

BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

UNO Campus Safety Policy

POLICY

It is the policy of the University of Nebraska at Omaha (UNO) to protect employees who, in the course of their work, may contact bloodborne pathogens (human body fluids and tissues). For additional information regarding pathogens, refer to Biosafety Guidelines UNMC/UNO (research issues) and the Institutional Policy on Infectious Diseases (copies on file in Environmental Health and Safety Office).

EXPOSURE DETERMINATION

1. Exposure determinations identify who will receive training and be offered Hepatitis B (HBV) vaccination. These determinations also identify what measures must be taken to minimize exposure incidents. Exposure determination has been separated into three classifications: **CLASS I** is a listing of those job titles in which **all** employees have potential for occupational exposure to human blood, body fluids, or other infectious materials. Employees (including student employees) in Class I will receive annual training and be offered HBV vaccination. **CLASS II** is a listing of those job titles whose tasks may result in occupational exposure. Employees (including student employees) in Class II will also receive annual training and be offered HBV vaccination. **CLASS III** are employees in areas where injuries are likely to occur. Individuals in Class III will receive training every three years.

Examples of tasks that place an individual at risk are listed in Appendix A. Class determinations are made by identifying the tasks that may lead to bloodborne pathogen exposure and by confirming that the tasks are part of an individual's normal job responsibility. Assisting or rendering first aid to an employee or student is not considered an employment related risk factor unless it is part of your normal job responsibility.

2. Using the form provided (Form I), department chairpersons must identify by job description reasonably anticipated exposure to human body fluids and tissues. Determination must be made without regard to personal protective equipment or frequency of exposure. Departments must send the list to the Environmental Health and Safety Office for review by the Bloodborne Pathogen Exposure Control Committee. Lists must be reviewed annually, and when any new or modified tasks might affect employee exposure. Reviewed lists must be resubmitted by October 1 each year.

A. Department Chairpersons are responsible for seeing that the methods used to protect employees are based on universal precautions. Methods will be reviewed by the Bloodborne Pathogen Exposure Control Comm.

B. Training will be scheduled by the employee's department. (See Training and Recordkeeping.)

EXPOSURE CONTROL - WORK PRACTICES

1. Engineering and workplace controls (see 2-8 below) must be used to eliminate or minimize exposure. Personal protective equipment, i.e., gloves, masks, faceshields, must be used whenever there is an exposure potential.

2. Hand-washing facilities must be available when feasible.

A. Employees must wash their hands immediately upon direct skin contact and always after removal of gloves or other protective equipment.

B. Flush eyes and/or mucous membrane areas immediately with water if those areas have come into contact with blood.

3. Sharps (needles, scalpels, razor blades, contaminated glass) procedures:

A. Do not bend, recap, or remove from syringes unless it can be demonstrated to the Bloodborne Pathogen Exposure Control Committee that no other feasible method exists or that such action is required by a specific medical procedure.

B. Shearing or breaking of contaminated needles is prohibited.

C. Never reach into or force items into a sharps container. Containers must be accessible and located as close as possible to the area where sharps are used or found. They must be kept upright throughout use, replaced routinely, and not be allowed to overflow.

D. Contaminated reusable sharps must be placed in containers that are puncture-resistant, labeled, and leakproof on sides and bottom until properly reprocessed. Storage and processing procedures must not be used which require employees to reach by hand into these containers.

4. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in areas where there is a reasonable possibility of exposure.

A. Food and drink must not be kept in refrigerators, freezers, shelves, cabinets, or countertops or benchtops where blood or other potentially infectious materials are present.

B. Mouth pipetting/suctioning of blood or other potentially infectious material is prohibited.

5. All procedures involving blood or other potentially infectious materials must be performed in a manner that minimizes splashing, spraying, spattering, and generation of droplets.

6. Specimens of blood or other potentially infectious material must be placed in a container that prevents leakage during collection, handling, processing, storage, transport, or shipping. Specimen containers must be labeled and closed prior to being stored or transported when universal precautions are not utilized. Specimen containers shipped off campus must be labeled.

A. The primary container must be placed in a labeled or secondary container that prevents leakage when outside contamination of the primary container occurs.

