

**SAGINAW VALLEY STATE UNIVERSITY
BLOODBORNE INFECTIOUS DISEASES
EXPOSURE CONTROL PLAN**



February, 2014

EXPOSURE DETERMINATION

The following employee job classifications are Category A due to expected occupational exposure to blood or other potentially infectious material (OPIM),* regardless of frequency. The exposure determination is made without regard to the use of personal protective equipment:

| <u>Category "A" Job Classification</u> | <u>Rationale/Task</u> |
|--|--|
| Athletic Trainers | Administering First Aid |
| Custodians | Blood or OPIM clean up |
| Custodial Specialists | Blood or OPIM clean up |
| First Aid/CPR/AED Trained Staff | Administering First Aid, CPR/AED |
| Certain College of HHS Faculty/Staff | Sharps/Needles/Blood or OPIM exposure |
| Laboratory workers | Sharps exposure/specimens |
| Laundry workers | Exposure to contaminated laundry |
| Maintenance workers | Maintenance of plumbing systems |
| Police Officers | Administering First Aid, CPR/AED |
| Plumbers | Maintenance of plumbing/sanitary sewer systems |

Compliance Methods:

Universal precautions will be observed at SVSU, including clinical laboratory science labs for the provision of first aid, the removal of sharps and waste from the first aid station, and the housekeeping of any first aid area in order to prevent contact with blood or OPIM. All blood and OPIM will be considered infectious regardless of the perceived status of the source individual.

Engineering and work practice controls will be used to reduce or eliminate potential employee exposures to human blood and body fluids. Where occupational exposure remains, after institution of these controls, personal protective equipment will also be used and includes hand washing and housekeeping practices. (Also, see Needles, page 3). Where scissors or any other tool/equipment are used in a medical procedure and become contaminated they will be decontaminated using a germicide approved by the Environmental Protection Agency, such as, Envirox Concentrate 118, EPA registration # 69268-2.

* Other potentially infectious materials include: A) semen, B) vaginal secretions, C) amniotic fluid, D) cerebrospinal fluid, E) peritoneal fluid, F) pleural fluid, G) pericardial fluid, H) synovial fluid, I) saliva in dental procedures, J) any body fluid that is visibly contaminated with blood, K) all body fluids in situations where it is difficult or impossible to differentiate between body fluids. Urine, feces and vomit are not considered OPIM except in cases (J) or (K) above.

Hand washing facilities are available to the employees who incur exposure to blood or other potentially infectious materials. MIOSHA requires that these facilities be readily accessible after incurring exposure. Hand washing facilities are located throughout campus. There are numerous public restrooms, lockers/showers rooms, and hand washing facilities in custodial closets.

Upon providing first aid or incurring exposures when hand washing facilities are not feasible, the employer is required to provide either an antiseptic cleanser in conjunction with a clean cloth/paper towels or antiseptic towelettes. If these alternatives are used, then the hands are to be washed with soap and running water as soon as feasible.

After removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.

If employees incur exposure to their skin or mucous membranes, then those areas shall be washed or flushed with water as appropriate as soon as feasible following contact.

Needles

Are used in College of Health & Human Services teaching classrooms/labs, and they must not be recapped unless required by a medical procedure, must not be bent or broken and must be disposed of in a labeled, closeable, leak proof, puncture-resistant container. Sharps containers are provided in these locations. Custodial staff will pick up full containers to dispose of in designated labeled biohazard bins located in HHS, REC, West Complex, Pioneer Hall, and Ryder Center.

Work Area Restrictions

In work areas (i.e., in exam/training rooms/laboratories) where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. All procedures involving blood or other potentially infectious materials will be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

Personal Protective Equipment

All first aid personal protective equipment used in patient treatment, first aid or housekeeping involving blood or OPIM will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or OPIM to pass through or reach the employee's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

Protective clothing will be provided to first aid and housekeeping employees involved in first aid in the following manner: the managers of the appropriate work unit will provide the PPE.

