Bloodborne Pathogen Training for Emergency Shelter Workers (PDF)

Multnomah County
Health Department

As a worker at a County emergency shelter, you may interact with individuals experiencing homelessness. Direct contact can increase risk of exposure to bloodborne pathogens (BBPs) like HIV, hepatitis B, and hepatitis C. These diseases can be transmitted through contact with infected blood and/or bodily fluids, also known as other potentially infectious material (OPIM). We take preventative steps to minimize direct physical contact with shelter guests and their belongings, to reduce risk.

This online course provides the information you need to protect yourself while continuing to serve our vulnerable community members. Over the next few modules, you will learn about potential exposure risks in emergency shelters and how to reduce your chances of coming into contact with contaminated blood or OPIM.

We will cover Oregon OSHA's collateral duty clause, the BBP exposure control plan (ECP), which includes information regarding universal precautions, protective equipment, reporting protocols, and potential exposure scenarios, so you understand how to safeguard your health if an exposure occurs.

While BBP exposure is not a significant concern in emergency shelters, our goal is to equip you with the knowledge to compassionately serve vulnerable individuals while reducing risk and ensuring your own safety. Let's get started.

Why is this course required?

For workers at severe weather shelters, understanding bloodborne pathogens is critical for two key reasons: ensuring personal safety and providing safe, informed care to those they serve. Bloodborne pathogens, such as hepatitis B, C, and HIV, can lead to serious diseases. These pathogens are present in human blood and OPIM and can be transmitted through an exposure incident , a risk that could be heightened in shelter environments if a worker has direct physical contact with a guest experiencing medical emergencies or injuries.

Step 1

This course is required for your safety

Knowing how to reduce the chances of exposure – through understanding the exposure control plan, proper use of personal protective equipment, safe handling and disposal of sharps, and adherence to hygiene protocols – is essential for worker safety. Additionally, in the unfortunate event of exposure, it's vital for you to know the immediate steps to take, such as seeking medical attention and following post-exposure procedures.

Step 2

This course is required because it's the law

Secondly, because it's required by law. The Oregon Administrative Rules, Chapter 437, Section Z: Toxic and Hazardous Substances Bloodborne Pathogens, requires that employees with potential occupational exposure to BBPs are to be trained, prior to the initial assignment with tasks where occupational exposure may take place, and annually thereafter.

The standard outlines requirements to protect workers who may be exposed to blood or other potentially infectious materials on the job. It covers exposure control plans, universal precautions, engineering controls, personal protective equipment, hepatitis B vaccinations, post-exposure treatment, training, and recordkeeping. OSHA also provides a Bloodborne Pathogens web page with extensive resources for workers and employers.

The *Collateral Duty* Clause

Oregon OSHA states when a worker's potential exposure to bloodborne pathogens is limited because their primary job responsibilities do not include tasks that may expose them to BBP, but could potentially result from an exposure incident while providing help, the role is characterized as a collateral duty. Incidental cleanup of blood or removal of a discarded needle may fall under collateral duty.

Note: Any shelter roles with more direct contact or beyond "collateral duty" with people (e.g., medical staff or security trained in first aid) may face a slightly elevated risk, but also have customized training based on their roles. This emergency shelter training is for shelter staff who do not perform medical care, hygiene services, or first aid and fall under the "collateral duty clause".

Summary

Yes, this course is legally required, but the time you spend learning here can literally save your life, or the lives of others. As you work through the content, focus on:

1) Understanding how BBPs are spread;

2) How to reduce your chance of exposure;

3) What to do in the event of an exposure.

Complete the content above before moving on.

Where can I Find the Legal Requirements?

The document below outlines requirements to protect workers who may be exposed to blood or other potentially infectious materials on the job. It covers exposure control plans, universal precautions, engineering controls, personal protective equipment, hepatitis B vaccinations, post-exposure treatment, training, and recordkeeping. OSHA also provides a Fact Sheet that summarizes the standard in plain language, detailing employers' responsibilities and workers' rights. Reading through both the original standard and OSHA's explanation can help you fully understand the protections in place.

OSHA also provides a Bloodborne Pathogens web page with extensive resources for workers and employers.

Oregon Administrative Rules, Chapter 437, Section Z Toxic and Hazardous Substances Bloodborne Pathogens.pdf

539.2 KB

Epidemiology and Symptoms of Bloodborne Diseases

What is epidemiology?

Epidemiology is the study of how diseases spread and what causes them to occur in groups of people. Epidemiologists look at how often diseases happen in human populations and where they happen most. This helps identify disease patterns and risk factors.

Epidemiology also works to uncover what causes diseases and how they spread among groups of people. Knowing how diseases are transmitted allows us to implement interventions to stop the spreading.

This is important to you because it can help you make informed decisions about your health: Knowing basics about how diseases spread and risk factors can help you take appropriate precautions and engage in preventative behaviors.

How can this help you stay healthy?

Knowing the basics of the transmission of BBPs can help in a number of ways.

