

TALLAHASSEE COMMUNITY COLLEGE ADMINISTRATIVE PROCEDURES

TITLE: Exposure Control Plan (Bloodborne Pathogens)	NUMBER: 12-05AP
AUTHORITY: 29 CFR 1910.1030(g)(2) 29 CFR 1910.1020	SEE ALSO: <ul style="list-style-type: none">• DBOT Policy 12-05; Exposure Control Plan (Bloodborne Pathogens)
DATE ADOPTED: July/2/18	

PURPOSE

To establish a procedure that provides for Tallahassee Community College's (TCC) compliance with the Occupational Safety and Health Administration's (OSHA) bloodborne pathogens standard found in Title 29, Code of Federal Regulation (CFR) 1910.1030. This procedure will outline the process for determining at-risk positions, facilitating associated training, administering the Hepatitis B virus (HBV) vaccination, ensuring required record keeping, and providing proper disinfecting and cleaning processes.

TCC's Exposure Control Plan (ECP) governs the College's compliance with OSHA standards and is applicable to all employees who have occupational exposure to bloodborne pathogens. Healthcare Professions students may be required to provide proof of HBV vaccination prior to their acceptance into a program and are required to maintain the minimum standards of all affiliated clinical agencies. Universal precautions, engineering and work practice controls, and the use of personal protective equipment must be practiced to prevent employee exposure to blood and other potentially infectious materials.

DEFINITIONS

At-Risk – an employee that can reasonably be anticipated to encounter blood or other potentially infectious materials (OPIM) as a result of performing their job duties.

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

Bloodborne Pathogens – pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include but are not limited to: HBV, Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV).

Contaminated – the presence or the reasonably anticipated presence of blood or other potentially infectious material on an item or surface.

Contaminated Sharps – any contaminated object that can penetrate the skin such as broken glass, edged weapons, needles, etc.

Decontamination – the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or items is/are rendered safe for handling, use, or disposal.

Engineering Controls – controls (such as sharps disposal containers, self-sheathing needles, sharps with engineered injury protection, needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace.

Exposure Incident – 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.

Occupational Exposure – 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.

Other Potentially Infectious Materials (OPIM) – materials other than human blood that are potentially infected with bloodborne pathogens including: (a) human body fluids (semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva, 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); (b) any unfixed tissue or organ (other than intact skin) from a human (living or dead); (c) HIV or HBV-containing cell or tissue cultures, organ cultures, culture medium or other solutions, and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral – piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

Personal Protective Equipment (PPE) – specialized clothing or equipment worn for protection against a hazard. General work clothes (e.g. uniforms, pants, shirts, or blouses) not intended to function against a hazard are not considered to be PPE.

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

Universal Precautions – an approach to infection control in which all human blood and body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. Universal precautions include the use of PPE.

Work Practice Controls – those practices that reduce the likelihood of exposure by altering the way a task is performed.

PROCEDURES

A. Determining At-Risk Positions

Human Resources will identify positions that can be reasonably considered at-risk for occupational exposure to blood or OPIM. The exposure determination is based on the job duties associated with specific positions or job classifications and without regard to the use of PPE. Human resources will maintain the following lists required by 29 CFR 1910.1030(c)(2)(i): all job classifications where all employees have occupational exposure, all job classifications where some employees have occupational exposure, and all tasks and procedures in which occupational exposure occurs.

Positions or job classifications identified below have responsibilities which could result in occupational exposure:

Position and/or Job Classification of At-Risk Employees

Supervising Dentist, sworn TCC Police Department member, Public Safety Officer, Police Dispatcher, Environmental Safety Technician, Emergency Management and Safety Coordinator, and Gym Workers (OPS).

All directors, assistant directors, and direct supervisors in these areas are considered exposed due to their training in CPR and First Aid:

Dental Health Program, Nursing Program, EMT/Paramedic Program, Lifetime Sports Complex, Athletics (coaches, assistants, trainers), Theater Productions, Plant Operations, and Science laboratories.

Some employees in these job classifications are considered at-risk:

HVAC/Building Automation Specialist, Custodial Worker, Senior Engineering Technician, Engineering Technician, Equipment Mechanic, Landscaper, Locksmith, Maintenance Technician I and II, Maintenance Support Worker, Human Resources Specialist, and faculty and staff of Dental Health, Nursing, EMT/Paramedic, Respiratory Therapy, First Aid/Emergency Techniques, and Florida Public Safety Institute.

B. Training

Employees subject to occupational exposure will participate in an infection control training program. Training will educate at-risk employees about proper bloodborne pathogen exposure prevention procedures, engineering controls, work practice controls, and the HBV vaccine.

