



OCCUPATIONAL EXPOSURE TO BLOODBORNE PATHOGENS CONTROL PLAN

OSHA Standard (29 CFR 1910.1030)

(Replaces MVCC Dormitory Corporation Bloodborne Pathogens Exposure Control Plan, 1992). 2014.
Annual review for 2015/16, 2016/17, 2017/2018, 2018/2019

Source: "Model Plans and Programs for the OSHA Bloodborne Pathogens..."(OSHA 3186-06R
2003), 2014

The MVCC Dormitory Corporation is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this endeavor, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA Standard 29 CFR 1910.1030, "Occupational Exposure to Blood Borne Pathogens."

The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- ❖ Determination of employee exposure.
- ❖ Implementation of various methods of exposure control, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping
- ❖ Hepatitis B vaccination.
- ❖ Post-exposure evaluation and follow-up.
- ❖ Communication of hazards to employees and training.
- ❖ Recordkeeping.
- ❖ Procedures for evaluating circumstances surrounding an exposure incident.

The methods of implementation of these elements of the standard are discussed in the subsequent pages of this ECP.

PROGRAM ADMINISTRATION

- ❖ The Supervisor of Residence Hall Facilities and Chief Housing Administrator, at the direction of the MVCC Environmental Health & Safety Officer, are responsible for the implementation of the ECP. They will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact location is Alumni College Center, Room 208.
- ❖ Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.
- ❖ In consultation with the MVCC Environmental Health & Safety Officer, the Supervisor of Residence Hall Facilities will maintain and provide all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. He/she will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes. Contact: Huntington Hall Office.
- ❖ The MVCC Environmental Health & Safety Officer will be responsible for ensuring that all medical actions required are offered and that appropriate employee health and OSHA records are maintained.
- ❖ The above will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives.

EMPLOYEE EXPOSURE DETERMINATION

The following is a list of all job classifications at our establishment in which **all** employees have occupational exposure:

<u>JOB TITLE</u>	<u>DEPARTMENT/LOCATION</u>	TASK/PROCEDURE, I.E.
<i>Maintenance Worker</i>	<i>Dormitory Corporation</i>	Routine maintenance in lavs./common area, incident response.
<i>Housekeeper</i>	<i>Dormitory Corporation</i>	Routine cleaning in lavs./common area, incident response.
<i>Resident Directors & Asst. Director of Residence Life</i>	<i>Dormitory Corporation</i>	<i>Incident clean-up</i>

The following is a list of job classifications in which **some** employees at our establishment have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

JOB TITLE

DEPARTMENT/LOCATION

TASK/PROCEDURE

Resident Assistant(& alternate title) Residence Life

Voluntary incident clean-up

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions

Employees will be trained on universal precautions.

Exposure Control Plan

Employees covered by the blood borne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in annual refresher training. All employees have an opportunity to review this plan at any time on-line at the employee benefits website. If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

The Supervisor of Residence Hall Facilities and Chief Housing Administrator are responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Engineering Controls and Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to blood borne pathogens. The specific engineering controls and work practice controls used are listed below:

- ❖ Use of protective equipment and supplies.
- ❖ No one is required to provide medical care.

Sharps disposal containers are inspected and maintained or replaced by Supervisor or Residence Hall Facilities whenever necessary to prevent overfilling.

This facility identifies the need for changes in engineering control and work practices through general observation and employee feedback, new laws, MVCC Dormitory Corporation new practices.

We evaluate new procedures or new products regularly by remaining current in field via such methods as listserv participation and communication with risk managers.

Both front line workers and management are involved in this process at yearly in-services.

Personal Protective Equipment (PPE)

PPE is provided to our employees at no cost to them. Training is provided by the Supervisor of Residence Hall Facilities and others in the use of the appropriate PPE for the tasks or procedures employees will perform.

The types of PPE available to employees are as follows:

Gloves, smock, eye protection, mask. "Kwik Kit" clean up bags.

PPE is distributed by Supervisor and may be obtained through the Huntington Hall Office. Any employee who is not able to obtain PPE in that office should not complete the task until obtaining the PPE. Kwik Kit clean up bags are also in the Bellamy Hall Office.

All employees using PPE must observe the following precautions:

- ❖ Wash hands immediately or as soon as feasible after removal of gloves or other PPE.
- ❖ Remove PPE after it becomes contaminated, and before leaving the work area.
- ❖ Used PPE may be disposed of in general trash or Huntington Hall Office Red Container.
- ❖ Wear appropriate gloves when it can be reasonably anticipated that there may be hand contact with blood or OPIM (*other potentially infectious materials*), and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, contaminated, or if their ability to function as a barrier is compromised.
- ❖ Utility gloves (11mil) may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.

- ❖ Never wash or decontaminate disposable gloves for reuse.
- ❖ Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM or other hazard pose a hazard to the eye, nose, or mouth.
- ❖ Remove immediately, or as soon as feasible, any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

The procedure for handling used PPE is as follows:

Dispose in general trash. If contaminated with regulated waste, dispose of in red bag in Huntington Hall Office.

Housekeeping

Regulated waste is placed in red bags which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see Labels), and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling **sharps disposal containers** is:

Utilize sharps containers in Huntington Hall Office or the Health Center.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak-proof on sides and bottoms, and labeled or color-coded appropriately. Sharps disposal containers are available at Huntington Hall Office or Health Center.

Bins & pails (e.g., wash basins) are cleaned and decontaminated as soon as feasible after visible contamination.

Broken glassware which may be contaminated is picked up using mechanical means, such as a brush and dust pan.

Laundry

The following contaminated articles will be laundered by this company:

Limited bed linens.

