



Policy Title:	Bloodborne Pathogen Exposure Control
Policy Number:	UNIV-428
Revision Date:	May 2022
Policies Superseded:	1870; FINA-713
Policy Management Area(s):	Environmental Health and Safety

SUMMARY:

The purpose of this exposure control plan is to eliminate or minimize employee occupational exposure to human blood or other infectious body fluids.

POLICY:

I. PURPOSE

The purpose of this exposure control plan is to eliminate or minimize employee occupational exposure to human blood or other infectious body fluids, including semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, amniotic fluid and any bodily fluid visibly contaminated with blood. The safety of all employees is the foremost objective of the program as set forth by the University and as defined by OSHA Standard 29 CFR 1910.1030.

II. SCOPE

This standard applies to employees who, during the normal course of their assigned work duties, may come into contact with human blood or potentially infectious bodily fluids.

A. Responsibility – departmental or area supervisors are responsible for ensuring that their employees comply with the provisions of this plan. Each University department is responsible for providing all necessary supplies, such as personal protective equipment, appropriate disinfectants and other supplies as needed, to reduce the risk of an exposure. The Department of Environmental Health and Safety (EHS) will be responsible for training employees, managing the Hepatitis B vaccinations program and infectious waste disposal.

B. Work Practice Controls

1. The “Universal Precaution” method presumes that all individuals carry infectious pathogens in their blood and bodily fluids. All blood or other potentially infectious materials will be considered infectious regardless of

the perceived status of the source individual. This method must be utilized by employees in order to prevent unprotected contact with blood or other potentially infectious materials from another individual.

2. The following work practice controls will be utilized to eliminate or minimize exposure to all employees working at Coastal Carolina University.
 - a. Employees must wash their hands and/or other exposed skin with soap and warm water, or flush mucous membranes with water, as soon as possible following removal of gloves or an exposure incident (such as a splash of blood to the eyes or an accidental needle stick).
 - b. No eating, drinking, smoking, applying cosmetics or lip balm, or handling contact lenses is allowed in a work area where there is a reasonable likelihood of occupational exposure.
 - c. No food or drinks are allowed to be kept in refrigerators, freezers or cabinets, or on shelves, countertops or bench tops where blood or other potentially infectious materials are present.
 - d. Employees must perform all procedures involving blood or other potentially infectious bodily fluids in such a manner so as to minimize splashing, spraying, splattering and generation of droplets of these substances.

C. Decontamination

Clean-up of the infected area and tools will be accomplished by utilizing one of the following materials. Surface contact time with disinfectant must be at least 10 minutes.

1. 10 percent (minimum) solution of chlorine bleach, or
2. Lysol or other EPA-registered disinfectant(s)

D. Infectious Waste

1. University employees who encounter improperly disposed sharps (needles) will notify EHS and Public Safety of the location of the needle(s). EHS will pick up and dispose of the needles. Needles may be moved only by using a mechanical device or tool (forceps, pliers, broom and dust pan). Breaking or sharing of needles is prohibited.
2. Other infectious waste will be placed in containers that are closeable, constructed to contain all contents and prevent leakage of fluids during handling, storage, transportation or shipping. The waste must be labeled or color coded and closed before removal to prevent spillage or protrusion of contents during handling, storage or transport. Biohazard bags and labels are available through the EHS office. Disposal of infectious waste will be handled by a SC-DHEC licensed infectious waste handler.

E. Laundry Procedures

1. Laundry contaminated with blood or other potentially infectious material

will be handled as little as possible. Such laundry must not be sorted or rinsed in the area of use. Employees who have contact with contaminated laundry must wear protective gloves and other appropriate personal protective equipment (PPE).

2. EHS will coordinate cleaning or disposal of contaminated laundry.

F. Personal Protective Equipment (PPE)

1. All 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 other potentially infectious materials to pass through or reach the employee's clothing, skin, eyes, mouth or mucous membranes under normal conditions of use and for the duration of time for which the protective equipment will be used.
2. Each department will provide the appropriate PPE (such as gloves, face shields, eye protection and aprons) to employees and will replace or repair personal protective equipment as necessary, all at no cost to the employees.
3. Employees must:
 - a. Utilize protective equipment in occupational exposure situations.
 - b. Remove garments that become penetrated by blood or other potentially infectious material immediately or as soon as feasible.
 - c. Replace all garments that are torn or punctured, or that lose their ability to function as a barrier to bloodborne pathogens.
 - d. Remove all personal protective equipment before leaving the work area. Place all garments in the appropriate designated area or container for storage, cleaning, decontamination or disposal. Wash hands as soon as possible after removing the PPE.

