

Web-Site Information Related to Blood Borne Pathogens Exposure Control Plan – Appendix F

BLOOD BORNE PATHOGEN TRAINING

If an employee's job description requires performance of any duty where they can be exposed to a "Blood Borne Pathogen or Other Potentially Infectious Material" an initial and refresher training is required. The initial training must be done within 10 days of a person being hired and the annual refresher is to occur one year from the initial training date.

The "Archdiocesan Blood Borne Pathogen Training Video" is one way to provide the initial and refresher training in order to comply with the Blood Borne Pathogens Control Plan. When showing this video, should questions arise that cannot be answered, contact the Office of Property and Construction Services. This training can also be provided by an outside vendor.

Upon completion of Blood Borne Pathogen Training, the Blood Borne Pathogen Awareness Worksheet (Appendix D-11 – located in the Safety and Accident Prevention Program) must be filled out and filed in the Employee's Personnel File. This file will include a completed Awareness Worksheet for each year of employment.

HEPATITIS B VACCINATION

Should an employee receive training on "Blood Borne Pathogens" the Hepatitis B Vaccine must be offered within 10 days of being hired. The employer is to pay the cost of this vaccination or an employee can decline the vaccination. Either a record of the vaccination or a signed/dated declination to receive the vaccination (use the Hepatitis B Vaccine Declination Form Appendix D-12 located in the Safety and Accident Prevention Program) is to be filed in the Employee's Medical Personnel File.

BLOOD BORNE PATHOGENS AWARENESS WORKSHEET

Personal Information

Name _____

Parish/School of Employment and City _____

Position or Job Title _____ Date of Hire _____

View the DVD for Completion of Awareness Training

Once this form is completed it must be filed in the employee's personnel file at their place of employment (parish or school).

If you have any questions about this worksheet, or the DVD, please contact:

Property and Construction Services
Catholic Archdiocese of Seattle
710 Ninth Ave., Seattle, WA 98104
206-382-4851
800-809-4923

Trainee's Signature

Date

Pastor, Facility Manager, or Principal's Signature

Date

BLOOD BORNE PATHOGENS DECLINATION OF HEPATITIS B VACCINE

Employment Information

Name _____

Parish/School of Employment and City _____

Position or Job Title _____ Date of Hire _____

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 I continue to have occupational exposure to blood or other potentially infectious materials in my future employment with _____ parish/school and I want to be vaccinated with hepatitis B vaccine, I understand that I am eligible to receive the vaccination series at no charge to me.

If you have any questions about this form please contact:

Property and Construction Services
Catholic Archdiocese of Seattle
710- Ninth Ave. Seattle, WA 98104
206-382-4851
800-809-4923

Employee Signature

Date

Pastor, Facility Manager, or Principal's Signature

Date