Department: Bucknell University Environmental Health and Safety Bloodborne Pathogens Exposure Control Plan Page **1** of **10** Effective Date: 10/1/2018



Blood Borne Pathogens Exposure Control Program

1) PURPOSE

a) Bucknell University is committed to operating its campus in the safest manner possible, with concern for the individual and the protection of the environment in accordance with all applicable Federal and State statutes. The Bloodborne Pathogens Program, as outlined in the following sections, has been prepared to comply with applicable regulations promulgated by the Occupational Health and Safety Administration in particular Title 29 of the Code of Federal Regulations standard 1910.1030. This program establishes the requirements that faculty and staff must meet in order to properly understand the hazards associated with blood or other potentially infected material. All employees who will come into contact with blood or other potentially infected materials shall make every effort to comply with this program. Additionally, Bucknell University will make every effort to identify high risk areas in the workplace as well as educate employees on the hazards they may encounter with these specific locations.

2) SCOPE and APPLICATION

a) This program applies to all employees who are required to work with or around blood or other potentially infectious materials during normal work operations and during some non-routine or emergency operations. All employees working with or engaged in certain processes that involve contact with blood or other potentially infectious materials must be adequately trained in Bloodborne Pathogens.

3) RESPONSIBILITIES

a) Exposure Control Officer

- i) The Exposure Control Officer for the Bucknell University Bloodborne Pathogens program is Jeremy Fanning, EH&S Coordinator.
- ii) The Exposure Control Officer is responsible for administering the bloodborne pathogens program. Duties of the program administrator include:
 - (1) Develop and administer any additional Bloodborne Pathogen related policies and practices needed to support effective implementation of this program.
 - (2) Continually search for potential improvements to this plan.
 - (3) Revise and update the Bucknell University Bloodborne Pathogen program
 - (4) Understand Occupational Safety and Health Administration (OSHA) and other related regulations regarding bloodborne pathogens.

- (5) Conduct periodic audits in order to maintain an up to date Exposure Control Plan.
- (6) Maintain current list of employees enrolled in bloodborne pathogens program
- (7) Develop training programs associated with bloodborne pathogens program.
- (8) Maintain appropriate documentation in accordance with the recordkeeping section of the OSHA bloodborne pathogens standard.
- b) Supervisors
 - i) Work directly with the Exposure Control Officer on Bloodborne Pathogen related topics.
 - ii) The responsibilities of the Supervisor are:
 - (1) Ensure proper exposure control procedures are being followed by employees.
 - (2) Ensure that employees have the proper personal protective equipment for tasks being completed and that it is in proper working condition.
- c) Employees
 - i) Required to know what tasks pose exposure risks.
 - ii) Complete initial bloodborne pathogens training and an annual refresher.
 - iii) Perform all operations in accordance with engineering controls and work practice controls.
 - **iv)** Understand the proper personal protective equipment for specific tasks and how to properly use this personal protective equipment.

4) PROGRAM ELEMENTS

- a) Exposure Determination
 - i) Job Classification/Exposure Risk Categories
 - Category I (High Risk) routinely involves exposure to blood, bodily fluids and tissue.
 - (2) Category II (Medium Risk) Does not routinely involve exposure to blood, bodily fluids and tissue. However, exposure may occur during non-routine tasks.
 - (3) Category III (Low Risk) Employee is not exposed to blood, bodily fluids and tissues under their job description.
 - ii) A list of employee job titles and their associated exposure risk can be found in Appendix A.

- Category I employees shall be given the opportunity to be enrolled in the Hepatitis B Vaccination Program.
- (2) Category II employees shall be given the opportunity to be enrolled in the Hepatitis B Vaccination Program if it has been determined that they will be exposed to blood or OPIM.
- (3) Category III employee shall not be enrolled in the Hepatitis B Vaccination Program.
- iii) Employees whose job title is not listed in Appendix A shall consult with the Exposure Control Officer to determine if they should be enrolled in the Hepatitis B Vaccination Program.
- b) Methods of Compliance
 - i) Universal Precautions
 - (1) A key factor in implementing a successful bloodborne pathogens program is to implement what is known as universal precautions.
 - (2) Universal precautions are when all bodily fluids are and other potentially infection materials are treated as if they contain some type of bloodborne pathogen.
 - (3) Universal precautions shall be used when handling the following:
 - (a) Blood, blood products
 - (b) Vomit
 - (c) Feces and Urine
 - (d) Any other bodily fluid which is contaminated or has the potential to be contaminated with blood.
 - (4) Universal precautions do not need to be used when handling the following:
 - (a) Nasal secretions
 - (b) Sweat
 - (c) Tears
 - **ii)** Engineering Controls
 - (1) Bucknell University implements the following as engineering controls:
 - (a) SHARPS containers
 - (b) Hand washing stations

