16.0 SAFETY, RISK MANAGEMENT & LOSS PREVENTION (ADOPTED FEBRUARY 7TH, 2017, AMENDED SEPTEMBER 18TH, 2018)

16.01 GENERAL SAFETY POLICY STATEMENT

McLennan County is committed to providing a safe workplace for our employees. Each County employee must adhere to the general safety standards established for all employees as well as comply with their departmental/office safety requirements. Safety procedures may differ at each County department/office. The supervisory authority will provide the employee with specific information pertaining to the employee’s position. Failure to follow the safety standards set by the County or department/office subjects an employee to disciplinary action, up to and including termination. Employees seeing unsafe working conditions shall either take steps to correct those conditions or report the unsafe conditions to their superior.

16.02 PURPOSE

The purpose of this Policy Guide is to:
- Express certain new safety expectations and work rules;
- Serve as a reminder of existing safety expectations and work rules;
- Designate responsibilities, both general and specific, for maintaining a safe workplace;
- Address dangerous or hazardous condition identification, mitigation, and correction;
- Address sharing of information regarding workplace injuries or incidents, and better coordination between all departments to assist in the identification of unsafe practices, equipment, or conditions;
- Address emergency procedures;
- Address preventative measures;
- Provide guidance for reporting unsafe conditions, equipment, or practices;
- Address hazardous substance communication, reporting, recordkeeping, safety equipment and audits; and
- Encourage a team concept for the maintenance of a safe work environment.

This Policy Guide is intended to address not only the safety of employees, but the safety of the public as well.
16.03 SCOPE OF THE POLICY GUIDE

It is impossible to address all workplace rules in a general policy manual. For example, specific safety and operational rules generally are maintained at the department/office/worksite level.

These policies are applicable to all employees of McLennan County (the “County”) except where otherwise expressly indicated. This McLennan County Safety Policy Guide is applicable to all McLennan County locations.
Failure to comply with the expectations and rules set forth herein can result in disciplinary action, up to and including termination.

16.04 RESPONSIBILITY OF THE EMPLOYEES

Employees are expected to report any dangerous or hazardous condition(s) they see or encounter to their supervisor or department head/elected official. Employees are also expected to report the dangerous condition of equipment or vehicles to their supervisor or department head/elected official. If appropriate action is not taken after the report to mitigate and correct the condition, an employee is expected to report the condition to the Human Resource Department.

Employees MUST report every on the job injury/illness to their supervisor. No exceptions. Work related injuries should receive medical coverage from the County’s Worker’s Compensation Insurance plan. An employee’s health plan should NOT be used to cover medical costs related to a work related injury or work related contracted illness. Failure to timely report puts the employee at risk of loss or delay of benefits. WORKERS’ COMPENSATION INSURANCE IS A BENEFIT TO EMPLOYEES, BUT IT ALSO PROVIDES PROTECTION TO THE COUNTY FROM LAWSUITS BY SERVING AS AN EMPLOYEE’S SOLE REMEDY FOR WORKPLACE INJURY. This will start being more closely monitored. Training will be provided.

Accidents or incidents resulting in damage to property must be reported to your supervisor immediately.

Observe all work safety rules, including department/office specific rules. Wear Personal Protective Equipment (PPE) where required or necessary. Report the absence or poor condition of PPE to your supervisor or department head/elected official. If appropriate action is not taken after the report, an employee is expected to report the condition to the Human Resource Department.

Employees and supervisors who do not follow the rules, placing the County in danger will face discipline, up to and including discharge.

FOLLOW MANUFACTURER’S INSTRUCTIONS. It is recognized that certain safety elements of equipment can make work more time-consuming or more difficult; but those safety elements are on the equipment for a reason. Example: do not remove guards from power saws; do not disable kill switches on mowers; do not operate mowers or other equipment on slopes that are too steep for the equipment to maintain stability, etc. When dealing with chemicals, carefully follow manufacturer’s instructions as to correct use and safety precautions.

USE COMMON SENSE— Be careful with sharp objects, do not wear loose clothing around belt-driven or rotary tools, make sure the electricity is turned off and tagged/locked out before doing electrical work, do not try to lift something that is too heavy for you to safely lift, do not have an open flame near
combustibles, do not rig ladders together to try to get to a high spot, do not use equipment for other than its intended purpose, etc.

Employees are expected to bring dangerous situations and practices to the attention of the County. This includes not only conditions that present dangers in the workplace, but also conditions noted on County premises that could endanger the public.

Employees and supervisors are responsible and will be held accountable for providing the County with a commitment to the safety and health program, abiding by the policies, procedures, rules set forth by the program and becoming actively involved in the program to assist in providing a safe and healthy workplace for all involved.

16.05 RESPONSIBILITY OF SUPERVISORS

Supervisors are a key component of workplace safety.

Expectations of ALL supervisors:

- Make sure that employees are following work safety rules, including the safety expectations set forth above;
- Assure that tools, equipment and vehicles to be used by employees are in safe condition;
- Assure the tools, equipment, or vehicles assigned to an employee for a project are properly rated and safe for such a project;
- Train employees on the proper and safe use of tools, vehicles and equipment;
- Do NOT allow an employee to operate a vehicle or equipment that he/she has not been trained to operate, or for which he or she does not hold appropriate licensure;
- Identify and correct dangerous or hazardous conditions, or if beyond the supervisor’s means or expertise, report the condition to the department head/elected official immediately;
- Act on reports of dangerous or hazardous conditions reported by employees where appropriate either by correcting the condition, or if beyond the supervisor’s means or expertise, report the condition to the department head/elected official immediately;
- Pending correction, mitigate potential harm from a condition, including by signage, barricade, or other manner that provides clear warning;
- Inventory the condition of equipment and vehicles and make recommendations for repairs or for the item to be taken out of service where it has become potentially dangerous;
- If inspections or permits are required for vehicles or equipment—do not place a vehicle or piece of equipment in service if its inspection/permit has expired;
- Hold periodic safety meetings, and specifically address unsafe practices that you have observed;
- Discipline employees who violate work safety rules or who otherwise have conducted work in an unsafe manner;
- Do not be complacent or neglectful to carry out preventative maintenance on a regularly scheduled basis instead of waiting for a component failure;
- Assure safe storage of combustibles;
- Comply with all requirements of the Hazardous Substances Communication Policy set forth herein;
- Assure that each County vehicle and piece of heavy equipment under his or her control is equipped with a fire extinguisher and a first aid kit;
- Lead by example; and
• Basically, use best efforts to maintain a safe and healthy work environment.

Supervisors MUST report every on the job injury/illness of employees (or themselves) to the Workers’ Compensation Representative. Failure to timely report puts the employee at risk of loss or delay of benefits and places the County in the position of often double paying. WORKERS’ COMPENSATION INSURANCE IS A BENEFIT TO EMPLOYEES, BUT IT ALSO PROVIDES PROTECTION TO THE COUNTY FROM LAWSUITS BY SERVING AS AN EMPLOYEE’S SOLE REMEDY FOR WORKPLACE INJURY.

16.06 DEPARTMENT HEADS AND ELECTED OFFICIALS

It is extremely important that the supervisors and employees feel supported in their efforts to maintain a safe work environment, and are not fearful of reporting unsafe conditions, vehicles, equipment, or practices. All departments/offices have a budget to worry about; however, the failure to address safety issues out of budgetary concerns will often lead to liability or other issues that are far costlier than the fix would have been.

16.07 REPORTS TO HUMAN RESOURCES

When failure to take corrective action on dangerous or hazardous conditions, vehicles, equipment, or practices, report the concerns to Human Resources. Human Resources will contact the department head or elected official to make sure that they are, in fact, aware of the report, and whether any action is being taken to address the matter. Part of this communication may also involve determining the veracity of the report. Except in situations where the report is insubstantial or incorrect, if the department head or elected official indicates that no corrective action will be taken or that corrective action will be delayed for a significant period, the matter will be reported by Human Resources to the Commissioners Court for consideration by the Court.

16.08 IMPORTANCE OF COMMUNICATION

Conditions that are dangerous may be identified and corrected early on if information is shared.

Going forward all incident/accident reports involving falls, slips, or other harm to members of the public should be reported (w/o any medial information) to the County Judge’s Office. If the person asks where to report the incident to the County, direct the person to the County Judge’s Office. WHETHER OR NOT the purportedly injured person makes a report to the County Judge’s Office, the official, department head or employee MUST do so. Forms will be provided by the County Judge’s Office. The County Judge’s Office will promptly copy the Workers’ Compensation Representative with reports received. Information regarding the incident will be provided to Human Resources and the Director of Building Maintenance as the reports/claims are received. A dangerous condition causing incidents cannot be fixed if it is not known about.

Notifications and reports of work related injuries or work related illness must be shared with the Human Resources Office immediately to provide the employee with all applicable support services. To check for trends, possible safety equipment, or training needs, workers compensation injury report information
that does not identify the claimant, but identifies the department, work activity involved, harm, and cause should be provided by Human Resources and reported to the Commissioners Court quarterly.

16.09 SAFETY RULES OF GENERAL APPLICABILITY

The following rules are designed to promote the safety and wellbeing of County employees and are to be observed by employees at all times:

- No employees may engage in horseplay, wrestling, or practical joking while on duty or operating County equipment;
- Employees should maintain awareness of potential dangerous situations that may cause injury or illness to themselves, fellow employees, or the public;
- If a severe or life-threatening injury occurs, immediately call 911;
- Employees must report immediately to their supervisory authorities any conditions that, in their judgment, threaten the health or safety of employees or the public;
- An employee who is unable to perform his or her duties safely due to illness or injury must promptly notify his or her supervisor. Employees must immediately seek proper first aid treatment for all on-the-job injuries and illnesses and report these injuries and illnesses to their supervisor unless emergency circumstances exist;
- Employees shall not turn on, use, repair or operate any vehicle, crane, electricity, gas, steam, air, acid, caustic or other dangerous material or equipment unless qualified, and authorized by a supervisory authority;
- Only tools, equipment, machines, etc. that are properly maintained and adjusted may be used;
- Safety guards and safety devices on equipment shall not be disabled or removed;
- Floors must be kept free of any material or substance that might constitute a tripping or slipping hazard. Employees responsible for any such material or substance spilled shall clean it up immediately;
- Any employee involved in an incident that damages County property or injures them or others are subject to a drug and alcohol test;
- Offices should be arranged in a manner to provide unobstructed, safe movement of employees;
- Floors and carpeting shall be maintained in a safe condition;
- Walkways shall be free of potential tripping hazards such as waste baskets, phone cords, boxes, etc.;
- File drawers should be closed when not in use;
- File cabinets and shelves should be properly secured to prevent tipping over;
- Exposed wiring, outlets, and switches shall be covered to prevent contact;
- Water heater pipes should be insulated to prevent contact burns;
- Desks, boxes, chairs, and other items should not be used in place of ladders;
- Chairs should be maintained in a safe condition;
- Storage areas should be arranged to reduce injuries associated with material handling;
- Do not work under the influence of drugs or alcohol, or a prescription drug that limits your ability to re-act or mentally function;
- Do not text and drive;
- Follow manufacturer instructions and safety recommendations in the use of equipment.
A. ACCIDENTS INVOLVING MEMBERS OF THE PUBLIC

Initial Response and Reporting

A County official or employee who witnesses or arrives on the scene of a claimed accident on County property involving a member of the public should first attend to the person and offer assistance. If it is apparent that the person is in need of emergency medical assistance or the person is requesting an ambulance, call 9-1-1.

Ask if the person needs assistance standing up before attempting to help the person. Do not attempt to move a motionless person, a person asking not to be moved, or a person who has likely suffered a back or neck injury. Never make statements that could be used against the County. Realize that no matter what the condition looks like, the County is not liable if it is open and obvious. That is, if a reasonable person paying attention would have seen and avoided the condition, the County is not responsible.

If the person asks where to report the incident to the County, direct the person to the County Judge’s Office. WHETHER OR NOT the purportedly injured person makes a report to the County Judge’s Office, the official or employee MUST do so. Forms will be provided by the County Judge’s Office. The County Judge’s Office will promptly copy the Workers’ Compensation Representative with reports received.

Investigation

The County Judge’s Office will assign someone to investigate the incident. If the incident occurred at the Courthouse or in the general area of the Courthouse, the County Judge, with the Sheriff’s permission will ask Courthouse Security to investigate the incident.

In other areas, the Director of Maintenance of Buildings or the department head of the department where the incident/accident occurred may be assigned. Other possible assignees are Human Resources., the County Administrator, the County Engineer’s Office, or legal.

Conducting Investigation

- Read all available reports and witness statements;
- Visit the accident scene and pay special attention to whether the conditions present match up with what is described in the report(s);
- Photograph the scene. When photographing an alleged condition (crack, offset in surface, etc) put a pen or ruler in the picture for reference. Also, measure the alleged offending condition.
- Check for any warning signs or markers;
- Interview witnesses as necessary;
- DO NOT FORGET TO CHECK FOR VIDEO. Whether County cameras or cameras from nearby buildings, there are fewer and fewer areas these days that are not being recorded; and
- Report findings to the County Judge’s Office;
The County Judge’s Office reports the information to Workers’ Compensation Representative. If it is an incident likely to involve a future claim of damages, the information is also reported to the County’s Risk Pool/Insurer.

If the information indicates a condition that needs to be fixed or warned off, the County Judge may direct the Director of Maintenance of Buildings to undertake such actions. If addressing the condition requires an expenditure of more than $500, the Commissioners Court must approve the fix, but in the meantime the Director of Building Maintenance shall assure that adequate temporary warning information or barriers are installed.

B. VEHICULAR ACCIDENTS

**Reporting**

Employees involved in an accident while operating a county vehicle, or while operating a personal vehicle on county business, must immediately notify the proper law enforcement agency (if applicable) and their supervisor. Accident reports, along with any law enforcement report, must be filed by the employee with the employee’s supervisor. Reporting is required regardless of the seriousness of the accident. The supervisor or designee reviews the matter with the employee to create the report to be submitted as set forth below.

Notification of the accident MUST be sent to the Workers’ Compensation Representative as soon as possible after the accident, this notification must occur on the SAME day of the date of the accident.

The County Judge’s Office and the Workers’ Compensation Representative must receive a report within two (2) business days. The report must contain at a minimum:

- the driving employee’s name and position;
- the name and contact information of the other driver if known;
- the date and time of the accident;
- the location of the accident;
- a summary of the employee’s version of what occurred;
- whether there were any injuries and extent if known; other parties insurance information;
- a general description of the extent of any property damage; and
- identification of the law enforcement agency that responded to the accident.

