSHA standard. *(NOTE: The standard provides an exemption for specimens from the labeling/color coding requirement, provided that the facility uses universal precautions in the handling of all specimens and the containers are recognizable as containing specimens. This exemption applies only while the specimens remain in the facility. If the employer chooses to use this exemption, it should be stated here.)*

Any specimens that could puncture a primary container will be placed within a secondary container that is puncture resistant.

If outside contamination of the primary container occurs, the primary container will be placed within a secondary container that prevents leakage during handling, processing, storage, transport, or shipping of the specimen.

3.5 Contaminated Equipment

Table 4 lists individuals responsible for ensuring that equipment, which has become contaminated with blood or OPIM shall be examined prior to servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible.

Table 4. Individuals responsible for ensuring contaminated equipment is examined.

Facility	Responsible Party
Morehead City HQ	Maintenance Supervisor (Jeremy Taylor)
Morehead City CDO	Maintenance Supervisor (Jeremy Taylor)
South River	Maintenance Supervisor (Jeremy Taylor)
Wilmington Regional Office and Belville	Marine Fisheries Biologist Supervisor (Chris Stewart)
Washington Regional Office	Marine Fisheries Technician II (Chris Braddy)
Manteo	Marine Fisheries Technician II (Kathleen Boylan
Elizabeth City	Marine Fisheries Technician II (Robert Corbett)

When single use needles are not practical needles will be disinfected at least at the end of each work shift. Needles are to be disinfected using a strong bleach solution (5 tablespoons bleach per gallon of water or 4 teaspoons bleach per quart of water). This is the most cost-effective means or EPA registered germicides. Another more expensive option is to purchase and use “Steris Coverage Plus” detergent. Needles should be immersed into the disinfecting agent. The disinfecting agent should never be applied by wiping the needle with one’s hand or fingers.

3.6 Personal Protective Equipment (PPE) PPE Provision

Michael Loeffler, DMF Deputy Director, is responsible for ensuring that the following provisions are met:

All PPE used at these facilities will be provided without cost to the employee. PPE will be chosen based on the anticipated exposure to blood or OPIM as identified by employees, supervisors, and managers. The PPE will be considered appropriate only if it does not permit blood or OPIM to pass through or reach the employee’s clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time while the protective equipment will be used.

1) Latex gloves – available to all employees in the DMF Morehead City Headquarters Warehouse

2) Broken glassware container for non–contaminated glass-available in the shellfish sanitation laboratory in the Wilmington Regional Office. Contaminated glassware will be disposed of through use of the Bloodborne Pathogen Kits and Bloodborne Pathogen Disposal Bucket (locations provided in Section 3.1).
es in the Morehead City Headquarters, and Goggles—available to all employees in the

DMF Morehead City Headquarters Warehouse

3) Lab coats—purchased for individuals by the DMF sections requiring this equipment (purchased with DMF funds)
4) Aprons—purchased for individuals by the DMF sections requiring this equipment (purchased with DMF funds)
5) Rain gear (coat, pants, overalls, boats)—purchased for individuals by the DMF sections requiring this equipment (purchased with DMF funds)
6) Marine Patrol Personal Protective Equipment Kit Contents: Tyvek Suit, Medical Gloves, Antimicrobial Wipe, Germicidal Wipe, Face Mask-Eye Shield, Identification Tags, Biohazard Waste Bag, and Instructions

PPE Use

Occasionally, Marine Patrol is requested to conduct search and rescue operations on the water and may be needed for 'body recovery' operations. These activities may be conducted in very inclement weather. For body recovery operations, Marine Patrol Colonel, Major, Captains, Lieutenants, Sergeants, and any supervisor shall ensure the officer performing the operation uses appropriate PPE such as water-proof rain gear (coats, pants, gloves, overalls, etc.) and/or water exposure suits, unless the supervisor shows that the employee temporarily and briefly declined to use PPE when, under rare and extraordinary circumstances, it was the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or posed an increased hazard to the safety of the employee or co-worker. When an employee makes this judgment, the

circumstances shall be investigated and documented to determine whether changes should be instituted to prevent such occurrences in the future.