Transmission: Bloodborne pathogens can be transmitted through several direct and indirect means, posing various risks of infection:

- Direct blood-to-blood contact is a primary route of transmission, where infected blood from one individual enters the bloodstream of another, often through open

wounds or cuts.

- Intravenous drug use with shared needles is another critical pathway, as it allows direct exchange of blood between users.
- Unsafe healthcare practices present significant risks as well, especially when medical equipment is not adequately sterilized, leading to the potential for cross-contamination between patients. Mother-to-child transmission is also a concern, with the possibility of passing pathogens to the newborn during childbirth or through breastfeeding.
- Lastly, sexual contact with an infected individual is a common transmission method, highlighting the importance of protective measures to prevent the spread of infections.

Each of these transmission routes requires targeted strategies for prevention and education to mitigate the risks associated with bloodborne pathogens.

At-Risk Populations: Certain groups are at higher risk of exposure to bloodborne pathogens:

- As a shelter worker, you may be at higher risk of exposure to BBPs because some clients may have risk factors, and may lack resources to protect themselves.
- Healthcare workers, for instance, face a heightened risk due to potential needlestick injuries, which can occur during the handling of sharp instruments or disposal of used needles.
- Intravenous drug users are also at a higher risk, mainly through the sharing of contaminated needles that provide a direct route for transmission.
- Patients who undergo transfusions or organ transplants are at risk, particularly in regions where rigorous blood screening protocols are not strictly adhered to.

- Additionally, individuals who have multiple sexual partners or engage in unprotected sex increase their chances of exposure to these pathogens. Infants born to infected mothers are another high-risk group, with the potential for transmission during childbirth or breastfeeding. These groups require targeted preventive measures and education to minimize the risk of infection.

Incidence and Prevalence: The incidence (new cases) and prevalence (total cases) of bloodborne diseases vary by region and population. For instance:

- HIV/AIDS has a significant prevalence in sub-Saharan Africa.
- Hepatitis B is endemic in parts of Asia and the Western Pacific.
- Hepatitis C is a common infection in many countries, with high rates found in Eastern Europe and parts of Asia.

Symptoms of BBPs

The symptoms of bloodborne diseases can vary widely depending on the specific pathogen involved. However, common initial symptoms might include:

- Fever and chills
- Nausea and vomiting
- Fatigue
- Joint pain or muscle aches

- Dark urine
- Jaundice (yellowing of the skin or eyes)

In chronic cases, bloodborne diseases can lead to more serious health complications such as liver cirrhosis or liver cancer in the case of chronic Hepatitis B and C, or Acquired Immunodeficiency Syndrome (AIDS) in the case of HIV if not treated.

Prevention is a key aspect of controlling bloodborne diseases, which includes the use of personal protective equipment (PPE), safe handling and disposal of needles and other sharp instruments, and following proper protocols when dealing with blood spills. Vaccinations are also available for some bloodborne diseases like Hepatitis B.

Multnomah County's Bloodborne Pathogen Exposure Control Plan

As a Multnomah County severe weather shelter employee or volunteer, it's crucial to be well-versed in the County's *Worksite Exposure Control Plan*. You can access the plan below. This plan is your guidebook for handling potential exposure to bloodborne pathogens, ensuring your safety and health while you help others. Understanding and following the plan's guidelines, such as using protective barriers and proper handwashing, significantly reduces your risk.

WORKSITE EXPOSURE CONTROL PLAN

MULTNOMAH COUNTY
Department of County Human Services
Risk Management

WORKSITE **Severe Weather Shelters**

This Bloodborne Pathogen Exposure Control Plan was prepared in compliance with OR/OSHA Safety and Health Code OAR 437 Division 2 (CFR 1910) General Occupational Safety & Health Rules Subdivision Z: Toxic & Hazardous Substances Blood Borne Pathogens (1910.1030). First initiated September 1, 1992
https://osha.oregon.gov/OSHARules/div2/div2Z-1030-bloodborne.pdf

https://osha.oregon.gov/OSHARules/pd/pd-154.pdf

FOR CLARIFICATION OR CONSULTATION REGARDING
YOUR WORKSITE EXPOSURE CONTROL PLAN PLEASE CONTACT:

CONTACT DETAILS HERE
ADDRESS HERE

Severe Weather Shelters - Worksite Exposure Control Plan.docx.pdf
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Additionally, the plan provides detailed instructions for specific situations, like handling sharps or cleaning up spills. Knowing where to find personal protective equipment (PPE) and how to use it correctly is also essential. Remember, even if your primary job doesn't involve exposure risk, you still need to be prepared for unexpected incidents.

Should you experience an exposure, the plan outlines the immediate steps to take. Notify the Person in Charge (PIC) and contact the 24/7 Nurse Triage Care Line for immediate medical advice. This ensures you receive prompt care and guidance, minimizing potential health consequences.

Familiarize yourself with the plan's location and contents. It's regularly updated and contains critical information on training, post-exposure procedures, and your rights as an employee. By understanding the plan, you're not only protecting yourself but also contributing to a safer, healthier work environment for everyone in the shelter.

