



BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

**J. Sargeant Reynolds Community College
Department of College Safety
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TABLE OF CONTENTS

I.	INTRODUCTION.....	1
II.	GENERAL PROGRAM MANAGEMENT.....	2
	A. RESPONSIBILITIES	2
	B. AVAILABILITY OF THE EXPOSURE CONTROL PLAN TO EMPLOYEES	3
	C. REVIEW AND UPDATE OF THE PLAN.....	4
III.	EXPOSURE DETERMINATION	5
	A. GENERAL DETERMINATION.....	5
	B. JOB CATEGORIES.....	6
IV.	METHODS OF COMPLIANCE	7
	A. UNIVERSAL PRECAUTIONS	7
	B. ENGINEERING CONTROLS	7
	C. WORK PRACTICE CONTROLS	8
	D. PERSONAL PROTECTIVE EQUIPMENT	10
	E. MAINTENANCE AND HOUSEKEEPING (INDOOR AND OUTDOOR)	12
V.	LABELS AND SIGNS.....	14
VI.	HEPATITIS B VACCINATION, EXPOSURE INCIDENT PROCEDURES AND FOLLOW-UP.....	15
	A. HEPATITIS B PROGRAM	15
	B. EXPOSURE INCIDENT PROCEDURES.....	16
	C. POST-EXPOSURE EVALUATION AND FOLLOW-UP.....	16
	D. MEDICAL RECORD KEEPING	18
VII.	EMPLOYEE TRAINING.....	19
	A. TRAINING TOPICS.....	19
	B. TRAINING METHODS	20
	C. RECORD KEEPING.....	20

ADDENDUM A:	21
HOUSEKEEPING AND MAINTENANCE PROCEDURES GUIDE	
ADDENDUM B:	25
SCIENCE LABORATORY PROCEDURES GUIDE	
ADDENDUM C:	27
SECURITY PROCEDURES GUIDE	
ADDENDUM D:	30
MANDATORY HEPATITIS B VACCINATION DECLINATION FORM	
ADDENDUM E:	31
BLOODBORNE PATHOGENS EXPOSURE INCIDENT PROCEDURES	
ADDENDUM F:	33
EXPOSURE INCIDENT INVESTIGATION FORM	
ADDENDUM G	34
TASK AND PROCEDURES RECORD	
ADDENDUM H:	35
HEPATITIS B VACCINATION RECORD	
ADDENDUM I:	36
INFORMATION AND TRAINING RECORD FOR EMPLOYEES WITH POTENTIAL EXPOSURE TO BLOODBORNE PATHOGENS	

BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

I. INTRODUCTION

The OSHA/VOSH 1910.1030 Bloodborne Pathogens Standard was issued to reduce the occupational transmission of infections caused by microorganisms sometimes found in human blood and certain other potentially infectious materials. Although a variety of harmful micro-organisms may be transmitted through contact with infected human blood, Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV) have been shown to be responsible for infecting workers who were exposed in the course of their work to human blood and certain other body fluids containing these viruses.

This Exposure Control Plan has been established by J. Sargeant Reynolds Community College (JSRCC) to minimize and to prevent, when possible, the exposure of JSRCC employees to disease-causing microorganisms transmitted through human blood and to meet the letter and intent of the OSHA Bloodborne Pathogens Standard.

All employees who are exposed to blood and other potentially infectious materials as a part of their job duties (see section III. Exposure Determination) are included in this program. It is the intent of the College that the principles and practices encompassed in this plan will be the standard adhered to by all elements of the college.

This plan will be reviewed at least annually and updated as necessary by the JSRCC College Safety Manager.

II. GENERAL PROGRAM MANAGEMENT

A. RESPONSIBILITIES

There are four major categories of responsibility that are central to the effective implementation of JSRCC's Exposure Control Plan:

- College Safety Manager
- Human Resources Department
- Directors, Managers and Supervisors
- JSRCC Employees, including faculty (both credit and non-credit), staff and students employed by the college

The roles of each of these groups are defined as follows:

1. COLLEGE SAFETY MANAGER

- Maintaining overall responsibility for implementing the Exposure Control Plan
- Working with administrators and other employees to develop and administer any additional policies and practices related to bloodborne pathogens
- Improving the Exposure Control Plan, as well as revising and updating the Plan as necessary
- Acting as liaison during OSHA inspections
- Conducting periodic audits to maintain an up-to-date Exposure Control Plan
- Coordinating and conducting training and maintaining training records
- Administering the vendor inoculation contract

2. HUMAN RESOURCES

- Maintaining medical records for employees who have been exposed to bloodborne pathogens

3. DIRECTORS, MANAGERS AND SUPERVISORS

Directors, Managers and Supervisors are responsible for compliance with established policies and procedures regarding exposure control in their respective areas. They work directly with the College Safety Manager and JSRCC employees to ensure that proper exposure control procedures are followed. They are also responsible for assuring that all new identified employees receive orientation training with respect to the bloodborne pathogens program.

