



## **Bloodborne Pathogen Exposure Control Plan**

**Reference: CFR 1910.1030**

**Implementation Date: 2010**

**Review Date: May 12, 2016**

## **Introduction**

The Bloodborne Pathogen Standard (29 CFR 1910.1030) requires a written Exposure Control Plan (ECP) describing the methods and controls utilized to prevent or minimize employee exposure to blood or other potentially infectious material. Austin Peay State University is committed to complying with all applicable laws and regulations and to minimizing health hazards and risk of injury to employees. Bloodborne Pathogens, such as Human Immunodeficiency Virus (HIV) and Hepatitis-B Virus (HBV), are pathogenic microorganisms present in human blood that can be transmitted through contact with infected blood.

APSU will seek to protect employees from exposure to infected blood through the use of engineering controls and work practices, personal protective equipment, housekeeping, vaccinations, and training. This plan addresses each of these items as well as labeling requirements, sharps injury log requirements, proper handling and disposal of infectious materials, universal precautions, and recordkeeping.

## **Application**

This plan applies to all APSU employees who may have contact with blood and other potentially infectious materials.

This plan applies to the following departments and/or job classifications:

- Custodial Staff
- Plumbers
- Athletic Trainers
- Public Safety Officers
- Biohazard Waste Handlers
- Laboratory Personnel
- Nurses, Physicians, and other Student Health Services Staff
- Medical Technology Staff and Faculty
- Nursing Department Staff and Faculty
- Fitness and Recreation Staff

## **Responsibilities**

- **Environmental, Health, and Safety Manager**
  - Maintain an updated Exposure Control Plan and ensure it is reviewed at least annually.

- Provide guidance and training materials on infectious material handling and disposal.
- Provide guidance and technical assistance to departments in appropriate work practice controls, engineering controls, and appropriate housekeeping methods.
- **Office of Human Resources**
  - Maintain all medical information required by this program for employees identified as having an occupational exposure to blood or other potentially infectious materials.
  - Ensure the medical portion of employee's personnel records are kept confidential and information is not disclosed without the written consent of the employee.
- **Department Chairs, Directors, and Supervisors that may have occupational exposures to blood or OPIM**
  - Ensure full implementation of this ECP in your department.
  - Ensure that appropriate positions that may have contact with blood or OPIM have been identified.
  - Ensure department is providing all necessary personal protective equipment.
  - Ensure required training is provided to all employees listed that may have contact with blood or OPIM and document all training.
  - Encourage employee participation in the hepatitis B vaccination program.
  - Ensure that individuals who refuse vaccination complete and sign a Hepatitis B Vaccination Declination Form.
  - Monitor and enforce compliance with Universal Precautions.
  - Ensure new employees are oriented to infection control policies and procedures.
  - Ensure a spill kit is available along with procedures in how to clean up a spill and where to place waste biohazardous materials.
  - Ensure required labels are affixed to containers of regulated waste as well as containers of blood or potentially infectious materials.

## **Exposure Determination**

Each department affected by the policy must perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination should be made without regard to the use of personal protective equipment. Occupational exposure is defined as a reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. This exposure determination requires a listing of all job classifications in which all employees may be expected to incur occupational exposure. Job classifications which are in this category must be listed on the form in Appendix 2.

In addition, TOSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur exposure to blood or other potentially infectious materials, tasks or procedures that would cause these employees to have occupational exposure, are also required to be listed. The job classifications and associated tasks for these categories are listed in Appendix 3. All other job classifications are considered Category C (no exposure) by the standard.

“Good Samaritan” acts are unanticipated events that occur when employees who do not have occupational exposure are exposed to blood to other OPIM (e.g., assisting a person with a nosebleed). These are not included in the scope of this plan.

Each department shall maintain a current record of their job classification determinations and a copy of their department Exposure Control Plan. These determinations should be updated annually or as required for new employees.

## **Universal Precautions**

Universal Precautions embraces the concept of treating all body fluids and materials as infectious. The use of Universal Precautions will be employed in all workplaces with occupational exposures to blood or OPIM. All bodies are considered to contain potentially transmissible pathogens and appropriate barrier techniques must be followed.

## **Engineering and Work Practice Controls**

Methods or controls to eliminate or minimize exposure to blood or OPIM must be implemented in each department. The following work practices shall be used by all employees who may be exposed to blood or OPIM:

- Hand Washing – Hand washing facilities must be available to all employees. Employees must wash their hands with soap and water before and after potential exposure to blood or OPIM, to the extent possible. Employees must wash their hands after the removal of gloves, after exposure to blood or OPIM.
- Sharps Containers – Sharps containers shall be made available in all areas where sharps are regularly used. Sharps containers must be closable, puncture resistant, leak proof, and labeled or color – coded (red) in accordance with the TOSHA standard.
- General Safety Practices – Eating, drinking, smoking, applying cosmetics, and handling contact lens are prohibited in all work areas where there is a reasonable likelihood of occupational exposures to blood or OPIM. Food and drink shall not be kept in refrigerators, freezers, shelves, counters, or bench tops where blood or OPIM are present. Mouth pipetting/suctioning of blood or OPIM is prohibited. Specimens of blood

or OPIM shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.

### **Biohazardous Waste Handling and Storage Procedures**

Containers for biohazardous waste must be closable, leak proof, puncture resistant, and labeled and/or color-coded in accordance with TOSHA requirements. All biohazard containers must be stored with the lid closed unless waste material is being added to the container. Adequate spill response equipment must be stored near all biohazardous waste collection areas, and all rooms where biohazardous waste is stored must have a Biohazard sign in place.

### **Sharps Injury Prevention**

All sharps and needles must be handled, stored, and disposed of in a manner that protects employees and other personnel from exposure. Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed. All contaminated reusable sharps shall be placed in an appropriate, safe container as soon as possible after use, until properly reprocessed.

### **Personal Protective Equipment**

When potential occupational exposures have been identified, the department shall provide, at no cost to the employee, appropriate personal protective equipment, such as, but not limited to gloves, gowns, face shields, laboratory coats, masks, eye protection, mouthpieces, etc.