University of the District of Columbia

Bloodborne Pathogen Exposure Control Plan

OCCUPATIONAL EXPOSURE TO BLOODBORNE PATHOGENS

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN FOR COLLATERAL JOBS

In accordance with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, the following Exposure Control Plan has been developed for:

Facility Name: University of the District of Columbia

Date of Preparation: August 19, 2004
Revised: March 15, 2012

1. PURPOSE

The purpose of the University of the District of Columbia Bloodborne Pathogen (BBP) Exposure Control Plan is to eliminate or minimize the risk of occupational exposure to Blood or Other Potentially Infectious Materials (OPIM) for our designated faculty, staff, and students.

2. EXPOSURE DETERMINATION

Job Classifications

Job Classifications in which all employees have occupational exposure:

Campus Police
Risk Management
House Keeping
Athletic Department
Child Development Center
Mortuary Science

Job classification in which some employees have occupational exposure:

Tasks/Procedures:

- First Aid Treatment
- CPR or Rescue Breathing
- Decontamination of Equipment and / or Accident Scene
- Cleanup of Blood and OPIM

3. IMPLEMENTATION SCHEDULE AND METHODOLOGY

An annotated copy of the final Bloodborne Pathogen Standard 29 CFR 1910.1030 will be available in the Risk Management, Bldg. 38, Suite 301 and the Public Safety, Bldg. 39, C04. A copy of the University of the District of Columbia Site Specific BBP Exposure Control Plan will be provided to each designated faculty, staff, and students.

4. COMPLIANCE METHODS

Engineering Controls

Red Biohazard bags are available for disposal of contaminated waste. These bags may be obtained by calling the Risk Management at (202) 274-7178. They must be replaced once they are full. The department/ area must call Risk Management to schedule proper disposal of the regulated waste.

Sharps Containers are available for disposal of contaminated sharps. The container will be inspected at least monthly by a designated individual within the department or area. These containers will be replaced once they are full. No container will be allowed to exceed the full level. A designated individual within the department/area will be responsible for disposing contaminated sharps in an appropriate manner and replace the sharps container when full on an incident by incident basis.

Our biohazardous waste will be disposed of in accordance with regulated waste regulations by our biohazardous waste vendor. The designated individual within the department/ area in the identified job classification will notify Risk Management when this vendor needs to be notified of a pick-up.

5. Work Practice Controls & Housekeeping

Universal Precautions will be observed at the University in order to prevent contact with blood or OPIM. All blood or OPIM will be considered infectious regardless of the perceived status of the source individual.

Each time first aid is provided, the care givers will wash their hands with soap and running water after removing and properly disposing of their gloves.

The designated care givers will always wash their hands and any other potentially contaminated skin area immediately, or as soon as possible, with soap and running water. If a sink isn't readily available, employees will use the antiseptic towelettes provided at the first aid station until washing with soap and running water is possible.

If an employee incurs an exposure to their mucous membranes then those areas will be washed or flushed with water as appropriate, as soon as possible, following contact. Eye wash stations are located throughout the each university building.

Decontamination will be done using an EPA approved germicidal agent.

Any knife, broken glass or the like, that either causes a laceration and bleeding or that is contaminated by blood or OPIM, will be cleaned-up using a dust pan and hand brush to gather up all the pieces for disposal into a sharps container.

Equipment, materials, products, fixtures or work areas that become contaminated from blood or OPIM will be immediately isolated and restricted until clean-up/ decontamination by the designated employee.

Equipment or fixtures, first aid kits, sinks and toilets that may become contaminated, will be inspected for blood or OPIM and if necessary, decontaminated by the designated employee following the procedures contained in this exposure control plan.

All housekeeping procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or OPIM.

An evaluation of the BBP Exposure Control Plan will take place at the time of an Exposure Incident or at least on an annual basis. Engineering controls and Work Practices, such as the use of Universal Precautions and the use of Personal Protective Equipment will also be evaluated at the time of the Exposure Incident. This evaluation will be the responsibility of the Office of Environment Health and Safety.

6. Personal Protective Equipment (PPE)

All personal protective equipment used at the University will be provided to the designated care givers by the department at no cost. PPE will be chosen based on the anticipated exposure to blood or OPIM. The PPE will be considered appropriate only if it does not permit blood or OPIM to pass through or reach the employee's clothing, 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.