- iii) Work Practice Controls
 - (1) Bucknell University implements the following as work practice controls:
 - (a) Hands shall be washed immediately, or as soon as possible, after removing gloves or other personal protective equipment.
 - (b) All exposed areas of the body that have made contact with blood or other potentially infectious materials shall be washed with warm water and soap. Exposed mucous membranes should be flushed with plenty of water.
 - (c) All personal protective equipment should be removed as soon as possible, prior to leaving the scene and placed in the appropriate designated area.
 - (d) Potentially contaminated broken glassware shall be picked up by mechanical means (broom and dustpan, forceps).
 - (e) All procedures shall be performed in such a manner to minimize splashing, spraying, spattering and generation of these droplets.
 - (f) Food and drink shall not be kept or used in areas where blood and other potentially infectious materials are present.
 - (g) New employees shall be given a copy of their job description, job category, tasks and procedures related to the exposure control program
 - (h) Employees are trained by supervisor regarding any method of compliance that the employee is not familiar with.
- iv) Personal Protective Equipment
 - (1) Personal Protective Equipment is to be used as a "last line of defense" against bloodborne pathogens.
 - (2) Personal Protective Equipment for bloodborne pathogens is provided at no cost to the employee.
 - (3) Personal Protective Equipment includes:
 - (a) Gloves
 - (b) Gowns
 - (c) Face shields/masks
 - (d) Mouthpieces
- v) Housekeeping

- (1) Maintaining a clean and sanitary work area is a key factor in a successful and effective bloodborne pathogen program.
- (2) Practices include:
 - (a) Cleaning and decontamination of all surfaces and equipment that have come into contact with blood or other potentially infectious materials.
 - (b) Use properly labeled containers to dispose of contaminated waste.
 - (c) Bloodborne pathogen containers must have the following
 - (i) Closed topped
 - (ii) Puncture resistant
 - (iii)Leak Proof
 - (iv)Red in color
 - (v) Labeled with biohazard warning label
 - (d) Containers shall be located in easily accessible areas
 - (e) Containers must be kept upright and not overfilled
 - (f) Waste shall not be compacted in containers
 - (g) Red bag waste shall be collected by custodians and stored at the proper collection site.
- c) Exposure Evaluations
 - i) Pre-Exposure Vaccination (Hepatitis B)
 - (1) To protect our employees as much as possible from the possibility of Hepatitis B infection, Bucknell University has implemented a vaccination program. This program is available, at no cost, to all employees whose job classification is category I or category II according to Appendix A of the area specific Exposure Control Program.
 - (2) The vaccination program consists of a series of 3 inoculations over a 6-month period. Should a booster be recommended by U.S. Public Health Service at a future date, such booster shall be available in accordance with U.S. Public Health Service recommendations.
 - (3) All employees are offered information on vaccinations, including safety and effectiveness.