4. EMPLOYEES

Our employees have the most important role in JSRCC's bloodborne pathogens compliance program because the ultimate execution of much of the Exposure Control Plan rests in their hands. In this role they are responsible for such things as:

- Knowing what tasks they perform that have occupational exposure
- Attending the bloodborne pathogens training sessions
- Planning and conducting all operations in accordance with JSRCC policies and procedures and work practice controls
- Developing good personal hygiene habits

B. AVAILABILITY OF THE EXPOSURE CONTROL PLAN TO EMPLOYEES

Specific portions of the JSRCC Exposure Control Plan will be given to employees who have the potential for exposure due to the nature of their job duties during their training session. Employees will be offered a complete copy of the plan as well during the bloodborne pathogens training session. A hard copy of the plan will be maintained in the Safety Office. The plan will also be made available on the Police and Security Services website.

C. REVIEW AND UPDATE OF THE PLAN

To ensure that the JSRCC Exposure Control Plan is kept up-to-date, it will be reviewed and updated by the College Safety Manager:

- Annually, on or before June 1 of each year
- Whenever new or modified tasks and procedures are implemented which affect occupational exposure of our employees
- Whenever employees' jobs are revised such that new instances of occupational exposure may occur
- Whenever new functional positions are established at JSRCC that may involve exposure to bloodborne pathogens

III. EXPOSURE DETERMINATION

A. GENERAL DETERMINATION

All job categories in which it is reasonable to anticipate that an employee will have skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials (listed below) will be included in this Exposure Control Plan. Exposure determination is made without regard to the use of personal protective equipment.

Other Potentially Infectious Materials (as defined by OSHA)

Body Fluids:

- amniotic fluid
- any body fluid visibly contaminated with blood
- cerebrospinal fluid
- pericardial fluid
- peritoneal fluid
- pleural fluid
- saliva
- semen
- vaginal secretions

Other Materials:

- Any unfixed tissue or organ (other than intact skin) from a human (living or dead)
- HIV/HBV containing cell or tissue cultures, organ cultures, and culture medium
- Blood, organs or other tissue from experimental animals infected with HIV or HBV

Unless they contain blood, OSHA does not list the following body fluids as HIV/HVB transmission sources: urine, feces, mother's milk, vomit or tears.

B. JOB CATEGORIES

All employees who have the potential of being exposed to bloodborne pathogens due to the nature of their employment duties are included in the Exposure Control Plan. The Plan does not include students other than those employed by the College; however, it is encouraged that students who are at risk of exposure due to their studies receive appropriate instructions by the academic department supervising their educational programs. The job categories that fall under this plan include, but are not limited to:

- Faculty Members (credit and non-credit), Assistants, Classified Staff and Working Students involved in areas such as:
 - Auto/Diesel Mechanics
 - Natural Sciences
 - Biology
 - Chemistry
 - Opticianry
 - Dental Assisting
 - Occupational Therapy
 - Medical Lab Technology
 - Physical Education
 - Health
 - Respiratory Therapy
 - Nursing
 - Police/security Personnel
 - Maintenance Personnel
 - Housekeeping Personnel
 - Any other faculty, staff or student employee who may be exposed to body fluids as a result of his/her occupational duties.
- Directors, Managers and Supervisors are responsible for identifying their “at risk” positions and the persons in those positions and informing the College Safety Manager.

In order to help employees in these job categories function in accordance with this plan, an Exposure Control Policy specifically pertaining to Maintenance and Housekeeping is attached as Addendum A, an Exposure Control Policy specifically pertaining to laboratory disciplines is attached as Addendum B, and an Exposure Control Policy specifically pertaining to Police and Security Services is attached as Addendum C.

IV. METHODS OF COMPLIANCE

A. UNIVERSAL PRECAUTIONS

At JSRCC, all blood or other potentially infectious materials (as described in III. Exposure Determination) shall be handled as if contaminated by a bloodborne pathogen. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

B. ENGINEERING CONTROLS

One of the key components of JSRCC's Exposure Control Plan is the use of engineering controls to eliminate or minimize employee exposure to bloodborne pathogens. As a result, the college shall use equipment such as sharps disposal containers, ventilating laboratory hoods and biologic safety cabinets as appropriate. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.

The College Safety Manager will conduct periodic inspections to identify:

- Areas where engineering controls are currently used
- Areas where engineering controls can be updated
- Areas currently not using engineering controls, but where they would be beneficial

The following engineering controls are used throughout the College where there is the possibility of exposure to bloodborne pathogens:

- Hand washing facilities that are easily accessible to the areas where there is the possibility of exposure to bloodborne pathogens. Where it is not feasible to have easily accessible hand washing facilities, germicidal towelettes or other disinfecting controls will be available.
- Containers for contaminated sharps that are:
 - Puncture resistant
 - Leak-proof on the sides and bottom
 - Labeled with a biohazard label or color-coded

- Specimen containers that are:
 - Puncture resistant when necessary
 - Leak-proof
 - Labeled with a biohazard label or color-coded

C. WORK PRACTICE CONTROLS

In addition to engineering controls, JSRCC uses a number of work practice controls to eliminate or minimize employee exposure to bloodborne pathogens. The Directors, Managers and Supervisors, along with support from the College Safety Manager, will ensure that JSRCC has adopted the following work practice controls:

1. HAND WASHING AND OTHER HYGIENE MEASURES

Employees shall wash their hands thoroughly using soap and water or germicidal towelettes whenever hands become contaminated and as soon as possible after removing gloves or other personal protective equipment.

