

# WESTERN CONNECTICUT STATE UNIVERSITY

# BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

PROCEDURE S-103

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> Please direct any questions or comments about the applicability of this document to Pano Koukopoulos, Director of Environmental Health & Safety

### 1.0 <u>PURPOSE</u>

To eliminate or minimize WCSU employee occupational exposure to bloodborne pathogens or other possible infectious materials in accordance with OSHA Bloodborne Pathogens Standard 29CFR 1910.1030.

### 1.1 OCCUPATIONAL EXPOSURE DETERMINATION

The following is a list of job classifications at WCSU which are at risk of occupational exposure of blood and other potentially infectious materials:

- a. Police
- b. Athletics
- c. Health Services
- d. Nursing
- e. Custodial Services

# 2.0 JOB TASKS AND PROCEDURES

The following list of job tasks/procedures performed by the above employees are at the greatest risk for occupational exposure:

- a. Employees administering first aid to accident victims with exposed blood or other potentially infectious materials.
- b. Employees working with needles or other sharp objects that could cause abrasions or lacerations during medical and clinical situations.
- c. Employees involved in the cleaning and handling of blood or other potentially infectious materials.
- d. Employees supervising other employees and students in reference to the above situations.

# 3.0 IMPLEMENTATION AND PRACTICE METHODS

# 3.1 ENGINEERING AND PRACTICE CONTROLS

- Under any circumstance when a WCSU employee is at risk of occupational exposure they will practice Universal Precautions and assume that all blood and other potentially infectious materials, as defined by OSHA, are infectious and must be handled properly using engineering and practice controls, and personal protective equipment (PPE) shall be utilized. The following engineering controls, as they apply to each job classification, should be utilized:
  - a. All WCSU employees shall use latex gloves, safety glasses and goggles, face masks, gowns, disinfectant, sharps containers, and biohazard bags when there is any potential for exposure to blood or other potentially infectious materials.

# 3.2 SCHEDULE FOR REVIEWING

The above controls will be examined and maintained on a regular schedule. The schedule for reviewing the effectiveness of the controls is as follows:

a. WCSU employees viewed not taking the precautions to protect themselves should be reminded of the proper individual practice controls by their supervisor or another employee.

# 3.3 HANDWASHING FACILITIES

Handwashing facilities are also available to WCSU employees who are at risk of exposure to blood or other potentially infectious materials, OSHA requires that these facilities be readily accessible where the risk is possible. If handwashing facilities are not available, WCSU is required to provide either antiseptic cleanser, along with a clean cloth or paper towels or antiseptic towelettes. WCSU provides handwashing facilities for proper cleaning at the following locations:

- a. Bathrooms in all public buildings
- b. Custodial closets
- b. Laboratories
- c. Medical exam rooms
- e. Athletic training rooms

It is the responsibility of the employee that, after the removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as possible with soap and water.

### 3.4 <u>NEEDLES</u>

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared, or purposely broken unless no alternative is available. Such recapping or needle removal is accomplished through the use of a mechanical device or a one handed technique. WCSU does not permit the recapping or removal of needles.

### 3.5 CONTAINERS FOR SHARPS

Contaminated sharps are to be placed immediately, or as soon as possible after use, into appropriate sharp containers. At WCSU the sharps are leak proof. Sharps containers are located in the following areas:

- a. Medical exam rooms
- b. Athletic training rooms
- d. Police Department
- c. All police vehicles
- e. Individual residence hall rooms predetermined by Health Services

### 3.6 WORK AREA RESTRICTIONS

WCSU employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses in work areas where there is reasonable likelihood of exposure to blood or other potentially infectious materials. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present. WCSU prohibits mouth pipetting / suctioning of blood or other potentially infectious materials. All WCSU employees will conduct all procedures in a manner which will minimize splashing, spraying, splattering and generation of droplets of blood or other potentially infectious materials.