The following PPE is used:

| Personal Protective Equipment | Task |
|--|--|
| Utility Gloves | Spill/clean up responders, custodial, maintenance workers |
| Lab Coat | Laboratories where workers may be working w/ blood or OPIM |
| Clinic Jacket or Uniforms | Health & Human Services faculty, teaching lab |
| Protective Eyewear (with solid side shield) | Custodial, maintenance, plumbers, Health & Human Services teaching lab workers, spill cleanup responders First aid responders where the possibility of splashing, spraying, spattering or aerosolization of blood or OPIM is possible. This includes emptying of foley, catheters, ostomies, etc. |
| CPR (one way resuscitation shield) | First Aid responders |
| Examination Gloves | First Aid responders, Health & Human Services faculty, teaching labs, laboratories where workers may be working w/blood or OPIM. |

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to employees. All repairs and replacements will be made by the employer at no cost to employees.

All personal protective equipment will be removed prior to leaving the work area. If visibly contaminated, the equipment shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal. The following procedure has been developed to facilitate leaving the equipment at the work area: Labs have designated areas to place PPE and custodial/maintenance & police employees are assigned PPE they use exclusively. All employees are to dispose of visibly contaminated PPE in designated biohazard containers located in the designated classrooms/labs, shops and police department. Custodial employees will pick up and place full biohazard containers in designated labeled bags to place in labeled biohazard bins located in receiving areas in HHS, REC, West Complex, Pioneer Hall, Health Sciences Building and the Ryder Center. These bins will be picked up by a licensed biohazard waste disposal vendor.

If an employee were to have another person's blood or OPIM splash or soak their clothing, they would make arrangements to remove the contaminated clothing as soon as possible. This clothing would be laundered at SVSU's expense. The clothing would be identified as contaminated and any employee, of any employer, exposed to it would be notified and protected from exposure.

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Gloves will be available from custodial and maintenance managers, in their respective areas.

Disposable gloves used are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibits other signs of deterioration or when their ability to function as a barrier is compromised.

Housekeeping

First aid stations and areas involved in a first aid incident will be cleaned and decontaminated according to the following schedule: daily and as soon after any incident.

Decontamination will be accomplished by utilizing the following materials: bleach solutions or EPA registered tuberculocidal germicides. If a bleach and water solution between 1:100 and 1:10 is used, it must be prepared on an as needed basis. Bleach loses its disinfectant quality when stored in water. Bleach solutions must be made fresh within 24 hours and not stored in glass containers, as they break down in sunlight.

All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or OPIM materials, as well as the end of the work shift if the surface may have become contaminated since the last cleaning.

Regulated Waste Disposal

All bins, pails, cans, and similar receptacles for regulated waste disposal in the first aid station or any area normally involved in first aid shall be appropriately colored or labeled as containing biohazards and shall be inspected, emptied and decontaminated on a regularly scheduled basis. Disposal of feminine hygiene products and bandages or Kleenex used in self-administered first aid (bloody nose, small cut) are not considered regulated waste and will be disposed of in the normal waste stream. Biohazard receptacles are located in HHS, REC, West Complex, Pioneer Hall and Ryder Center receiving areas. The bins are scheduled for quarterly pick up & disposal by a licensed bio-hazardous waste disposal vendor.

Standard Operating Procedures

Standard operating procedures (S.O.P.'s) provide guidance and information on the anticipated tasks assigned to our employees. They will be based on departmental plans and the form found in Appendix A. These S.O.P.'s will be utilized in employee training. Departments must ensure that their S.O.P.'s are complete and up to date and copies kept with this BID program. This is S.O.P is a frequently cited violation from state inspectors.

Contingency Plans

Where circumstances can be foreseen in which recommended standard operating procedures could not be followed, the employer shall prepare contingency plans for employee protection, incident investigation and medical follow-up. See Appendix A.

