Blood-borne Pathogens in the Department of Health and Human Services Work Areas

Policy #: DHHS-13-05

I. SUBJECT

Blood-borne Pathogens in the Department of Health and Human Services Work Areas.

II. POLICY STATEMENT

It is the Department of Health and Human Services ("DHHS") policy to use standard precautions regarding infectious materials, particularly blood-borne pathogens. Contact with recipients of services shall be considered potentially infectious. Employees whose jobs require them to physically touch clients/patients shall be offered routine immunizations against blood-borne pathogens, at no cost to the employee.

III. RATIONALE

The goal of the Department is to ensure staff and clients are protected from infectious materials including blood-borne pathogens.

IV. PROCEDURE STATEMENT

Standard infection prevention (through the use of personal protective equipment ("PPE")) shall be used by all employees who are at risk of exposure to blood-borne pathogens. Standard precautions include wearing gloves, masks, eye protection, face shields, gowns, aprons, and using proper hand-washing techniques.

Each facility and program shall develop and maintain an exposure to blood-borne pathogens plan that includes standard precautions and safe work practices. Procedures will also be developed for each facility/program outlining post-exposure prophylaxis and medically necessary evaluations of reported illnesses.

All of Department of Health and Human Services staff shall receive training in infection control at the time of initial hire and at regularly scheduled intervals thereafter. The training will consist of proper use of standard precautions to prevent contact with blood and other potentially infectious body fluids. PPE shall be available and worn when there is a risk of exposure to blood-borne pathogens. Additionally, all employees engaged in direct care functions shall receive annual updates on developments in infection control specifically related to blood-borne pathogens.

V. DISTRIBUTION

All Department employees via e-mail and posting on the DHHS intranet.

September 10, 2014
Revised Date

Mary C. Mayhew, Commissioner