A copy of the plan is maintained in the Person-In-Charge (PIC) binder at each worksite. The PIC also has access to this plan in their mobile materials.

Recognizing Risks in a Shelter Setting

Working in a shelter might increase risk of exposure to bloodborne pathogens compared to other workplaces. Shelters serve a vulnerable population with limited access to healthcare - some with untreated medical conditions. Direct contact with some people or things in the environment could potentially increase risk of disease transmission. Thus we take preventative measures to avoid potential exposures.

Shelter guests may have clothing, bedding, and waste that could be contaminated but may lack resources for disposables or private washing facilities. Drug use may occur on or around the premises as well.

With large numbers of residents in close quarters, often with uncertain health status, shelters require vigilant use of universal precautions to protect staff from occupational exposures.

Any shelter roles with more direct contact with people (e.g., medical staff or security trained in first aid) may face a slightly elevated risk, but also have customized training based on their roles. This emergency shelter training is for shelter staff who do not perform medical care, hygiene services, or first aid.

How do you recognize high-risk tasks in shelters?

Working in an emergency shelter might increase risk of exposure to bloodborne pathogens compared to other workplaces. Shelters serve a vulnerable population with limited access to healthcare - some with untreated medical conditions. Direct contact with some people or things in the environment could potentially increase risk of disease transmission. Thus we take preventative measures to avoid potential exposures.

Step 1

Handling personal items

Handling personal items like clothing, bedding, or other belongings of those you serve can potentially lead to exposure if items are soiled with blood or bodily fluids. Always wear gloves and avoid direct contact with soiled linens or personal items if possible. Bag items separately or place into bins and wash/disinfect according to protocol.

Disinfect surfaces stained with blood using approved disinfectants.

Step 2

Performing cleaning and maintenance duties

Performing cleaning and maintenance duties may bring staff into contact with blood or other potentially infectious materials.

- Wear waterproof gloves when handling waste or cleaning areas that may be contaminated.
- Anything visibly soiled with blood should be disinfected with proper disinfecting solutions.

  Avoid direct skin contact and needlestick injuries by not putting hands into containers or trash bags.

Summary

Workers at emergency shelters may encounter some risk of exposure to bloodborne pathogens when handling personal items or cleaning.

- Always wear protective gloves and other Personal Protective Equipment (PPE) to create a barrier against direct contact.
- Avoid touching anything visibly soiled with blood. Disinfect surfaces, bag contaminated items separately, and wash with appropriate disinfectant solutions.
- Needlestick injuries can occur when handling waste or linens - use caution.

Following universal precautions, using PPE, and proper disinfection protects both workers and the individuals they serve.

How Bloodborne Pathogens Can Spread in Emergency Shelters: What You Need to Know

Even if you're only working in a shelter temporarily, it's important to understand how bloodborne pathogens like Hepatitis B, Hepatitis C, and HIV can spread. This knowledge will help you stay safe and protect yourself from potential infection.