**Investigation**

Generally, the investigation of vehicular accidents is left to law enforcement, the TAC Liability & Workers’ Compensation Representative and experts hired by the County’s liability and worker’s compensation insurance provider and/or legal counsel. That does not mean the department/office cannot conduct its own review for disciplinary purposes. Note: Discipline for accidents should be uniform among offending employees where based on similar facts and circumstances.

However, for non-transportation equipment (ex. graders, front-end loaders, etc.), if the incident does not involve a non-employee and does not involve an injury to the employee (just property damage to the equipment), the investigation is handled within the department/office. A report of the incident still must be made to the Workers’ Compensation Representative and the County
Judge’s Office if the property damage is estimated to exceed $1,000 to repair. This notification to the Workers’ Compensation Representative must occur on the SAME day of the accident.

In addition, it is suggested that an after-incident review be conducted. The purpose of an after-incident review is for the department/office administration to review the findings to determine if and how the accident could have been avoided, whether there is a dangerous condition or practice that needs to be corrected, or whether additional safety training is needed.

**Note to Supervisors:** Uniformity in the application of testing is necessary. If one employee is sent for a drug test for an accident damaging County equipment, an employee who later commits the same conduct should be sent for testing. This is not only a fairness issue, but also an issue of assuring that the policy is effective. In addition, in certain circumstances it could give rise to claims of discrimination.

Special, more detailed drug and alcohol policies apply to employees who must hold a commercial driver’s license to perform their County job; this information can be found in the Appendix section entitled “McLennan County Controlled Substance Abuse & Alcohol Misuse Policy Manual”.

C. WORKPLACE ACCIDENTS

*Responding and Reporting*

**Serious Incident**
Assess the situation to make sure that it is safe to get to the employee. Turn off any tool or equipment involved, turn off electrical power where electrocution appears to be involved, and generally try to make sure anyone responding is not being exposed to the same danger. The first priority is to render aid to the employee. To assure that professional medical assistance is on the way immediately call 9-1-1. Employee-initiated measures such as CPR, attempting to stop bleeding, eye wash, or other first aid measures may be appropriate under the facts and circumstances. Unless necessary to prevent more serious injury or death, never move a fall victim who appears to have a head, neck, or back injury. Make sure an employee is posted at the worksite entrance to guide first responders to the accident site. Reporting must comply with the same requirements as below.

**General Injury Situation**
An employee injured on the job or subjected to an illness caused by his or her work is to **STOP WORKING** and report the condition to his or her superior immediately.

**ALL EMPLOYEE CONTACT WITH COMMUNICABLE DISEASES AND INJURIES OR ILLNESSES TO EMPLOYEES, REGARDLESS OF HOW MINOR, ARE TO BE REPORTED IMMEDIATELY TO THE EMPLOYEE’S SUPERVISOR.** Failure to do so promptly may delay or endanger receipt of workers compensation benefits.

The supervisor, official, or department head will, after sending the employee for medical attention, if such is required, immediately report the accident, illness, or injury to the Workers’ Compensation Representative.

The Workers’ Compensation Representative for all county offices is performed by the Human Resources Department. The injury must be reported to the Workers’ Compensation Representative
immediately, even if no doctor visit is necessary and/or no work time was lost. The applicable department/office must gather all facts necessary to complete the Incident Report Forms provided by the County and provide the forms to the Workers Compensation Coordinator with exception for extreme circumstances such as a death or extreme destruction where additional time in reporting may be justifiable. These forms will assist the Workers Compensation Coordinator in completing the forms required by the Texas Workers Compensation Commission and the County’s carrier/administrator for workers compensation.

Supervisor Responsibility
If the supervisor is aware that the employee has suffered a workplace injury or exposure, but the employee will not report it and refuses to be sent for medical review/assistance; the supervisor still must make the foregoing report. The supervisor must also make the decision of whether it is safe for the employee (and others) for the employee to continue working in his/her current condition.

Sending for Medical Attention
In serious injury, crisis situations, it is understood that the first priority is to obtain medical attention. However, this is generally not the situation faced. Generally, the employee presents with an injury that is not life-threatening or extremely serious and is allowed to take off to seek medical attention or driven to a medical provider. Work related injuries should receive medical coverage from the County’s Worker’s Compensation Insurance plan. An employee’s health plan should NOT be used to cover medical costs related to a work related injury or work related contracted illness. Failure to timely report puts the employee at risk of loss or delay of benefits. Accidents or incidents resulting in damage to property must be reported to your supervisor immediately.

Each office/department will receive injured worker packets, please inform Human Resources should you be out of this information. It is the responsibility of the Workers’ Compensation Representative to ensure these packets have the most current information. The injured worker packets (folders) will contain information regarding the list of health care providers, directions on how to fill prescriptions, first report of injury forms, among other points of information necessary for both the supervisor and the employee. It is suggested that all supervisors keep the injured worker packet/folder posted in a visible and easy access locations readily accessible in times of urgency.

HOWEVER, AGAIN, in emergency situations where getting the employee emergency services by contacting 9-1-1 or to the nearest provider as quick as possible is imperative; that is what must be done.

Investigation
As set forth above the investigation of the incident is the responsibility of the supervisor, official or department head, unless the official or department head designates another individual. There must be sufficient information obtained to complete the required notice and incident report forms required for workers’ compensation within the required time for submission as a first priority. Further investigation to assist the insurance carrier may be necessary. In addition, it is suggested that the investigation also involve an after-incident review. The purpose of an after-incident review is to review the findings to determine if and how the accident could have been
avoided, whether there is a dangerous condition or practice that needs to be corrected, or whether additional safety training is needed.

IMPORTANT: If an injury results from a defective tool, take the tool out of service, but do not dispose of it. Maintain it in its then-current condition in a locked container or drawer. In incidents involving a vehicle, retention is generally determined by law enforcement, the Risk Pool, or legal.

*Note to Supervisors*: uniformity in the application of testing is necessary. If one employee is sent for a drug test for an accident damaging County equipment, an employee who later commits the same conduct should be sent for testing. This is not only a fairness issue, but also an issue of assuring that the policy is effective. In addition, in certain circumstances it could give rise to claims of discrimination.

Special, more detailed drug and alcohol policies apply to employees who must hold a commercial driver’s license to perform their County job; this information can be found in the Appendix section entitled “McLennan County Controlled Substance Abuse & Alcohol Misuse Policy Manual”.

### 16.11 SAFETY FOCUS WORK GROUP

There is hereby established a Safety Focus Work Group that shall periodically review selected County facilities for the purpose of identifying safety issues. The Group shall be made up of the Director of Building Maintenance, County Engineer, the Emergency Management Coordinator, the Director of Purchasing, and the Director of Human Resources. The Group will attempt to address at least one County facility per quarter. The Group, or as many of them as are available on the scheduled date, shall review the County facility in question to identify safety issues. Upon completing the review, the Group will submit a report to the Commissioners Court for a determination of corrective actions to be taken, if any.

[Note: Items that are easily corrected should be corrected by Building Maintenance, and then noted as corrected on the Report to the Commissioners Court].

### 16.12 PREVENTION

**A. GENERALLY**

Preventative steps are a key component to workplace safety. For example: assuring that the work area is picked up so that tools or materials do not create a tripping hazard; immediately cleaning up spills, and if the area is still wet, putting out cones or signage; assuring that all employees use PPE where required; training; and removing fire hazards. Always assess a worksite for potential dangers before starting a project (overhead lines, steep embankments, gas lines, etc.). Before excavating or deep blading (deeper than 18”), always call for a utility locate.

**B. PREVENTATIVE MAINTENANCE**

One of the surest ways to prevent accidents is to assure that all tools, equipment, vehicles and physical facilities are regularly inspected and provided with preventative maintenance. Each supervisor should develop an inspection checklist. [Examples of checklists can be obtained from the Human Resource Department]. For example, a checklist for a vehicle would include tires, brakes, lights, signals, mirrors, etc. A vehicle should not be placed in service unless it is in safe, operable shape. Conducting preventative
maintenance instead of waiting for a part to fail is key to preventing accidents. If the brakes appear overly worn, they should be replaced. If there is little tread on a tire, it should be changed. Indeed, supervisors are encouraged to develop a preventative maintenance program where various maintenance occurs periodically based on mileage/hours.

Employees must inspect the vehicle or equipment they are to operate prior to operating it. If it is in an unsafe condition or is not safe for the assignment the employee is to perform, the employee should report this immediately to the employee’s supervisor. No employee is expected to operate an unsafe vehicle or piece of equipment.

**C. HOUSEKEEPING**

- All areas shall be kept clean and orderly. Housekeeping includes cleanliness and the orderly arrangement of tools, equipment, storage facilities, and supplies. Good housekeeping reduces incident rates and improves productivity, morale, and public relations.
- Housekeeping must be continuous and incorporated into all activities and every job.
- Examples of poor housekeeping include litter, unused odds and ends, tools out of place, trash not placed in waste cans, poor sanitation, tripping hazards, oil on the floor, fire hazards, protruding objects, inadequate storage facilities, etc.
- Supervisors shall be especially observant for housekeeping hazards associated with operations, activities, and conditions.
- Employees shall be aware of the serious consequences that result from poor housekeeping practices and that violations will be dealt with accordingly.

**D. LIFTING AND MANUAL MATERIAL HANDLING SAFETY**

Lifting and material handling type injuries make up a major portion of risk for employee injury. To reduce the risk of this type injury, employees must follow the lifting guidelines to protect themselves from injury:

- When available use mechanical assistance if you are trained in using the lifting equipment.
- If mechanical assistance is unavailable, use team lifting if you are unable to lift item on your own.
- Twisting and jerking movements should be avoided; turn the body as a whole and not at the waist.
- Employees who will be lifting objects on the job should keep themselves in good physical condition. If you are going to be lifting objects that are heavy, or lifting for a prolonged period, take time to do some stretching and warm up exercise prior to starting the job. Studies have shown that this can have a dramatic effect on reducing injuries of this type.
- Use common sense—do not try to lift something that you cannot safely lift by yourself.

**E. COMMUNICABLE DISEASE**

If an employee believes he/she has been exposed to a communicable disease while performing job duties, they must report this immediately to their supervisory authority and to the County’s Workers’ Compensation Representative. If exposure is through a blood borne pathogen, reporting should be conducted in accordance with the County’s Blood Borne Pathogens Exposure Control Plan provided in the McLennan County Safety Policy Guide in the Appendix section titled: Bloodborne Pathogen Exposure Control Plan & Forms. Post-exposure medical evaluation and follow-up, including an option to be tested.
will be provided. Hepatitis B vaccinations are made available at the County’s cost to custodial employees, law enforcement and corrections officers, civilian jail personnel having contact with inmates, and jail medical personnel. For further information, consult the Blood Borne Pathogens Exposure Control Plan.

Communicable diseases are spread via airborne viruses or bacteria or contact with human blood or other bodily fluids. In addition to viruses and bacteria, communicable disease pathogens include fungi and parasites. Persons who know or who have reason to believe they are infected with a reportable communicable disease have an obligation to conduct themselves in accordance with such knowledge in order to protect themselves and others. Avoid physical contact, wash hands frequently, cover mouth/nose when coughing/sneezing, cover open sores/wounds and avoid the workplace if you are feverish. If a position has a higher risk of exposure, use protective equipment such as masks, gloves, eyewear, etc. Refer to Personal Protective Equipment for more details. If you have a communicable disease that poses an unreasonable risk of infection to other employees and that risk cannot be adequately mitigated by reasonable accommodation, you may be re-assigned or separated from employment.

F. PERSONAL PROTECTIVE EQUIPMENT
Employees are required to wear personal protective equipment if their position entails hazards that place the employee at high risk for injury. Refer to your supervisory authority and your job description for instructions on what type of protection equipment is required for your position.

Follow the guidelines for protective equipment below:

- All personnel working in or visiting a work area, which requires personal protective equipment, shall wear or use the required items while in the area;
- The person in charge of each operation shall see that the specific safety equipment needed on the particular job is available and used;
- All safety items issued shall be maintained in clean and serviceable condition. Any unserviceable items shall be reported to the immediate superior, not used, and replaced as soon as possible;
- Protective wear, after being used by one employee, shall be cleaned and disinfected before being used by another employee;
- Provision of protective clothing and equipment is a temporary measure. Every effort shall be made to correct the hazard through administration, engineering, or other methods

G. SEATBELTS
In order to protect the safety of employees, all employees operating County vehicles along with any passengers are required to wear seatbelts. This policy is also mandatory for employees and their passengers riding in personal vehicles while engaged in County business.

H. SECURITY AND LOSS PREVENTION
McLennan County is committed to providing a safe and secure environment for its employees, visitors, customers and other assets including County equipment and machinery. Each employee is responsible for being vigilant in reporting any suspicious activity to the McLennan County Sheriff’s Office and/or the Courthouse Security. Be mindful and abide by security protocols of facilities that are locked down and require either secured key access or physical barriers for security checkpoints.
Every employee is responsible for maintaining the security and safety of our building facilities, records and systems. Every employee is responsible for helping to make this a secure work environment. Upon leaving work, lock all desks, lockers, and doors protecting valuable or sensitive material in your work area and report any lost or stolen keys, passes, or other similar devices to your superior immediately. You should refrain from discussing with nonemployees specifics regarding County security systems, alarms, passwords, etc. Lending keys or keycards to County buildings, equipment or property to unauthorized persons is prohibited.

Do not hesitate to report any suspicious observations or ask questions. If you see something, say something

I. FINANCIAL LOSS PREVENTION AND RISK MANAGEMENT

The County is entrusted with tax revenues and other public funds necessary to provide public services. The protection of County funds, financial accounts, and financial information is of great importance. IF YOU SUSPECT MISAPPROPRIATION, THEFT OR FRAUD, IMMEDIATELY REPORT IT TO YOUR SUPERVISORY AUTHORITY OR DEPARTMENT HEAD/OFFICIAL. IF YOU ARE NOT COMFORTABLE REPORTING IT WITHIN YOUR DEPARTMENT OR OFFICE—REPORT IT TO THE COUNTY AUDITOR OR TO HUMAN RESOURCES. If the County Auditor or the County’s independent audit firm identifies to a department or office financial controls that need to be put in place, those controls must promptly be implemented by the department/office.

16.13 RECORDS STORAGE

A. TRAINING DOCUMENTATION

All safety and health related training administered or provided by the County will be documented with the following minimum information:

- Date of training session
- Instructor or presenter
- Subject matter
- Legible name of attendee(s)
- Signature of acknowledgement of attendance

The person providing the training is responsible for generating the documentation. All training records and documentation will be retained within the Human Resources Department/office. Individual training records will be maintained for the current year, plus five more years.

16.14 HAZARDOUS SUBSTANCES

A workplace chemical list shall be maintained for chemicals stored in the amounts set out in Chapter 502 of the Texas Health & Safety Code (55 gallons or 500 pounds), or for chemicals that the state has determined to be highly toxic.