### 3.7 <u>SPECIMENS</u>

Containers used for storage, transportation, or shipping of specimens are to be labeled with the Universal Symbol or the words "Biohazard" and are sealed properly prior to shipment. Primary specimen containers that become externally contaminated are to be placed in a secondary container which prevents leakage during handling, processing, storage, transport, or shipping and is appropriately labeled or color coded in accordance with the requirements of the OSHA standard. Standards that puncture the primary container are placed within a secondary container that is puncture resistant in addition to the above characteristics. A WCSU employee is responsible for ensuring that equipment which had 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 decontamination of the equipment is not available.

#### 3.8 PERSONAL PROTECTIVE EQUIPMENT (PPE)

All personal protective equipment use at WCSU will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eye, mouth, or other mucous membrane under normal conditions of use and for the duration of time which the protective equipment will be used. Recommended types of PPE are:

- a. Latex gloves
- b. Safety glasses and goggles
- c. Face masks
- d. Gowns
- e. CPR microshields
- 3.8.1 PERSONAL PROTECTIVE EQUIPMENT USE
  - WCSU shall ensure that appropriate PPE in the appropriate sizes are readily accessible at each particular work site or is issued without cost 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.

#### 3.8.2 <u>PPE CLEANING, LAUNDRY, AND DISPOSAL</u>

All PPE will be cleaned, laundered, and disposed of by WCSU at no cost to employees. All repairs and replacements will be made by WCSU at no cost to employees. All garments which are penetrated by blood shall be removed immediately or as soon as possible. All PPE will be removed prior to leaving the work area. When PPE is removed, it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

### 3.9 <u>GLOVES</u>

Gloves shall be worn where it is reasonably anticipated that the employee may have contact with blood or other potentially infectious materials, mucous membranes, and non-intact skin; when performing vascular access procedures and when handling or touching contaminated items or surfaces. Disposable gloves are to be replaced as soon as practical when contaminated or as soon as possible if they are torn, punctured, or when their ability to function as a barrier is compromised. Disposable are not to be washed or decontaminated for re-use. Utility gloves can be decontaminated for re-use if the integrity of the glove is not compromised. Gloves are discarded if they are cracked, peeling, torn, punctured, or exhibit their signs of deterioration.

### 3.10 EYE AND FACE PROTECTION

Masks, in combination with eye protection devices such as goggles or glasses with solid side shield or chin length face shields, are required to be worn whenever splashes, splatter or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated. Prescription glasses with solid side shields are appropriate.

# 3.11 ADDITIONAL PROTECTION

Additional protection clothing, such as lab coats, gowns, aprons, clinical jackets, or similar outer garments shall be worn in instances when gross contamination can reasonably be anticipated.

# 3.12 HOUSEKEEPING

All worksites are to be maintained in a clean and sanitary condition. Each worksite is to be cleaned on a schedule based upon location within WCSU, type of surface to be cleaned, type of soil present (gross contamination versus minor splattering), and tasks and procedures being performed in the area.

Based on the above criteria:

- a. Worksites where blood or other potentially infectious materials are located are to be cleaned on a daily basis by the custodial services.
- b. All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as possible after any spill of blood or other potentially infectious materials, as well as at the end of the work shift if the surface may have become contaminated since the last cleaning.
- c. All equipment and environmental working surfaces are to be cleaned and decontaminated on a regularly scheduled basis by a WCSU employee. Any broken glassware which may be contaminated will not be picked up directly with hands. Reusable sharps that are contaminated with blood are processed in a manner that does not require to retrieve them by hand from the storage container.

# 3.13 <u>REGULATED WASTE DISPOSAL</u>

Contaminated sharps shall be discarded immediately or as soon as possible in containers that are closeable, puncture resistant, leak proof on sides and bottom, and labeled or color coded.