Otherwise, DMF's operations do not require acquisition, use, or storage of specimens of blood or OPIM but PPE will be available in the event these operations change. If DMF operations change, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented:

> The supervisor and manager of the person *(Name of person/position)* shall ensure that the employee uses appropriate PPE unless the supervisor shows that the employee temporarily and briefly declined to use PPE when, under rare and extraordinary circumstances, it was the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or posed an increased hazard to the safety of the employee or co-worker. When an employee makes this judgment, the circumstances shall be

investigated and documented to determine whether changes should be instituted to prevent such occurrences in the future.

PPE Accessibility

The DMF Purchasing Agent, located in the DMF Morehead City Headquarters Warehouse, shall ensure that appropriate PPE in appropriate sizes is purchased when requested or readily accessible at the work site or is issued (without cost) to employees if and when identified by appropriate DMF staff. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily available to employees at all times who are allergic to the gloves normally provided if and when identified by appropriate DMF staff.

PPE Cleaning, Laundering, and Disposal

DMF's operations do not require PPE to be laundered due to the contamination of blood or OPIM. If exposure occurs, contaminated materials will be placed in the plastic bag provided in the Bloodborne Pathogen Kits and sealed (ensure these are labeled properly as biohazard). Sealed biohazard bags will be transported to the Morehead City Headquarters Shop and placed in a 'Stericycle' disposal bucket to be mailed or retrieved by a contracted vendor for proper disposal (see section 3.1 for locations).

Any Marine Patrol Officer whose clothing becomes contaminated from blood or other body fluids shall remove the clothing as soon as possible. That area of skin contacted by the contaminated area of the clothing should be cleansed with disinfectant and washed as soon as possible with soap and water. Officers will not wear contaminated clothing but will change uniforms before resuming their duties. The clothing shall be placed in the red contaminated materials plastic bag carried in each patrol vehicle. The clothing will either be disposed of or taken to the proper location for decontamination and cleaning.

Marine Patrol will decontaminate potentially contaminated rain gear with a strong bleach solution (200 – 400 parts per thousand) to be mixed for each incident. Marine Patrol may also dispose of contaminated materials through drop-off at local hospitals that provide contaminated cleaning and disposal to

first responders. Otherwise, if DMF operations change, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented:

All PPE will be cleaned, laundered, and/or disposed of by the employer at no cost to employees. All repairs and replacements will be made by the employer at no cost to employees.

All garments that are penetrated by blood or OPIM shall be removed immediately, or as soon as feasible. All PPE shall be removed before leaving the work area. When PPE is removed, it shall be placed in an appropriately designated area or container for storage, laundering, decontamination, or disposal.

Gloves

If exposure occurs, contaminated materials will be placed in the plastic bag provided in the Bloodborne Pathogen Kits and sealed (ensure these are labeled properly as biohazard). Sealed biohazard bags will be transported to the Morehead City Headquarters Shop and placed in a 'Stericycle' bloodborne disposal bucket to be mailed or retrieved by a contracted vendor for proper disposal (see section 3.1 for locations).

Anytime a Marine Patrol Officer anticipates contact with blood, or any kind of body fluid or with any person suspected of having a communicable disease, they are to don protective gloves as soon as possible prior to contact. After using protective gloves, they shall be placed in the red contaminated materials plastic bag carried in each patrol vehicle and the hands shall be washed as soon as possible with soap and water. If there will be any delay, hand sanitizer lotion should be used. If contact occurs to any blood or body fluid without having PPE on, the area(s) of skin contacted shall be cleansed with disinfectant and washed as soon as possible with soap and water.

Otherwise, DMF's operations do not require hand contact with blood, OPIM, non-intact skin, and mucous membranes; when performing vascular access procedures; and when handling or touching contaminated items or surfaces. If DMF operations change, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented:

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, OPIM, non-intact skin, and mucous membranes; when performing vascular access procedures; and when handling or touching contaminated items or surfaces.