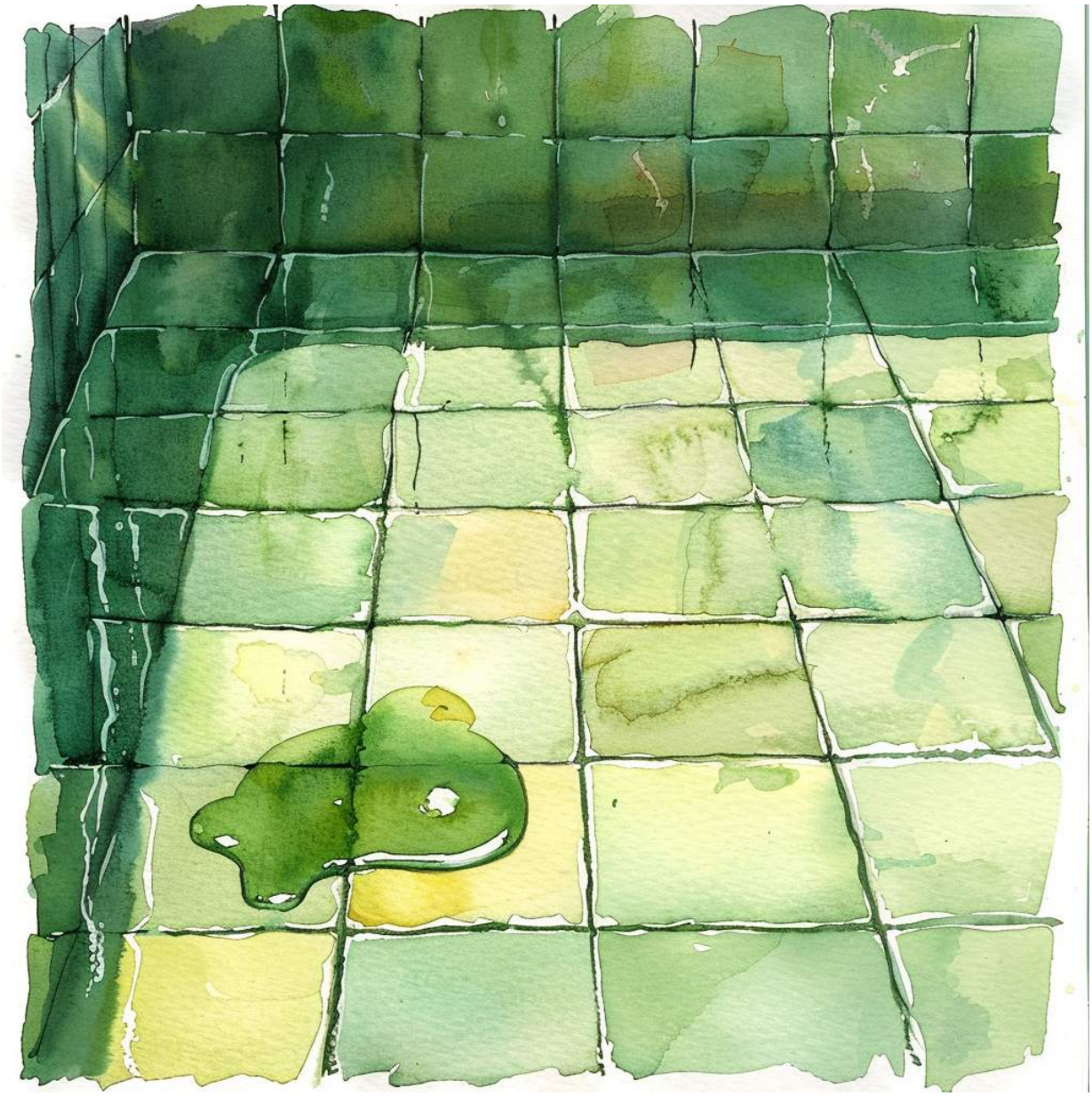
Key Transmission Risks in Shelters

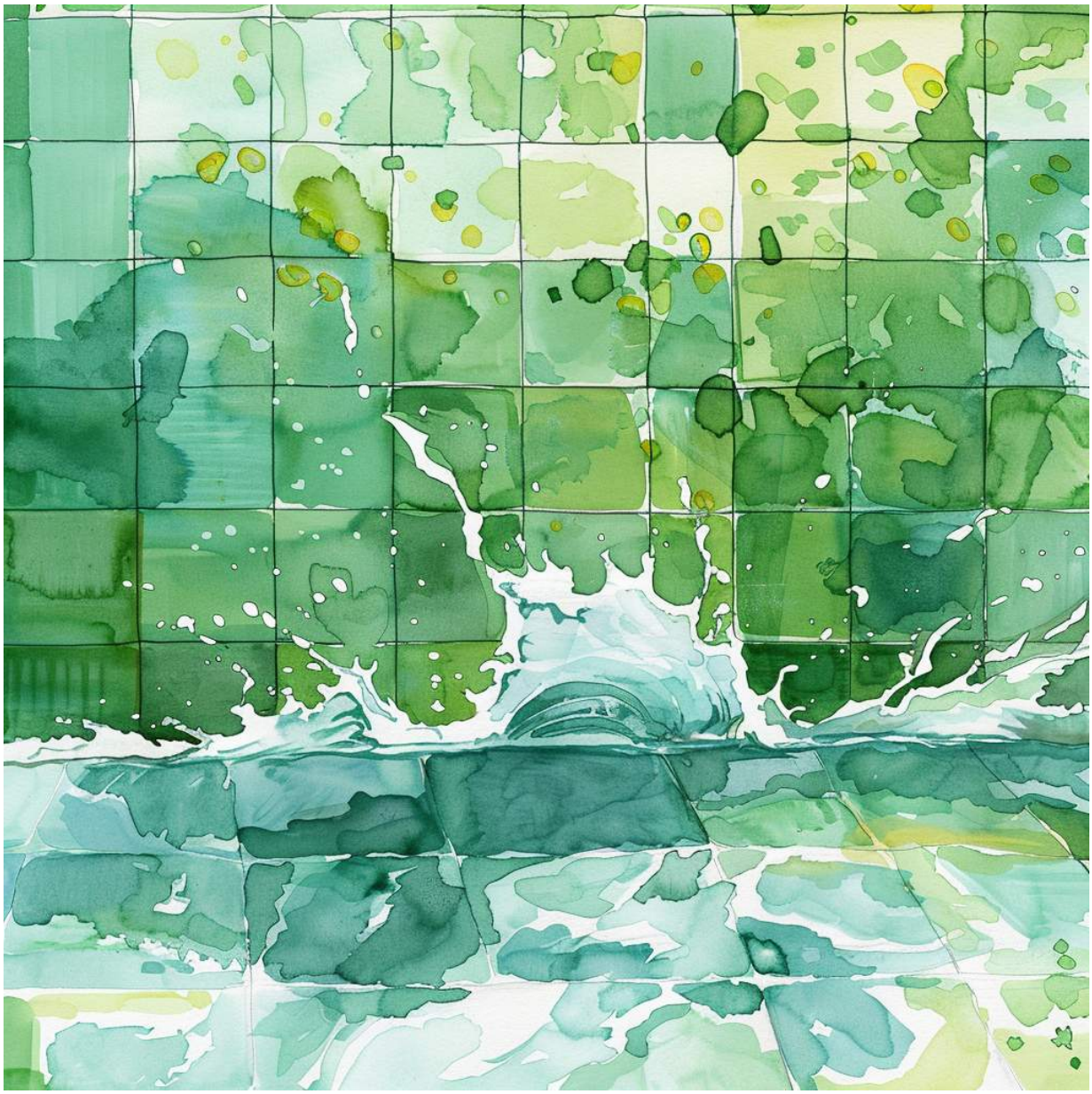
Accidental Needle Sticks

- Discarded needles from IV drug use are a major concern in shelters. Even a tiny prick from a contaminated needle can transmit dangerous pathogens.
- Never attempt to pick up or recap needles. Instead, alert shelter staff so they can safely dispose of them.

Contact with Blood or Bodily Fluids

- You might encounter blood spills, soiled linens or clothing, or other bodily fluids in a shelter environment.
- Bloodborne pathogens can enter your body through cuts, scrapes, or even chapped skin.
- Always wear gloves when handling anything that might be contaminated, and wash your hands thoroughly afterward.





Splashes to the Eyes, Nose, or Mouth

- Although less common, it's possible to get infected if blood or bodily fluids splash into your eyes, nose, or mouth.
- If this happens, flush the area with water immediately and seek medical attention if needed.

Remember:

Don't touch anything sharp. If you see a needle or other sharp object, don't try to pick it up. Let shelter staff handle it.

- Always wear gloves. When cleaning up spills or handling soiled items, wear gloves to protect your hands.
- Wash your hands frequently. Handwashing is one of the best ways to prevent the spread of infection. Wash your hands thoroughly after any potential exposure.
- Report any exposures. If you accidentally get stuck with a needle or have any other exposure to blood or bodily fluids, report it to shelter staff immediately. They can advise you on the next steps and help ensure you get the appropriate medical care.

By following these simple precautions, you can help protect yourself from bloodborne pathogens while working in a temporary emergency shelter.

Standard Precautions to Minimize Exposure

Always wear gloves as a barrier when blood, bodily fluids, or contaminated surfaces could come into contact with your skin. Gloves protect both you and the individuals you are serving from potential bloodborne pathogen transmission related to direct exposure.

Utilize face masks and eye protection when there is a risk of blood, vomit, or other potentially infectious bodily fluids splashing into your eyes, nose or mouth during first aid administration or cleaning tasks. They serve as an important shield to guard against direct mucous membrane exposure.

Carefully handle and dispose of all sharps immediately after use in closed puncture-proof containers to prevent needlestick injuries. Never recap needles or improperly dispose of sharps medical waste. Prioritizing safety protocols for sharp object handling protects staff from accidental infection.

