



TITLE

OCCUPATIONAL EXPOSURE TO BLOOD AND BODY FLUIDS

SCOPE

Provincial

DOCUMENT #

1111

APPROVAL AUTHORITY

People Executive Committee

INITIAL EFFECTIVE DATE

June 24, 2009

SPONSOR

Workplace Health and Safety

REVISION EFFECTIVE DATE

October 29, 2019

PARENT DOCUMENT TITLE, TYPE AND NUMBER

Not applicable

SCHEDULED REVIEW DATE

October 29, 2022

NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

If you have any questions or comments regarding the information in this document, please contact the Policy & Forms Department at policy@ahs.ca. The Policy & Forms website is the official source of current approved policies, procedures, directives, standards, protocols and guidelines.

OBJECTIVES

- To manage **post-exposure** of occupational transmission of infectious diseases and **blood-borne pathogens** through contact with blood or body fluids in the workplace.

PRINCIPLES

- Alberta Health Services (AHS) is committed to ensuring all **employees, contracted service providers'** workers, **medical staff**, midwifery staff, **volunteers**, and students are provided with safe and secure working environments.
- AHS shall ensure employees, medical staff, midwifery staff, volunteers, and students have access to appropriate post-exposure investigation, follow-up, surveillance, and support.
- Contracted service providers shall also ensure their workers have access to appropriate post-exposure investigation, follow-up, surveillance, and support.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

ELEMENTS

1. Prevention

- 1.1 AHS shall take appropriate steps to mitigate occupational **exposure** to blood and body fluids and any blood-borne pathogens and infectious diseases that may be present at AHS sites and facilities.
- 1.2 AHS shall ensure that employees, medical staff, midwifery staff, volunteers, and students have access to appropriate resources including training, hazard assessments, hazard controls, response processes, and all necessary personal protective equipment (PPE), in accordance with Infection Prevention and Control requirements and the appropriate Hazard Identification, Assessment & Control (HIAC), to mitigate risks and ensure safety in the workplace.
- 1.3 Contracted service providers shall ensure that their workers have access to appropriate resources including training, hazard assessments, hazard controls, response processes, and all necessary PPE to mitigate risks and ensure safety in the workplace.

2. General

- 2.1 Management and employees, medical and midwifery staffs, volunteers, and students shall act in accordance with applicable legislation, including:
 - a) the *Occupational Health and Safety Act (OHS Act)* (Alberta) and its associated regulations;
 - b) the *Occupational Health and Safety Code (OHS Code)* (Alberta), including but not limited to Part 35, *Health Care and Industries with Biological Hazards*; and
 - c) the *Mandatory Testing and Disclosure Act* (Alberta) and its associated regulations.
- 2.2 Employees, medical and midwifery staffs, volunteers, and students shall also comply with related AHS policy documents and their respective governing professional standards, bylaws, and regulations (if applicable).
- 2.3 Contracted service providers shall comply with the *OHS Act* (Alberta) and its associated regulations, *OHS Code* (Alberta), AHS policy documents, and respective governing professional standards, bylaws, and regulations (if applicable).

3. Exposure Prevention, Reporting Exposure Incidents, and Exposure Investigation and Follow-up

- 3.1 The requirements for exposure prevention, reporting exposure incidents, and exposure investigation, and follow-up are outlined in the following appendices:

- a) Employees shall adhere to the requirements outlined in Appendix A.
 - b) Contracted service providers shall adhere to the requirements outlined in Appendix B.
 - c) Medical staff and midwifery staff shall adhere to the requirements outlined in Appendix C.
 - d) Volunteers shall adhere to the requirements outlined in Appendix D.
 - e) Students shall adhere to the requirements outlined in Appendix E.
- 3.2 The responsibilities and accountabilities outlined in these appendices are a joint responsibility of AHS management, Workplace Health and Safety, employees, medical staff, midwifery staff, volunteers, students, and contracted service providers. Responsibilities for carrying out reporting, investigation, and follow-up during a specific incident may vary depending on the circumstances. Contact Workplace Health and Safety for further direction and support on reporting, investigation, and follow-up.