- (4) If employee does not wish to receive the Hepatitis B Vaccination they must sign the refusal form located in Appendix B.
- ii) Post Exposure Evaluation and Follow-Up
 - (1) Evaluation
 - (a) In the event of an exposure the following steps should be taken:
 - (i) Cleanse the area of exposure to minimize the chance of infection. This should be done as soon as possible after the exposure.
 - (ii) Notify the supervisor and document circumstances surrounding the exposure incident.
 - (iii)Seek medical attention from a member of the Bucknell University selected panel of physicians.
 - (2) Investigation
 - (a) The designated person will investigate every exposure incident that occurs under their specific Exposure Control Program.
 - (b) A copy of all reports related to an incident shall be forwarded to the exposure control officer.
 - (c) The following information need to be included in the report to the Exposure Control Officer.
 - (i) Date and Time of Exposure
 - (ii) Routes of exposure
 - (iii)What potentially infectious materials are involved (blood, vomit, urine, etc.).
 - (iv)Under what circumstances did the incident occur
 - (v) Actions that were taken as a result of the exposure (employee decontamination, clean up, notifications made).
 - (3) Follow-Up
 - (a) Bucknell University shall ensure that all confidential information including medical evaluations, procedures including Hepatitis B Vaccination Series, past exposure evaluations and follow-ups are:
 - (i) Available at no cost to the employee
 - (ii) Made available to the employee at reasonable time and place

(iii)Performed by or under supervision of licensed health care physician or professional

- d) Labels and Signs
 - i) Warning labels shall be visibly located on containers of regulated waste, refrigerators and freezers containing blood and other potentially infectious materials.
 - **ii)** Labels shall be located on containers used to store, transport or ship blood and other potentially infectious materials except when:
 - (1) Red bags or red containers are being used
 - (2) Individual containers of blood or other potentially infectious material are placed in a labeled container.
- e) Training and Information
 - i) All employees who have the potential for exposure to bloodborne pathogens are required to be trained.
 - **ii)** Employees must undergo an annual refresher training and also be retrained if the employee is changing their job function which will require them to be in the program.
 - **iii)** Training topics shall include:
 - (1) The OSHA Bloodborne Pathogen Standard
 - (2) Epidemiology and symptoms of bloodborne diseases
 - (3) Modes of transmission
 - (4) Bucknell University Exposure Control Plans and their locations
 - (5) Methods of recognizing risk categories and job tasks
 - (6) Review of use and limitations of control methods in order to prevent or reduce exposure, including:
 - (a) Engineering Controls
 - (b) Work Practice Controls
 - (c) Personal Protective Equipment
 - (7) Selection and appropriate use of personal protective equipment
 - (8) Biohazard labeling and warning devices
 - (9) Information on the Hepatitis Vaccine including:
 - (a) Efficacy
 - (b) Safety

- (c) Method of Administration
- (d) Benefits of vaccination
- (e) Bucknell University free vaccination program
- (10) Emergency actions involving blood or other potentially infectious materials
- (11) Exposure incident procedures, including incident reporting
- (12) Information on post-exposure evaluations and follow-up.

5) PROGRAM EVALUATION

- a) The Exposure Control Officer will conduct periodic evaluations of the workplace to ensure that the requirements of this program are being implemented. The evaluations will include meeting with employees and supervisors as well as site inspections.
- **b)** The Exposure Control Officer will also conduct an annual evaluation of the written Bloodborne Pathogens Program.

6) DOCUMENTATION and RECORDKEEPING

- a) A written copy of this program and the OSHA standard is available in the EHS office. It is available to all employees who wish to review it. The OSHA standard can also be found on OSHA's website.
- b) Also maintained in the EHS office are copies of training records. These records will be updated when: new employees are trained, existing employees receive refresher training, and when any changes are made to the program requiring training to be conducted.
- c) All records pertaining to Hepatitis B Vaccination shall be kept by EH&S to ensure the confidentiality of the documents.

7) 7.0 REVISION HISTORY

- a) 9/15 Updated program to current format.
- **b)** 9/16 Updated section 6c to indicate that records shall be kept in EH&S.
- c) 9/17 No changes to program.
- d) 9/18 Consolidated from area specific to campus wide exposure control program.

Appendix A: Job Classifications

Department	Category I	Category II	Category III
Facilities	Custodians	Trades Technicians	Warehouse Employees
	Utilities Maintenance	Groundskeepers	Carpenters
		Laborers	Locksmiths
		Garage Employees	Painters
		Electricians	Administrative
			Employees
Athletics	Athletic Trainers	Athletics Coaches	Administrative
			Employees
	Equipment Managers	Strength & Conditioning	Communication
		Coaches	Personnel
		Operations Personnel	
Public Safety	Public Safety Officers	Dispatchers	Administrative
			Employees
		Student Medical Drivers	Traffic and Security
			Attendants