Hepatitis B Vaccine

All regular and part-time temporary employees who have been identified as having exposure to blood or OPIM will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine will be offered within 10 working days of their initial assignment to work involving the potential for occupational exposure to blood or OPIM unless the employee has previously had the vaccine, is allergic to the vaccine or wishes to submit to antibody testing which shows the employee to have sufficient immunity.

Employees who decline the Hepatitis B vaccine will sign a copy of the attached waiver (see Appendix B).

Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided at no cost. The SVSU Human Resources office has responsibility for assuring that the vaccine is offered, the waivers are signed, etc. The University Health Center will administer the vaccine.

Post-Exposure Evaluation and Follow-Up

When an employee incurs an exposure incident, it must be reported to the Human Resources office and Director, Environmental Health & Safety.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up by a licensed physician in accordance with the MIOSHA standard.

This follow-up will include the following:

- Documentation of the route of exposure and the circumstances related the incident.
- If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity.
- Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
- The employee will be offered the option of having their own blood collected for testing of their HIV/HBV serological status. The blood sample will be preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV serological status.

However, if the employee decides prior to that time that testing will be conducted then the appropriate action can be taken and the blood sample discarded.

- The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service in consultation with a licensed physician treating the exposed employee.
- The employee will be given appropriate, confidential counseling concerning precautions to take during the period after the exposure incident, including counseling on risk reduction and the risks and benefits of HIV testing in accordance with state law. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.
- The Human Resources office has been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to this policy.

Interaction with Health Care Professionals

The Human Resources office shall ensure that the health care professional who is responsible for the hepatitis B vaccination is provided with a copy of these rules and appendices. A written opinion shall be obtained from the health care professional who evaluates employees of this facility. Written opinions will be obtained in the following instances:

- 1) When the employee is sent to obtain the Hepatitis B vaccine.
- 2) Whenever the employee is sent to a health care professional following an exposure incident.

Health care professionals shall be instructed to limit their written opinions to:

- 1) Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident;
- 2) A statement that the employee has been informed of the results of the evaluation, and;
- 3) A statement that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. (Note: The written opinion to the employer is not to reference any personal medical information.)
- 4) Any limitations on the employee's use of personal protective clothing or equipment.

Training

Training for all Category A employees will be conducted prior to initial assignment to tasks where occupational exposure may occur. Training will be conducted in the following manner:

Training for employees will include the following an explanation of:

- 1) The MIOSHA standard for Bloodborne Infectious Disease
- 2) Epidemiology and symptomatology of bloodborne diseases
- 3) Modes of transmission of bloodborne pathogens
- 4) This Exposure Control Plan, (i.e. points of the plan, lines of responsibility, how the plan will be implemented, access to the plan, etc.)
- 5) Procedures which might cause exposure to blood or other potentially infectious materials at

- this facility.
- 6) Control methods which will be used at the facility to control exposure to blood or other potentially infectious materials.
 - 7) Personal protective equipment available at this facility and who should be contacted concerning its use.
 - 8) Post Exposure evaluation and follow-up
 - 9) Signs and labels used at the facility
 - 10) Hepatitis B vaccine program at the facility

Training sessions shall afford employees ample opportunity for discussion and the answering of questions by a knowledgeable trainer.

The training shall include opportunities for supervised practice with personal protective equipment and other equipment which is designed to reduce the likelihood for exposure and which will be used in the employee's work.

Training will be conducted using videotapes, computer-based, written material, etc. The individual department managers are responsible for conducting the training. The training must include an opportunity to ask questions of a knowledgeable person. Such a person would have knowledge in epidemiology and disease transmission, etc. The department manager may assistance and resource support if some questions need follow up.

All Category A employees will receive annual refresher training. (Note: This training is to be conducted within one year of the employee's previous training.)