Disposable gloves used at this facility are not to be washed or decontaminated for re- use and are to be replaced as soon as practical when they become contaminated or if they are torn, punctured, or their ability to function as a barrier is compromised. Utility gloves may be decontaminated for re-use, provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or show other

signs of deterioration or when their ability to function as a barrier is compromised.

Eye and Face Protection

DMF's operations do not include splashes, spray, splatter, or droplets of blood or OPIM that may be generated and eye, nose, or mouth contamination that can be reasonably anticipated. If DMF operations change, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented:

Masks, in combination with eye protection devices such as goggles or glasses with solid side shields, or chin length side face shields must be worn whenever splashes, spray, splatter, or droplets of blood or OPIM that may be generated or eye, nose, or mouth contamination that can be reasonably anticipated. The following situations at this facility require such protection:

Additional Protection

DMF's operations do not include gross contamination that can reasonably be anticipated (e.g., no exposure to massive amounts of blood or OPIM).

Additional protective clothing (such as rain gear, exposure suits, or similar outer garments) shall be worn when gross contamination can reasonably be anticipated (e.g., exposure to massive amounts of blood or OPIM). The following situations at this facility would require that such protective clothing be used:

Marine Patrol Body Recovery Operations

Marine Patrol Officers will use their issued PPE when dealing with any incident where bloodborne pathogens may be present. Additionally, Officers will wear their issued rain gear when engaged in the recovery of deceased individuals from the water. If the rain gear is contaminated, officers are to clean said equipment with an issued cleaning agent such as a strong bleach solution (200 – 400 parts per thousand) to be mixed for each incident. If exposure occurs, contaminated materials shall be placed and sealed in the red contaminated materials plastic bag carried in each patrol vehicle (ensure these are labeled properly as biohazard). Sealed biohazard bags will be transported to the Morehead City Headquarters Shop and placed in a 'Stericycle' disposal bucket to be mailed or retrieved by a contracted vendor for proper disposal. A new PPE Kit will be issued.

3.7 Housekeeping

DMF's operations do not include regular need for decontamination. If DMF operations change, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented:

This facility will be cleaned and decontaminated according to the

following schedule: Area

Schedule

Cleaner

However, if contamination occurs unexpectedly, the contaminated area will be accomplished by using the following materials: a strong bleach solution (200 – 400 parts per thousand) to be mixed for each incident or EPA registered germicides.

All contaminated work surfaces will be decontaminated after completion of procedures, and immediately or as soon as feasible after any spill of blood or OPIM, as well as at the end of the work shift if the surface may have become contaminated since the last cleaning.

If and when contamination occurs, all bins, pails, cans, and similar receptacles shall be inspected and decontaminated by DMF Facility Maintenance staff or responsible parties listed in Table 2.

Any broken glassware that may be contaminated will not be picked up directly with the hands.

3.8 Regulated Waste Disposable Sharps

All DMF employees who tag fish are exposed to sharps. All needles will be treated with universal precautions, meaning employees will assume all needles are contaminated. Whenever feasible used sharps will be immediately

disposed of in a suitable sharps container and not re-capped or re-used. Persons who may use needles for their personal health must maintain control of the needles, not expose others to needles, and dispose of needles at their homes.

The DMF's Marine Mammal Response Program does use hypodermic needles

in field stranding response for live and recently dead animals to collect ocular fluids and blood. When using needles, responders take a field sharps container in the field and then take them to North Carolina State University College of Veterinary Medicine for proper disposal based on the Universities' policies.

Disposable sharps shall be discarded immediately (or as soon as feasible) in containers that are closable, puncture resistant, leak proof on sides and bottom, and labeled or color- coded. This applies to all contaminated sharps, regardless of whether they are designed with sharps injury prevention features.

During use, containers for contaminated sharps shall be easily accessible to personnel and located as close as feasible to the immediate area where sharps are used or can reasonably be anticipated to be found (e.g., laundries). The containers shall be kept upright throughout use and replaced routinely, and not be allowed to overfill. When moving containers of contaminated sharps from the area of use, the containers shall be closed prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

The container shall be placed in a secondary container if leakage of the primary container is possible. The second container shall be closeable, constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping. The second container shall be labeled or color-coded to identify its contents.