Biohazard Warnings

Being familiar with common biohazard signs and labels can help you stay aware of potential hazards and take appropriate precautions, even in settings beyond the shelter.

The Biohazard Symbol

- The most common biohazard warning is an diamond or circle with the biohazard symbol in the center.
- You might see this symbol on containers, bags, or doors to indicate the presence of potentially infectious materials.

In addition to the general biohazard symbol, more specific labels may be used to identify the type of biohazard present. These labels might include color coding and additional symbols. For example, red bags or containers are often used for the disposal of contaminated sharps.

Remember:

- If you see the biohazard symbol or other warning labels, proceed with caution.
- Avoid touching any materials or containers that display these warnings unless you have the proper training and protective equipment.
- If you're unsure about a particular sign or label, ask the PIC for guidance

Conclusion

In summary, while these methods significantly reduce exposure risks, they are not foolproof. Continuous training, proper use, regular maintenance, and adherence to protocols are necessary to ensure maximum protection against bloodborne pathogens.

Reducing Risks of Exposure

Ways to reduce your risk

Engineering controls, work practices, and personal protective equipment all play vital roles in reducing occupational exposure to bloodborne pathogens.

While each method can greatly decrease transmission risks when implemented correctly, they have limitations. Reliance on staff compliance, supply shortages, budget constraints, improper use, and damage can all reduce the effectiveness of exposure controls.

Training, planning, and investment is required to maximize the protective benefits of these critical safeguards within the constraints of real-world healthcare and social service settings. Most importantly, constant vigilance and awareness can help keep everyone, staff and residents, safer.

Here are three important methods we can use to prevent or reduce exposure, along with their limitations:

1

Engineering Controls are devices that isolate or remove hazards from the workplace. An example include sharps disposal containers, a control designed to eliminate or minimize exposure automatically.These controls are designed to eliminate or minimize exposure automatically. However, their effectiveness is limited if they are not used correctly.