A chemical list that contains the following information shall be maintained at each worksite where the chemical is normally present:
• The identity of the chemical as used on the Safety Data Sheet ("SDS") and container label; and
• The area of the worksite where the chemical is located.

The list must be updated each calendar year as required by Chapter 502. The workplace chemical list will be posted at each worksite where the chemical is present.

Each department/office shall keep a copy of the SDS on hand at the worksite(s). In addition, the County will maintain a master list of chemicals and copies of SDS on file with the Emergency Management Coordinator. Each time a department/office orders a hazardous chemical it must report the same to the Emergency Management Coordinator and provide a copy of the SDS. In addition, for hazardous chemicals purchased through the County Purchasing Department, the Purchasing Director shall report the purchase to the Emergency Management Coordinator and provide a copy of the SDS.

Labels on containers shall not be removed or made unreadable. If a label becomes unreadable, it must be replaced. The replacement label must identify the chemical and its physical and health hazards, including the organs that would be affected, and the manufacturer’s name and address. Secondary containers must be labeled accordingly.


It is the supervisor’s duty to assure that all employees are aware of the presence, dangers, and proper use of hazardous chemicals. It is also the supervisor’s responsibility to assure that eye-wash kits are on-hand at the worksite.

Worksites will be periodically audited by the Emergency Management Coordinator for compliance.

16.15 FIRE SAFETY

A. MINIMIZING RISK
Employees can assist in minimizing the risk of fires by being aware of potential fire hazards. Below are preventive measures that can be taken by all employees:

• Clear passageways shall be maintained to fire extinguishers and exits;
• Oily rags, waste, etc. shall be disposed of in metal cans with covers;
• Precautions against fire and explosions shall be taken where flammables with a low flash point are stored or used. Some common hazardous liquids are gasoline, paint, paint thinners, and solvents;
• Spilled flammable liquids should be cleaned up immediately;
• Gasoline and other flammable liquids should be stored in department approved safety containers and away from ignition sources;
• Combustible storage should be minimized;
• Do not check for gas leaks using an open flame. Use approved gas indicators. Report all gas leaks to your immediate supervisory authority;
• Employees should know the location of fire extinguishers at their reporting facilities and how to properly operate them;
• Fire extinguishers shall be readily accessible and not mounted in an area of likely immediate danger;
• Do not attempt to fight a fire unless it is small and controllable. Never place yourself or others in unnecessary danger. Make sure everyone in the area is aware of a fire;
• For all fires, the fire alarm must be activated or 911 should be contacted immediately to ensure Fire Department response.

16.16 EVACUATION

McLennan County Elected Officials, Appointed Officials and Department Heads are encouraged to formulate an evacuation plan for their respective building(s). Below are some guidelines that will assist to ensure the continued safety of our employees and visitors when evacuating County buildings. The guidelines should not be considered all encompassing. A practical approach should be utilized when instituting evacuation procedures. Basic rules include:

• Elevators should not be used during evacuation procedures;
• Upon activation of fire alarm(s), evacuation procedures should commence in an orderly manner;
• Do not lock any doors, as this will hamper firefighting and/or rescue efforts;
• Evacuation routes should have clear signage and evacuation plans should be reviewed by all employees;
• Evacuation routes should be posted and periodically gone over with employees;
• A rendezvous point away from the evacuated building should be established to account for all employee and visitors, and a head count conducted;
• Allow no one to return to the evacuated facility until proper authority from the fire department, sheriff’s office, or police dept. has been given.

A. EVACUATION PLANNING

The Emergency Management Coordinator will review (or prepare) evacuation plans for all County buildings, provide some training, and coordinate drills. Because of the EMC’s other duties, this will be a phased process. Until an EMC-approved plan for a building is in place, follow the existing evacuation plan. If no evacuation plan exists for your building, contact the County Judge’s Office so that appropriate steps can be taken to provide an evacuation plan from a qualified source.

16.17 FIRE EXTINGUISHERS AND AUTOMATIC EXTERNAL DEFIBRILLATORS

Fire extinguishers are only helpful if kept operable. It is the responsibility of the Building Maintenance Department to assure that the fire extinguishers in County buildings are kept current and operable. The Building Maintenance Department will also be responsible for providing and ensuring that all Automated External Defibrillators are maintained.
It shall be the duty of Human Resources to assure that required training for use of the Automated External Defibrillators is provided to designated persons in the applicable office or worksite.

16.18 TEXAS ASSOCIATION OF COUNTIES ASSISTANCE

Periodically, HUMAN RESOURCES shall request the Texas Association of Counties to conduct safety/risk assessments of a sampling of County buildings/worksites. The report will initially be reviewed by the Safety Focus Work Group to determine what corrections can be made promptly without having to seek additional resources from the Commissioners Court. The report will then be provided to the Commissioners Court for focus on areas that may require expenditures to correct.

16.19 NO RETALIATION

No employee shall be retaliated against for making a good faith report of a dangerous condition of property, equipment, vehicles, tools, or practices.

CLOSING STATEMENT

This employee handbook is our attempt to keep you informed of the terms and conditions of your employment, including County policies and procedures. The handbook is not a contract. The County reserves the right to revise, add, or delete from this handbook as it determines to be in its best interest. When changes are made to the policies and guidelines contained herein, we will endeavor to communicate them in a timely fashion, typically in a written supplement to the handbook or in a posting on County bulletin boards.

Thank you for reading our employee handbook. We hope it has provided you with an understanding of the County’s mission, history, and structure as well as our current policies and guidelines. We look forward to working with you to create a successful County and a safe, productive, and pleasant workplace.
Appendix Documents

Table of Contents:

A. McLennan County Controlled Substance Abuse & Alcohol Misuse Policy Manual
B. McLennan County Blood Borne Pathogens Exposure Control Plan & Forms
C. V.T.C.A. Health & Safety Code 502.009, Employee Education Program
McLennan County

CONTROLLED SUBSTANCE ABUSE
&
ALCOHOL MISUSE
POLICY MANUAL

Prepared by

Compliance Consortium Corporation
Belton, Texas

As required by the

U.S. Department/office of Transportation
Federal Highway Administration

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CONTROLLED SUBSTANCE ABUSE
&
ALCOHOL MISUSE
POLICY MANUAL

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**DOT ALCOHOL AND DRUG POLICY**

**SECTION ONE**

**PURPOSE**

**McLennan County** has established this policy to assist in protecting the traveling public and its employees. McLennan County also intends through this policy to reduce accidents, fatalities, injuries, and property damage that may result from employee use of controlled substances or alcohol.

This policy is intended to promote an overall safe, healthful, and efficient working environment for all employees. Being under the influence of a controlled substance or alcohol on the job poses serious safety and health risks to the user and to all those who work with the user. The use, sale, purchase, transfer, or possession of an illegal drug in the workplace, and the use, possession, or being under the influence of alcohol poses unacceptable risks for safe, healthful, and efficient operations.

**McLennan County** believes it has the obligation and the right to protect McLennan County's property, information, equipment, operations, and reputation.

**McLennan County** recognizes its obligations to employees for the provision of a company that is free of the influence of controlled substances and alcohol, and will endeavor through this policy to maintain such safe, efficient and professional environment.

**McLennan County** has entered into a contractual agreement with Compliance Consortium Corporation, and that firm will perform a controlled substances and alcohol random testing program.

Furthermore, McLennan County takes note of its obligation to comply with US DOT regulations relating to controlled substances and alcohol use. McLennan County will ensure that the controlled substances and alcohol testing conducted conforms to US DOT workplace testing requirements.

**McLennan County**'s position is that the sale, purchase, transfer, concealment, transportation, use or possession of contraband by any employee of McLennan County represents a threat to the health, safety and well-being of its employees and property, as well as to the traveling public and is therefore strictly prohibited.

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SECTION TWO
DEFINITIONS

As used in this policy:

McLennan County premises or facilities means all property of McLennan County, including but not limited to offices, buildings and surrounding areas on McLennan County-owned or leased property, parking lots, and storage areas. The term also includes McLennan County-owned or leased vehicles and equipment wherever located. It also includes any premises where McLennan County performs contract services.

Alcohol means the intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohol’s including methyl and isopropyl alcohol.

Alcohol concentration (or content) means the alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by and Evidential Breath Test (EBT).

Alcohol use means the consumption of any beverage, mixture, or preparation, including any medication, containing alcohol.

Breath Alcohol Technician (BAT) means an individual who instructs and assists individuals in the alcohol testing process and operates an EBT.

Collection site means a place where individuals present themselves for the purpose of providing body fluid or breath samples to be analyzed for specific controlled substances or alcohol. A collection site will have all the required personnel, materials, equipment, facilities, and supervision to provide for the collection, security, temporary storage, and transportation of the samples to the testing laboratory, or for alcohol testing.

Commercial motor vehicle means a motor vehicle or combination of motor vehicles used in commerce to transport passengers or property if the motor vehicle:

1. Has a gross combination weight rating of 26,001 or more pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds or
2. Has a gross vehicle weight rating of 26,001 or more pounds or
3. Is designed to transport 16 or more passengers, including the driver or
4. Is of any size and is used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act and which require the motor vehicle to be placarded.

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DEFINITIONS (continued)

**Confirmation test for alcohol** means a second test, following a screening test with a result of 0.02 or greater, which provides quantitative data of alcohol concentration.

**Contraband** means any article the possession of which on McLennan County premises or while on McLennan County business causes an employee to be in violation of a McLennan County work rule. Contraband includes illegal drugs and alcoholic beverages, drug paraphernalia, lethal weapons, firearms, explosives, incendiaries, stolen property, and counterfeit money.

**Controlled substances** means any drug, substance or immediate precursor listed in Schedules I-V or Penalty Groups 1-4 of the Controlled Substances Act of 1988 as it may be revised from time to time.

**DOT agency** means an agency of the United States Department/office of Transportation administering regulations requiring alcohol testing.

**Driver** means any person who operates a commercial motor vehicle. This includes, but is not limited to: full-time, regularly employed drivers, casual intermittent or occasional drivers, leased drivers and independent, owner-operated contractors who are either directly employed by or under lease to an employer who operates a commercial motor vehicle at the direction of or with the consent of an employer.

**Drug testing or testing** means the scientific analysis of urine, blood, breath, saliva, hair, tissue or other specimens of the human body for the purpose of detecting a drug or alcohol.

**Employee** means any employee, agent, officer or representative of McLennan County, any contractor or subcontractor performing work on behalf of McLennan County is also expected to comply with this policy.

**Employer** means any person who owns or leases commercial motor vehicle or assigns persons to operate such a vehicle. It also includes agents, officers, and representatives.

**Evidential breath testing device (EBT)** means a device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath and place on the Conforming Products List of Evidential Breath Measurement Devices.

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Illegal drug means any drug in any detectable amount which is not legally obtainable any
drug which is legally obtainable but has not been legally obtained any prescribed drug not legally
obtained any prescribed drug not being used for the prescribed purpose any over-the-counter drug
being used at a dosage level different than recommended by the manufacturer or being used for a
purpose other than intended by the manufacturer and any drug being used for a purpose not in
accordance with bona fide medical therapy. Examples: marijuana, hashish, cocaine, heroin,
phencyclidine (PCP), amphetamines, and morphine.

**Initial test cutoff levels (Ng/ml)**
- Marijuana metabolites  50
- Cocaine metabolites  300
- Opiate metabolites  2000
- Phencyclidine (PCP)  25
- Amphetamines  1,000
- McLennan County-25 Ng/ml if immunoassay for free morphine

**Confirmatory test cutoff levels (Ng/ml)**
- Marijuana metabolites  15
- Cocaine metabolites  150
- Opiates: Morphine  300
- Codeine  300
- Phencyclidine  25
- Amphetamines  500
- Methamphetamine  500

Medical Review Officer (MRO) means a licensed doctor of medicine or osteopathy responsible
for receiving laboratory results generated by an employer's drug testing program that has
knowledge of substance abuse disorders and has appropriate medical training to interpret and
evaluate an individual's confirmed positive test result together with his or her medical history and
any other relevant biomedical information.

Medically unqualified to work means the condition of a person by reason of an impairing or
potentially impairing medical condition such as, but not limited to, the use of illegal drugs and
alcohol.

Performing a safety-sensitive function means an employee who is considered to be performing
a safety-sensitive function during any period in which he/ she is actually performing, ready to
perform, just completed performing, or immediately available to perform any safety-sensitive
functions.

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Possession is also meant to include the presence in the body system of any detectable amount of drug, or in the case of alcohol, a test result of 0.04 or greater.

Reasonable cause or suspicion means a belief that the actions, appearance or conduct of a person are indicative of the use of a controlled substance or alcohol. Such a belief is based on objective articulated facts. A reasonable cause or "for cause" situation is any situation in which an employee's job performance is in conflict with established job standards relating to safety and efficiency. The term includes accidents, near accidents, erratic conduct suggestive of drug or alcohol use, any unsafe performance behaviors, and unexplained deviation from productivity.

Refuse to submit to an alcohol or controlled substances test means that an employee:

1. Fails to provide adequate breath for testing without a valid medical explanation after he or she has received notice of the requirement for breath testing in accordance with DOT regulations,

2. Fails to provide adequate urine for controlled substances testing without a valid medical explanation after receiving notification of the testing requirements,

3. Engages in conduct that clearly obstructs the testing process.

Screening test in alcohol testing means an analytical procedure to determine whether an employee may have a prohibited concentration of alcohol in his or her system. In controlled substances testing, it means an immunoassay screen to eliminate "negative" urine specimens from further consideration.

Substance Abuse Professional (SAP) means a licensed physician (MD or DO), or a licensed or certified psychologist, social worker, employee assistance professional, or addiction counselor (NAADACCC certified) or a counselor certified by the International Certification Reciprocity Consortium/Alcohol and Other Drug Abuse with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders. All must have knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substance-related disorders.

Note: Compliance Consortium Corporation will be responsible for arranging the SAP assessment.

Under the influence means a condition in which a person is affected by a controlled substance or alcohol in any detectable manner. The symptoms or influence are not confined to that consistent with misbehavior, nor to obvious impairment of physical or mental ability, such as
slurred speech or difficulty in maintaining balance. A determination of being under the influence can be established by a professional opinion, a scientifically valid test such as urinalysis, breath analysis, or blood analysis and in some cases by the opinion of a layperson.
SECTION THREE
EMPLOYEES SUBJECT TO TESTING

I. Conditions Requiring Testing

A. Testing of current employees
   An employee's consent to submit to drug and/or alcohol testing is required as a condition of employment. McLennan County will perform drug and/or alcohol testing of an employee in the following situations:

B. Pre-employment
   All applicants for employment will, as a pre-qualification condition is subject to drug testing. If evidence of the use of illegal drugs by an applicant is discovered either through testing or other means, the employment process will be terminated.