When other skin areas or mucous membranes come in contact with blood or other potentially infectious materials, the skin shall be washed with soap and water, and the mucous membranes shall be flushed with water as soon as possible.

Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses are prohibited in work areas where there is a potential for exposure to bloodborne pathogens.

Food and drink shall not be kept in refrigerator, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present.

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

Employees shall use practices to minimize splashing, spraying, spattering, and generation of droplets during procedures involving blood or other potentially infectious materials.

2. MANAGEMENT OF SHARP OBJECTS

Shearing or breaking of contaminated needles is prohibited. Contaminated needles and other contaminated sharp objects shall not be bent, recapped or removed unless:

(a) it can be demonstrated that there is no feasible alternative or

(b) the action is required by specific medical procedure

In the above circumstances, recapping or needle removal is accomplished only through the use of a mechanical device or a one-handed technique.

Sharp object containers shall be closable, puncture resistant, labeled with a biohazard label or color-coded in red, leak proof on the sides and bottom, and maintained upright as long as they are in use. They shall be located where they are easily accessible to personnel and as close as is feasible to the immediate area where sharps are used.

Contaminated disposable sharp objects and contaminated broken glass shall be discarded as soon as possible after use in sharp object containers. Reusable contaminated sharp objects shall be placed in a reusable sharps container and will be decontaminated by autoclaving or otherwise properly processed as soon as feasible.

Overfilling of sharp object containers creates a hazard when needles protrude from openings. To eliminate this possibility, nearly full containers shall be promptly disposed of (or, in the case of reusable sharp objects, emptied and decontaminated) and replaced. The position responsible for maintaining the sharp object containers for science labs at each campus shall be designated by the Dean of Mathematics and Science and the Dean of Health Sciences for their respective areas. If applicable, the position responsible for maintaining the sharp object containers for maintenance and housekeeping shall be designated by the Director of Facilities Management. If applicable, the position responsible for maintaining the sharp object containers for police/security shall be designated by the Chief of Police and Security Services. The College Safety Manager shall be notified of each designated position.

3. HANDLING SPECIMENS

Specimens of blood or OPIM (other potentially infectious materials) shall be placed in a container that prevents leakage during collection, handling, processing, storage, transport or shipping. The container must be closed before being stored, transported or shipped. Containers shall be labeled with a biohazard label if they leave the facility. All specimens at

JSRCC shall be handled using universal precautions, therefore labeling is not necessary for those specimens used in house.

If the outside of the primary specimen container becomes contaminated or punctured, it shall be placed inside a secondary container which prevents leakage and resists puncture during handling, processing, storage, transport or shipping.

4. MANAGEMENT OF CONTAMINATED EQUIPMENT

Equipment will be assessed for contamination and decontaminated, if possible, before servicing or shipping. Any equipment that has not been fully decontaminated will be labeled as to which parts remain contaminated. The department controlling the equipment will be responsible for assuring that equipment is assessed and decontaminated and the procedure that is to be used, and notifying the College Safety Manager.

D. PERSONAL PROTECTIVE EQUIPMENT

Directors, Managers and Supervisors, with assistance of College Safety Manager, will identify and provide personal protective equipment for employees in their respective areas and will inform Purchasing of personal protective equipment needs. All personal protective equipment will be provided, repaired, cleaned and disposed of by JSRCC at no cost to the employees. This equipment includes, but is not limited to:

- Gloves (Hypoallergenic gloves are available for staff who are allergic to the gloves JSRCC normally use)
- Gowns
- Aprons
- Laboratory Coats
- Face Shields
- Masks
- Eye Protection
- Mouthpieces
- Pocket Masks

Employees will wear personal protective equipment when performing procedures in which exposure to the skin, eyes, mouth or other mucous membranes is anticipated.

The College Safety Manager, will coordinate training for Directors, Managers, and Supervisors. Directors, Managers, and Supervisors will be responsible for ensuring that required training is conducted for all new and current employees regarding the use of the appropriate personal

protective equipment for their job classifications and tasks or procedures they perform. Additional training will be provided if an employee takes a new position or new job functions are added to his/her current position. To determine whether additional training is needed, the employee's previous job classification and tasks will be compared to those for any new job or function that they undertake.

To ensure that personal protective equipment is used as effectively as possible, employees will adhere to the following practices:

- All personal protective equipment will be inspected periodically by Directors, Managers and Supervisors and repaired or replaced as needed.
- Any garments or equipment penetrated by blood or other potentially infectious materials will be removed immediately, or as soon as feasible.
- All personal protective equipment will be removed prior to leaving the work area and will be disposed of or laundered at the facility.
- Gloves will be worn when:
 - there is a possibility of hand contact with blood or OPIM
 - employees perform vascular access procedures
 - handling or touching contaminated items or surfaces
- Disposable gloves are replaced as soon as practical after contamination or if they are torn, punctured or otherwise lose their ability to function as an "exposure barrier."
- Utility (reusable) gloves will be decontaminated for reuse unless they are cracked, peeling, torn or exhibit other signs of deterioration, in which case they will be disposed of properly.
- Masks and eye protection or face shields will be used whenever there is the possibility of splashes, sprays or droplets of blood or OPIM.
- Protective clothing will be worn whenever potential exposure to the body is anticipated.