2

Work Practices involve altering the way tasks are performed to reduce the likelihood of exposure. This includes hand hygiene, proper waste disposal, and specific techniques for handling sharps, if they are encountered. While these practices are crucial, they rely heavily on consistent staff training and compliance, which can be challenging to maintain.

3

Personal Protective Equipment (PPE) such as gloves, gowns, masks, and eye protection, create a barrier against infections. PPE is highly effective when used properly. However, its protective ability is limited if it is damaged, if the wrong type of PPE is used for a task, or if it is not available when needed.

More About Personal Protective Equipment

During any potential higher exposure risk, using Personal Protective Equipment (PPE) is one of the most effective things you can do to prevent exposure to BBPs. Multnomah County provides PPE at no cost to shelter workers. Essential items include eye protection, gloves, masks, and in some cases, protective clothing.

Always wear gloves as a barrier if there is a possibility that blood, bodily fluids, or contaminated surfaces could come into contact with your skin. Gloves protect both you and the individuals you are serving from potential bloodborne pathogen transmission related to direct exposure.

Utilize face masks and eye protection when there is a risk of blood, vomit, or other potentially infectious bodily fluids splashing into your eyes, nose or mouth during first aid administration or cleaning tasks. They serve as an important shield to guard against direct mucous membrane exposure.

Carefully handle and dispose of any sharps found at shelter sites and dispose of them in closed puncture-proof containers to prevent needlestick injuries. Prioritizing safety

protocols for sharp object handling protects staff from accidental infection.

Proper donning, doffing, and disposal of PPE are vital for safety when doing any shelter cleaning.

Donning and Doffing PPE

For the best protection, it's important to follow the proper sequence when putting on (donning) and taking off (doffing) PPE. This guide from the Center for Disease Control outlines the steps.

Workers should understand PPE limitations and inspect gear regularly.

Selecting PPE

When working in a shelter, even temporarily, it's important to use the right personal protective equipment to keep yourself safe. The type of PPE you need will depend on the tasks you're doing and the potential exposures you might encounter. Discuss this with your PIC to ensure that you have the proper PPE.

Conclusion

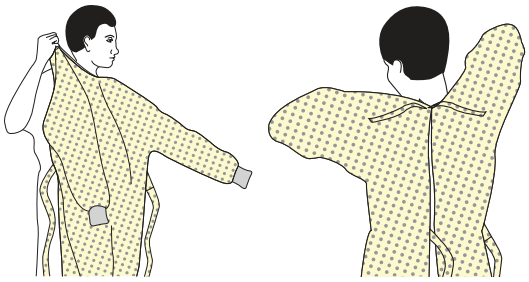
In summary, while these methods significantly reduce exposure risks, they are not foolproof. Continuous training, proper use, regular maintenance, and adherence to protocols are necessary to ensure maximum protection against bloodborne pathogens.

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

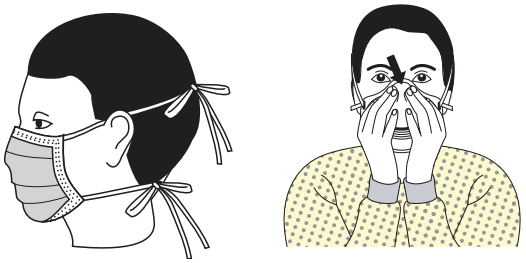
1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator

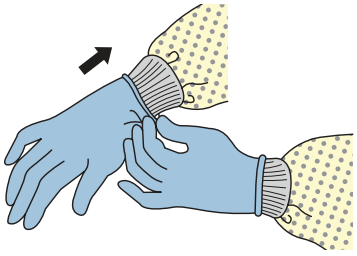


3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit

4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

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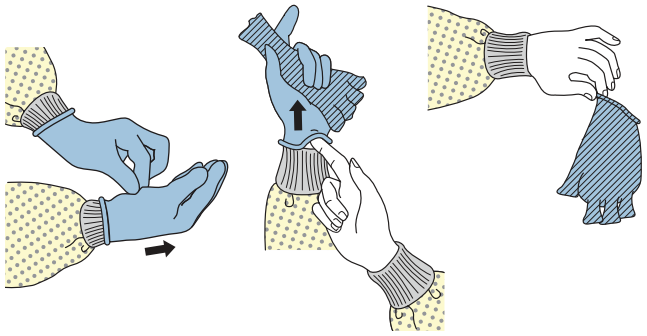
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container

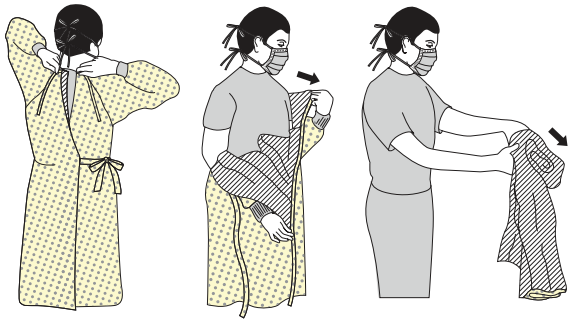


2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

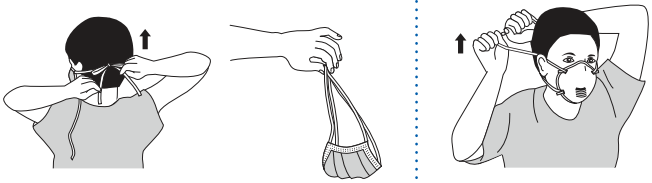
3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