B. The primary container must be placed in a labeled, puncture-resistant secondary container if the specimen could puncture the primary container.

7. The worksite must be kept in a clean and sanitary condition. All equipment and work surfaces must be cleaned and disinfected after contact with blood or other potentially infectious material. Equipment that may become contaminated with blood or other potentially infectious materials must be examined prior to servicing or shipping and must be decontaminated if possible. The person using the equipment is responsible for decontamination.

A. A label must be attached to the equipment stating which portions remain contaminated.

B. Information must be conveyed to all affected employees, servicing representatives, and/or manufacturers prior to handling, servicing, or shipping so that appropriate precautions can be taken.

8. **RESEARCH LABORATORIES** dealing with human pathogens must determine the level of risk. They must meet the requirements as directed by the Biosafety Guidelines of UNMC/UNO. Reference that document for information on procedures in research laboratory environments.

EXPOSURE CONTROL - PERSONAL PROTECTIVE EQUIPMENT

Employees must use appropriate personal protective equipment, provided at no cost to the employee. It must be readily accessible and in a variety of sizes. Appropriate protective equipment includes but is not limited to: gloves, masks with face shield, CPR mouthpieces.

Protective equipment must be worn under the following conditions:

A. Gloves - must be worn when it is reasonably anticipated that the employee may have hand contact with blood or other body fluids and when handling or touching contaminated items or surfaces.

1. Disposable gloves must be replaced as soon as practical when contaminated, or as soon as feasible if they are torn, punctured, or when their ability to provide an effective barrier is lost. Disposable gloves must not be washed or decontaminated for reuse.

2. Utility gloves may be decontaminated and reused if the integrity of the gloves is not compromised.

They must be discarded if cracked, peeling, torn, punctured, or exhibiting other signs of deterioration.

B. Masks and eye protection, (glasses, goggles or face shields) must be worn whenever there is the possibility that splashes, spray, or droplets of blood or other potentially infectious materials may be generated, which could contaminate eye, nose, or mouth.

WASTE DISPOSAL AND LAUNDRY

1. Special precautions must be taken when disposing of infectious waste. All infectious waste must be put in red (biohazard) bags and placed in containers located at Health Services, Athletic Training, Campus Recreation (Central Issue), and Milo Bail Student Center. Biohazard waste is transported and disposed by a contractor.

A. Mechanical means, such as a brush and dust pan, must be used to pick up potentially contaminated broken glassware.

B. Broken contaminated glassware and sharps must be placed in sharps containers prior to disposal.

NOTE: Glass disposal is a potential hazard for departmental and environmental personnel. Glass should be placed in a puncture-resistant container and labeled that it contains GLASS.

2. Contaminated laundry must be handled as little as possible.

A. Wet contaminated laundry must be placed and transported in bags or containers that prevent soak-through or leakage to the exterior.

B. Employees who have contact with contaminated laundry must wear gloves and other appropriate personal protective equipment.

HEPATITIS B VACCINE

1. Hepatitis B vaccines must be available to Class I and II employees (including student employees), within 10 working days of assignment.

A. The University will cover the cost of the vaccinations for University employees.

B. Employees who choose not to be vaccinated must sign a declination form (Form II); they may later opt to receive the vaccine at no cost.

2. Students with the potential for exposure to blood and other body fluids as part of their academic program must show proof of initial vaccination with Hepatitis B to enter the program. The student must complete the vaccination series within six (6) months. The student is responsible for the vaccination costs.

POST EXPOSURE PROCEDURES

Following an exposure incident at UNO, employees and students must immediately report to Health Services during business hours. Students and employees must report to an emergency room (preferably UNMC) after hours. Employees must also notify their supervisor of the exposure incident.

A. Employees, including student employees, who report to Health Services or the emergency department will receive a confidential medical evaluation and follow up which must include

testing the worker's blood upon consent (at no cost to the worker), post-exposure preventive treatment, and counseling.

B. A copy of the evaluating health care professional's written opinion must be provided to the employee within 15 days of the evaluation.