E. MAINTENANCE AND HOUSEKEEPING (Indoor and Outdoor)

Maintaining JSRCC's campus facilities in a clean and sanitary condition is an important part of the College's Bloodborne Pathogens Exposure Control Plan. To facilitate this, a written Maintenance and Housekeeping Procedures Guide for maintenance and custodial personnel has been developed (see Addendum A). Directors, Managers and Supervisors will also be responsible for assuring that employees maintain the workplace in a clean and sanitary condition.

1. Equipment and Working Surfaces

Equipment and working surfaces that are contaminated will be cleaned with an appropriate disinfectant:

- after completing procedures,
- immediately or as soon as feasible after any spill of blood or other possibly contaminated material,
- at the end of the work shift if the surface may have become contaminated since the last cleaning.

2. Special Sharp Object Precautions

Broken glass that may be contaminated will be cleaned up using mechanical means, such as a brush and dustpan, tongs or forceps. Employees WILL NOT pick-up sharp objects directly with the hands.

Reusable containers will not be opened, emptied or cleaned manually or in any other manner that will expose employees to the risk of percutaneous injury. Employees WILL NOT reach by hand into a container of reusable contaminated sharp objects.

3. Regulated Waste

Regulated waste includes:

- Liquid or semi-liquid blood or other potentially infectious materials

- Contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed
- Items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling

These substances will be placed in containers that are closeable, puncture-resistant, leak proof, if necessary, and labeled with the biohazard label or color-coded in red. The containers will be maintained upright and not allowed to overfill.

Waste containers will be disposed of in accordance with the Virginia Department of Waste Management's Infectious Waste Management Regulations.

V. LABELS AND SIGNS

The most obvious warning of possible exposure to bloodborne pathogens is the use of labels and signs. JSRCC will use both biohazard labels (red-orange or fluorescent orange in color with the biohazard symbol and the text, "BIOHAZARD", in a contrasting color) and bags and equipment that are color-coded in red.

Warning labels will be firmly attached to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material, and any other containers used to store, transport or ship blood or other potentially infectious materials.

VI. HEPATITIS B VACCINATION, EXPOSURE INCIDENT PROCEDURES AND FOLLOW-UP

JSRCC recognizes that exposure incidents can occur even though all exposure prevention practices are strictly followed. As a result, the College will implement a Hepatitis B vaccination program, as well as procedures for post-exposure evaluation and follow-up should exposure to bloodborne pathogens occur.

A. HEPATITIS B PROGRAM

All employees who have been identified as having exposure to bloodborne pathogens will be offered a hepatitis B vaccination series at no cost to them. The vaccination program consists of a series of three injections over a six-month period.

The vaccination will be made available to the appropriate employees after they have attended training on bloodborne pathogens and within ten working days of assignment to a job category with exposure. The vaccination series will not be made available to:

- Any employee who has demonstrated immunity through antibody testing
- Any employee for whom the vaccine is medically contraindicated

Any employee who has a potential for exposure who chooses not to take the Hepatitis B. vaccination will be required to sign a declination statement (see Addendum D). This signed document will be maintained by the College Safety Manager.

Supervisors will be responsible for scheduling time during the employee's normal working hours for the inoculations. The college Safety Manager will administer the contract with the vendor, authorize billing statements and collect and maintain the vaccination records.

B. EXPOSURE INCIDENT PROCEDURES

An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials resulting from the performance of an employee's duties. A list of the procedures to follow in the case of an exposure incident is provided in Addendum E and is TO BE POSTED in all areas where there is the possibility of an exposure incident.

C. POST-EXPOSURE EVALUATION AND FOLLOW-UP

In the event of an exposure incident, JSRCC will immediately investigate the exposure incident and make sure that the employee receives consultation and treatment, if required, as soon as possible.

The Director, Manager, or Supervisor, with the assistance of the College Safety Manager, will investigate every exposure incident that occurs at JSRCC and take immediate action and will report the incident on the appropriate form (see Addendum F). This investigation will include:

- The date and time the incident occurred
- Route of exposure(s)
- Where the incident occurred
- What potentially infectious materials were involved in the incident (blood, amniotic fluid, etc.)
- Under what circumstances the incident occurred, including the type of work being performed
- The cause of the incident, whether by accident or an unusual circumstance such as an equipment malfunction, power outage, etc.
- Any personal protective equipment being used at the time
- Identification and documentation of the source individual, unless identification is infeasible
- Actions taken as a result of the incident

If the infectivity status of the source individual is unknown, the blood will be tested as soon as feasible after the individual's consent is obtained. If consent is not obtained, this will be documented in writing by the person investigating the incident. If the source individual's blood is available and the individual's consent is not required by law, the blood shall be tested and the results documented. The exposed employee will be informed of the results of the source individual's testing.

The exposed employee's blood will be collected as soon as feasible after consent is obtained and will be tested for HBV and HIV serological status.