- a. Containers for contaminated sharps shall be easily accessible in the work area.
- b. When moving containers of contaminated sharps from the area of 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.
- c. Other regulated waste shall be placed in containers which are closeable, constructed to contain all contents and prevent leakage of fluids during handling, storage, transportation or shipping. The waste must be labeled or

color coded and closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

#### 3.14 <u>LAUNDRY</u>

Contaminated laundry will be handled as little as possible. Contaminated laundry is bagged or containerized at the location where it is generated.

### 4.0 <u>HEPATITIS B VACCINE AND POST EXPOSURE EVALUATION AND</u> <u>FOLLOW-UP</u>

The vaccine is available at no cost to high risk WCSU employees. It is available to these employees at times conducive to their schedule and at a place easily accessible to them. The vaccine will be given by a licensed healthcare professional in accordance with the recommendations of the U.S. Department of Health and Human Services Immunization Practices Advisory Committee. An employee must be given training in Occupational Exposure within the first ten days of employment. Following the training, the employee will be offered the Hepatitis vaccination. If a WCSU employee initially declines Hepatitis B vaccine, but at a later date decides to accept the vaccination, the vaccination shall be made available. All employees who decline the Hepatitis B vaccination offered shall sign the OSHA waiver indicating their refusal. If a routine booster dose of Hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster doses shall be made available.

#### 4.1 POST EXPOSURE EVALUATION AND FOLLOW UP

An "Exposure Incident" means that while performing their duties, an employee is exposed to a potentially infectious material via eye, mouth, mucous membrane, non-intact skin or puncture wound from a contaminated needle. If an exposure incident occurs, it shall be reported, investigated, and documented. The report shall be completed via a Report of Injury Form found in Workmen's Compensation. The source individual's blood shall be tested as soon as possible after consent is obtained in order to determine HBV or HIV infectivity. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and test results documented. When the source individual is already known to be infected with HBV/HIV, testing need not be repeated. 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.

Collecting and testing of blood for HBV and HIV serological status will comply with the following:

- a. The exposed employee's blood shall be collected as soon as possible and tested for HBV/HIV after consent is obtained. The blood sample will be preserved up to 90 days pending the employee's decision for testing.
- b. All employees who incur an exposure incident will be offered post-exposure evaluation and follow up. These post exposure evaluations and follow up will be performed by Corporate Health or a State designated Workmen's Compensation affiliate.

#### 4.2 <u>INFORMATION PROVIDED TO HEALTHCARE PROFESSIONAL(S)</u> WCSU will ensure that the healthcare professional(s) responsible for the employee's HBV is provided with:

- a. A copy of 29CFR 1910.1030
- b. A written description of the exposed employee's duties as they relate to the exposure incident.
- c. Written documentation of the route of exposure and circumstances under which exposure occurred.
- d. Results of the source individual's blood testing.
- e. All medical records relevant to the appropriate treatment of the employee, including vaccination status.

The employee shall obtain a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of evaluation. The healthcare professional's written opinion for post-exposure follow-up shall be limited to the following information:

- 1. A statement that the employee has been informed of the results of the evaluation.
- 2. A statement 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.

### 5.0 LABELS AND SIGNS

WCSU shall ensure that biohazard labels shall be affixed to containers of regulated waste, refrigerators, and freezers containing blood or other potentially infectious materials, and other containers used to store, transport or ship blood or other potentially infectious materials. The universal biohazard symbol shall be used. The label shall be fluorescent orange or orange-red. Red bags or containers may be substituted for labels. However, regulated wastes must be handled in accordance with the rules and regulations of the organization having jurisdiction.

### 6.0 **INFORMATION AND TRAINING**

WCSU ensures that training is provided at the time of initial assignment to tasks where occupational exposure may occur, and that it shall be repeated within twelve months of the previous training. Training shall be tailored to the educational level of the employee, and offered during the normal work shift. The training will be interactive and cover the following:

- a. A copy of the 29CFR 1910.1030 standard and an explanation of bloodborne diseases.
- b. A discussion of the epidemiology and symptoms of bloodborne diseases.
- c. An explanation of the modes of transmission of bloodborne pathogens.
- d. An explanation of WCSU's Bloodborne Pathogen ECP, and a method for obtaining a copy.
- e. The recognition of tasks that may involve exposure.