Recordkeeping

The Human Resources office shall establish and maintain a record for each employee with occupational exposure to include:

- Name
- Social Security Number
- Hepatitis B vaccine from status
- Copies of any past exposure/evaluation or follow-up
- Employer shall ensure record confidentiality
- Kept for duration of employment plus 30 years

Training Records:

- Date(s)
- Summary of Contents
- Names and qualifications of trainers
- Names and job titles of all trainees
- Maintain records for three (3) years

Records shall be kept by the Human Resources and/or department in which the employee is assigned

Annual reviews: Date: _____ Performed by:

 Date: _____ Performed by:

 Date: _____ Performed by:

APPENDIX A
DEPARTMENTAL STANDARD OPERATING PROCEDURE
FOR BLOODBORNE INFECTIOUS DISEASE CONTROL MEASURES

Task/Procedure:

Exposure Potential:

Personal Protective Equipment:

Use:

Maintenance/Disinfection:

Disposal:

Engineering Controls:

Work Practice Controls:

Management of Exposure Incidents:

Contingency Plan:

APPENDIX B

Saginaw Valley State University Hepatitis B Vaccination Declaration

A safe and effective vaccine is available for protection from Hepatitis B. While the University strongly encourages employees to be vaccinated, accepting vaccination is not a condition of employment. This vaccine is available at no cost to the employee. Immunization usually requires three injections over a six-month period. Hepatitis B vaccination is made available after the employee has received required training (Bloodborne Pathogens) and within 10 working days of initial assignment to employees who have occupational exposure [per MIOSHA Part 554 Bloodborne Infectious Diseases].

Please check the appropriate box:

- I have already received the Hepatitis B vaccine.
Approximate date of vaccine: _____
I received the vaccine at: _____
- I wish to receive the Hepatitis B vaccine.
- I do not wish to receive the Hepatitis B vaccine at this time.

If you wish to **decline** the Hepatitis B vaccine at this time, please read and sign the statement below.

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given this opportunity to be vaccinated with hepatitis B vaccine at no charge to myself. However, I decline the hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Name: _____
(Print) (Signature)

Date: _____ Department: _____

Submit the completed form to your supervisor. The supervisor will either file the form (if vaccination is declined) or make arrangements with the medical provider for vaccination (if accepted).

If you have any questions, please contact the supervisor.

SVSU Supervisor to forward copies of completed form to SVSU Human Resources & Director, Environmental Health & Safety

APPENDIX C

**SAGINAW VALLEY STATE UNIVERSITY
HEPATITIS B VACCINATION AUTHORIZATION**

All Hepatitis B immunizations are billed to employee's departmental account. All accounting information must be given before the Hepatitis B vaccination series of injections is initiated.

Department Account Number: _____

Authorized signer for account number:

Signature: _____

Please Print:

Employee Name: _____ I.D. # (if known) _____

Department: _____ Job Title: _____

Supervisor's Name: _____ Phone: _____

This completed form can be taken to University Health Center to initiate the Hepatitis B series of immunizations.

University Health Center
2970 Pierce Road
University Center, MI 48710
(989) 583-0285
uhc@chs-mi.com

Hours of Operation
Monday – Saturday: 8:00am – 8:00pm
Sunday 9:00 a.m. – 3:00 p.m.

SVSU Supervisor to forward completed copies of this form to: SVSU
Controller & Director, Environmental Health & Safety

**APPENDIX D
SVSU EMPLOYEE EXPOSURE INCIDENT FORM**

In the event of an exposure incident, two forms must be completed: (1) *the Incident Report* form (completed by University Police) and (2) the information on this form (completed by the immediate supervisor). The information provided below is intended to assist in evaluating the control methods used and to prevent future employee exposures.