1. Human Resources will facilitate and track annual exposure control training for at-risk employees. The Emergency Management & Safety Office will provide oversight regarding training content and requirements.
2. New and reassigned (promotion, demotion, transfer) at-risk employees will receive training and be offered the HBV vaccine within ten (10) days of assignment. Human Resources will facilitate and track training and acceptance or refusal of the HBV vaccine.
3. Individual supervisors, in consultation with Human Resources and the Emergency Management & Safety Office, will conduct training on new exposure risks when new or modified procedures affect the employee's occupational exposure. This training will be documented and forwarded to Human Resources for inclusion in the employee's personnel file.
4. Minimum Training Requirements:
 - a. An accessible copy of the regulatory text of the bloodborne pathogen standard and an explanation of its contents.
 - b. A general explanation of the epidemiology and symptoms of bloodborne diseases.
 - c. An explanation of the modes of transmission of bloodborne pathogens.
 - d. An explanation of the College's Exposure Control Plan and how the employee can obtain a copy of the written plan.
 - e. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and OPIM.
 - f. An explanation of the use and limitations of methods that prevent or reduce exposure including appropriate engineering controls, work practices, and PPE.
 - g. Information on the types, proper use, location, removal, handling, decontamination, and disposal of PPE.
 - h. An explanation of the basis for selection of PPE.
 - i. Information about the HBV vaccine including its efficacy, safety, method of administration, benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge to the employee.

- j. Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM.
 - k. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.
 - l. Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident.
 - m. An explanation of the signs and labels and/or color coding required by the bloodborne pathogen standard.
 - n. An opportunity for interactive questions and answers with the person conducting the training session.
 - o. Successful completion of a post-training test.
5. Part time College employees who receive bloodborne pathogen training from their primary employer are exempt from the above training requirements. If the employee is unable to provide proof of training to Human Resources, then the employee will be required to complete the College's training program.
6. Human Resources will keep training records as part of the employee's personnel file for at least three years after the date of training. Training records will include the following:
- a. Dates of the training sessions.
 - b. Contents or summary of the training sessions.
 - c. Names and qualifications of persons conducting the training sessions.
 - d. Names and job titles of all persons attending the training sessions.
7. The College will make the training records available to the Assistant Secretary of Labor for Occupational Safety and Health, the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or their designated representative for examination and/or copying upon request as mandated by law or subpoena.
- a. The College will make the training records available upon request to employees and their representative(s) for examination and/or copying in accordance with 29 CFR 1910.1030(h).
 - b. The College will comply with the requirements involving transfer of records as set forth in 29 CFR 1910.1030(h).

C. Hepatitis B Vaccination

New and reassigned (promotion, demotion, transfer) at-risk employees, or employees who are assigned new duties where occupational exposure is reasonably anticipated, will be offered the HBV vaccination at no cost to the employee after completing training and within ten (10) days of assignment. Each College department or Human Resources will be responsible for covering the cost of the HBV vaccination for its employees.

1. The College will provide the HBV vaccination series, post-exposure evaluation, and medical follow-up to at-risk employees.
2. At-risk employees, whether accepting or declining the HBV vaccination, will complete the HBV Vaccination Form. The completed form will be placed in the employee's personnel file.
3. Human Resources will schedule an appointment with the College's designated healthcare provider so that employees can be vaccinated during their work hours. Supervisors will ensure employees receive the vaccinations and forward proof of completion to Human Resources for inclusion in the employee's personnel records.
4. Employees who initially decline the vaccination may request to receive the vaccination at any point in the future. The completed request form will be placed in the employee's personnel file.
5. HBV vaccinations are administered in a series of three doses at 0-, 1-, and 6-month intervals.
6. If an employee terminates employment prior to completing the vaccine series, the College is not responsible for providing the remaining doses.
7. Per current Centers for Disease Control guidance, booster doses are not recommended for individuals with normal immune systems who have been fully vaccinated. Booster doses are only recommended for hemodialysis patients and can be considered for other individuals with a weakened immune system. Titer testing is generally not recommended for previously vaccinated individuals.

D. Compliance with OSHA Standards

1. Universal precautions will be used to prevent contact with blood or other infectious materials. Universal precautions require that all human blood and body fluids be treated as if known to be infected with HIV, HBV, HCV, and other bloodborne pathogens.
2. The College will provide PPE at no cost to at-risk employees. PPE may include goggles, disposable hypoallergenic gloves, face mask, and disposable protective clothing.

3. PPE will be immediately removed after use and prior to leaving the area. Used PPE will be discarded in a red biohazard bag and then placed into an approved biohazard container. The container will be puncture resistant, leak proof, and properly labeled.
4. The employee will wash hands with soap and water immediately or as soon as feasible after removal of gloves or other PPE items.
5. Eating, drinking, smoking, applying cosmetics or lip balm, or handling contact lenses is prohibited in work areas where there is a reasonable likelihood of occupational exposure.

E. Exposure Incident Reporting

1. Employees involved in an exposure incident must notify their immediate supervisor as soon as practical and:
 - a. Immediately wash the affected skin area(s) thoroughly with soap and water.
 - b. Immediately flush affected eyes or mucous membranes with water.
 - c. Place any contaminated clothing in an approved biohazard container for proper disposal. Contaminated clothing will not be laundered.
2. The employee's immediate supervisor will:
 - a. Notify Human Resources and complete an Accident and Injury report.
 - b. Evaluate the exposure incident to identify and correct work practices or other factors, if necessary, to prevent recurrence of similar incidents.
3. If the exposure resulted from a needlestick or sharps injury, the Accident and Injury report must include, at a minimum, the following:
 - a. The type and brand of device involved in the exposure incident.
 - b. The department or work area where the exposure incident occurred.
 - c. An explanation of how the exposure incident occurred.
4. Human Resources will be responsible for maintaining a log of all needlestick and sharps injuries as required by 29 CFR 1910.1030(h)(5)(i). The log will be maintained in a manner that ensures the confidentiality of the injured employee.