- f. An explanation of the use and limitations of methods to reduce exposure, for example, engineering controls, work practices, and personal protective equipment (PPE).
- g. Information on the types, use, location, removal, handling, decontamination, and disposal of PPE's.
- h. Information on the Hepatitis B vaccination, including efficacy, safety, method of administration, benefits, and how it will be offered for free.
- i. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- j. An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow-up.
- k. Information on the evaluation and follow-up required after an employee exposure incident.
- 1. An explanation of the signs, labels, and color coding systems.

The person conducting the training shall be knowledgeable in the subject matter. Employees who have received training on bloodborne pathogens in the twelve months preceding the effective date of this plan shall only receive training in provisions of the plan that were not covered. Additional training shall be provided to employees when there are any changes of tasks or procedures affecting the employee's occupational exposure.

### 7.0 <u>RECORD KEEPING</u>

WSCU medical records can be found in the following locations:

a. Department of Public Safety

Medical records shall be maintained in accordance with OSHA Standard 29CFR 1910.20. These records shall be kept confidential and must be maintained for at least the duration of employment, plus thirty years. The records shall include the following information:

- 1. Name and social security number of the employee.
- 2. A copy of the employee's HBV vaccination status, including the dates of vaccination.
- 3. A copy of all results of examinations, medical testing, and follow-up procedures.
- 4. A copy of the information provided to the healthcare professional, including a description of the employee's duties as they relate to the exposure incident, and documentation of the routes of exposure and circumstances of the exposure.

# 7.1 TRAINING RECORDS

WCSU employee training records can be found in the following location:

a. Department of Public Safety

Training records shall be maintained for three years from the date of training. The following information shall be documented.

- a. The dates of the training sessions.
- b. An outline describing the material presented.
- c. The names and qualifications of persons conducting the training.

- d. The names and job titles of all persons attending the training sessions
- 7.2 <u>AVAILABILITY</u> All WCSU employee records shall be made available to the employee in accordance with 29CFR 1910.20. Upon request, all employee records shall be made available to the Assistant Secretary of Labor for the Occupational Safety and Health Administration and the Director of the National Institute of Occupational Safety and Health.
- 7.3 <u>TRANSFER OF RECORDS</u> If WCSU is closed or there is no successor employer to receive and retain the records for the prescribed period, the Director of NIOSH shall be contacted for the final disposition.
- 8.0 EVALUATION AND REVIEW

WCSU is responsible for annually reviewing this program and its effectiveness and for updating this program, as needed.

### 9.0 <u>DEFINITIONS</u>

The following are important definitions that comply with this ECP.

### BLOOD

Human Blood, human components, and products made from human blood.

### EXPOSURE INCIDENT

A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee's duties.

# OCCUPATIONAL EXPOSURE

While performing their duties, an employee is exposed to a potentially infectious material via eye, mouth, mucous membrane, non-intact skin or puncture wound from a contaminated needle.

### OTHER POTENTIALLY INFECTIOUS MATERIALS

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.

### UNIVERSAL PRECAUTIONS

An approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious with HBV, HIV, and other bloodborne pathogens. Procedure S-103 (Bloodborne Pathogen Exposure Control Plan) Page 10 of 11



Western Connecticut State University

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Employee's Name (Last, First,	Initial):	
Employee ID Number:		
Position Title:		
Department:		
Telephone Number:		
Supervisor's Name:		
Incident Date and Time:		
Incident Location:		
Exposure Type (circle one):	Non-significant	Significant

Provide a description of exposed employee's duties as they relate to the exposure incident: (attach additional information if necessary)

How did the incident occur? Please provide an explanation of the route(s) of exposure and the circumstances under which the exposure incident occurred: (attach additional information if necessary)

Employee Signature

Date

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