   If an applicant refuses to take the drug test, the employment process will be terminated.
   If an applicant attempts to substitute or contaminate his or her drug screen specimen or attempts to subvert the procedure, the employment process will be terminated.

C. Post-accident - CDL Drivers
   Any CDL driver involved in an accident will be required to submit to tests for alcohol and controlled substances as soon as practicable following the accident, if:

   1. A fatality occurred while performing safety-sensitive functions with respect to the vehicle

   OR

   2. Bodily injury to a person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident, and the CDL driver received a citation under State of local law for a moving traffic violation arising from the accident

   OR

   3. One or more motor vehicles incurring disabling damage as a result of the accident, requiring the vehicle to be transported away from the scene by a tow truck or other vehicle, and the CDL driver received a citation under State or local law for a moving traffic violation arising from the accident.

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CDL Drivers are prohibited from using alcohol for eight hours following any accident or until the required post-accident alcohol test is administered, whichever occurs first. Every effort will be made to conduct post-accident drug and alcohol tests within two hours following an accident. Any CDL driver involved in an accident must therefore remain readily available for testing and will be considered to have refused to submit to testing if he/she fails to do so. This requirement will not, however, require a CDL driver to delay any necessary medical attention for injured people following an accident or to remain at the scene of an accident when his/her absence is necessary to obtain assistance in responding to the accident or to obtain necessary emergency medical care. In order to ensure expeditious testing, we will provide all drivers with information, procedures and instructions explaining our post-accident testing requirement. These instructions will be distributed to each CDL driver prior to his/her operation of a vehicle covered by this policy.

In the event an alcohol test is not administered within two hours following an accident, McLennan County will prepare and maintain a record stating the reasons why the test was not promptly administered. If an alcohol test is not administered within eight hours following an accident, McLennan County will make no further effort to administer an alcohol test and will document the reasons why the test was not administered within eight hours. In the event a drug test is not administered within 32 hours following an accident, McLennan County will cease its attempts to administer any further testing and prepare and maintain a record stating the reasons why the test was not promptly administered.

The results of any breath of blood test for the use of alcohol or a urine test for the use of controlled substances, conducted by Federal, State, local officials having independent authority for the test, will be considered to meet the requirements of this section, provided such tests conform to applicable Federal, State or local requirements, and the results of the tests are obtained by McLennan County.

**C. Reasonable Cause**

Whenever McLennan County has reasonable suspicion/cause to believe that a covered CDL driver has engaged in any conduct prohibited by this policy, it will require him/her to submit to an alcohol and/or drug test. However, any such suspicion will be based upon specific, contemporaneous, articulated observations concerning the appearance, behavior, speech or body odors of the CDL driver, which may include indications of the chronic and withdrawal effects of controlled substances.

These observations will only be made by a supervisor or McLennan County official who has received appropriate training and will be documented by that individual in a Supervisor's Report of Reasonable Suspicion within twenty-four (24) hours after his/her observations, or before any drug test results are released. Prior to making a determination for testing, he/she will notify and include management or the Administrator representative.

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at (800) 303-0281 in a decision to make the determination for testing. Both will substantiate and concur in the decision to test the CDL driver for drugs/alcohol and their concurrence may be by telephone.

Whenever a reasonable suspicion drug or alcohol test is required, the individual(s) making the determination will be required to complete, date and sign a written report describing the CDL driver's condition. Copies of this report will be made available to the CDL driver upon request. In such cases the CDL driver's immediate supervisor(s) may, in a confidential manner, order the employee to submit to substance abuse or alcohol testing.

Third party reports that a CDL driver is impaired in his/her duties due to the use of prohibited drugs/alcohol will not constitute reasonable cause, but may be cause for further observation of the CDL driver.

A reasonable suspicion alcohol test will only be required if the reasonable suspicion observations are made during, just before or just after the period of the workday that the employee is required to be in compliance with this policy. A covered CDL driver will therefore be directed to undergo reasonable suspicion alcohol test only while performing a safety-sensitive function, just before the performance of a safety-sensitive function, just after the performance of such a function, or is immediately available to perform such a function.

If a reasonable suspicion alcohol test is not administered within two hours following the reasonable suspicion determination, McLennan County will document the reasons why the test was not promptly administered. If the test is not administered within eight hours following the reasonable suspicion determination, McLennan County will no longer attempt to administer an alcohol test and will document the reasons for its inability to do so.

Notwithstanding the above testing requirements, or CDL driver may not report for duty or remain on duty requiring the performance of safety-sensitive functions if that CDL driver is under the influence of or impaired by drug/alcohol, as shown by the behavioral, speech and performance indicators of alcohol misuse. Any such CDL drivers will not be allowed to perform or continue to perform a safety-sensitive function until:

1. The CDL driver undergoes an alcohol test yielding an alcohol concentration level of less than 0.02.

   OR

2. The start of the CDL driver's next regularly-scheduled duty period, but not less than eight hours have elapsed following the reasonable suspicion determination.

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McLennan County will not take any disciplinary action against a CDL driver based solely upon observations of the CDL driver's behavior and appearance, with respect to
drugs/alcohol use, in the absence of an alcohol test. In any reasonable suspicion testing circumstance, a McLennan County representative will transport the individual to an appropriate collection facility and await the completion of the collection procedure. The McLennan County representative will then transport the individual back to McLennan County's premises, where a spouse, family member or other individual will be contacted to transport the individual home. In the event no such individual is available; the McLennan County will contact a taxi to transport the CDL driver home. If the reasonable suspicion test result is negative, McLennan County will reimburse the CDL driver for the cost of the taxi. If the CDL driver refuses to comply with any of these procedures and attempts to operate his/her own vehicles, McLennan County will take appropriate efforts to discourage him/her from doing so, up to and including contacting local law enforcement officials. Any CDL driver failing to cooperate with any of the above procedures will be subject to immediate termination.

**D. Random (Drug and Alcohol) - CDL Drivers**

All CDL drivers subject to this policy will be required to submit to random drug and alcohol testing.

**McLennan County** will conduct alcohol tests at a minimum annual percentage rate of 10% of the average number of driver positions. (If this rate is subsequently increased or decreased by the FMCSA, we will provide all drivers with written notice of the change.) The minimum annual percentage rate for random controlled substances testing will be 50% of the average number of driver positions.

If a CDL driver performs functions subject to random drug or alcohol testing requirements of another DOT agency, the CDL driver will be tested at the rate of that agency which regulates more than 50% of the CDL driver's safety-sensitive functions or those that take the greatest percentage of his/her time.

The random selection process will be completely objective and anonymous and will utilize a scientifically valid method such as a random number table or a computer-based random number generator matched with CDL drivers' Social Security numbers, payroll identification numbers, facility number or other comparable identifying numbers. The test will be unannounced and the dates for testing will be reasonably spread throughout the course of the year. All CDL drivers will have an equal chance of being tested at any time, regardless of the number of his/her previous selections.

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Any CDL driver notified of his/her selection for random alcohol and/or controlled substances testing will be expected to proceed to the test site immediately. If a CDL driver is performing a safety-sensitive function at the time of his/her notification of the random test requirement, he/she will be required to cease performing the safety-sensitive function and proceed to the testing site as soon as possible. However, a CDL driver will only be required to submit to a random alcohol test if the driver is performing a safety-sensitive function, is about to perform a safety-sensitive function, just ceased performing a safety-sensitive function or is immediately available to perform a safety-sensitive function.

4. **Return-to-duty (Drug/Alcohol)**

Before a covered CDL driver who has engaged in any prohibited conduct will be allowed to return to duty to perform a safety-sensitive function, he/she will be required to undergo return-to-duty alcohol and/or controlled substance tests, with results indicating an alcohol concentration of less than 0.02 and/or a verified negative for controlled substances use, respectively.

Any CDL driver who seeks to return to work following drug/alcohol rehabilitation will also be subject to a schedule of unannounced testing, as determined by McLennan County and its MRO or SAP depending upon the operating agency (i.e., SAP for alcohol and drug positives under FMCSA, and MRO for any FMCSA drug positive) for a period of up to 60 months following the CDL driver's return to work. A positive result in a return-to-duty or any subsequent follow-up or other drug test will result in immediate termination.

**E. Follow-up**

1. **Alcohol**

   Any CDL driver determined by a substance abuse professional (SAP) to be in need of assistance in resolving problems associated with alcohol misuse use will be subject to additional, unannounced follow-up testing for controlled substances as directed by the SAP. However, any recommended follow-up testing for alcohol will only be required just before, during, just after the CDL driver has performed a safety-sensitive function, or is immediately available to perform a safety-sensitive function.

2. **Drugs - CDL Drivers**

   Any CDL driver determined by a substance abuse professional to be in need of assistance in resolving problems associated with controlled substances use will be
subject to additional, unannounced follow-up testing for controlled substances as directed by the SAP.

II. Prescribed drugs

McLennan County reserves the right at all times to judge the effect that a legal drug may have upon an employee's work performance and to restrict the employee's work activity or presence at the workplace accordingly. It also reserves the right to have a physician of its own choice determine if the medication at the prescribed dosage produces hazardous effects, and may restrict the employee's work activity.

III. Prohibited activities

The use, sale, offer to sell, purchase, transfer, distribution, or possession of drug paraphernalia or any detectable amount of an illegal drug or alcohol by any employee while on McLennan County premises or while performing McLennan County business is strictly prohibited.

The employee must remain available for alcohol testing and may not consume any alcohol for 8 hours following the accident or until the alcohol test has been conducted. Notwithstanding the previous statement, employees should seek and obtain emergency medical care whenever necessary.

Alcohol Concentration. A covered employee shall be prohibited from reporting for duty or remaining on duty requiring the performance of covered functions while having an alcohol concentration of 0.04 or greater. If a company representative has actual knowledge that a covered employee has an alcohol concentration of 0.04 or greater, the employee shall not be permitted to perform or continue to perform covered.

Pre-Duty Use. The company shall prohibit a covered employee from using alcohol within four hours prior to performing covered functions, or, if an employee is called to duty to respond to an emergency, within the time period after the employee has been notified to report for duty. If the company has actual knowledge that a covered employee has used alcohol within four hours prior to performing covered functions or within the time period after the employee has been notified to report for duty, the employee shall not be permitted to perform or continue to perform covered functions.

On-Duty Use. The company shall prohibit a covered employee from using alcohol while performing covered functions. If a company representative has actual knowledge that a

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covered employee is using alcohol while performing covered functions, the employee shall not be permitted to perform or continue to perform covered functions.

General Refusal to submit to a post-accident, reasonable suspicion or follow-up alcohol test shall result in the covered employee not being allowed to perform or to continue to perform any covered functions.

No CDL drivers shall be on duty if the CDL driver uses any controlled substances or alcohol while on duty or test positive for the use of controlled substances or alcohol, except in the case of legally prescribed medications.

A regulated person under the FMCSA who tests positive for the use of a controlled substance or alcohol is considered medically unqualified to work, except in the case of legally prescribed medications, which do not impact a covered employee's ability to do their job.

**IV. Discipline**

Disciplinary action consisting of discharge without benefit of rehabilitation will be applied to any employee who:

1. Uses, possesses, distributes, transfers, conceals, sells, offers to sell, purchases or offers to purchase illegal drugs, drug paraphernalia or alcohol on McLennan County premises or while on McLennan County business.
2. Substitutes, contaminates, tampers or attempts to substitute, contaminate or tamper with their specimen to be presented for testing.

Disciplinary action up to and including discharge will be applied to any CDL drivers who:

1. Tests positive for an illegal drug in a test conducted under the provisions of this policy.
2. Tests positive for alcohol in excess of 0.04 percent when measured by the standard breath alcohol concentration tests.
3. Refuses to submit to a drug or alcohol test when requested to do so.
4. Is found to be in possession of contraband.
5. Refuses to submit to a search or inspection under the provisions of this policy.
6. Refuses to cooperate with the Medical Review Officer (MRO) as required under policy.

McLennan County or a law enforcement agency may apply suspension without pay for the duration of the investigation to any employee who is the subject of a drug-related inquiry.

Disbarment from McLennan County work or workplace may be applied to any contractor or contractor employee who violates this policy.

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V. Responsibilities
Each individual required submitting to drug testing shall as soon as practicable, providing the required biological specimens for testing. **Failure to meet this responsibility is an offense punishable by termination.**

Individuals in supervisory positions shall as soon as practicable following an incident which requires drug or alcohol testing, arrange for the collection and testing of specimens for drugs and/or alcohol. **Failure to meet this responsibility is an offense punishable by termination.**

Note: A medically documented physical condition that would contribute to a shy bladder may not necessarily result in termination of employment.

VI. Confidentiality

General:

1. The company shall maintain all alcohol related testing information including all test results and other appropriate record in a secure manner to prevent the disclosure of such information to unauthorized personnel.

2. The APM or designee shall maintain a locked file system, which will contain the alcohol testing information and records. This file shall be maintained as confidential. Employee files shall be handled on strict "need to know" basis.

3. Alcohol test results shall not be included in personnel files.

Disclosure Provisions:

1. The company shall not release covered employee information that is contained in records as required to be maintained by the provisions of the AMPP and in accordance with federal requirements except as required by law or when expressly authorized or required by 49 CFR, and 40.

2. A covered employee is entitled, upon written request, to obtain copies of any records pertaining to the employee's use of alcohol, including any records pertaining to his/her alcohol tests. The company shall promptly provide the requested records. Access to an employee's records shall not be contingent upon payment for records other than those specifically requested.

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3. The company shall permit access to all facilities utilized in complying with the
requirements of 49 CFR Part and 40 to the Secretary of Transportation or any DOT or state agency with regulatory authority over the company.

4. The company shall make available copies of all results for alcohol testing and any other information pertaining to the administrative process of the operator's AMPP as required by 49 CFR Part and 40 when requested by the Secretary of Transportation or any DOT or state agency with regulatory authority over the company. When specified by the information shall include name specific alcohol test results, records, and reports.

5. When requested by the National Transportation Safety Board as part of an accident investigation, the company shall disclose information related to its administration of any post-accident alcohol test administered following the accident under investigation.

6. The company shall make records available to a subsequent employer upon receipt of the written request from the covered employee. Disclosure by the subsequent employer is permitted only as expressly authorized by the terms of the employee's written request.

7. The company may disclose required information pertaining to a covered employee to the employee or the decision maker in a lawsuit, grievance, or other proceeding initiated by or on behalf of the individual, and arising from the results of an alcohol test administered as required by the AMPP and the regulations set forth in 49 CFR Part and 40 or from the company's determination that the covered employee engaged in prohibited alcohol conduct including, but not limited to, a worker's compensation, unemployment compensation, or other proceeding relating to a benefit sought by the employee.