4. Consent for Testing

- 4.1 In the event of an exposure incident, the **most responsible health practitioner** shall obtain the necessary consent from the person(s) believed to be the source of the exposure and the person(s) exposed prior to any testing in accordance with the *AHS Consent for Treatment/ Procedure(s) Policy*. Consent shall be obtained by using the *AHS Consent to Blood Testing for Blood Borne Viruses Form*, unless it has already been obtained on the *AHS Consent to Surgery or Invasive Procedure Form*.
- 4.2 If the person(s) believed to be the source of the exposure has questions during the consent process, they may be provided the *AHS Blood Borne Virus Testing Patient Information Sheet*.
- 4.3 If consent is refused or consent cannot be obtained and the incident occurred while providing emergency patient care, contact Workplace Health and Safety to determine whether obtaining a testing order is necessary or appropriate in accordance with the *Mandatory Testing and Disclosure Act (Alberta)*.

5. Information Sharing

- 5.1 AHS shall not provide identifiable demographic information in any cases, but shall, with consent or as mandated by legislation, disclose serology results on the person who has exposed the AHS employee, contracted service provider's worker, medical staff, midwifery staff, volunteer, or student.

6. Records Retention and Disclosure

- 6.1 Information pertaining to an occupational exposure shall be maintained in accordance with the *OHS Act*, the *AHS Records Management Policy*, and the *AHS Records Retention Schedule*.
- 6.2 Divisions/departments are responsible for storing and retaining blood and body fluid exposure incidents in MySafetyNet.
- 6.3 Incident Management records must be available, upon request, to the impacted employee, medical staff, midwifery staff, student, or volunteer and to the appropriate regulatory authorities as required by legislation.
- 6.4 AHS shall disclose information pertaining to an occupational exposure when required to do so by the *AHS Privacy Protection and Information Access Policy*, the *AHS Collection, Access, Use, and Disclosure of Information Policy*, and legislation (including the disclosure requirements under the *Mandatory Testing and Disclosure Act* [Alberta] when testing is undertaken under that legislation).
- 6.5 Despite this section, contracted service provider occupational exposure records shall be maintained by the contracted service provider in accordance with the *OHS Act* and the contracted service provider's records management processes.

DEFINITIONS

Blood-borne pathogens mean pathogens such as Hepatitis B, Hepatitis C, or human immunodeficiency virus (HIV) that can be transmitted through blood and body fluids.

Contracted service providers means a third party, including a self-employed person, providing goods or services to AHS in an AHS site or facility.

Employees means employees of AHS including permanent and probationary employees, full time and part time employees, term employees, and casual employees and includes such aforementioned individuals at all levels of AHS administration and management including the President and Chief Executive Officer and other members of AHS Executive Leadership Team.

Exposure means the contact by an individual with potentially infectious blood or body fluids or blood-borne pathogens in the workplace through the percutaneous route (skin puncture or laceration by a contaminated needle, sharp instrument, or human bite), mucous membrane route (contact with mucous membranes lining the eyes, nose, or mouth by a splash or spray), or non-intact skin route (contact with compromised skin due to an open wound, cracked, or chapped skin).

Medical staff means all practitioners who possess a medical staff appointment in accordance with the *Medical Staff Bylaws*.

Most responsible health practitioner means the health practitioner who has responsibility and accountability for the specific treatment/procedure(s) provided to a patient and who is

authorized by Alberta Health Services to perform the duties required to fulfill the delivery of such a treatment/procedure(s) within the scope of their practice.

Post-exposure means the post-exposure investigation, ongoing serological follow-up, ongoing chemoprophylaxis (if applicable), on-going surveillance, post-exposure counselling, or any further medical management.

Safety engineered device (SED) means a device that has a built in sharps injury protection mechanism such as an attached sheath covering the needle or scalpel after use or needles that retract after use. Other types of safety devices include blunt needles or needle-less systems. SEDs protect the user from exposure to blood borne pathogens or chemical hazards (i.e., cytotoxic medications).