Disposing of sharps into municipal waste streams is only allowed for personal use needles, such as diabetics. Sharps generated by DMF employees are not to be disposed of in municipal waste streams. Each department will maintain a sharps box that will be disposed of by a hazardous waste disposal company.

Other Regulated Waste

If disposing of regulated waste occurs, contaminated materials will be placed in the plastic bags in the Bloodborne Pathogen Kits and taken to the Morehead City HQ Shop to be placed in the 'Stericylcle' bloodborne pathogen bucket to be mailed or picked up by the vendor for proper

disposal (see section 3.1).

Otherwise, DMF's operations do not include the need for disposing of other regulated waste. If DMF operations change, this plan will be updated with notation of the date this change is implemented and the following

procedures will be implemented:

Other regulated waste shall be placed in containers that are closeable and constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping. The waste container must be labeled or color-coded and closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

NOTE: Disposal of all regulated waste shall be in accordance with all applicable federal, state, and local regulations.

3.9 Laundry Procedures

DMF's operations do not include laundry that may be contaminated. However, if this occurs, laundry contaminated with blood or OPIM will be handled as little as possible. Such contaminated materials will be place and sealed in the plastic bag provided in the Bloodborne Pathogen Kit. For Marine Patrol, contaminated clothing shall be placed in the red contaminated materials plastic bag carried in each patrol vehicle. Sealed bags are to be delivered to the Morehead City Headquarters Shop for placement in the 'Stericycle' containment buckets to be mailed or picked up by the vendor for proper disposal (see section 3.1 for locations).

Marine Patrol will decontaminate potentially contaminated rain gear with a strong bleach solution (200 – 400 parts per thousand) to be mixed for each incident. Marine Patrol may also dispose of contaminated materials through drop-offs at local hospitals that provide contaminated cleaning and disposal to first responders.

3.10 Hepatitis B Vaccine and Post-Exposure

Evaluation and Follow-up General

The Division of Marine Fisheries shall make available the Hepatitis B vaccine and vaccination series to employees whose occupation requires them to respond to health-related situations (possibly Marine Patrol Officers). If a position is not required to respond to health-related situations, but regularly or consistently does respond to health-related situations, then

vaccinations will be offered, if requested, and post-exposure follow-up to employees who have had an exposure incident (possibly Marine Patrol officers).

DMF's Human Resources Manager, shall ensure that all medical evaluations and procedures including the Hepatitis B vaccine and vaccination series and post-exposure follow-up including prophylaxis are:

a) Made available at no cost to the employee.
b) Made available at a reasonable time and place.
c) Performed by, or under the supervision of, a licensed physician or other licensed healthcare professional; and
d) Provided according to the recommendations of the US Public Health Service.

Hepatitis B Vaccination

DMF's operations do not require Hepatitis B vaccinations, but in the event a position regularly or consistently does respond to health-related situations, then they may be offered Hepatitis B vaccine.

DMF's Human Resources Manager oversees the Hepatitis B vaccination program and will identify the provider for this service, when needed.

Hepatitis B vaccination will be made available after the employee has received the training in occupational exposure (see "Information and Training" section), and within 10 working days of initial assignment to all employees who have occupational exposure unless: the employee has previously received the complete Hepatitis B vaccination series; antibody testing has revealed that the employee is immune; or the vaccine is contraindicated for medical reasons.

Participation in a pre-screening program shall not be a prerequisite for receiving Hepatitis B vaccination.

For employees who complete the Hepatitis B vaccination series, antibody testing will be made available at no cost to the employee, one to two months after completion of the series, as recommended by the US Public Health Service.

Employees who decline the Hepatitis B vaccination shall sign the OSHA-required declination form indicating their refusal (see Attachment 1). Any employee who initially declines Hepatitis B vaccination, but later decides to accept the vaccination while still covered by the standard, shall be provided the vaccination series as described above.