8. The company shall release information regarding a covered employee's records as directed by the specific, written consent of the employee authorizing release of the information to an identified person. Release of such information by the person receiving the information is permitted only in accordance with the terms of the employee's consent.

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**Disclosure of Information:**

1. Except as provided in this paragraph, the MRO shall not disclose to any third party
medical information provided by the individual to the MRO as a part of the testing verification process.

2. The MRO may disclose such information to the company, DOT or other Federal Safety Agency, or a physician responsible for determining the medical qualification of the employee under the appropriate DOT regulation, as applicable, only if:

   a. An applicable DOT regulation permits or requires such disclosure

   b. In the MRO's reasonable medical judgment, the information could result in the Employee being determined to be medically unqualified under an applicable DOT Rule.

   OR

   c. In the MRO's reasonable medical judgment, in a situation in which there is no DOT rule establishing physical qualification standards applicable to the Employee, the information indicates that continued performance by the employee of his or her covered function could pose a significant safety risk.

3. Before obtaining medical information from the employee as part of the verification process, the MRO shall inform the employee that information may be disclosed to third parties as provided in this paragraph and the identity of any parties to whom information may be disclosed.

VII. Notifications

McLennan County will notify each employee of this policy by providing to each employee a copy of this policy. Each employee will acknowledge in writing the receipt and understanding of this policy.

McLennan County will generally publicize this policy to the employees through memoranda, posted notices and ongoing training programs.

McLennan County will notify each employee of the results of random, reasonable cause and post-accident drug and alcohol tests when the test results are positive. The employee will also be advised what drug class was discovered and be removed from performing a safety-sensitive function.

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VIII. Record keeping

   A. General-Drug:
1. The DPM (or designee) shall maintain a locked file system, which will contain
drug test results. This file shall be maintained as confidential. Employee files
shall be handled on strict "need to know" basis.

2. Drug tests results shall not be included in personnel files. Information regarding
an individual's drug testing results or rehabilitation may be released only upon
written consent of the individual, except
   a. Such information must be released regardless of consent to FMCSA or
      other Government agency as a part of an accident investigation.
   
   b. Such information may be disclosed regardless of consent in a lawsuit,
      Grievance, or other proceeding initiated by or on behalf of the individual
      and arising from a verified positive drug test.

IX. Appeals

A CDL driver whose test is reported as positive for a drug will be asked by McLennan County
in a confidential meeting or telephone conference to offer an explanation. The purpose of the
meeting or telephone conference will be to determine if there is any reason that a positive test
could have resulted from some cause other than drug use which is in violation of this policy.

If the CDL driver is desirous of a second opinion in the result of a positive drug test, they may
request a retest of the same specimen by an alternate laboratory which has been approved by
McLennan County. The retest will be at the employee's expense. The retest must be
performed using the same methods and techniques as the initial test and will be at the expense
of the employee.

The CDL driver may also request to review the findings of the drug test with a licensed
physician knowledgeable of substance abuse disorders (MRO). The cost related to this will
be at the expense of McLennan County.

An appeal that merits further inquiry may require that the pipeline employee or CDL driver
be suspended without pay until the inquiry and the appeals process are completed.

If the CDL drivers is cleared of any charges or violations of this policy, McLennan County
will reimburse back pay due the employee, up to two weeks of regular pay.

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X. Rehabilitation

1. CDL Drivers
Any CDL driver who fails either a drug or alcohol test must undergo a return-to-duty alcohol test with a result indicating 0.02 or less or a drug test with a negative result. In addition each employee identified as needing assistance by a substance abuse professional in resolving problems associated with alcohol misuse or drug abuse:

a. Shall be evaluated by a SAP to determine if the CDL Driver has properly followed the rehabilitation program, and

b. Shall be subject to unannounced follow-up alcohol and/or drug test administered by McLennan County following the CDL driver's return to duty. The number and frequency of the test shall be directed by the SAP and consist of at least 6 test in the first 12 months following return to duty. Follow-up testing will be up to 60 months and can be eliminated after one year if the SAP determines that such testing is no longer necessary.

SECTION FOUR
Testing Program

I. Applicability
This policy applies to every person within McLennan County who is employed in gas pipeline construction or operates a commercial motor vehicle in either interstate or intrastate commerce and is subject to a CDL.

II. General
The provisions of this section of the policy are applicable in addition to, not in lieu of the provisions that applies to all employees.

A CDL driver subject to the provisions of this section of the policy may be a person employed by McLennan County, a contractor engaged by McLennan County or an employee of such contractor.

All drug and alcohol testing performed under this section will conform exactly to DOT procedures.

III. Program and Procedures
Any program or procedures resulting from this policy will conform to this policy and the DOT procedures:

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The McLennan County will maintain and follow a program and procedures containing:

1. Methods and actions for complying with all the requirements of this policy and DOT
procedures, including requirements with respect to the EAP.

2. The name and address of each laboratory that analyzes specimens collected for drug testing:

**Quest Diagnostics Laboratory**
4770 Regent Blvd.
Irving, TX 75063
800-877-7484

3. The name and address of the Medical Review Officer (MRO) employed in the administration of drug testing under this section of the policy:

**Dr. James Vanderploeg**
700 Gemini Ave. Suite 110
Houston, TX 77058
281-486-4434
281-486-8811 fax

IV. Drug testing

**McLennan County** has engaged a laboratory certified by the Department/office of Health and Human Services (DHHS), Substance Abuse and Mental Health Services Administration (SAMSHA) formally NIDA, in accordance with DOT procedures. The testing laboratory will be required to permit:

1. Inspections by McLennan County before the laboratory is selected to perform testing.
2. Unannounced inspections including examination of records at any time by McLennan County, SAMSHA, or a State agency if the laboratory is subject to State agency jurisdiction.

**McLennan County** will not hire or contract for the use of any person as an employee whose functions are subject to DOT procedures unless that person passes a drug test.

Specimens tested positive for drugs will be retained and retested in the following manner:

1. Specimens that yield positive results on confirmation will be retained by the laboratory in frozen storage for at least 365 days, during which time McLennan County, SAMSHA, or a State agency may request retention for an additional period.
2. If the MRO determines there is no legitimate medical explanation for a confirmed positive test result, the split specimen will be tested if the employee makes a written request for so doing within 72 hours of receipt of the final test result from the MRO. McLennan County will pay for the cost of the split being tested, but the employee will reimburse McLennan County for the testing, unless the split is
determined to be negative.
3. If the employee requests a test of the split sample, it must be forwarded to another SAMSHA-certified laboratory of the employee's choice.
4. Since some analyses may deteriorate during storage, any detectable level of the drug will be reported and considered corroborative of the original positive test results.

Contact:
Compliance Consortium Corporation
201 East 2nd Street
Belton, Texas 76513
1-800-303-0281

Transmission of test results to a McLennan County representative may be in writing, in person or by telephone or electronic means, but the BAT will ensure that any test results requiring McLennan County to prevent a CDL driver from performing or continuing to perform a safety-sensitive function will be transmitted immediately. If the initial transmission is not in writing, the BAT will follow-up by providing McLennan County with its copy of the test form, this will be treated as a confidential record under this policy.

Protection of Employee Records.

1. Employer contracts with laboratories shall require that the laboratory maintain employee test records in confidence, as provided in DOT regulations.

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2. The contracts shall provide that the laboratory shall disclose information related to a positive drug test of an individual to the individual, the employer, or the decision-maker in a lawsuit, grievance, or other proceeding initiated by or on behalf of the individual and arising from a certified positive drug test.
3. Upon written request form the employee, the laboratory shall provide access to any and all records relating to his or her drug test and any record relating to the results of any relevant certification, review, or revocation-of-certification proceedings.

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SECTION FIVE
Employee Assistance Program (EAP)

A.cope of Program:

The EAP will provide education and training on alcohol and drug misuse to all employees. The education shall include:
1. Information material displayed on bulletin boards, employee break rooms, locker rooms, etc., and distributed to employees.

2. A community service hot-line telephone number for employee assistance displayed on bulletin boards and distributed to employees, and

3. Distribution of company's policy regarding drug and alcohol misuse to all employees. The policy shall be displayed in prominent places throughout the company (i.e. employee bulletin board, break room, locker rooms).

B. Supervisor Training:

1. Supervisory personnel responsible for those employees covered under Part 382 will receive training under the alcohol misuse prevention plan. The training shall include at least one 120-minute period of training on the specific, contemporaneous physical, behavioral, speech, and performance indicators of probable alcohol and/or misuse. This training shall be for supervisors who determine whether an employee must be alcohol or drug tested for reasonable suspicion.

If any employee wishes to seek help with substance abuse or alcohol misuse the following toll free numbers are available:

   Drug & Alcohol Hotline - 800-252-6465
   SAMSHA - 800-662-HELP

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APPENDIX B
MCLENNAN COUNTY

BLOODBORNE PATHOGENS
EXPOSURE CONTROL
PLAN AND FORMS
# MCLENNAN COUNTY
## BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

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MCLENNAN COUNTY BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

I. INTRODUCTION
The McLennan County Bloodborne Pathogens Exposure Control Plan is implemented to meet the minimum standard requirements for an Exposure Control Plan in accordance with the Health and Safety Code, Chapter 81, Subchapter H and Federal Register, 29 CFR, Section 1910.1030, Chapter XVII. This plan is designed to eliminate or minimize the exposure of employees to bloodborne pathogens.

II. PURPOSE
The Bloodborne Pathogens Exposure Control Plan sets forth policies and procedures to be followed, should an employee be exposed to bloodborne pathogens or other potentially infectious materials resulting in the performance of an employee’s duties. Effective workplace practices and the use of personal protective equipment practices should be followed to minimize or eliminate exposure. The Bloodborne Pathogens Exposure Control Plan is to be accessible to employees and reviewed and updated annually or whenever changes in tasks or positions make it necessary.

III. EXPOSURE DETERMINATION
Occupational Exposure- An exposure incident is defined as a reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of his/her job duties is included. Determination is without regard to use of personal protective equipment. The following job classifications apply:

a. Certified Peace Officers
b. Detention Officers/Jailers
c. Detention/Jail Medical Employees
d. Juvenile Detention Officers
e. Juvenile Probation Officers
f. Custodial employees

The above job classifications were determined to be “at risk” for occupational exposure to bloodborne pathogens in the performance of duties.

IV. METHODS OF COMPLIANCE
Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material is considered infectious regardless of the perceived status of the source individual.

A. Engineering Controls
Engineering and work practice controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.

1. Engineering controls must be examined and maintained or replaced by supervisors and workers on a regular schedule to ensure their effectiveness.

2. Hand washing facilities shall be available to the employees who incur exposure to blood or other potentially infectious materials.

3. When the provision of hand washing facility is not feasible, the department head shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. If these alternatives are used, hands should be washed with soap and running water as soon as feasible.
4. Supervisors shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.

B. **Work Practice Controls**
   Work practice controls shall be used to reduce the likelihood of exposure by altering the manner in which a task is performed (i.e., prohibiting recapping of needles by the two-handed technique).

1. **Needles**
   Contaminated needles and other contaminated sharps should not be bent, recapped, or removed. Shearing or breaking of contaminated needles is prohibited. Recapping or needle removal must be accomplished through the use of a mechanical device or the one-handed technique.

2. **Contaminated Sharps/Discarding and Containment**
   Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be puncture resistant, labeled or color-coded in accordance with this standard and leak proof on sides and bottom.

3. **Work Area Restrictions**
   Avoid eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses in work areas where there is a reasonable likelihood of an occupational exposure.
   
a. Food and drink should not be stored in refrigerators, freezers, shelves, cabinets or on counter tops or bench tops where blood or other potentially infectious materials are present.

b. All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

C. **Personal Protective Clothing and Equipment /Schedule and Method for Implementation**

1. **Provision**
   When there is potential for an occupational exposure, the department shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, face shields or masks and eye ventilation devices. Personal protective equipment is considered to be “appropriate”, only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee’s work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time that the protective equipment will be used.

2. **Uses**
   The supervisor shall ensure that the employee is using appropriate personal protective equipment unless the supervisor shows that the employee temporarily and briefly declines to use personal protective equipment 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 public safety services or would have posed increased hazard to the safety of the worker or co-worker. When the employee makes this judgment, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

3. **Cleaning, Laundering, and Disposal**
   The department or office shall clean, launder, and dispose of personal protective equipment at no cost to the employee.
4. **Repair and Replacement**
   The department or office shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.

5. If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately or as soon as feasible.

6. All personal protective equipment should be removed prior to leaving the work area.

7. When personal protective equipment is removed, it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

8. Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials and when handling or touching contaminated items or surfaces.
   a. Disposal (single use) gloves such as surgical or examination gloves, shall be replaced as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.
   b. Disposable (single use) gloves should not be washed or decontaminated for re-use.
   c. Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, gloves must be discarded if they are cracked, peeled, torn, punctured, exhibit other signs of deterioration, or when their ability to function as a barrier is compromised.

9. Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin length face shields, must be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination may be reasonably anticipated.

10. Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, or clinic jackets must be worn when potentially infectious material or other contamination can be reasonably anticipated.

D. **Housekeeping**

1. **General**
   Supervisors shall ensure that the work site is maintained in a clean and sanitary condition. The supervisor shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, and the type of surface to be cleaned.

2. All equipment and environmental work surfaces must be cleaned and decontaminated after contact with blood or any other potentially infectious materials.
   a. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as possible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials.
   b. Protective coverings, such as plastic wrap, aluminum foil, or imperviously backed absorbent paper should be used to cover equipment and environmental surfaces, should be removed and replaced as soon as possible when they become overtly contaminated.
c. All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable
likelihood for becoming contaminated with blood or other potentially infectious materials
should be inspected and decontaminated on a regularly scheduled basis and cleaned and
decontaminated immediately or as soon as possible upon visible contamination.

d. Broken glassware may be contaminated and should not be picked up directly with the
hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, tongs,
or forceps.

e. Reusable sharps contaminated with blood or other potentially infectious materials should
not be stored or processed in a manner that requires employees to reach by hand into the
containers where these sharps were placed.

3. Laundry

a. Contaminated laundry shall be handled as little as possible with a minimum of agitation.

(1) Contaminated laundry shall be bagged or containerized at the location where it was
used and shall not be sorted or rinsed in the location of use.

(2) Contaminated laundry shall be placed and transported in bags or containers labeled
or color-coded in accordance with section H of this standard. When a facility utilizes
universal precautions in the handling of all soiled laundry, alternative labeling or
color-coding is sufficient if it permits all employees to recognize the containers as
requiring compliance with universal precautions.