Volunteer means an individual, including patient advisors, who freely provides their time to support AHS activities.

REFERENCES

- Appendix A: *Employee Exposure Requirements*
- Appendix B: *Contracted Service Provider Exposure Requirements*
- Appendix C: *Medical Staff and Midwifery Staff Exposure Requirements*
- Appendix D: *Volunteer Exposure Requirements*
- Appendix E: *Student Exposure Requirements*
- Alberta Health Services Governance Documents:
 - *Collection, Access, Use, and Disclosure of Information Policy* (#1112)
 - *Consent for Treatment/Procedure(s) Policy* (#PRR-01)
 - *Hazard Identification, Assessment and Control Standard* (#WHS-PCS-01)
 - *Incident Reporting and Investigation Standard* (#WHS-PCS-06)
 - *Official Records Destruction Procedure* (#1133-02)
 - *Privacy Protection and Information Access Policy* (#1177)
 - *Records Management Policy* (#1133)
 - *Records Retention Schedule* (#1133-01)
 - *Workplace Health & Safety Policy* (#1121)
- Alberta Health Services Forms:
 - *Consent to Blood Testing for Blood Borne Viruses Form* (#18213)
 - *Consent to Surgery or Invasive Procedure Form* (#18628)
 - *Use of Conventional Devices Waiver Request Form* (#09614)
- Alberta Health Services Resources:
 - Blood and Body Fluid Exposure Insite Page
 - *Blood Borne Virus Testing Patient Information Sheet*
 - *Workplace Health & Safety Corrective Action Process*
 - *Workplace Health & Safety Management System*
- Non-Alberta Health Services Documents:
 - Government of Alberta *Guidelines for Post-Exposure Management and Prophylaxis: HIV, Hepatitis B, Hepatitis C and Sexually Transmitted Infections*
 - *Health Information Act* (Alberta)
 - *Mandatory Testing and Disclosure Act* (Alberta)

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- *Mandatory Testing and Disclosure Regulation* (Alberta)
- *Occupational Health and Safety Act* (Alberta)
- *Occupational Health and Safety Code* (Part 2 and Part 35, Section 530) (Alberta)

VERSION HISTORY

Date	Action Taken
October 29, 2019	Revised
Click here to enter a date	Optional: Choose an item

APPENDIX A

Employee Exposure Requirements**1. Exposure Prevention**

- 1.1 AHS and employees shall consider blood and body fluids as a biological hazard while completing hazard assessments.
- 1.2 All reasonable measures to prevent, mitigate, and/or manage occupational exposures are a shared responsibility between AHS and employees. This includes **safety engineered devices** (SED) and personal protective equipment (PPE) processes. Information about exposure prevention safety precautions can be found on the WHS Insite pages.
- 1.3 There may be occasion where an exemption to using the SED can be requested through the AHS Waiver Application Process and the AHS *Use of Conventional Devices Waiver Request* Form.

2. Reporting Exposure Incidents

- 2.1 Incidents involving the exposure of employees to blood or body fluids shall be reported by the employee using the AHS blood and body fluid exposure processes located on Insite.

3. Exposure Investigation and Follow-Up

- 3.1 AHS shall conduct the necessary post-exposure investigation, follow-up, and on-going surveillance services and provide support for all exposures of AHS employees, regardless if the source is known or unknown, in accordance with AHS' obligations under the *OHS Act, Regulation, and Code* (Alberta).

APPENDIX B

Contracted Service Provider Exposure Requirements**1. Exposure Prevention**

- 1.1 Contracted service providers shall consider blood and body fluids as a biological hazard while completing hazard assessments.

2. Reporting Exposure Incidents

- 2.1 Incidents involving the exposure of contracted service provider's workers to blood or body fluids shall be reported following the contracted service provider's reporting process.