If, at a future date, the US Public Health Service recommends a routine booster dose of Hepatitis B vaccine, such booster doses shall be made available.

Post-Exposure Evaluation and Follow-up

All exposure incidents shall be reported, investigated, and documented. When an employee incurs an exposure incident, it shall be reported to their immediate supervisor who will contact DMF Human Resources Manager for guidance on proper medical follow-up and conduct an incident investigation according to the DMF Safety Policy Manual.

Following a report of an exposure incident, the exposed employee shall immediately receive a confidential medical evaluation and follow-up, including at least the following elements:

a) Documentation of the route of exposure, and the circumstances under which the exposure incident occurred. If the incident involves a percutaneous injury from a contaminated sharp, appropriate information should be entered in the sharps injury log. *(Must also be entered on the OSHA 300 form).*
b) Identification and documentation of the source individual, unless it can be established that identification is infeasible or prohibited by state or local law.
c) The source individual's blood shall be tested as soon as feasible, and after consent is obtained, to determine HBV and HIV infectivity. If consent is not obtained, a Department of Environmental Quality (DEQ) attorney shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the blood (if available) shall be tested, and the results documented.
d) When the source individual is already known to be infected with Hepatitis B (HBV) or Human Immunodeficiency Virus (HIV), testing for the source individual's HBV/HIV status need not be repeated.
e) Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

Collection and testing of blood for HBV and HIV serological (blood serum) status will comply with the following:

a) The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.
b) The employee will be offered the option of having her/his blood collected for testing of the employee's HIV serological status. The blood sample

will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV status.

Any employee who incurs an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard. All post-exposure follow-up will be provided by a provider identified by the DMF Human Resources Manager.

Marine Patrol: Any Officer who has unprotected physical contact with blood or other bodily fluids of another person while in the line of duty shall be considered to have been potentially exposed to HBV and/or HIV. In cases of exposure, a Captain shall be contacted who shall complete a first report of injury and shall take appropriate steps to document the means and circumstances under which the exposure occurred. Immediately after exposure, the employee shall proceed to the designated health care facility for tests of evidence of infection and treatments of any injuries. The Marine Patrol shall ensure continued testing of the employee for evidence of infection and provide initial psychological counseling at no cost to the employee as determined necessary by the health care official. The employee shall receive a copy of the evaluation and information on any conditions resulting from the exposure that require further evaluation or treatment. Unless disclosure to an appropriate Marine Patrol official is authorized by the employee or by state law, the employee's medical evaluation, tests results and any follow-up procedures shall remain confidential.

Information Provided to the Healthcare Professional

DMF's Human Resources Manager through the employee's supervisor shall ensure that the healthcare professional (HCP) responsible for the employee's Hepatitis B vaccination is provided with a copy of the OSHA Bloodborne Pathogens standard (29 CFR 1910.1030).

DMF's Human Resources Manager through the employee's supervisor shall ensure that the HCP who evaluates an employee following an exposure incident is provided with the following:

a) A copy of the OSHA Bloodborne Pathogens standard; *(The standard outlines confidentiality requirements, but the employer should ensure that the HCP is aware of these requirements.)*
b) A description of the exposed employee's duties as they relate to the exposure incident.
c) Documentation of the route(s) of exposure and circumstances under which exposure occurred.
d) Results of the source individual's blood testing, if available; and
e) All medical records relevant to the appropriate treatment of the

employee, including vaccination status.

Health Care Professional's Written Opinion

DMF's Human Resources Manager shall obtain and provide the employee with a copy of the evaluating HCP's written opinion within 15 days of completion of the evaluation. For HBV vaccination, the HCP's written opinion shall be limited to whether vaccination is indicated for an employee, and if the employee has received such vaccination.

For post-exposure follow-up, the HCP's written opinion shall be limited to the following:

a) A statement that the employee has been informed of the results of the evaluation; and
b) A statement that the employee has been told about any medical conditions resulting from exposure to blood or OPIM which may require further evaluation or treatment.