Name of Person _____ Department _____

Incident Date _____ Time _____

Incident: Mark in each column, as appropriate

| <i>Incident:</i> | <i>Injury type:</i> | <i>Body Part Injured:</i> |
|--|--|--------------------------------------|
| <input type="checkbox"/> Cut: | <input type="checkbox"/> Abrasion | <input type="checkbox"/> Finger |
| <input type="checkbox"/> Exposure: | <input type="checkbox"/> Laceration | <input type="checkbox"/> Hand |
| <input type="checkbox"/> Body Fluids | <input type="checkbox"/> Puncture | <input type="checkbox"/> Arm |
| <input type="checkbox"/> Infectious Material | <input type="checkbox"/> Mucous Membrane | <input type="checkbox"/> Eye |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |

Description of Incident

Protective equipment used:

| | | |
|---|---|--------------------------------|
| <input type="checkbox"/> Gloves | <input type="checkbox"/> Protective Sleeves | <input type="checkbox"/> Other |
| <input type="checkbox"/> Goggles | <input type="checkbox"/> Lab Coat | |
| <input type="checkbox"/> Face Mask/shield | <input type="checkbox"/> Gown | |

Seen by:

| |
|--|
| <input type="checkbox"/> University Health Center |
| <input type="checkbox"/> No Medical Treatment sought |
| <input type="checkbox"/> Emergency Treatment Center |

What changes need to be made to prevent reoccurrence?

Report prepared by: _____

Position _____

Please send completed form to: SVSU Human Resources & Director, Environmental Health & Safety

STANDARD OPERATING PROCEDURE FOR BLOODBORNE INFECTIOUS DISEASE CONTROL MEASURES

Task/Procedure: Cleanup of Small Blood or OPIM Spills.

Follow these procedures for cleaning up spills of blood and blood products. The same procedures can be used for cleaning up other body fluids. For larger spills that go beyond your ability to clean with the supplies on hand, contact your supervisor.

Exposure Potential: Minimal

Personal Protective Equipment:

Use: Gloves, rubber, latex or PVC or similar type

Maintenance/Disinfection: The following items may be needed in handling the spill:

- 10% bleach solution (or Lysol, virex or other EPA reg. Tuberculocidal)
- biohazard bags/labels
- leak-proof sharps containers
- brush & dustpan, or tongs or forceps for picking up sharps
- disinfectant wipes

SPILL DECONTAMINATION PROCEDURES

Cover the spill area with a paper towel and then pour freshly mixed 10% bleach and water solution. Allow solution to soak into the contaminated material. Work from the outside edges of the spill inward when applying the bleach solution.

Any glass, needles, or other sharp objects that may puncture the skin will not be picked up by hand. Only mechanical means such as a brush and dustpan, tongs, or forceps are allowed.

Wipe up bleached material with paper towels or absorbent pads. It may be necessary to use a scrub brush to remove the material if it impacted a hard porous surface such as concrete. If non-porous surfaces, such as a carpet have been contaminated, an outside vendor may be needed to clean the area.

Disposal: Place bleached material, gloves and other disposable materials into a labeled biohazard bag and place into either another labeled biohazard bag or container. Ensure lids are firmly sealed on all waste containers when spill cleanup is complete

Engineering Controls: Dispose of needles and sharps or broken glass in sharps container

Work Practice Controls: WASH YOUR HANDS.

If hand-washing facilities are not available at the job site use disinfectant wipes and then wash your hands as soon as possible.

DECONTAMINATE RE-USEABLE EQUIPMENT

Decontaminate with the bleach solution all potentially contaminated re-useable tools or protective equipment used in the cleanup. This includes dustpans, brooms, forceps, buckets, etc. Anything that cannot be effectively cleaned (bleach solution must be able to make contact with all surfaces) must be disposed as waste. After the contaminated area has been cleaned, use fresh water to remove bleach residue from all surfaces.

Management of Exposure Incidents: BIOHAZARD EXPOSURE

If you believe you were exposed (skin puncture or splash to eyes or mucous membranes) to biohazard material that had not been decontaminated with the bleach solution follow these recommended steps:

- Skin exposure: Vigorously wash affected skin with plenty of soap and water while removing contaminated clothing and shoes.
- Eye exposure: Wash eyes for at least 10-15 minutes with copious amounts of water, lifting the upper and lower eyelids occasionally.
- Seek follow-up medical attention by contacting your supervisor for referral to the University Health Center

Contingency Plan: N/A.