7. Appropriate PPE and Related Tasks:

Personal Protective Equipment	Task
Gloves	**Simple First Aid** **Controlled Spill Clean-Up**
• **Protective Eye Wear (with solid side shields)** • **Goggles** • **Masks** • **Gowns**	**If Chance Of Splashing, Spurting, Spraying, Splattering or Generation Of Blood Droplets or OPIM**
Resuscitation Devices	**CPR**
Puncture Proof & Leak Proof Containers	**Disposal Of Contaminated Sharps**
EPA Approved Germicidal	**Blood & OPIM Clean-Up**
Hand Washing	**After Every Encounter With Blood & OPIM.**
Labeling & Bagging of Contaminated Waste	**Disposal Of Blood & OPIM** **Decontamination of personal clothing**

PPE will be located at the Campus Police Communications Center, Risk Management, House Keeping, Athletic Department, Child Development Center, and Mortuary Science. Designated individuals in the above department/ area have the responsibility to maintain an adequate supply of all PPE.

All contaminated PPE and/ or contaminated personal clothing will be removed immediately or as soon as feasible after contamination. The contaminated items will be placed in a red biohazardous bag. A separate red biohazardous bag will be used if personal clothing is contaminated and the employee will label whether the contents are for laundry or for disposal. The laundering of contaminated personal clothing will be handled by our biohazardous waste vendor. No one is to take contaminated clothing home. All contaminated materials for disposal or laundering will be picked-up by our contracted biohazardous waste vendor. Biohazardous bags will be appropriately labeled and the Environmental Protection Specialist will be contacted in order to arrange for the bags to be picked up.

Mortuary Science contracts independently with the waste vendor for the proper disposal of biohazard waste generated during student laboratory sessions.
All personal protective equipment and contaminated personal clothing will be cleaned, laundered, or disposed of by the University at no cost to employees. All cleaning or

replacement of personal clothing will be made by the University at no cost to employees.

Gloves are required to be worn every time it is reasonably anticipated that a designated faculty, staff, and students will have hand contact with blood or OPIM. Gloves will be available at the Campus Police Communications Center, Office of Environmental Health and Safety, House Keeping, Athletic Department, Child Development Center, and Mortuary Science. All gloves used at this university are disposable and are not to be washed or decontaminated for re-use. Gloves are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin length face shields, are required to be worn whenever splashing, spraying, splattering, or droplets of blood or OPIM may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

Disposable Protective Gowns are required to be worn anytime it is reasonably anticipated that designated employees will have extensive contact with blood or OPIM which may come in contact with non-intact skin, other than hands and personal clothing.

PPE is available at the first aid stations. The designated first aid team member has the responsibility to maintain an adequate supple of all designated PPE.

8. HEPATITIS B VACCINATION

All employees who have been identified as having potential exposure because of collateral job duties to blood or OPIM will be offered the Hepatitis B vaccine at no cost.

1) The vaccine will be offered within 10 working days of the faculty, staff, or students initial assignment as a care giver, and also given to faculty and students enrolled in the Mortuary Science program unless they have previously had the vaccine or who wish to submit to antibody testing which shows the employee to have sufficient immunity,

2) Faculty, staff, and students who decline the Hepatitis B vaccine will sign a declination form that uses the wording in Appendix A of the OSHA standard. (See Appendix A)

3) Faculty, staff, and students who initially decline the vaccine but who later wish to be vaccinated may then have the vaccine at no cost.

The Chairperson and department supervisor will be responsible for:

- Assuring the vaccine is offered
- If refused, the Declination Form is completed and placed in the employee's medical file.

If the vaccine is accepted the vaccine will be administered by:

9. POST-EXPOSURE EVALUATION AND FOLLOW-UP

If a faculty, staff, or student incurs an exposure incident, it will be reported to the Risk Management staff immediately. Any employee who incurs an exposure incident will be offered a post-exposure evaluation and follow-up with (FMH Occupational Health Services) in accordance with the OSHA standard.