If the employee does not give consent at the time for HIV serologic testing, the sample shall be preserved for at least 90 days. The appropriate health care facility will be informed of the 90-day requirement. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.

The exposed employee will be offered post-exposure prophylaxis, when medically indicated, as well as counseling and medical evaluation of any reported illnesses.

Blood collection, testing, post-exposure prophylaxis, counseling and medical evaluation will be provided by a designated healthcare facility within reasonable proximity to the campus where the employee works. These services will be provided under Worker's Compensation.

The following information will be provided by the college Human Resources Office to the healthcare professional evaluating an employee after an exposure:

- A copy of the Bloodborne Pathogens Standard
- A description of the exposed employee's duties as they relate to the exposure incident
- The documentation of the route of exposure and the circumstances under which exposure occurred
- Results of the sources individual's blood testing, if available
- All medical records relevant to the appropriate treatment of the employee, including vaccination status

Human Resources will obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation. The written opinion will be limited to the following information:

- The employee has been informed of the results of the evaluation
- The employee has been told of any medical conditions resulting from exposure to blood or other potentially infectious materials that require further evaluation of treatment.

Note: All other findings shall remain confidential and shall not be included in the written report.

In addition, Human Resources will notify the College Safety Manager of the status of medical records.

D. MEDICAL RECORD KEEPING

The Human Resources Office is responsible for keeping all medical records pertaining to an exposure incident. These records include:

- Name of employee
- Social Security number of employee
- The employee's Hepatitis B vaccination status
- Copies of the results of examinations, medical testing and follow-up procedures which took place as a result of the employee's exposure to bloodborne pathogens

VII. EMPLOYEE TRAINING

Having well-informed employees is central to JSRCC's plan to eliminate or minimize risk to employees of the College who are assigned to tasks where exposure may occur will receive comprehensive training as soon as feasible upon implementation of this Exposure Control Plan. Training will also be conducted on an on-going basis for new employees during their orientation. Directors, Managers or Supervisors will provide additional on-the-job training whenever there are changes in tasks or procedures that affect employee's occupational exposure which will be limited to the new exposure situation. The College Safety Manager will be informed of such changes.

The training approach will be tailored to the educational level, literacy and language of the employees. Each training session will include an opportunity for employees to have their questions answered by the trainer. The College Safety Manager is responsible for coordinating and conducting training.

A. TRAINING TOPICS

The topics covered in the JSRCC training programs will include, but will not be limited to:

- An explanation of the Bloodborne Pathogens Standard
- The epidemiology, modes of transmission and symptoms of bloodborne diseases
- JSRCC's Exposure Control Plan, including where employees can obtain a copy
- Procedures that may expose employees to blood or other potentially infectious materials
- Engineering controls and work practice controls to be used at JSRCC
- Selection and use of personal protective equipment, including the types available, proper use, location within the facility, removal, handling, decontamination and disposal.
- Visual warnings of biohazards, including labels, signs and color-coded containers
- Information on the Hepatitis B vaccination program, including the benefits and safety of vaccination
- Information on procedures to use in an emergency involving blood or other potentially infectious materials
- The procedures to follow if an exposure incident occurs
- An explanation of post-exposure evaluation and follow-up procedures
- How to inspect equipment for contamination and how to decontaminate it

B. TRAINING METHODS

JSRCC's training presentations will use several training techniques, including, but not limited to:

- An interactive classroom atmosphere providing ample opportunity for employees to ask questions
- Videotape programs
- Training manuals and employee handouts
- Overheads
- Handouts

C. RECORD KEEPING

The JSRCC College Safety Manager will document the training process and maintain training records containing the following information:

- Dates of the training sessions
- Contents or a summary of the training sessions
- Names and qualifications of the trainer(s)
- Names and job titles of attendees

These records will be kept for a minimum of three years from the date the training took place.

**J. SARGEANT REYNOLDS COMMUNITY COLLEGE
BLOODBORNE PATHOGEN
EXPOSURE CONTROL PLAN**

ADDENDUM A:

HOUSEKEEPING AND MAINTENANCE PROCEDURES GUIDE

Hygiene maintenance of the facilities at J. Sargeant Reynolds Community College includes both the custodial work force and the grounds maintenance and trades staff in general. Custodial contracts, as appropriate, will be accomplished in accordance with contract specifications geared to proper cleaning maintenance.

CUSTODIAL PERSONNEL:

- Wear rubber gloves and lab coats or smocks as appropriate
- Wash hands and arms before every break with an appropriate disinfectant. Clean and disinfect rubber gloves and hand dry during break. Durable, throwaway gloves and permissible
- At the end of the work day or task, clean and disinfect equipment with appropriate disinfectant
- Keep all soap dispensers filled with anti-microbial lotion soap, or the equivalent
- Wear dust masks when vacuuming in the restrooms, as applicable
- Inspect and, as applicable, disinfect and clean bathroom urinals, commode seats and sinks when blood, mucous, or any other contaminated material is suspected. OTHERWISE:
- DAILY CLEANING should include all restrooms and shower/locker rooms, as follows:
 - Wash and clean shower room stalls and locker rooms to include drains
 - Clean and disinfect washbasins, faucets and pipes under basins
 - Clean and disinfect toilets and urinals and floor areas surrounding toilets and urinals
 - Wet mop and disinfect floors
 - Empty all trash containers and replace liners
 - Replenish paper products (paper towels and toilet tissue)
- WEEKLY CLEANING – ALL RESTROOMS AND SHOWER/LOCKER ROOMS:
 - Wash and disinfect entrance doors
 - Wash and disinfect stall partitions
 - Wash and disinfect trash and disposable containers