(3) Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-
through of or leakage from the bag or container, the laundry shall be placed and
transported in bags or containers which prevent soak-through and/or leakage of
fluids to the exterior.

b. It is the supervisor’s responsibility to ensure that employees who handle contaminated
laundry are wearing protective gloves and other appropriate personal protective equipment.

c. When a facility ships contaminated laundry offsite to the second facility which do not
utilize universal precautions in the handling of all laundry, the facility generating the
contaminated laundry must place such laundry in labeled or color-coded bags or
containers.

4. Regulated Waste

a. Contaminated Sharps - Discarding and Containment

(1) Contaminated sharps should be discarded immediately or as soon as possible in
containers that are containable, puncture resistant, leak proof on sides and bottom, and
labeled or color-coded in accordance with section H of this standard.

(2) During use, containers for contaminated sharps shall be easily accessible to personnel
and located as close as is feasible to the immediate area where sharps are used or can
be reasonably anticipated to be found. The containers shall be maintained upright
throughout use and replaced routinely and should not be allowed to overfill.

(3) When moving containers of contaminated sharps from the area for use, the containers
shall be closed immediately prior to removal or replacement to prevent spillage or
protrusion of contents during handling, storage, transport, or shipping. The containers
shall be placed in a secondary container if leakage is possible. The second container shall be containable and constructed to contain all contents to prevent leakage during handling, storage, transport, or shipping.

(4) Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner, which would expose employees to the risk of percutaneous injury.

b. Other Regulated Waste Containment

(1) Regulated waste shall be placed in containers which are leak resistant, labeled with a biohazard label or color-coded in accordance applicable standards and closed prior to removal.

(2) If outside contamination of the regulated waste container occurs, it shall be placed in a second container. The second container shall be containable and constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping.

c. All regulated waste shall be properly disposed of in accordance with federal, state, county and local regulations.

V. SCHEDULE AND METHOD FOR IMPLEMENTATION

A. General
The County shall make available the hepatitis B vaccine to employees classified to be “at risk” for exposure as identified above after they have received training information on the vaccine. Post-exposure procedures, follow-up and evaluation are to be provided at no cost to the employee.

1. The vaccine shall be made available at no cost to the employee.

2. Medical evaluations and procedures shall be performed by or under the supervision of a licensed physician or other licensed health care professional.

3. Laboratory tests shall be conducted by an accredited laboratory.

B. Hepatitis B Vaccination

1. Hepatitis B vaccine shall be offered by McLennan County to all employees who have a potential risk to an occupational exposure after they have received training information on the vaccine.

2. If the employee has received the complete hepatitis B vaccination series or antibody testing has revealed the employee is immune or the vaccine is contraindicated for medical reasons, the employee will not be required to take the vaccine.

3. The vaccine shall be made available if the employee initially declines but at a later date decides to accept the vaccination.

C. Post exposure medical evaluation and follow-up:

1. The department head must document the route(s) of exposure and the circumstances associated with the exposure.
2. The department head must identify and document the source individual if not prohibited by law or unfeasible. After obtaining consent, unless law allows testing without consent, the blood of the source individual shall be tested for HIV/HBV infectivity, unless it was established that testing of the source is not possible or prohibited by state or local law. When the source individual is already known to be infected with HBV or HIV, testing for the source individual’s known HBV & HIV status should be repeated.

3. The results of testing of the source shall be made available to the exposed employee. The employee shall be informed regarding applicable laws and regulations concerning disclosure of infectious status and identity of source individual.

4. Test for HB, HIV as soon as possible after the exposure incident. Contact the Risk Management Department to set up testing. If the employee consents to a baseline blood collection, but does not give consent for testing, the sample will be preserved for at least 90 days. If within 90 days the employee desires the testing, it will be done immediately.

5. The employee will receive appropriate counseling concerning infection status, results and interpretations of tests, and precautions to take during the period after the exposure incident. The employee will be informed about what potential illnesses can develop and should seek early medical evaluation and subsequent treatment.

D. Information to be provided to the evaluating health care professional:
   1. A copy of the exposure form.
   2. Description of exposed employee’s duties relative to employee’s occupational exposure.
   3. Documentation of the route and circumstances of exposure.
   4. Results of source individual’s blood testing, if available.
   5. All medical records relevant to the appropriate treatment of the employee.

E. Documentation to Employee
   1. The department head or official will obtain and provide a copy of the health care professional’s written opinion to the employee within 15 working days of the completion of the evaluation.
   2. The written opinions regarding hepatitis B vaccination will be limited to whether hepatitis B vaccination is indicated and if the employee has received that vaccine.
   3. Written opinions regarding post-exposure follow-up and evaluation shall be limited to the following:
      a. A statement that the employee has been informed of the results of the evaluation, medical condition resulting from such exposures requiring further evaluations or treatment. All other findings will remain confidential and will not be included in the written report.

VI. IMMEDIATE ACTIONS UPON EXPOSURE

A. STOP

B. WASH cuts, skin punctures, scratches or needle sticks and with soap and water. Flush splashes to the nose, mouth, or skin with water. Irrigate eyes with clean water, saline, or sterile irrigates.

C. REPORT the exposure to your supervisor or department head and call the HR Department. Fill out the Supervisor’s Immediate Report of Illness, Injury or Exposure forms and forward to the HR Department and County Auditor.
VII. COMMUNICATION OF HAZARDS TO EMPLOYEES

A. Labels

1. Warning labels must be affixed to containers of regulated waste, refrigerators, and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials.

2. Labels required by this section shall include the following legend: BIOHAZARD.
   a. These labels shall be fluorescent orange or orange-red or predominantly so, with lettering or symbols in a contrasting color.
   b. These labels are required to be affixed as close as possible to the container by string, wire, or adhesive.

B. Information and Training

1. All employees with occupational exposure must participate.

2. Training shall be provided at no cost to the employee and during work hours.

3. Training shall be provided at the time of initial assignment to tasks where occupational exposure may occur, within 90 days after the effective date of this policy, and at least annually thereafter. Additional training shall be provided when job duties are modified or changed in accordance with the plan.
   a. Employees who have received training during the year preceding their effective date need only receive training on the provisions of the standard not included in their previous training.

4. Annual training shall be provided within one year of previous training.

5. Training programs must be conducted by a knowledgeable person and provide the opportunity for interactive questions and answers with the trainer. Elements of a training program to include a copy of the standard and an explanation of the following:
   a. Epidemiology (the branch of medical science dealing with the transmission and control of disease), modes of transmission, and symptoms of bloodborne diseases.
   b. Employer’s exposure control plan and the means by which employees can obtain a copy.
   c. Methods for recognizing tasks/activities that may involve exposure.
   d. Use and limitations of practices that will prevent or reduce exposure.
   e. Personal protective equipment: selections, proper use, location, removal, handling, decontamination and disposal.
   f. The hepatitis B vaccine: efficacy, safety, benefits, method of administration, and that the vaccine is offered free.
   g. Actions and persons to contact in an emergency involving blood/infectious materials.
   h. Procedures to follow if an exposure incident occurs.
   i. Post-exposure follow-up and evaluation that the employer is required to provide.
   j. Signs and labels.
VIII. RECORD KEEPING

A. Each department that has employees with positions as identified in the McLennan County Bloodborne Pathogens Exposure Control Plan who may be at risk to exposure to blood or other potentially infectious materials shall designate a person within that department to be responsible for the implementation and compliance of the Plan.

1. Medical records to be maintained:
   a. Record of Hepatitis B vaccination
   b. Name and social security number
   c. Copy of refusal form for vaccination
   d. Copy of exposure forms
   e. Copy of results form with doctor’s opinion on exposure.

2. Training records to be maintained:
   a. Copy of training certificates
   b. Copy of training dates
   c. Job description (Law Enforcement, Environmental, Medic, etc.)

3. Availability of records:
   a. Each department shall ensure that all records required to be maintained by this section shall be made available upon request by the Director, and to the Assistant Secretary of the Texas Department of Health for examination and copying.
MCLENNAN COUNTY, TEXAS
BLOOD BORNE PATHOGEN EXPOSURE CONTROL PLAN

HEPATITIS B VACCINE DECLINATION

Employee Name: ________________________________  Employee Number: _____

Department: ________________________________  Job  Position: _______

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the Hepatitis B virus (HBV). I understand that I have been given the opportunity through my employer (McLennan County) to receive the Hepatitis B vaccination series to be administered by appointment at the _________________ at no charge to myself. However, I am declining the Hepatitis B vaccination series at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring the Hepatitis B virus. If in the future I continue to have occupational exposure to blood and other potentially infectious materials and I want to receive the Hepatitis B vaccination series, I may receive the vaccination series at no charge to myself.

I understand that I will need to sign a consent form in order to receive the Hepatitis B vaccination series in the future. I am responsible for scheduling and keeping my appointments, and for providing the completed consent form to the Risk Management Department upon completion of the (3) dose vaccination series.

Employee Signature: ____________________________  Date: ____________________________

Risk Management Representative: ____________________________  Date: ____________________________

Check box below if applicable:

☐ I have received the Hepatitis B vaccination series previously through another source. The vaccination series is not over 10 years old. I have a record of receiving the vaccine, which I can provide upon request.

*Keep original completed form in HR Department and send a copy to department.
MCLENNAN COUNTY, TEXAS
BLOOD BORNE PATHOGEN EXPOSURE CONTROL PLAN
EMPLOYEE ACKNOWLEDGMENT/CONSENT FORM
FOR HEPATITIS B VACCINATION

Employee Name: _______________________________ Employee Number: ______

Department: ______________ Job Position: ___________ Daytime Phone Number: ________________

I have read the vaccine manufacturer’s printed information and have attended an informational training session on Date: __________ regarding Hepatitis B and the Hepatitis B vaccination.

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the Hepatitis B virus (HBV). I understand that I have been given the opportunity through my employer (McLennan County) to receive the Hepatitis B vaccination series to be administered by appointment at the ______________ and at no charge to me.

I have had the opportunity to ask questions and consult my personal physician. I understand that there is no guarantee that I will become immune to Hepatitis B or that I will not experience any adverse side effects from the vaccine. I understand that I must have all three (3) doses of the vaccine as scheduled to derive the benefit of the Hepatitis B vaccine and I understand that there is no guarantee of immunity.

I understand that it is my responsibility to schedule and keep my appointments, and to provide this completed form to the HR Department upon completion of the vaccination series.

Employee Signature: ___________________________ Date: ______________

Risk Management Representative: __________________ Date: ______________

*Must have HR authorization before vaccine may be administered

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<th>Date Vaccination Received</th>
<th>Signature of Vaccine Administrator</th>
<th>Employee Initials After Receiving Vaccination</th>
<th>Lot Number and Expiration Date</th>
<th>Injection Site Left/Right Deltoid</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Dose</td>
<td>_________</td>
<td>_______________________________</td>
<td>_____________________________</td>
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</tr>
<tr>
<td>2nd Dose</td>
<td>_________</td>
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<td>_____________________________</td>
<td>_______________________________</td>
</tr>
<tr>
<td>3rd Dose</td>
<td>_________</td>
<td>_______________________________</td>
<td>_____________________________</td>
<td>_______________________________</td>
</tr>
</tbody>
</table>

Pre administration Questionnaire:
• If you have had a (3) dose Hepatitis B vaccine series in the past, have you had a post vaccine titer drawn to determine seroconversion? ☐ Yes ☐ No
• Are you allergic to Baker’s Yeast? ☐ Yes ☐ No
• Have you ever had a serious reaction to the Hepatitis B vaccine? ☐ Yes ☐ No
• Are you currently ill with a moderate or severe illness? ☐ Yes ☐ No

*Upon completion of 3rd vaccination, return original to HR Department.
Sec. 1910.1030 Bloodborne pathogens.

(a) Scope and Application. This section applies to all occupational exposure to blood or other potentially infectious materials as defined by paragraph (b) of this section.
(b) Definitions. For purposes of this section, the following shall apply:

**Assistant Secretary** means the Assistant Secretary of Labor for Occupational Safety and Health, or designated representative.

**Blood** means human blood, human blood components, and products made from human blood.

**Bloodborne Pathogens** means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

**Clinical Laboratory** means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.

**Contaminated** means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

**Contaminated Laundry** means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

**Contaminated Sharps** means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

**Decontamination** means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

**Director** means the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

**Engineering controls** means controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace.
Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

Hand washing Facilities means a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

Licensed Healthcare Professional is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.

HBV means hepatitis B virus.

HIV means human immunodeficiency virus.

Needleless systems means a device that does not use needles for: (1) The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established; (2) The administration of medication or fluids; or (3) Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.

Occupational Exposure means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

Other Potentially Infectious Materials means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions. Personal Protective Equipment is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

Production Facility means a facility engaged in industrial-scale, large-volume or high concentration production of HIV or HBV.

Regulated Waste means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

Research Laboratory means a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV but not in the volume found in production facilities.

Sharps with engineered sharps injury protections means a non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.
**Source Individual** means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

**Sterilize** means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

**Universal Precautions** is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

**Work Practice Controls** means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

(c) Exposure control

1. **Exposure Control Plan.**
   (i) Each employer having an employee(s) with occupational exposure as defined by paragraph (b) of this section shall establish a written Exposure Control Plan designed to eliminate or minimize employee exposure.
   (ii) The Exposure Control Plan shall contain at least the following elements:
       (A) The exposure determination required by paragraph(c)(2),
       (B) The schedule and method of implementation for paragraphs (d) Methods of Compliance, (e) HIV and HBV Research Laboratories and Production Facilities, (f) Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up, (g) Communication of Hazards to Employees, and (h) Recordkeeping, of this standard, and
       (C) The procedure for the evaluation of circumstances surrounding exposure incidents as required by paragraph (f)(3)(i) of this standard.
   (iii) Each employer shall ensure that a copy of the Exposure Control Plan is accessible to employees in accordance with 29 CFR 1910.20(e).
   (iv) The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. The review and update of such plans shall also:
       (A) Reflect changes in technology that eliminate or reduce exposure to bloodborne pathogens; and
       (B) Document annually consideration and implementation of appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure.
   (v) An employer, who is required to establish an Exposure Control Plan, shall solicit input from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps in the identification, evaluation, and selection of effective engineering and work practice controls and shall document the solicitation in the Exposure Control Plan.
   (vi) The Exposure Control Plan shall be made available to the Assistant Secretary and the Director upon request for examination and copying.
(2) Exposure determination.