This post-exposure evaluation and follow-up will include the following:

- Documentation of the route of exposure and the circumstances related to the incident.
- If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/ HBV infectivity.
- Results of testing of the source individual will be made available to the exposed faculty, staff, or student along with information about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
- The faculty, staff, or student will be offered the option of having their blood collected for testing of their HIV/ HBV serological status. The blood sample will be preserved for up to 90 days to allow the faculty, staff, or student to decide if the blood should be tested for HIV serological status. However, if the faculty, staff, or student decides prior to that time that testing will or will not be conducted, then the appropriate action can be taken and the blood sample discarded.
- The faculty, staff, or student will be offered post exposure prophylaxis in accordance with the current recommendations of the U. S. Public Health Service.
- The faculty, staff, or student will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The faculty, staff, or student will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate medical personnel.

Risk Management staff will assure that the policy outlined here is effectively carried out. Records will be maintained according to the OSHA standard 29 CFR 1910.1030. Any resulting Medical Records will be maintained in a separate locked file with limited access.

10. Interaction with Health Care Professionals

The Risk Management staff will ensure that the exposure incident report is completed and transmitted to the health care professional providing the post exposure evaluation and follow-up.

A written opinion will be obtained from the health care professional who evaluates any designated university faculty, staff, or student. Written opinions will be obtained in the following instances:

1) When the faculty, staff, or student is sent to obtain the Hepatitis B Vaccine.

2) Whenever the faculty, staff, or student is sent to a health care professional following an exposure incident.

Health care professionals shall be instructed to limit their opinions to:

1) Whether the Hepatitis B Vaccine is indicated and if the faculty, staff, or student has received the vaccine, or for evaluation following an exposure incident.

2) That the faculty, staff, or student has been informed of the results of the evaluation, and

3) That the faculty, staff, or student has been told about any medical conditions resulting from exposure to blood or OPIM.

4) That the written opinion to the faculty, staff, or student is not to reference any personal medical information.

11. TRAINING

Training for all designated faculty, staff, or students will be conducted before initial assignment to tasks where occupational exposure to blood or OPIM may occur. Training will then be conducted annually in the following manner:

Training for faculty, staff, or students will include an explanation of the following:
1) The OSHA standard for Bloodborne Pathogens.

2) Epidemiology and symptomology of bloodborne diseases.
3) Modes of transmission of bloodborne pathogens.
4) This Exposure Control Plan
5) Procedures that might cause exposure to blood or other potentially infectious materials at the university.
6) Control methods that will be used at university to control exposure to blood or OPIM.
7) Personal protective equipment available at university.
8) Post exposure evaluation and follow-up.
9) Signs and labels used at the facility.
10) Hepatitis B Vaccine Program at university.

- This training will be conducted by an outside vendor who has qualifications to do this specific training and may utilize Videotapes, Power-point Presentations, and Written Materials.

12. RECORDKEEPING

The Human Resources Department will ensure that the recordkeeping and confidentiality requirements of the standard are maintained. This includes:

- Training records will be kept for three years
- Medical records will be kept for the length of employment plus thirty years and include:
    1. Vaccination Records
    2. Antibody Testing Records
    3. Post Exposure Evaluation & Follow-up Records

Signature_____Effective Date___/___/___

Appendix A - Hepatitis B Declination

I understand that due to my occupational exposure to blood or OPIM 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 OPIM and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

_____ **Print Name**	_____/_____/_____ **Date**

_____ **Sign Name**	_____/_____/_____ **Date**

_____ **Witness Sign Name**	_____/_____/_____ **Date**

DEFINITIONS

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.

Contaminated means the presence or the reasonably anticipated presence of blood or OPIM on an item or surface.

Contaminated Laundry means laundry that has been soiled with blood or OPIM

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

Decontaminated means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface 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.

Engineering Controls means controls (e.g., sharps disposal containers) 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 who's 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.

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 any employee's duties.

Other Potentially Infectious Materials means: (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural 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 including teeth.

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.

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

Sterilize means 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).

Appendix A

HEPATITIS B VACCINE DECLINATION FORM

Appendix B

Exposure Incident Report

Appendix C

Bloodborne Pathogen
Post Exposure Recommendations

Appendix D

Hepatitis B Employee Information Sheet

Appendix E

HIV Employee Information Sheet

Appendix F

POST EXPOSURE FACT SHEET

Appendix G

OSHA FACT SHEETS