- MONTHLY CLEANING – ALL RESTROOMS AND SHOWER/LOCKER ROOMS:
 - Wash and disinfect walls
- BI-MONTHLY CLEANING – ALL RESTROOMS AND SHOWER/LOCKER ROOMS:
 - Vacuum and clean all grills and vents to include door and ceiling vents
- MONTHLY CLEANING – ACADEMIC AND ADMINISTRATIVE AREAS:
 - Wash and disinfect all trash containers

If contaminated material is found, immediately deposit it in an appropriately marked contaminated material container.

- Sanitary receptacles in restrooms
 - Ensure that receptacles have liners large enough to tie shut and without the possibility of spillage
 - Empty at least daily

MAINTENANCE (TRADES AND GROUNDS) PERSONNEL:

- Wear rubber gloves when working around commodes, sinks (in restrooms as well as cafeteria), urinals, showers, traps and other catch basins.
- Wear (safety) glasses when working around other than normal tap water (dirty water).
- Cordon off the work area (e.g. close restrooms).
- All personnel assigned to pick up trash on the grounds, as well as in the buildings, must wear rubber gloves. Rubber gloves will be rinsed and disinfected after use with a bleach/water solution or properly disposed of if this type of glove is used.
- After use, or at the end of the day, disinfect all equipment which might be contaminated, such as drain snakes, truck beds, plungers, etc.

GENERAL PRACTICES TO BE FOLLOWED:

- Use Airkem's STAT III heavy duty detergent/disinfectant (see attached), or a suitable substitute that is effective against bacteria, viruses and fungi, including mycobacterium tuberculosis.

- Ensure that first-aid kits located within the maintenance shop and custodial departments are continually updated.
- Report any needles or other drug paraphernalia products that are found in the facility or out side to the Chief of Police and Security Services.
- The Chief of Police and Security Services will enter the incident in the log, notify the Director of Facilities Management and the Vice President of Finance and Administration, the College Safety Manager, and the local police jurisdiction if required.
- Pick up the drug paraphernalia with heavy duty gloves or a mechanical instrument and place it in a puncture-resistant, leak proof container.
- The Chief of Police and Security Services will arrange for transportation of the drug material/contaminator for final disposition.
- Custodial and maintenance personnel will have on standby leak proof and puncture-resistant containers in order to quickly dispose of drug paraphernalia.
- Deposit garments, gloves, or any other personal protective equipment that is contaminated, in an appropriately marked, leak proof contaminated material container and forward it to the applicable laundry or cleaners, or,
- In the case of disposable contaminated waste, deposit it in an appropriately labeled or color-coded leak proof container and taking it to the appropriate area as designated by the contract. The contractor will remove the waste periodically.

➤ **Equipment and Working Surfaces:**

Equipment and working surfaces that are contaminated will be cleaned with an appropriate disinfectant by the using organization:

- After completing procedures
- Immediately or as soon as feasible after any spill of blood or other possibly contaminated material
- At the end of the work shift, if the surface may have become contaminated since the last cleaning

➤ **Special Sharp Object Precautions:**

Broken glass which may be contaminated will be cleaned up using mechanical means, such as a brush and dustpan, tongs, or forceps. DO NOT reach by hand into a container of reusable contaminated sharps. Wear gloves when picking up large pieces of glass.

Reusable containers will not be opened, emptied or cleaned manually or in any other manner that will expose employees to the risk of percutaneous injury. DO NOT reach by hand into a container of reusable contaminated sharps.

➤ **Regulated Waste:**

Regulated waste include:

- Liquid or semi-liquid blood or other potentially infectious materials (mucous, vaginal discharge, etc.)
- Contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed
- Items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling

These substances will be placed in containers that are closeable, puncture-resistant, leak proof, if necessary, and labeled with the biohazard label or color-coded in red. The containers will be maintained upright and not allowed to overfill.

Waste containers will be disposed of in accordance with the Virginia Department of Waste Management's Infectious Waste Management Regulations.-

**J. SARGEANT REYNOLDS COMMUNITY COLLEGE
BLOODBORNE PATHOGEN
EXPOSURE PLAN**

ADDENDUM B:

SCIENCE LABORATORY PROCEDURES GUIDE

The personnel responsible for hygiene maintenance of the science laboratories at J. Sargeant Reynolds Community College includes the Directors, Supervisors, College Safety Manager, and the Science Lab Specialist Senior. To prevent any unnecessary chances for bloodborne pathogen infections, the science labs will no longer perform activities which require the use of body fluids (blood, saliva or urine), either human or animal.