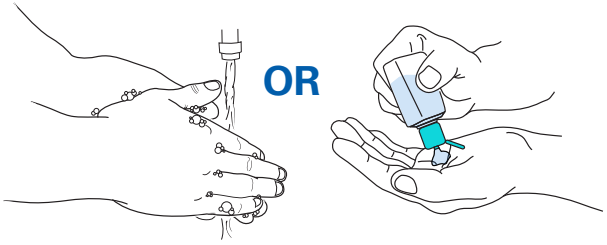


4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

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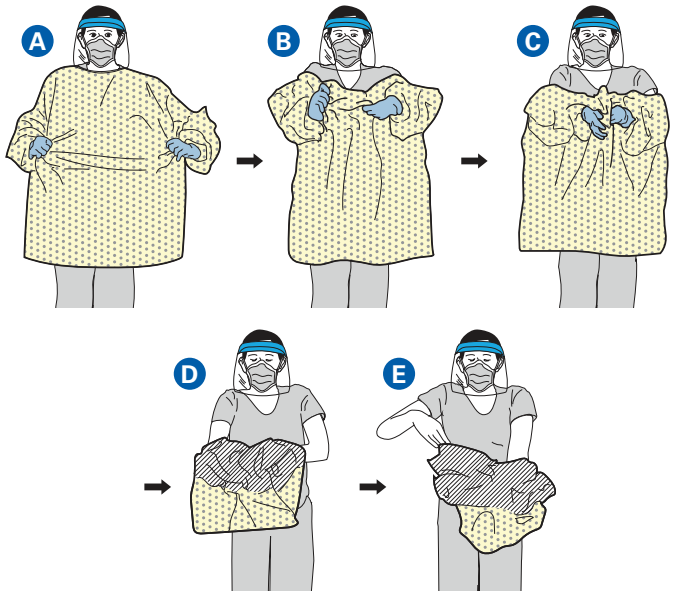
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container

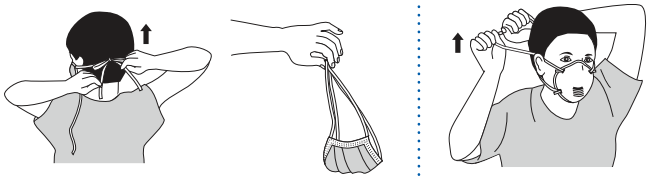


2. GOGGLES OR FACE SHIELD

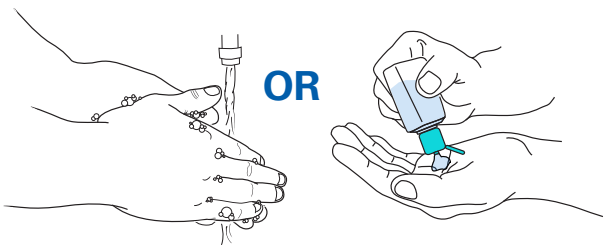
- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

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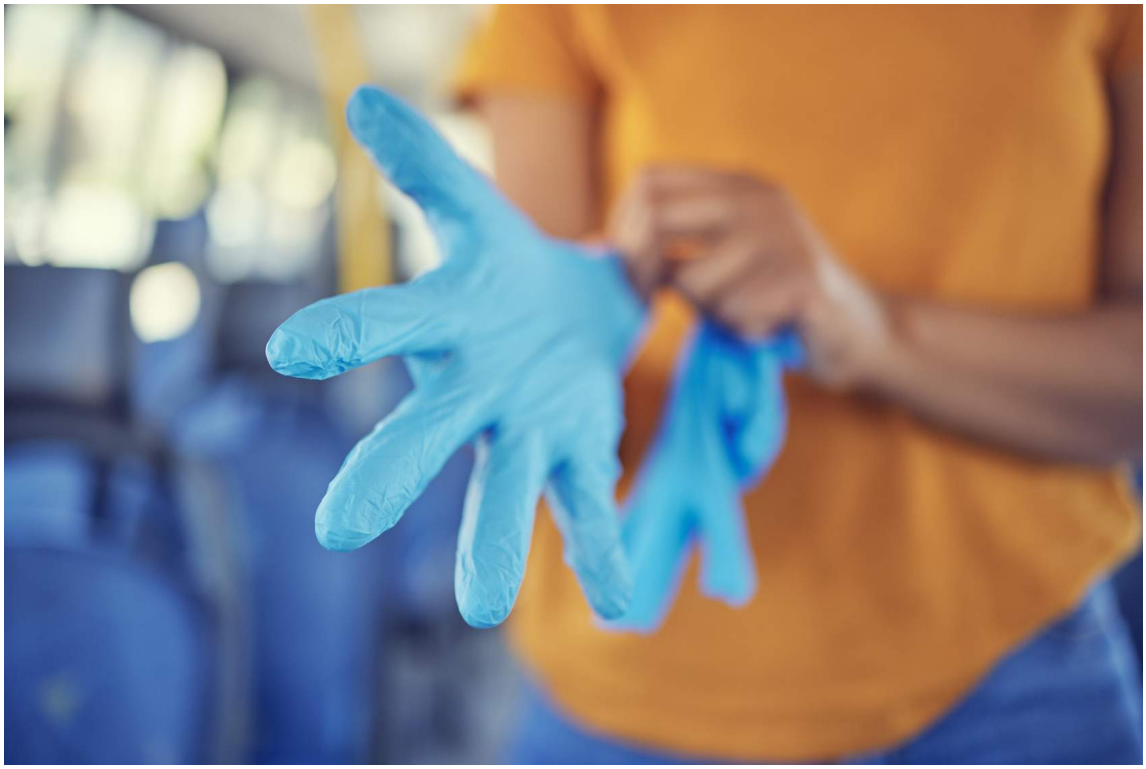
Choosing the Right Gear: Personal Protective Equipment (PPE) in Shelters