The following laundering requirements must be met:

- ❖ Handle contaminated laundry as little as possible, with minimal agitation.
- ❖ Place wet, contaminated laundry in leak-proof, labeled or color-coded containers before transport.

- ❖ Wear the following PPE when handling and/or sorting contaminated laundry: gloves, mask.

Labels

The following labeling method(s) is used in this facility:

<u>WASTE TO BE LABELED</u>	<u>LABEL TYPE</u> (size, color, etc.)
Blood and other bodily fluid clean up, i.e. vomit	Red Bag

HEPATITIS B VACCINATION

Supervisors will provide training to employees on Hepatitis B vaccinations, addressing the safety, benefits, efficacy, methods of administration, and availability.

The Hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified in the exposure determination section of this plan in a classification that **all** employees have occupational exposure: Maintenance Workers, Housekeepers & Resident Directors and Assistant Director of Residence Life.

Vaccination is encouraged unless: 1). Documentation exists that the employee has previously received the series, 2). Antibody testing reveals that the employee is immune, or 3). Medical evaluation shows that vaccination is contraindicated.

However, if an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is maintained by the Supervisor of Residence Hall Facilities. Vaccination will be provided at the Oneida County Health Department. The employee will be given a voucher for the vaccination cost from the Health Center. If an employee elects to receive vaccine from Personal Healthcare provider instead of the Oneida County Health Department, it is not reimbursable. There is NO expectation that an employee will incur any direct or indirect cost for this vaccination series.

Following a medical evaluation (when the employee discusses the vaccination with a health care professional) a copy of the health care professional's Written Opinion will be obtained and provided to the employee. It will be limited to whether the employee requires the hepatitis vaccine, and whether the vaccine was administered.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, contact any supervisor immediately or Public Safety via an emergency telephone.

An immediately available confidential medical evaluation and follow-up will be conducted by either your physician or a local emergency room. Following the initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- ❖ Document the routes of exposure and how the exposure occurred.
- ❖ Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- ❖ Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- ❖ If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- ❖ Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- ❖ After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV, and HIV serological status.
- ❖ If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

The MVCC Environmental Health & Safety Officer ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's blood borne pathogens standard.

The MVCC Environmental Health & Safety Officer ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- ❖ A description of the employee's job duties relevant to the exposure incident.
- ❖ Route(s) of exposure.
- ❖ Circumstances of exposure.
- ❖ If possible, results of the source individual's blood test.
- ❖ Relevant employee medical records, including vaccination status.

The MVCC Environmental Health & Safety Officer provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING EXPOSURE INCIDENT

The MVCC Environmental Health & Safety Officer will review the circumstances of all exposure incidents to determine:

- ❖ Engineering controls in use at the time.
- ❖ Work practices followed.
- ❖ A description of the device being used (including type and brand).
- ❖ Protective equipment or clothing that was used at the time of the exposure incident (*gloves, eye shields, etc.*).
- ❖ Location of the incident.
- ❖ Procedure being performed when the incident occurred.
- ❖ Employee's training.

The MVCC Environmental Health & Safety Officer & Supervisor of Residence Halls Facilities will record all percutaneous injuries from contaminated sharps in the Sharps Injury Log.

If it is determined that revisions need to be made, *the* chief housing administrator will ensure that appropriate changes are made to this ECP.

EMPLOYEE TRAINING

Employees in a classification in which all or some employees have occupational exposure to blood borne pathogens receive training conducted by the MVCC Environmental Health & Safety Officer or similar qualified trainer, i.e. risk manager.

These employees receive training on the epidemiology, symptoms, and transmission of blood borne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- ❖ A copy and explanation of the standard. .
- ❖ An explanation of our ECP and how to obtain a copy
- ❖ An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident.
- ❖ An explanation of the use and limitations of engineering controls, work practices, and PPE.
- ❖ An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE.
- ❖ An explanation of the basis for PPE selection.
- ❖ Information on the Hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge to employees in a classification where ALL employees have exposure risk.

- ❖ Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM.
- ❖ 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.
- ❖ Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident.
- ❖ An explanation of the signs and labels and/or color coding required by the standard and used at this facility.
- ❖ An opportunity for interactive questions and answers with the person conducting the training session

Training materials for this facility are available from the MVCC Environmental Health & Safety Officer.

RECORD KEEPING

Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least **three years** by the MVCC Environmental Health & Safety Officer and chief housing administrator.

The training records include:

- ❖ The dates of the training sessions.
- ❖ The contents or a summary of the training sessions.
- ❖ The names and qualifications of persons conducting the training.
- ❖ The names and job titles of all persons attending the training sessions.

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the MVCC Dormitory Corporation.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29CFR 1910.1020, "Access to Employee Exposure and Medical Records."

The MVCC Environmental Health & Safety Officer and chief housing administrator are responsible for maintenance of the required medical records. These **confidential** records are kept for at least the **duration of employment plus 30 years**.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to MVCC Dormitory Corporation.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by the MVCC Environmental Health & Safety Officer

Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in the Sharps Injury Log. All incidences must include at least:

- ❖ The date of the injury.
- ❖ The type and brand of the device involved
- ❖ The department or work area where the incident occurred.
- ❖ An explanation of how the incident occurred.

This log is reviewed at least annually as part of the annual evaluation of the program and is maintained for at least five years following the end of the calendar year that they cover. If a copy is requested by anyone, it must have any personal identifiers removed from the report.



OSHA 1910.1030 - HEPATITIS B VACCINE DECLINATION (MANDATORY)

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 the opportunity to be vaccinated with hepatitis B vaccine 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 by making such request in writing to withdraw this waiver to my supervisor.

Employee Name: _____

Employee Signature: _____

Date: _____

Witness Name: _____

Witness Signature: _____