

GUILFORD TECHNICAL COMMUNITY COLLEGE

EXPOSURE CONTROL PLAN BLOODBORNE PATHOGENS AND OTHER POTENTIALLY INFECTIOUS MATERIALS

I. PURPOSE

The purpose of the Exposure Control Plan is to significantly reduce the risk of infection for employees with potential to be exposed to blood or body fluids. The targeted diseases include but not limited to: Hepatitis Viruses, and Human Immunodeficiency Virus (HIV).

This plan and noted procedures are in compliance with the standards U.S. Department of Labor in 29 CFR 1910.1030 Occupational Safety and Health Administration (OSHA), pertaining to employees who may be subject to occupational exposure to bloodborne pathogens.

This plan identifies the job classifications that have been determined to have potential exposure to blood and other potentially-infectious materials at the college. This plan also describes the methods of compliance with applicable requirements of the Standard and a procedure for evaluating exposure incidents. All full- and part-time employees of the college whose job classifications make them at risk for exposure to bloodborne pathogens are required to comply with this plan and with requirements of the Standard. Any failure to comply may be cause for disciplinary action.

College employees involved in the instruction of students at off-campus clinical sites will comply with the plan established by that facility as well as the Exposure Control Plan of the College.

Departments/Programs utilizing on-campus sites for instruction in which there is a high risk of exposure to bloodborne pathogens will establish specific exposure control policies and procedures as applicable to the situation in conjunction with the Program Coordinator.

1. RESPONSIBILITY

All Department Chairs/Program Directors are responsible for implementing the Exposure Control Plan and ensuring compliance with it and the Standard, including training required by this Standard. **Programs with the greatest risk will have program coordinators identified in Attachment 1, Section A.** New employees are to be trained within 30 days of hire, and annual training on bloodborne

entation of commercially available and safer
minimize occupational exposure. Non-
ing needles, or involved in the selection of
e decision and provide input in choosing

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body fluids.

b. An unfixed organ or tissue (other than intact skin) from a human (living or dead).

HIV-containing cells or tissue cultures, organ cultures, and HIV, HCV, HBV or Ebola Virus Disease (EVD) containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV, HCV, HBV or Ebola Virus Disease (EVD).

Personal Protective Equipment (PPE): specialized clothing or equipment worn by an employee for protection against a hazard. General HIV worga5o/cuww

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All department managers and supervisors are responsible for monitoring employees' job performance and for updating job descriptions/class activities both on and off-campus if new tasks are being performed by individuals in a job/class which present a change in exposure status while on any of the College's campuses or their clinical sites. Updates to job descriptions as they relate to this Standard are to flow through the division / department Compliance Officer, and is to be shared with Human Resources and the Risk Manager.

Managers and supervisory personnel are also responsible for monitoring employees' training status and their compliance with Universal Precautions and other risk-reducing policies; being particularly attentive to recognize, act on, and prevent unsafe actions by anyone in their presence. Initial and subsequent annual training is to be documented by the immediate supervisor and flow through the Compliance Officer to the Program Coordinator and Human Resources.

The Risk Manager or designee shall ensure that whenever a new position description is prepared, it is reviewed for exposure risks with the supervisor/manager involved in filling the job prior to it being approved.

All employees share responsibility with and for their co-workers to ensure compliance with the letter, spirit, and intent of this institution's policies for the prevention of transmission of disease among employees, students, and visitors of the College. Therefore, each employee must know how to recognize occupational exposure and must communicate changes in the exposure classification to their supervisor if asked to perform tasks or procedures which involve an increased risk of exposure.

EXPOSURE CLASSIFICATIONS Are listed in Attachment 1, Section F for jobs and tasks presenting a potential risk of exposure. Section G provides jobs that normally would not have an exposure risk unless certain unplanned tasks have to be performed, such as administering first aid as part of the college system or having to clean blood.

III. RECORDKEEPING

The Human Resources will maintain a record for each employee who is determined to be at risk for occupational exposure to bloodborne pathogens or OPIM. Each employee's record should contain the following:

- a. Employee's name and Social Security Number, and college ID number.
- b. A copy of the employee's Hepatitis B vaccination status, including the dates of all Hepatitis B vaccinations or a signed declination form. Faculty / Staff (including housekeeping) directly involved with medical programs must present proof of all vaccines and necessary titers (see Attachment 2; differing wording is included for accepting or declining vaccination1 Tf0.73(c)-6 (e)4 (pt (nt)-2 (2;)-2 (d)-10 he)4 (21 (i)-6 (t)-6 (y)T.