(i) Each employer who has an employee(s) with occupational exposure as defined by paragraph (b) of this section shall prepare an exposure determination. This exposure determination shall contain the following:

(A) A list of all job classifications in which all employees in those job classifications have occupational exposure;

(B) A list of job classifications in which some employees have occupational exposure, and

(C) A list of all tasks and procedures or groups of closely related task and procedures in which occupational exposure occurs and that are performed by employees in job classifications listed in accordance with the provisions of paragraph (c)(2)(i)(B) of this standard.

(ii) This exposure determination shall be made without regard to the use of personal protective equipment.

(d) Methods of compliance

(1) General. Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

(2) Engineering and work practice controls.

(i) Engineering and work practice controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.

(ii) Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure their effectiveness.

(iii) Employers shall provide hand washing facilities which are readily accessible to employees.

(iv) When provision of hand washing facilities is not feasible, the employer shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

(v) Employers shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.

(vi) Employers shall ensure that employees wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

(vii) Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed except as noted in paragraphs (d)(2)(vii)(A) and (d)(2)(vii)(B) below. Shearing or breaking of contaminated needles is prohibited.

(A) Contaminated needles and other contaminated sharps shall not be bent, recapped or removed unless the employer can demonstrate that no alternative is feasible or that such action is required by a specific medical or dental procedure.

(B) Such bending, recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed technique.
(viii) Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be:
   (A) Puncture resistant;
   (B) Labeled or color-coded in accordance with this standard;
   (C) Leak proof on the sides and bottom; and
   (D) In accordance with the requirements set forth in paragraph (d)(4)(ii)(E) for reusable sharps.

(ix) Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

(x) Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present.

(xi) All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

(xii) Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

(xiii) Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.
   (A) The container for storage, transport, or shipping shall be labeled or color-coded according to paragraph (g)(1)(i) and closed prior to being stored, transported, or shipped. When a facility utilizes Universal Precautions in the handling of all specimens, the labeling/color-coding of specimens is not necessary provided containers are recognizable as containing specimens. This exemption only applies while such specimens/containers remain within the facility. Labeling or color-coding in accordance with paragraph (g)(1)(i) is required when such specimens/containers leave the facility.
   (B) If outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and is labeled or color-coded according to the requirements of this standard.
   (C) If the specimen could puncture the primary container, the primary container shall be placed within a secondary container which is puncture-resistant in addition to the above characteristics.

(xiv) Equipment which may become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless the employer can demonstrate that decontamination of such equipment or portions of such equipment is not feasible.
   (A) A readily observable label in accordance with paragraph (g)(1)(i)(H) shall be attached to the equipment stating which portions remain contaminated.
   (B) The employer shall ensure that this information is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, and prior to handling, servicing, or shipping so that appropriate precautions will be taken.
(3) Personal protective equipment

(i) Provision. When there is occupational exposure, the employer shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

(ii) Use. The employer shall ensure that the employee uses appropriate personal protective equipment unless the employer shows that the employee temporarily and briefly declined to use personal protective equipment 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 public safety services or would have posed an increased hazard to the safety of the worker or co-worker. When the employee makes this judgment, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

(iii) Accessibility. The employer shall ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

(iv) Cleaning, Laundering, and Disposal. The employer shall clean, launder, and dispose of personal protective equipment required by paragraphs (d) and (e) of this standard, at no cost to the employee.

(v) Repair and Replacement. The employer shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.

(vi) If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately or as soon as feasible.

(vii) All personal protective equipment shall be removed prior to leaving the work area.

(viii) When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

(ix) Gloves. Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; when performing vascular access procedures except as specified in paragraph (d)(3)(ix)(D); and when handling or touching contaminated items or surfaces.

(A) Disposable (single use) gloves such as surgical or examination gloves, shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

(B) Disposable (single use) gloves shall not be washed or decontaminated
Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

If an employer in a volunteer blood donation center judges that routine gloving for all phlebotomies is not necessary then the employer shall:

1. Periodically reevaluate this policy;
2. Make gloves available to all employees who wish to use them for phlebotomy;
3. Not discourage the use of gloves for phlebotomy; and
4. Require that gloves be used for phlebotomy in the following circumstances:
   i. When the employee has cuts, scratches, or other breaks in his or her skin;
   ii. When the employee judges that hand contamination with blood may occur, for example, when performing phlebotomy on an uncooperative source individual; and
   iii. When the employee is receiving training in phlebotomy.

Masks, Eye Protection, and Face Shields. Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

Gowns, Aprons, and Other Protective Body Clothing. Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.

Surgical caps or hoods and/or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated (e.g., autopsies, orthopedic surgery).

Housekeeping
   i. General. Employers shall ensure that the worksite is maintained in a clean and sanitary condition. The employer shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.
   ii. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning.
(B) Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the work shift if they may have become contaminated during the shift.

(C) All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.

(D) Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps.

(E) Reusable sharps that are contaminated with blood or other potentially infectious materials shall not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.

(iii) Regulated Waste

(A) Contaminated Sharps Discarding and Containment.

(1) Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are:

(i) Closable;

(ii) Puncture resistant;

(iii) Leak proof on sides and bottom; and

(iv) Labeled or color-coded in accordance with paragraph (g)(1)(i) of this standard.

(2) During use, containers for contaminated sharps shall be:

(i) Easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found (e.g., laundries);

(ii) Maintained upright throughout use; and

(iii) Replaced routinely and not be allowed to overfill.

(3) When moving containers of contaminated sharps from the area of use, the containers shall be:

(i) Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping;

(ii) Placed in a secondary container if leakage is possible. The second container shall be:

(A) Closable;

(B) Constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping; and

(C) Labeled or color-coded according to paragraph (g)(1)(i) of this standard.

(4) Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury.

(B) Other Regulated Waste Containment

(1) Regulated waste shall be placed in containers which are:

(i) Closable;
(ii) Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping;
(iii) Labeled or color-coded in accordance with paragraph (g)(1)(i) of this standard; and
(iv) Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

(2) If outside contamination of the regulated waste container occurs, it shall be placed in a second container. The second container shall be:
(i) Closable;
(ii) Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping;
(iii) Labeled or color-coded in accordance with paragraph (g)(1)(i) of this standard; and
(iv) Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

(C) Disposal of all regulated waste shall be in accordance with applicable regulations of the United States, States and Territories, and political subdivisions of States and Territories.

(iv) Laundry.

(A) Contaminated laundry shall be handled as little as possible with a minimum of agitation.

(1) Contaminated laundry shall be bagged or containerized at the location where it was used and shall not be sorted or rinsed in the location of use.

(2) Contaminated laundry shall be placed and transported in bags or containers labeled or color-coded in accordance with paragraph (g)(1)(i) of this standard. When a facility utilizes Universal Precautions in the handling of all soiled laundry, alternative labeling or color-coding is sufficient if it permits all employees to recognize the containers as requiring compliance with Universal Precautions.

(3) Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through of or leakage from the bag or container, the laundry shall be placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.

(B) The employer shall ensure that employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment.

(C) When a facility ships contaminated laundry off-site to a second facility which does not utilize Universal Precautions in the handling of all laundry, the facility generating the contaminated laundry must place such laundry in bags or containers which are labeled or color-coded in accordance with paragraph (g)(1)(i).

(e) HIV and HBV Research Laboratories and Production Facilities.

(1) This paragraph applies to research laboratories and production facilities engaged in the culture, production, concentration, experimentation, and manipulation of HIV and HBV. It does not apply to clinical or diagnostic laboratories engaged solely in the analysis of blood, tissues, or organs. These requirements apply in addition to the other requirements of the standard.
(2) Research laboratories and production facilities shall meet the following criteria:

(i) Standard microbiological practices. All regulated waste shall either be incinerated or decontaminated by a method such as autoclaving known to effectively destroy bloodborne pathogens.

(ii) Special practices.

(A) Laboratory doors shall be kept closed when work involving HIV or HBV is in progress.

(B) Contaminated materials that are to be decontaminated at a site away from the work area shall be placed in a durable, leak proof, labeled or color-coded container that is closed before being removed from the work area.

(C) Access to the work area shall be limited to authorized persons. Written policies and procedures shall be established whereby only persons who have been advised of the potential biohazard, who meet any specific entry requirements, and who comply with all entry and exit procedures shall be allowed to enter the work areas and animal rooms.

(D) When other potentially infectious materials or infected animals are present in the work area or containment module, a hazard warning sign incorporating the universal biohazard symbol shall be posted on all access doors. The hazard warning sign shall comply with paragraph (g)(1)(ii) of this standard.

(E) All activities involving other potentially infectious materials shall be conducted in biological safety cabinets or other physical-containment devices within the containment module. No work with these other potentially infectious materials shall be conducted on the open bench.

(F) Laboratory coats, gowns, smocks, uniforms, or other appropriate protective clothing shall be used in the work area and animal rooms. Protective clothing shall not be worn outside of the work area and shall be decontaminated before being laundered.

(G) Special care shall be taken to avoid skin contact with other potentially infectious materials. Gloves shall be worn when handling infected animals and when making hand contact with other potentially infectious materials is unavoidable.

(H) Before disposal all waste from work areas and from animal rooms shall either be incinerated or decontaminated by a method such as autoclaving known to effectively destroy bloodborne pathogens.

(I) Vacuum lines shall be protected with liquid disinfectant traps and high-efficiency particulate air (HEPA) filters or filters of equivalent or superior efficiency and which are checked routinely and maintained or replaced as necessary.

(J) Hypodermic needles and syringes shall be used only for parenteral injection and aspiration of fluids from laboratory animals and diaphragm bottles. Only needle-locking syringes or disposable syringe-needle units (i.e., the needle is integral to the syringe) shall be used for the injection or aspiration of other potentially infectious materials. Extreme caution shall be used when handling needles and syringes. A needle shall not be bent, sheared, replaced in the sheath or guard, or removed from the syringe following use. The needle and syringe shall be promptly placed in a puncture-resistant container and autoclaved or decontaminated before reuse or disposal.

(K) All spills shall be immediately contained and cleaned up by
appropriate professional staff or others properly trained and equipped to work with potentially concentrated infectious materials.

(L) A spill or accident that results in an exposure incident shall be immediately reported to the laboratory director or other responsible person.

(M) A biosafety manual shall be prepared or adopted and periodically reviewed and updated at least annually or more often if necessary. Personnel shall be advised of potential hazards, shall be required to read instructions on practices and procedures, and shall be required to follow them.

(iii) Containment equipment.
(A) Certified biological safety cabinets (Class I, II, or III) or other appropriate combinations of personal protection or physical containment devices, such as special protective clothing, respirators, centrifuge safety cups, sealed centrifuge rotors, and containment caging for animals, shall be used for all activities with other potentially infectious materials that pose a threat of exposure to droplets, splashes, spills, or aerosols.

(B) Biological safety cabinets shall be certified when installed, whenever they are moved and at least annually.

(3) HIV and HBV research laboratories shall meet the following criteria:
(i) Each laboratory shall contain a facility for hand washing and an eye wash facility which is readily available within the work area.
(ii) An autoclave for decontamination of regulated waste shall be available.

(4) HIV and HBV production facilities shall meet the following criteria:
(i) The work areas shall be separated from areas that are open to unrestricted traffic flow within the building. Passage through two sets of doors shall be the basic requirement for entry into the work area from access corridors or other contiguous areas. Physical separation of the high-containment work area from access corridors or other areas or activities may also be provided by a double-doored clothes-change room (showers may be included), airlock, or other access facility that requires passing through two sets of doors before entering the work area.
(ii) The surfaces of doors, walls, floors and ceilings in the work area shall be water resistant so that they can be easily cleaned. Penetrations in these surfaces shall be sealed or capable of being sealed to facilitate decontamination.
(iii) Each work area shall contain a sink for washing hands and a readily available eye wash facility. The sink shall be foot, elbow, or automatically operated and shall be located near the exit door of the work area.
(iv) Access doors to the work area or containment module shall be self-closing.
(v) An autoclave for decontamination of regulated waste shall be available within or as near as possible to the work area.
(vi) A ducted exhaust-air ventilation system shall be provided. This system shall create directional airflow that draws air into the work area through the entry area. The exhaust air shall not be recirculated to any other area of the building, shall be discharged to the outside, and shall be dispersed away from occupied areas and air intakes. The proper direction of the airflow shall be verified (i.e., into the work area).

(5) Training Requirements. Additional training requirements for employees in HIV and HBV research laboratories and HIV and HBV
production facilities are specified in paragraph (g)(2)(ix).

(f) Hepatitis B vaccination and post-exposure evaluation and follow-up

(1) General.

(i) The employer shall make available the hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post-exposure evaluation and follow-up to all employees who have had an exposure incident.

(ii) The employer shall ensure that all medical evaluations and procedures including the hepatitis B vaccine and vaccination series and post-exposure evaluation and follow-up, including prophylaxis, are:

(A) Made available at no cost to the employee;
(B) Made available to the employee at a reasonable time and place;
(C) Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and
(D) Provided according to recommendations of the U.S. Public Health Service current at the time these evaluations and procedures take place, except as specified by this paragraph (f).

(iii) The employer shall ensure that all laboratory tests are conducted by an accredited laboratory at no cost to the employee.

(2) Hepatitis B Vaccination.

(i) Hepatitis B vaccination shall be made available after the employee has received the training required in paragraph (g)(2)(vii)(I) 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.

(ii) The employer shall not make participation in a prescreening program a prerequisite for receiving hepatitis B vaccination.

(iii) If the employee initially declines hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, the employer shall make available hepatitis B vaccination at that time.

(iv) The employer shall assure that employees who decline to accept hepatitis B vaccination offered by the employer sign the statement in appendix A.

(v) If a routine booster dose(s) of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) shall be made available in accordance with section (f)(1)(ii).

(3) Post-exposure Evaluation and Follow-up. Following a report of an exposure incident, the employer shall make immediately available to the exposed employee a confidential medical evaluation and follow-up, including at least the following elements:

(i) Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;

(ii) Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law;

(A) The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the employer shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
(B) When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.

(C) 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.

(iii) Collection and testing of blood for HBV and HIV serological status;

(A) The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.

(B) If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.

(iv) Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service;

(v) Counseling; and

(vi) Evaluation of reported illnesses.

(4) Information Provided to the Healthcare Professional.

(i) The employer shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided a copy of this regulation.

(ii) The employer shall ensure that the healthcare professional evaluating an employee after an exposure incident is provided the following information:

(A) A copy of this regulation;

(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 which are the employer's responsibility to maintain.

(5) Healthcare Professional's Written Opinion. The employer shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.

(i) The healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.

(ii) The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:

(A) That the employee has been informed of the results of the evaluation; and

(B) That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment. (iii) All other findings or diagnoses shall remain confidential and shall not be included in the written report.

(6) Medical recordkeeping. Medical records required by this standard shall be maintained in accordance with paragraph (h)(1) of this section.
(g) Communication of hazards to employees

(1) Labels and signs

(i) Labels.