Laboratory personnel will follow these procedures:

DAILY

- Wear a lab coat, smock or apron, and goggles when appropriate.
- Keep anti-microbial soap containers filled and at sinks.
- Clean lab tables and sinks between classes.
- Before leaving lab hands should be washed

IN RESPONSE TO AN ACCIDENT THAT MAY INVOLVE BODY FLUIDS

- Wear disposable (plastic or vinyl) or reusable gloves, lab coat or smock, apron, face shield or mask and goggles.
- Thoroughly clean and disinfect the accident scene IMMEDIATELY afterwards, using a 1:10 dilution of bleach and water (70% ethanol or 70% isopropanol may be substituted) to scrub the equipment, sink and floor when necessary.
- Dispose of contaminated nonreusable items in biohazard bags (autoclave when appropriate). The biohazard bag should then be placed in a covered, leak proof container labeled "BIOHAZARD".
- Disinfect reusable contaminated materials with bleach or an alcohol solution as mentioned above.
- Send contaminated materials containers to the designated campus location for final disposition.
- Cordon off the area, using barrier tape (available from the Lab Safety Supply Company), until the scene of the accident has been disinfected.

SHARP OBJECTS PRECAUTIONS

Sharp objects include broken glass (beakers, thermometers, etc.), scalpels and razor blades, pins, teasing needles and syringes.

They:

- Must be disposed of in the biohazard containers if they have been used where there is a possibility of contamination by body fluids.
- Otherwise, they may be placed in a cardboard box, taped shut and placed in a waste container for disposal.

RELATED WASTE

Regulated waste includes:

- Liquid or semi-liquid blood or other potentially infectious materials
- Contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed
- Items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling

These substances will be placed in containers that are closeable, puncture-resistant, leak proof, if necessary, and labeled with the biohazard label or color-coded in red. The containers will be maintained upright and not allowed to overfill.

Waste containers will be disposed of in accordance with the Virginia Department of Waste Management's Infectious Waste Management's Regulations.

LAUNDRY

When possible, personnel will wear disposable lab coats or aprons when responding to an accident. If this is not possible and the reusable lab coat, smock or apron becomes contaminated, it is not to be taken home for cleaning.

**J. SARGEANT REYNOLDS COMMUNITY COLLEGE
BLOODBORNE PATHOGEN
EXPOSURE PLAN**

ADDENDUM C:

POLICE/SECURITY PROCEDURES GUIDE

Addendum C is provided as a supplement to the J. Sargeant Reynolds Community College Bloodborne pathogens exposure control plan in recognition of the unique circumstances that Police/Security Officers may encounter that would expose them to human blood and other potentially infectious materials.

**EXPOSURE CONTROL PROCEDURES
FOR POLICE/SECURITY OFFICERS**

The College is very concerned about the well being and health of the police/security officers who serve the unique environment of each campus. These procedures are designed to supplement the JSRCC Bloodborne pathogens exposure control plan in providing training and protection to security officers who may be exposed to body fluids where HIV/HBV may exist.

RESPONSIBILITIES

The Chief of Police and Security Services is responsible for monitoring the Exposure Plan's Addendum C, complying with reporting procedures and recordkeeping and for keeping the College Safety Officer informed of exposure incidents.

PROCEDURES

Personal Protective Equipment

All police/security staff shall be issued protective gloves and a protective CPR face shield to be carried in the provided belt carrier at all times while on duty in uniform.

A monthly inspection of all issued protective equipment shall be conducted by the respective campus supervisor to ensure that the equipment is in a serviceable and safe condition and that it is being carried.

A supply of gloves and masks shall be maintained in an accessible location to officers 24 hours a day. An assortment of glove sizes shall be available to accommodate all personnel.

Training Program

The College Safety Manager will coordinate and conduct training with current and new employees of the Police and Security Services Department.

All employees shall participate in an annual retraining and update of the Exposure Plan. If critical new information concerning changes in the methods of exposure control is received, an interim training session shall be scheduled.

Engineering and Work Practice Controls – Situational Responses

Ill/Injured Persons

In all situations where the potential for contact with body fluids from a victim exists, all personnel shall utilize the issued protective equipment available to them, using Universal Precautions and handling all blood or other potentially infectious material as though contaminated by bloodborne pathogens. If CPR is required, all personnel shall use the issued protective shield over the mouth of the victim.

Searches of Persons

In performing searches on individuals where there are unknown fluids present or in circumstances where a search is to be performed, all personnel involved with the search shall, when practical, utilize the protective equipment available. If practical, the person being searched will be instructed to empty his/her own pockets, turning them inside out. This should only be required when officer safety is not compromised.

Crime Scenes

All personnel entering a crime scene where body fluids are present shall apply Universal Precautions, treating all fluid as infectious. All personnel present at the crime scene and/or involved in the collection of evidence, or those who could possibly be exposed to blood or other potentially infectious material, shall use all available personal protective equipment.

Dead Bodies

When an exposure occurs involving a dead body or body part, the Chief of Police and Security Services will contact local authorities, all appropriate college authorities and restrict the area.

Post-Exposure Notification Process

Any member of the department who is involved in a potential or actual exposure, or is aware of another member of the department being involved in a potential or actual exposure, shall notify the Chief of Police and

Security Services, the Safety Manager and the individual's immediate supervisor.