3. Exposure Investigation and Follow-Up

- 3.1 A contracted service provider shall conduct the necessary post-exposure investigation, follow-up, and on-going surveillance services and provide support for all exposures of the contracted service provider's workers in accordance with the contracted service provider's obligations under the *OHS Act, Regulation, and Code (Alberta)*, unless otherwise agreed to by AHS in writing with a specific contracted service provider.
- 3.2 A contracted service provider's failure to comply with AHS' policy documents, including this Policy, or a contracted service provider's failure to comply with its obligations under the *OHS Act, Regulation, and Code (Alberta)* may result in termination of the contract between AHS and the contracted service provider.

APPENDIX C

Medical Staff and Midwifery Staff Exposure Requirements**1. Exposure Prevention**

- 1.1 AHS and medical and midwifery staffs shall consider blood and body fluids as a biological hazard while completing hazard assessments.
- 1.2 All reasonable measures to prevent, mitigate, and/or manage occupational exposures are a shared responsibility between AHS and medical and midwifery staffs. This includes safety engineered devices (SED) and personal protective equipment (PPE) processes. Information about exposure prevention safety precautions can be found on the WHS Insite pages.
- 1.3 There may be occasion where an exemption to using the SED can be requested through the AHS Waiver Application process and the AHS *Use of Conventional Devices Waiver Request Form*.

2. Reporting Exposure Incidents

- 2.1 Incidents involving the exposure of medical or midwifery staffs to blood or body fluids shall be reported by the medical or midwifery staff practitioner using the AHS blood and body fluid processes located on Insite.

3. Exposure Investigation and Follow-Up

- 3.1 AHS shall conduct the necessary post-exposure investigation, follow-up, and on-going surveillance services and provide support for all exposures of medical and midwifery staffs, regardless if the source is known or unknown.

APPENDIX D

Volunteer Exposure Requirements**1. Exposure Prevention**

- 1.1 AHS and volunteers shall consider blood and body fluids as a biological hazard while completing hazard assessments.
- 1.2 All reasonable measures to prevent, mitigate, and/or manage occupational exposures are a shared responsibility between AHS and volunteers. This includes personal protective equipment (PPE) processes. Information about exposure prevention safety precautions can be found on the WHS Insite pages.

2. Reporting Exposure Incidents

- 2.1 Incidents involving the exposure of volunteers to blood or body fluids shall be reported by the Volunteer Manager through the AHS blood and body fluid exposure processes located on Insite.

3. Exposure Investigation and Follow-Up

- 3.1 AHS shall conduct the necessary post-exposure investigation, follow-up, and on-going surveillance services and provide support for all exposures of AHS volunteers, regardless if the source is known or unknown, in accordance with AHS' obligations under the *OHS Act, Regulation, and Code (Alberta)*.

APPENDIX E

Student Exposure Requirements**1. Exposure Prevention**

- 1.1 AHS and students shall consider blood and body fluids as a biological hazard while completing hazard assessments.
- 1.2 All reasonable measures to prevent, mitigate, and/or manage occupational exposures are a shared responsibility between AHS and students. This includes safety engineered devices (SED) and personal protective equipment (PPE) processes. Information about exposure prevention safety precautions can be found on the WHS Insite pages.
- 1.3 There may be occasion where an exemption to using the SED can be requested through the AHS Waiver Application process and the AHS *Use of Conventional Devices Waiver Request* Form.

2. Reporting Exposure Incidents

- 2.1 Incidents involving the exposure of students to blood or body fluids shall be reported according to the respective educational institution process.

3. Exposure Investigation and Follow-Up

- 3.1 In accordance with the *OHS Act* (Alberta), AHS shall conduct the necessary initial response, post-exposure investigation, follow-up, and on-going surveillance services and provide support for exposures of students, regardless if the source is known or unknown, unless AHS is satisfied that the applicable educational institution and/or family physician will provide the post-exposure investigation, follow-up, or on-going surveillance and support required.
- 3.2 AHS shall provide students and/or the educational institution with what follow-up is required and appropriate incident documentation in order for the student to fulfill their educational institution's incident reporting requirements to the WCB.