(A) Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials, except as provided in paragraph (g)(1)(i)(E), (F) and (G).

(B) Labels required by this section shall include the following legend:

(C) These labels shall be fluorescent orange or orange-red or predominantly so, with lettering and symbols in a contrasting color.

(D) Labels shall be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.

(E) Red bags or red containers may be substituted for labels.

(F) Containers of blood, blood components, or blood products that are labeled as to their contents and have been released for transfusion or other clinical use are exempted from the labeling requirements of paragraph (g).

(G) Individual containers of blood or other potentially infectious materials that are placed in a labeled container during storage, transport, shipment or disposal are exempted from the labeling requirement.

(H) Labels required for contaminated equipment shall be in accordance with this paragraph and shall also state which portions of the equipment remain contaminated.

(I) Regulated waste that has been decontaminated need not be labeled or color-coded.

(ii) Signs.

(A) The employer shall post signs at the entrance to work areas specified in paragraph (e), HIV and HBV Research Laboratory and Production Facilities, which shall bear the following legend:

( Name of the Infectious Agent) (Special requirements for entering the area) (Name, telephone number of the laboratory director, or other responsible person.)

(B) These signs shall be fluorescent orange-red or predominantly so, with lettering and symbols in a contrasting color.

(2) Information and Training.

(i) Employers shall ensure that all employees with occupational exposure participate in a training program which must be provided at no cost to the employee and during working hours.

(ii) Training shall be provided as follows:

(A) At the time of initial assignment to tasks where occupational exposure may take place;

(B) At least annually thereafter.

(iii) [Reserved]

(iv) Annual training for all employees shall be provided within one year of their previous training.

(v) Employers shall provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the employee's occupational exposure. The additional training may be limited to addressing the new exposures created.
(vi) Material appropriate in content and vocabulary to educational level, literacy, and language of employees shall be used.

(vii) The training program shall contain at a minimum the following elements:

(A) An accessible copy of the regulatory text of this standard and an explanation of its contents;
(B) A general explanation of the epidemiology and symptoms of bloodborne diseases;
(C) An explanation of the modes of transmission of bloodborne pathogens;
(D) An explanation of the employer's exposure control plan and the means by which the employee can obtain a copy of the written plan;
(E) An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
(F) An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment;
(G) Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
(H) An explanation of the basis for selection of personal protective equipment;
(I) Information on the hepatitis B vaccine, including information on 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 on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;
(K) An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available;
(L) Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident;
(M) An explanation of the signs and labels and/or color coding required by paragraph (g)(1); and
(N) An opportunity for interactive questions and answers with the person conducting the training session.

(viii) The person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.

(ix) Additional Initial Training for Employees in HIV and HBV Laboratories and Production Facilities. Employees in HIV or HBV research laboratories and HIV or HBV production facilities shall receive the following initial training in addition to the above training requirements.

(A) The employer shall assure that employees demonstrate proficiency in standard microbiological practices and techniques and in the practices and operations specific to the facility before being allowed to work with HIV or HBV.
(B) The employer shall assure that employees have prior experience in the handling of human pathogens or tissue cultures before working with
The employer shall provide a training program to employees who have no prior experience in handling human pathogens. Initial work activities shall not include the handling of infectious agents. A progression of work activities shall be assigned as techniques are learned and proficiency is developed. The employer shall assure that employees participate in work activities involving infectious agents only after proficiency has been demonstrated.

(h) Recordkeeping

(1) Medical Records.

(i) The employer shall establish and maintain an accurate record for each employee with occupational exposure, in accordance with 29 CFR 1910.1020.

(ii) This record shall include:

(A) The name and social security number of the employee;

(B) A copy of the employee's hepatitis B vaccination status including the dates of all the hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination as required by paragraph (f)(2);

(C) A copy of all results of examinations, medical testing, and follow-up procedures as required by paragraph (f)(3);

(D) The employer's copy of the healthcare professional's written opinion as required by paragraph (f)(5); and

(E) A copy of the information provided to the healthcare professional as required by paragraphs (f)(4)(ii)(B)(C) and (D).

(iii) Confidentiality. The employer shall ensure that employee medical records required by paragraph (h)(1) are:

(A) Kept confidential; and

(B) Not disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by this section or as may be required by law.

(iv) The employer shall maintain the records required by paragraph (h) for at least the duration of employment plus 30 years in accordance with 29 CFR 1910.1020.

(2) Training Records

(i) Training records shall include the following information:

(A) The dates of the training sessions;

(B) The contents or a summary of the training sessions;

(C) The names and qualifications of persons conducting the training; and

(D) The names and job titles of all persons attending the training sessions.

(ii) Training records shall be maintained for 3 years from the date on which the training occurred.

(3) Availability

(i) The employer shall ensure that all records required to be maintained by this section shall be made available upon request to the Assistant Secretary and the Director for examination and copying.

(ii) Employee training records required by this paragraph shall be provided upon request for examination and copying to employees, to employee representatives, to the Director, and to the Assistant Secretary.

(iii) Employee medical records required by this paragraph shall be provided upon request for examination and copying to the subject employee, to
anyone having written consent of the subject employee, to the Director, and to the Assistant Secretary in accordance with 29 CFR 1910.1020.

(4) Transfer of Records
   (i) The employer shall comply with the requirements involving transfer of records set forth in 29 CFR 1910.1020(h).
   (ii) If the employer ceases to do business and there is no successor employer to receive and retain the records for the prescribed period, the employer shall notify the Director, at least three months prior to their disposal and transmit them to the Director, if required by the Director to do so, within that three month period.

(i) Dates
   (1) Effective Date. The standard shall become effective on March 6, 1992.
   (2) The Exposure Control Plan required by paragraph (c) of this section shall be completed on or before May 5, 1992.
   (3) Paragraph (g)(2) Information and Training and (h) Recordkeeping shall take effect on or before June 4, 1992.

(5) Sharps injury log.
   (i) The employer shall establish and maintain a sharps injury log for the recording of percutaneous injuries from contaminated sharps. The information in the sharps injury log shall be recorded and maintained in such manner as to protect the confidentiality of the injured employee. The sharps injury log shall contain, at a minimum:
      (A) The type and brand of device involved in the incident,
      (B) The department or work area where the exposure incident occurred, and
      (C) An explanation of how the incident occurred.
   (ii) The requirement to establish and maintain a sharps injury log shall apply to any employer who is required to maintain a log of occupational injuries and illnesses under 29 CFR 1904.
   (iii) The sharps injury log shall be maintained for the period required by 29 CFR 1904.6.

Appendix A to Section 1910.1030--Hepatitis B Vaccine Declination (Mandatory)

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 vaccination series at no charge to me.

HEALTH & SAFETY CODE

CHAPTER 81. COMMUNICABLE DISEASES

SUBCHAPTER H. BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

Sec. 81.301. DEFINITIONS. In this subchapter:

(1) "Bloodborne pathogens" means pathogenic microorganisms that are present in human blood and that can cause diseases in humans. The term includes hepatitis B virus, hepatitis C virus, and human immunodeficiency virus.

(2) "Engineered sharps injury protection" means:

(A) a physical attribute that is built into a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids and that effectively reduces the risk of an exposure incident by a mechanism such as barrier creation, blunting, encapsulation, withdrawal, retraction, destruction, or another effective mechanism; or

(B) a physical attribute built into any other type of needle device, into a nonneedle sharp, or into a nonneedle infusion safety securement device that effectively reduces the risk of an exposure incident.

(3) "Governmental unit" means:

(A) this state and any agency of the state, including a department, bureau, board, commission, or office;

(B) a political subdivision of this state, including any municipality, county, or special district; and

(C) any other institution of government, including an institution of higher education.

(4) "Needleless system" means a device that does not use a needle and that is used:

(A) to withdraw body fluids after initial venous or arterial access is established;

(B) to administer medication or fluids; or

(C) for any other procedure involving the potential for an exposure incident.

(5) "Sharp" means an object used or encountered in a health care setting that can be reasonably
anticipated to penetrate the skin or any other part of the body and to result in an exposure incident, including a needle device, a scalpel, a lancet, a piece of broken glass, a broken capillary tube, an exposed end of a dental wire, or a dental knife, drill, or bur.

(6) "Sharps injury" means any injury caused by a sharp, including a cut, abrasion, or needle stick. Added by Acts 1999, 76th Leg., ch. 1411, Sec. 26.01, eff. Sept. 1, 1999.

Sec. 81.302. APPLICABILITY OF SUBCHAPTER. This subchapter applies only to a governmental unit that employs employees who:

(1) provide services in a public or private facility providing health care-related services, including a home health care organization; or

(2) otherwise have a risk of exposure to blood or other material potentially containing bloodborne pathogens in connection with exposure to sharps.

Added by Acts 1999, 76th Leg., ch. 1411, Sec. 26.01, eff. Sept. 1, 1999.

Sec. 81.303. EXPOSURE CONTROL PLAN. The department shall establish an exposure control plan designed to minimize exposure of employees described by Section 81.302 to bloodborne pathogens. In developing the plan, the department must consider:

(1) policies relating to occupational exposure to bloodborne pathogens;

(2) training and educational requirements for employees;

(3) measures to increase vaccinations of employees; and

(4) increased use of personal protective equipment by employees.

Added by Acts 1999, 76th Leg., ch. 1411, Sec. 26.01, eff. Sept. 1, 1999.

Sec. 81.304. MINIMUM STANDARDS. The board by rule shall adopt minimum standards to implement the exposure control plan and the other provisions of this subchapter. The rules shall be analogous to standards adopted by the federal Occupational Safety and Health Administration. Each governmental unit shall comply with the minimum standards adopted under this subchapter.

Added by Acts 1999, 76th Leg., ch. 1411, Sec. 26.01, eff. Sept. 1, 1999.

Sec. 81.305. NEEDLELESS SYSTEMS.

(a) The board by rule shall recommend that governmental units implement needleless systems and
sharps with engineered sharps injury protection for employees.

(b) The recommendation adopted under Subsection (a) does not apply to the use of a needleless system or sharps with engineered sharps injury protection in circumstances and in a year in which an evaluation committee has established that the use of needleless systems and sharps with engineered sharps injury protection will jeopardize patient or employee safety with regard to a specific medical procedure or will be unduly burdensome. A report of the committee's decision shall be submitted to the department annually.

(c) At least half of the members of an evaluation committee established by a governmental unit to implement Subsection (b) must be employees who are health care workers who have direct contact with patients or provide services on a regular basis.

(d) Expired.

Added by Acts 1999, 76th Leg., ch. 1411, Sec. 26.01, eff. Sept. 1, 1999.

Sec. 81.306. SHARPS INJURY LOG.

(a) The board by rule shall require that information concerning exposure incidents be recorded in a written or electronic sharps injury log to be maintained by a governmental unit. This information must be reported to the department and must include:

(1) the date and time of the exposure incident;

(2) the type and brand of sharp involved in the exposure incident; and

(3) a description of the exposure incident, including:

(A) the job classification or title of the exposed employee;

(B) the department or work area where the exposure incident occurred;

(C) the procedure that the exposed employee was performing at the time of the incident;

(D) how the incident occurred;

(E) the employee's body part that was involved in the exposure incident; and

(F) whether the sharp had engineered sharps injury protection and, if so, whether the protective mechanism was activated and whether the injury occurred before, during, or after the activation of the protective mechanism.

(b) Information regarding which recommendations under Section 81.305(a) were adopted by the
governmental entity shall be included in the log.

(c) All information and materials obtained or compiled by the department in connection with a report under this section are confidential and not subject to disclosure under Chapter 552, Government Code, and not subject to disclosure, discovery, subpoena, or other means of legal compulsion for their release by the department. The department shall make available, in aggregate form, the information described in Section 81.305(b) and this section, provided that the name and other information identifying the facility is deleted and the information is provided according to public health regions established by the department.

Added by Acts 1999, 76th Leg., ch. 1411, Sec. 26.01, eff. Sept. 1, 1999.

Sec. 81.307. DEVICE REGISTRATION

(a) The department, in accordance with rules adopted by the board, shall implement a registration program for existing needleless systems and sharps with engineered sharps injury protection.

(b) The department shall compile and maintain a list of existing needleless systems and sharps with engineered sharps injury protection that are available in the commercial marketplace and registered with the department to assist governmental units to comply with this subchapter.

(c) The department shall charge a fee to register a device in an amount established by the board. The fees collected under this section may be appropriated only to the department to implement this subchapter.

Added by Acts 1999, 76th Leg., ch. 1411, Sec. 26.01, eff. Sept. 1, 1999.
§ 502.009. Employee Education Program, TX HEALTH & S § 502.009

V.T.C.A., Health & Safety Code § 502.009

§ 502.009. Employee Education Program

Effective: April 2, 2015

(a) An employer shall provide an education and training program for employees who use or handle hazardous chemicals.

(b) An employer shall develop, implement, and maintain at the workplace a written hazard communication program for the workplace that describes how the criteria specified in this chapter will be met.

(c) An education and training program must include, as appropriate:

(1) information on interpreting labels and SDSs and the relationship between those two methods of hazard communication;

(2) the location by work area, acute and chronic effects, and safe handling of hazardous chemicals known to be present in the employees’ work area and to which the employees may be exposed;

(3) the proper use of protective equipment and first aid treatment to be used with respect to the hazardous chemicals to which the employees may be exposed; and

(4) general safety instructions on the handling, cleanup procedures, and disposal of hazardous chemicals.

(d) Training may be conducted by categories of chemicals. An employer must advise employees that information is available on the specific hazards of individual chemicals through the MSDSs. Protective equipment and first aid treatment may be by categories of hazardous chemicals.
(e) An employer shall provide additional instruction to an employee when the potential for exposure to hazardous chemicals in the employee’s work area increases significantly or when the employer receives new and significant information concerning the hazards of a chemical in the employee’s work area. The addition of new chemicals alone does not necessarily require additional training.

(f) An employer shall provide training to a new or newly assigned employee before the employee works with or in a work area containing a hazardous chemical.

(g) An employer shall keep the written hazard communication program and a record of each training session given to employees, including the date, a roster of the employees who attended, the subjects covered in the training session, and the names of the instructors. Those records shall be maintained for at least five years by the employer. The department shall have access to those records and may interview employees during inspections.

(h) Emergency service organizations shall provide, to their members or employees who may encounter hazardous chemicals during an emergency, information on recognizing, evaluating, and controlling exposure to the chemicals.

(i) As part of an outreach program created in accordance with Section 502.008, the department shall develop an education and training assistance program to assist employers who are unable to develop the programs because of size or other practical considerations. The program shall be made available to those employers on request.

Credits


Notes of Decisions (1)