When working in a shelter, even temporarily, it's important to use the right personal protective equipment (PPE) to keep yourself safe. The type of PPE you need will depend on the tasks you're doing and the potential exposures you might encounter. If you have questions about PPE, work with the Person-in-Charge (PIC) to determine what is right for your situation.

Step 1

Basic PPE for Shelter Work



- Gloves: Always wear gloves when there's a chance of coming into contact with blood, bodily fluids, or contaminated items. Choose gloves that fit well and are appropriate for the task.
- Hand Sanitizer: Keep hand sanitizer readily available and use it frequently, especially after removing gloves or when soap and water aren't available.

Step 2

Additional PPE for Specific Tasks

- Cleaning Spills: In addition to gloves, consider wearing a gown or apron and eye protection if there's a risk of splashing.
- Handling Soiled Linens or Clothing: Wear gloves and consider using a mask if handling heavily soiled items.
- Responding to an Injury: If someone is bleeding, wear gloves and consider using a mask and eye protection.

Step 3

Remember...

- Choose the right PPE for the job. The type of PPE you need will depend on the specific task and potential exposures. Your PIC can help.
- Inspect PPE before use. Make sure gloves are free of holes or tears, and that other PPE is in good condition.
- Remove PPE carefully. Avoid touching contaminated surfaces when removing PPE.
- Dispose of PPE properly. Contaminated PPE should be placed in designated disposal containers.
- Wash hands after removing PPE. Always wash your hands thoroughly after removing PPE.

Summary

By using the appropriate PPE, you can help protect yourself from bloodborne pathogens and other hazards in the shelter environment.

Important Note: This is just a general overview. Work with the PIC when determining what PPE is appropriate for the situation.

What to do if you or Someone Else is Exposed

If you or a colleague are exposed to BBPs, it's important to notify the Person-In-Charge (PIC), refer to the Exposure Control Plan, and seek emergency medical attention through the 24/7 Nurse Triage Care Line immediately.

The PIC has access to the *Exposure Control Plan* noted earlier in this course in the mobile materials that are set up at temporary severe weather shelters. The Plan contains detailed steps on how to proceed. It is also available in the PIC Binder and below.

Remember: knowledge and preventative steps greatly reduce risk, and the risks are not very high to begin with, but it is important to be prepared in case an exposure occurs.

PDF

Severe Weather Shelters - Worksite Exposure Control Plan.docx.pdf

230.8 KB

Still Have Questions?

How to get answers

The Communicable Disease hotline 503-988-3406 is answered by Multnomah County Health Department phone triage staff Monday - Friday, 8-5. After hours and on weekends, it is staffed by our on-call service who will connect callers to either a health officer or a public health manager. You can request Catherine Walker, occupational health nurse.

Course Conclusion

1. Always consult with the Person-In-Charge (PIC) to ensure you have the proper PPE for your tasks and that you understand how to use it correctly. Proper use of PPE is one of your best defenses against BBP exposure.
2. You can avoid many potential exposures by being aware of risks in shelter settings. Pay particular attention to hazards such as discarded needles, soiled linens, and spills of blood or other bodily fluids. Remember, recognizing these risks is the first step in protecting yourself.
3. In the event of a potential exposure, it's crucial to act quickly and follow established procedures:
    - Immediately notify the Person-In-Charge (PIC);
    - Contact the 24/7 Nurse Triage Care Line for immediate medical advice;
    - Follow the steps outlined in the Exposure Control Plan, which is available in the PIC binder and mobile materials at each shelter site.

Remember, your safety is paramount. The knowledge you've gained in this course empowers you to protect yourself while serving our community's most vulnerable members. However, if you ever have questions or concerns about BBPs or any of the content covered in this training, don't hesitate to reach out. Call the Communicable Disease hotline 503-988-3406 for clarification or additional information.