G. Hepatitis B Vaccine

1. The Hepatitis B vaccination and antibody testing will be made available after the employee has received the training in occupational exposure. It will be made available to all employees who have potential occupational exposure unless a particular employee has previously received the complete Hepatitis B vaccination series, has been deemed immune through antibody testing, or has been diagnosed such that the vaccine is contraindicated for medical reasons.
2. If the employee initially declines Hepatitis B vaccination, but at a later date decides to accept the vaccination, the vaccination will then be made available. All employees who decline the offered Hepatitis B vaccination must sign the OSHA required waiver indicating their refusal. If a routine booster dose of Hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster doses will be made available at no cost to employees.

H. Post-Exposure Evaluation and Follow-up

1. When an employee experiences an exposure, the incident must be documented and reported immediately to the respective supervisor, the EHS Department and the coordinator of risk management.
2. Following a report of exposure, the exposed employee must go to the University's occupational healthcare provider for a confidential medical evaluation and follow-up, including at least the following elements:
 - a. Documentation of the route(s) of exposure
 - b. A description of the circumstances under which the exposure occurred
 - c. Identification and documentation of the individual who was the source of the exposure
 - 1) The identification is not required if the employer can establish that identification is impossible or prohibited by state or local law.
 - d. The collection and testing of the blood for Hepatitis B virus (HBV) and human immunodeficiency virus (HIV) serological status of the individual who was the source of the exposure
3. Post-exposure treatment for the exposed employee, when medically indicated in accordance with the U.S. Public Health Service.
4. Counseling.
5. Evaluation of any illness reported by the exposed employee.
6. The healthcare professional evaluating the exposed employee will be provided with the following information:
 - a. A copy of this plan
 - b. A copy of the Occupational Safety and Health Administration (OSHA) bloodborne pathogen regulations (29 CFR 1910.1030).
 - c. Documentation of the route(s) of exposure
 - d. A description of the circumstances under which the exposure occurred
 - e. Results of the blood testing of the individual who was the source of the exposure, if available
 - f. All medical records applicable to treatment of the exposed employee, including vaccination status
7. The exposed employee will receive a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.
 - a. The healthcare professional's written opinion for Hepatitis B vaccination will be limited to the following:
 - 1) Whether the exposed employee needs a hepatitis vaccination and/or
 - 2) whether the exposed employee has received such a vaccination.
 - b. The healthcare professional's written opinion for post-exposure evaluation and follow-up is limited to the following information:
 - 1) That the employee was informed of the results of the evaluation and

- 2) that the employee was informed of any medical conditions resulting from exposure to blood or other infectious materials that require further evaluation or treatment
- c. All other findings or diagnoses will remain confidential and will not be in a written report.
- d. All medical evaluations will be made by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional. All laboratory tests must be conducted by an accredited laboratory at no cost to the exposed employee. All medical records will be kept in accordance with OSHA standard 29 CFR 1910.1020.

I. Training

- 1. All employees in job classifications listed in subheading J. below will participate in the training program. Training will occur before assignment to a task where a potential occupational exposure could take place. Refresher training will be conducted annually thereafter.
- 2. The training program will include at least the following elements:
 - a. An accessible copy of the regulatory text of 29 CFR 1910.1030 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 exposure control plan and the means by which employees can obtain a written copy of the plan
 - e. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood or other potentially infectious materials
 - f. An explanation of the use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices and personal protective equipment
 - g. Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment
 - h. An explanation of the basis for selection of personal protective equipment
 - i. Information on the Hepatitis B vaccine
 - j. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials
 - k. An explanation of the procedure to follow if an exposure incident occurs
 - l. An opportunity for employees to ask and get answers to questions related to the training session

- J. Job classifications that may have potential for an occupational exposure to blood or other potentially infectious materials:

JOB CLASSIFICATION	TASKS/PROCEDURES
Athletic Coaches	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
Athletic Laundry Services	Handle gym clothes, towels; may be exposed to blood and/or body fluids
Athletic Trainers	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
Custodial Workers	May be exposed to blood and/or other infectious waste
Fire and Life Safety	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
Grounds Workers	May be exposed to infectious waste
Lifeguards	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
Plumbers	May be exposed to infectious waste
Public Safety Officers (Police and security)	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
Recreation (Programming and desk staff)	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
University Housing Staff	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
Student Activities (Programming staff)	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids
Student Health Services Staff	Works with sharps; may be exposed to blood and/or body fluids
Trades Workers (University Housing)	Provide first-aid and/or CPR; may be exposed to blood and/or body fluids