NOTE: All other findings or diagnosis shall remain confidential and shall not be included in the written report.

3.11 Labels and Signs

DMF's operations do not require use or storage of specimens of blood or OPIM, but if storage become necessary, the supervisor of the person storing the specimen or OPIM will ensure that biohazard labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or OPIM, and other containers used to store, transport or ship blood or OPIM. The universal biohazard symbol shall be used. Labels shall be fluorescent orange or orange- red and shall be affixed as close as feasible to the container by string, wire, adhesive, or other method prevents loss or unintentional removal. Red bags or containers may be substituted for labels.

Labels for contaminated equipment shall comply with the previous paragraph and shall state which portions of the equipment are contaminated.

The following are exempted from the labeling requirement:
a) Containers of blood products that have been released for transfusion or other clinical use.
b) Containers of blood or OPIM that are placed in a labeled container for storage, transport, shipment, or disposal; and
c) Regulated waste that has been decontaminated.

3.12 Information and Training

DMF's Human Resources Manager and the direct supervisor of the person in the position requiring Bloodborne Pathogen training as listed in Table 1 shall ensure that the need for training is communicated and provided at the time of initial assignment to tasks where occupational exposure may occur as outlined on the new employee orientation safety checklist, and that training is repeated as needed.

Training shall be tailored to the education and language level of the employee and offered during normal work hours. Training covers the following:

a) A copy of the DMF Bloodborne Pathogen Exposure Plan.
b) A copy of the OSHA standard and an explanation of its contents.
c) A discussion of epidemiology and symptoms of bloodborne diseases.
d) An explanation of the modes of transmission of bloodborne pathogens.
e) An explanation of the organization's Bloodborne Pathogen Exposure Control Plan (this program), and the method for obtaining a copy.
f) The recognition of tasks that may involve exposure.
g) An explanation of the use and limitations of methods to reduce exposure, such as engineering controls, work practices, and PPE.
h) Information on the types, use, location, removal, handling, decontamination, and disposal of PPE.
i) An explanation of the basis of selection of PPE.
j) Information on the Hepatitis B vaccination, including efficacy, safety, method of administration, benefits, and that it will be offered free of charge.
k) Information on the appropriate actions to take and people to contact in case of an emergency involving blood or OPIM.
l) An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow-up.
m) Information on the evaluation and follow-up required after an employee exposure incident, particularly incidents which involve needle sticks or contaminated sharps; and
n) An explanation of the signs, labels, and color-coding system used to identify biohazards, regulated waste, and other potential Bloodborne Pathogen hazards.

The person conducting the training shall be knowledgeable in the subject matter. Employees who have received training on bloodborne pathogens preceding the effective date of this policy shall receive training only in provisions of the policy that were not covered in their previous training. Additional training shall be provided to employees when there are changes in tasks or procedures that affect occupational exposure.

Note: Shellfish Sanitation section shoreline survey and plant inspection staff undergo fairly extensive training when first hired, including "Centralized Intern Training," that is the same training all local health department staff undergo as detailed in:

https://ehs.dph.ncdhhs.gov/oet/cit.htm

3.13 Recordkeeping Medical Records

DMF's Human Resources Manager is responsible for maintaining medical records as indicated below. These records will be kept in the secured DMF Human Resources Office in the Morehead City Headquarters office file storage room and file cabinets and filed in accordance with legal guidance for the retention of employee's medical records. *(NOTE: If you contract for post-exposure follow-up and Hepatitis B vaccination evaluation, make sure the contract language includes provisions for recordkeeping that are consistent with the requirements of 29 CFR 1910.1020.)*

Medical records shall be maintained in accordance with OSHA standard 29 CFR1910.1020. These records shall be kept confidential and must be maintained for the duration of employment plus 30 years. The records shall include the following:

a) The employee's name and social security number or employee ID number.
b) A copy of the employee's HBV vaccination status, including the dates of vaccination OR a signed declination form.
c) A copy of all results of examinations, medical testing (including post-vaccination antibody testing), and follow-up procedures; and
d) A copy of the information provided to the healthcare professional, including a description of the employee's duties as they relate to the exposure incident, documentation of the route(s) of exposure, and circumstances of the exposure.