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documented. Copies of this documentation are to be provided to Human Resources and the Program Coordinator. OSHA Form 300a (ad9.19 0 Td(O)pr)1nd 6.8 (i)-2 (.9t)-2(e)4 (d.)TJ(r)3 (lon a

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- f. If the community college ceases to do business and there is no successor employee to receive and retain the records for the prescribed period, the College shall notify the Director of the National Institute for Occupational Safety and Health, U.S.

Department of Health and Human Services, at least three (3) months prior to their disposal. The College shall also transmit these records to the Director, if the Director requires them to do so, within that three (3) month period.

IV. METHODS OF COMPLIANCE

The college will practice and enforce Standard Precautions to prevent contact with blood or other potentially-infectious materials (i.e., semen, vaginal secretions, cerebrospinal fluid (CSF), synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood and in situations where it is difficult or impossible to differentiate between body fluids).

- a. Standard precautions will be used consistently in a setting where the risk of blood exposure is present.
- b. All identified employees will follow industry standard precautions to prevent exposure to the skin and mucous membranes (eyes, nose, mouth) when contact with blood or other potentially infectious materials is anticipated.
- c. Disposable gloves (single use) will always be replaced as soon as practical when visibly contaminated, torn, punctured, or when their ability to function as a barrier is compromised. Impervious gloves

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WORK PRACTICES

- a. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.
- b. Food or beverages will be consumed only in a safe designated area. Food and drinks will not be kept on the counter tops or benches.

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- labeled with the international biological hazard symbol and the wording "Biohazard" or (2) red containers.
- c. The sharps containers will be easily accessible to personnel and located as close as possible to the areas where sharps are used.
 - d. The sharps containers will be maintained upright throughout use, replaced routinely and not be allowed to overflow.
 - e. During replacement or removal from the work area, the sharps containers will be closed to prevent the spillage or protrusion of contents during handling, storage, transport, or shipping. The sharps containers will be placed in a secondary container if leakage is possible.
 - f. Reusable containers will not be opened, emptied, or cleaned manually or in any other manner which will expose employees to the risk of a percutaneous injury.
 - g. Immediately, or as soon as possible, after use, contaminated reusable sharps must be placed in containers until properly decontaminated. These containers will be puncture resistant, leak-proof on the sides and bottom, and will either be red or affixed with a fluorescent orange or orange-red label with letters in contrasting colors and a biohazard symbol.
 - h. All reusable sharps will be properly sterilized or decontaminated after use as recommended by the Center for Disease Prevention and Control.
 - i. Contaminated reusable sharps will not be stored in a manner which requires employees to reach into the containers.

SPECIMENS

- a. Specimens of blood, tissue, or other potentially-infectious materials collected or transported by the college will be placed in containers which prevent leakage during collection, handling, processing, storage, transport, or shipping.
- b. The container will be red or affixed with a fluorescent orange or orange-red label with letters in contrasting colors and a biohazard symbol. The container must be closed prior to storage, transport, or shipping. If outside contamination of the primary container occurs, the primary container is to be placed within a second container, which prevents leakage during handling, processing, storage, transport, or shipping and which is labeled or color-coded appropriately.
 - i. If the specimen could puncture the primary container, the primary container will be placed within a secondary container which is puncture-resistant in addition to having

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become overtly contaminated during the shift.

- e. Any bins, pails, cans or other similar receptacles intended for reuse will be decontaminated (regularly) before reuse.
- f. Broken glass (ill) Tc 0 Tw () Tj1.8 E(TjEMC /5R Td5 (ils)1 . Tc 0.003 Tw.32 Td (ill)0

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HAZARD COMMUNICATION

The College must affix florescent orange or orange-red labels with letters in a contrasting color to containers of regulated waste, refrigerators and freezers containing blood or other potentially-infectious material, and other containers that will be used to store, transport, or ship blood or other potentially-infectious materials. All such labels must have the universal biohazard symbol.