F. Post Exposure Evaluation and Follow Up

Human Resources will schedule a confidential medical evaluation with the College's designated healthcare provider at no cost to the employee after an exposure incident.

The healthcare provider's evaluation and follow up will include, at a minimum, the following elements:

1. Route(s) of exposure and the circumstances under which the exposure incident occurred.
2. Identification and documentation of the source individual, unless the College can establish that identification is not feasible or is prohibited by law.
 - a. If the source individual is known and provides consent, the source individual's blood will be tested as soon as practical to determine HBV and HIV status. If the source individual is already known to be infected with HBV or HIV, re-testing is not necessary.
 - b. If the source individual does not consent, the College legal advisor will determine if sampling may be obtained through legal measures.
 - c. Results of the source individual's testing will be made available to the exposed employee, and the employee will be informed of applicable laws and regulations concerning disclosure of the identity and infection status of the source individual.
3. If the employee consents, his or her blood will be tested as soon as practical to determine HBV and HIV status. If the employee consents to blood collection but chooses not to be tested for HIV at the time blood is drawn, the sample will be held for 90 days should the employee later choose to have the sample tested for HBV and HIV.
4. Post exposure prophylaxis, counseling, and evaluation of reported illnesses.

G. Information Provided to Healthcare Professionals

1. The College will ensure that the healthcare professional responsible for an employee's HBV vaccination is provided a copy of the OSHA bloodborne pathogens regulation (29 CFR 1910.1030).
2. The College will ensure that the healthcare professional evaluating an employee after an exposure incident is provided the following information:
 - a. A copy of the OSHA bloodborne pathogen regulation (29 CFR 1910.1030)
 - b. A description of the exposed employee's duties as they relate to the exposure incident (a copy of the Accident and Injury report may also be included).

- c. Documentation of the route(s) of exposure and circumstances under which exposure occurred.
 - d. Results of the source individual's blood testing, if available.
 - e. All medical records, including vaccination status, the College maintains which are relevant to the appropriate treatment of the employee.
3. Within 15 days of the completion of the evaluation, the College will provide the employee with a copy of the evaluating healthcare professional's written opinion as to whether the HBV vaccination is indicated for the employee and if the employee has received such vaccination.
 4. The healthcare professional's written opinion for post-exposure evaluation and follow-up will be limited to the following information:
 - a. That the employee has been informed of the results of the evaluation.
 - b. That the employee has been told about any medical conditions resulting from exposure to blood or OPIM which require further evaluation or treatment.
 - c. All other findings or diagnoses will remain confidential and will not be included in the written report.

H. Medical Records

1. The College will maintain accurate records for each employee with occupational exposure in accordance with 29 CFR 1910.1020. These records will include the following information:
 - a. Name and social security number of the employee.
 - b. A copy of the employee's HBV vaccination status, including the dates of all HBV vaccinations, and any medical records relative to the employee's ability to receive the vaccination.
 - c. A copy of all results of examinations, medical testing, and follow-up procedures.
 - d. The employer's copy of the healthcare professional's written opinion.
 - e. A copy of the information provided to the healthcare professional.
2. The College will maintain confidentiality of the employee's medical records. Medical records will not be disclosed or reported to any person within or outside the workplace without the employee's written consent except as required by 29 CFR 1910.1020 or as may be required by law.

3. The College will maintain employee medical records for at least the duration of employment plus thirty years in accordance with 29 CFR 1910.20.

I. Disinfecting and Cleaning

Each campus and center director/manager will be responsible for developing procedures for disinfecting and cleaning of contaminated areas. Procedures will include statements addressing, at a minimum, each of the following:

1. During normal business hours, contact Plant Operations to have custodial staff conduct clean up. After normal business hours, contact the TCC Police Department for assistance.
2. Employees cleaning up blood or OPIM must wear PPE.
3. All blood or OPIM must be thoroughly cleaned up prior to applying a U.S. Environmental Protection Agency (EPA) approved disinfectant/tuberculocidal solution.
 - a. Contaminated surfaces will be left wet with the disinfectant for 10 minutes.
 - b. All disinfectant solutions will be mixed and used in accordance with the manufacturer's instructions.
4. Potentially contaminated materials will be placed in red biohazard bags and discarded in an approved biohazard container.
5. Potentially contaminated sharps will be handled using mechanical means such as forceps, tongs, brush, or dust pan and placed in an approved sharps container.
6. College employees will not transport more than 25 pounds of regulated waste to the designated college collection site.
7. All red bags and sharps containers will be disposed of by an approved biohazard waste disposal service.