LABELING

1. Warning labels must be affixed to containers of infectious waste: refrigerators and freezers containing blood or other potentially infectious material, and other containers used to store, transport, or ship blood or other potentially infectious material except for the following exemptions.

A. Red bags or red containers may be substituted for labels.

B. Individual containers of blood or other potentially infectious materials that are placed in a labeled container during storage, transport, shipment or disposal.

2. Labels must include the BIOHAZARD legend and symbol. Labels must be fluorescent orange or orange-red, or predominantly so, with lettering or symbols in contrasting color.

A. Labels should be affixed as close as possible to the container by string, wire, adhesive, or another method that prevents loss or unintentional removal.

B. Labels for contaminated equipment must meet the specifications above, and must state the portions of the equipment which remain contaminated.

TRAINING AND RECORDKEEPING

1. Trainers must be "certified" to conduct these classes. Training materials and instructor certification is available from Environmental Health and Safety. Contact Environmental Health and Safety for information and instructor availability.

2. All employees will review and receive the Bloodborne Pathogen Exposure Control Plan summary statement during employee orientation.

3. For employees with occupational exposure (Classes I and II), annual training must be provided during working hours at no cost to the employee. Training must meet a specific set of criteria, and is available from Environmental Health and Safety.

4. Employees who work in areas where injuries occur more frequently due to the nature of their vocation or lab content (Class III) should receive initial training and refresher training every three years thereafter.

5. Training records, which include the following, must be kept: dates of training sessions; contents and summary of training sessions; names and qualifications of persons conducting the

training; and names and job titles of all persons attending the training sessions. Training documentation forms are available from Environmental Health and Safety.

6. Training records must be maintained for three years from the date on which the training occurs. Training records will be kept in Environmental Health and Safety and in the individual's department file.

7. A medical record must be maintained in Health Services for each employee with occupational exposure. Among the

items the record must contain are a copy of the employee's Hepatitis B status, dates of all Hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination, a copy of all results of any post-exposure evaluations and follow-up procedures, and a copy of the information provided by the health care professional, if applicable.

A. Medical records will be kept confidential and not disclosed or reported without the employee's written consent, except as required by law.

B. The records must be maintained for at least the duration of employment plus 30 years.

ENFORCEMENT

Employees not complying with the provision of this Plan will be subject to the disciplinary measures outlined in the UNO employee handbook.

10/26/95

APPENDIX A

Exposure Determination

Tasks that may involve exposure to bloodborne pathogens include, but are not limited to the following:

- Administering vaccines or injections to humans
- Administering first aid or CPR
- Touching broken skin or mucous membranes
- Handling, obtaining or performing tests with human body specimens
- Cleaning surfaces or equipment that may be contaminated with bloodborne pathogens
- Handling laundry that may be contaminated with bloodborne pathogens
- Disposing of biohazard waste "red bags" or "sharps" containers.

CLASS EXAMPLES

Class I	Job Title	
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	Nurse Security Officer Athletic Trainer Custodian	
Class II	<u>Job Title</u> Graduate Asst., Campus Rec Student Worker, Campus Rec	<u>Tasks and Assignments</u> Building Mgr, responds to injury scene and assists as necessary Field Supervisor, " " Central Issue - handles soiled laundry, etc.
Class III	<u>Job Title</u> Faculty - Chemistry, Biology Graduate Asst.-Chem., Biol. Food Service Plant Maint. and Utilities Grounds	<u>Tasks and Assignments</u> Assist injured students in lab Assist injured students in lab Assist injured co- workers Assist injured co- workers Assist injured co- workers

TRAINING AND VACCINATION SUMMARY

	TRAINING CONTENT	FREQUENCY	HEPATITIS B VACCINATION
NEW EMPLOYEES	Control Plan Summary	During new employee orientation	No
CURRENT EMPLOYEES	Control Plan Summary	Once through Department staff	No
CLASS I & II (Employees and Students)	1. Control Plan 2. Video*	Annually	Yes

CLASS III Employees in high injury areas	1. Control Plan 2. Video* (optional)	Every 3 years	No
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* Video - Bloodborne Pathogens, by Summit Training 1992