BLOOD

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- not have one.
- e. The Hepatitis B vaccination will be available to employees within ten (10) working
 - f. days of initial assignment involving potential exposure and after they have received training on the required subjects.
 - g. The Hepatitis B vaccine and any future booster(s) recommended by CDC will be available to employees who have an occupational exposure, unless they have previously received the complete Hepatitis B vaccination series, and antibody testing has revealed the employee is immune or the vaccine is contraindicated for medical reasons.
 - h. A Hepatitis B pre-screening program will not be a prerequisite for receiving the vaccination. (Note: Hepatitis B vaccination can be given without testing for the virus first and is prudent to do so from a cost and benefit analysis perspective.)
 - i. An employee who initially declines the Hepatitis B vaccination will be allowed to receive the vaccination at a later date.
 - j. Employees who decline to accept the Hepatitis B vaccination will be required to sign the declination statement, Attachment 2.
 - k. All part-time employees who may have occupational exposure to Hepatitis B will be offered the Hepatitis B vaccine free of charge, as long as they are employed by the College. If the employee's assignment ends at the College before the completion of the vaccination series, that individual will be responsible for completing the series at his or her own expense.
 - l. Employees who have already had the vaccine at another location must send or deliver a copy of their vaccination record, with all necessary titer results, to the Program Coordinator to be placed in the employee's file.

V. POST-EXPOSURE

1. IMMEDIATELY TAKE THE FOLLOWING STEPS:

- a. Immediately take appropriate precautionary measures. For eye, mouth and other mucous membrane exposures, flush/rinse the exposed area thoroughly with running water for at least ten to fifteen (10-15) minutes. For needle sticks, puncture wounds, or contamination of any body part with blood, scrub for a minimum of five (5) minutes.
- b. Report the incident to the appropriate persons (e.g., supervisor, program director, or department head) *IMMEDIATELY*.
- c. If the source individual is known

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acute febrile illness that occurs within twelve (12) weeks post-exposure, and use of safe and effective post-exposure measures according to recommendations for standard medical practices.

- q. Following an exposure incident, the College will provide the healthcare professional with the following information if the employee chooses to be treated by their personal physician:
 - i. A copy of The Standard: 29 CFR 1910.1030 if they do not have one.
 - ii. A description of the exposed employee's duties as they relate to the exposure incident.
 - iii. Documentation of the route(s) of exposure and the circumstances under which the exposure occurred.
 - iv. Results of the source individual's HCV, HBV testing if available.
 - v. All records relevant to the appropriate treatment of the employee, including his/her vaccination status.
- r. An evaluation of the employee's work practices and protective ~~an~~Quatus

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Hepatitis B Vaccine Record Form

Attachment 2

Hepatitis B: Special Precautions:

I have read information on hepatitis B and have had an opportunity to ask questions. I understand the benefits and risks of Hepatitis B vaccine, and voluntarily agree to be immunized. I understand that I must have 3 doses of the vaccine to confer immunity. As with all medical treatments, there is no guarantee that I will become immune. I am in general good health. I am not immunosuppressed, on hemodialysis, pregnant, or breast-feeding.

Name

Date of Birth

Address

City

State

Zip

Home Phone

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2.If you have previously received Hepatitis B vaccine through another organization or employer:

I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. I decline hepatitis B vaccination at this time due to the fact that I have previously received all 3 hepatitis B vaccines through another organization; or I know that I already have immunity due to hepatitis B antibody count.

Signature of employee: _ Year of hepatitis B vaccine: ___ Through what organization: ___

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**Guilford Technical Community College
Letter to Licensed Medical Personal Evaluating Employee Injured
From Possible Blood Exposure
Attachment 3**

Dear Dr. _____:

An employee at our Community College encountered a blood exposure injury on _____ . Please refer to the attached supervisor's injury report for the route of entry and circumstances regarding this incident. This employee has come to you for a medical evaluation, and you may treat as medically indicated. If you do not have one, we can supply a copy of the U.S. Public Health Service recommendations regarding these testing and treatment options.

The status of the source which may have infected the employee is indicated below:

_____ The source cannot be determined.

_____ The source has given their consent for HBV/HIV antibody testing to be done.

A copy of the medical evaluation must be delivered to the employee within 15 working days of

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