3.14 Training Records

DMF's Human Resources Manager is responsible for maintaining Bloodborne Pathogen training records. These records will be kept by the DMF Human Resource Manager in the DMF Human Resources office's training files in Morehead City Headquarters office.

Training records shall be maintained for 3 years from the date of training, and shall document the following information:

a) The dates of the training sessions.
b) An outline describing the material presented.

c) The names and qualifications of persons conducting the training; and
d) The names and job titles of all persons attending the training sessions.

3.15 Sharps Injury Log

DMF's operations do not require use of needles so DMF does not dispose contaminated needles or other contaminated sharps. Persons who may use needles for their personal health must maintain control of the needles, not expose others to needles and dispose of needles at their homes. If DMF operations change requiring use of needles, this plan will be updated with notation of the date this change is implemented and the following procedures will be implemented:

For cases that involve percutaneous injury from contaminated sharps, the safety consultant is responsible for maintaining a sharps injury log. Information shall be entered on the log so as to protect the confidentiality of the injured employee. At a minimum, log entries shall document the following:

a) The type and brand of device involved in the incident.
b) The department or work area where the incident occurred; and
c) An explanation of how the incident occurred.

The sharp injury log (Attachment 2) is required in addition to the OSHA 300 log.

Availability

All employee records shall be made available to the employee in accordance with 29 CFR 1910.1020.

All employee records shall be made available to the Assistant Secretary of Labor for Occupational Safety and Health (OSHA) and the director of the National Institute for Occupational Safety and Health (NIOSH), or their representatives, upon request.

Transfer of Records

If this facility is closed and/or there is no successor employer to receive and retain the records for the prescribed period, the Director of NIOSH shall be contacted for final disposition.

3.16 Evaluation and Review

DMF's Safety Committee Chairman, is responsible for annually reviewing this program and its effectiveness, and for updating this program as needed.

This review shall include and document:

a) Consideration and implementation, where feasible, of commercially available safer medical devices designed to eliminate or minimize occupational exposure; and
b) Input from non-management direct care staff that are potentially exposed to injury from contaminated sharps on identification, evaluation and selection of engineering and work practice controls.

3.17 Outside Contractors

If DMF's operations change requiring a written exposure plan to address information obtained from and/or provide to outside contractor, the DMF may establish standard operating procedures for these situations and append them to this document.

Attachment 1

Hepatitis B Vaccine Declination

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 vaccine series at no charge to me.

_____
Employee's name (print)

_____
Employee's signature

_____
ECP Administrator signature

_____
Date

Attachment 2

Current DMF operations do not require use of needles, so DMF does not dispose of contaminated needles or other contaminated sharps. Persons who may use needles for their personal health must maintain control of the needles, not expose others to needles and dispose of needles at their homes. If DMF operations change requiring use of needles, this plan will be updated, and this log will be implemented.

Establishment/Facility Name: _____ Year 2

_____

Sharps Injury Log

Date / Time	Report No.	Type of Device (syringe, needle, etc.)	Brand Name of Device	Work Area where injury occurred (Lab, etc.)	Brief description of how injury occurred and what part of body was injured
06/25/05 13:05	001-05	Syringe	Injecto Ease	Sterile Lab	Employee cleaning up broken glass containing blood. A piece of glass stuck in Right Thumb of Employee.

Retain until: __/__/__ (which is five years after the end of the current calendar year).

You are required to maintain this Sharps Log if the requirement to maintain an

OSHA 300 log form applies to your company. See 29 CFR 1904 for details. The purpose of this Sharps Log is to aid in the evaluation of devices being used in healthcare and other facilities and to identify problem devices or procedures requiring additional attention and/or review. This Sharps Log must be kept in a manner which preserves the confidentiality of the affected employee(s).

Re: 29 CFR 1910.1030(h)(5)