Chief of Police and Security Services Duties

The Chief of Police and Security Services, with the Safety Manager, is responsible for monitoring the Exposure Plan for the department, determining if an actual exposure occurred, and informing the College's Human Resources Office.

Handling Procedures for Infectious Waste

Contaminated Sharp Objects (Non-Evidentiary)

All sharp objects not being used for evidence shall be placed in the appropriate sharps disposal container available at each campus.

Contaminated Sharp Objects (Evidentiary)

All sharp objects that are needed as evidence shall be placed into the appropriate sharps evidence container.

Contaminated Clothing (Non-Evidentiary)

All clothing items that are not being collected as evidence and that are contaminated with body fluids shall be packaged in proper biohazard waste bags. Uniform components that become contaminated shall be packaged in the appropriate contaminated laundry bags supplied in compliance with the laundering contractor. Contaminated uniform articles shall not be taken home for laundering nor taken to a regular cleaning establishment. All cleaning costs shall be charged to JSRCC.

Contaminated Clothing (Evidentiary)

All contaminated clothing should remain undisturbed and the area secured by staff until local, state, and/or federal authorities arrive and/or the investigation is completed. All evidentiary contaminated clothing will be placed in proper biohazard bags.

Contaminated Gloves and Masks

After gloves or a CPR face shield are used in a potential exposure incident, they shall be placed into a red hazardous waste bag and the bag shall be secured. The employee using gloves shall, as soon as feasible, wash his/her hands using an antibacterial soap.

**J. SARGEANT REYNOLDS COMMUNITY COLLEGE
BLOODBORNE PATHOGEN
EXPOSURE PLAN**

ADDENDUM D:

**MANDATORY HEPATITIS B
VACCINATION DECLINATION FORM**

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 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 decide to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Name

Position

Date

Witness

**J. SARGEANT REYNOLDS COMMUNITY COLLEGE
BLOODBORNE PATHOGEN
EXPOSURE PLAN**

**ADDENDUM E:
BLOODBORNE PATHOGENS EXPOSURE INCIDENT PROCEDURES**

These procedures shall be posted in all areas of J. Sargeant Reynolds Community College where there is the possibility of an exposure to bloodborne pathogens resulting from the performance of an employee's duties.

In the event of an exposure incident (a specific eye, mouth or other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials), the following procedures will be followed:

1. The exposed employee will IMMEDIATELY wash the affected skin with soap and water or germicidal towelette and/or flush mucous membranes with water.
2. The scene of the incident, including any equipment, floors and sinks, will be immediately and thoroughly cleaned and disinfected with an appropriate disinfectant.
3. The employee will inform his/her supervisor or manager of the incident as soon as possible.
4. The supervisor or manager will advise the Dean/Associate Dean, who will notify Human Resources and the College Safety Manager.
5. Human Resources will:
 - a. Arrange for the employee to receive a hepatitis B. vaccination if the employee has not received one previously. If the employee declines the vaccination, he/she will be required to sign a declination statement. The declination form will be maintained by the Safety Manager.
 - b. Upon consent of the employee, arrange to have the employee's blood collected for testing at the designated healthcare facility for that campus.
 - c. Arrange to have the blood of the source individual tested, if a specimen is available or upon consent of the source individual, if the infectious status is unknown.
 - d. Assure that the employee is informed of the results of the source individual's blood test.
 - e. Arrange for the employee to have post-exposure prophylaxis, counseling and medical evaluation if necessary.
 - f. Provide the employee with a copy of the healthcare professional's written opinion within 15 days of the evaluation.

6. The Dean/Associate Dean and the Safety Manager will investigate the exposure incident within 24 hours and will report the results to Human Resources on the appropriate form.

**J. Sargeant Reynolds Community College
BLOODBORNE PATHOGEN
EXPOSURE CONTROL PLAN**

**ADDENDUM G
TASK AND PROCEDURES RECORD**

Program: _____ **Location:** _____

Prepared By: _____ **Date:** _____

Type of bodily fluid/substance to which exposure is likely:

- | | | |
|-------------------------|------------------------------------|---|
| 1. Blood | 6. Unfixed human tissues or organs | 11. HIV-containing cell or tissue cultures |
| 2. Semen | 7. Amniotic fluids | 12. Organ cultures |
| 3. Vaginal secretions | 8. Synovial fluids | 13. HIV-or HBV-containing culture media |
| 4. Cerebrospinal fluids | 9. Saliva in dental procedures | 14. Body Fluids visibly contaminated with blood |
| 5. Percardial fluids | 10. Peritoneal fluids | |

Job Classification	Location(s) (PRC, DTC, CAB, WC)	Task/Procedure	Type(s) of Exposure (See Code)	Protective Procedure(s)	Protective Barrier(s) (Gloves, Gown, Apron, Mask, Eyeware etc.)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

**J. Sargeant Reynolds Community College
BLOODBORNE PATHOGEN
EXPOSURE CONTROL PLAN**

**ADDENDUM H:
HEPATITIS B VACCINATION RECORD**

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 information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration and the benefits of being vaccinated. I also understand that the vaccine and vaccination series will be offered free of charge.

I, _____ have elected to receive:

_____ Hepatitis B vaccine

or

_____ Hepatitis B Titer Test

**J. Sargeant Reynolds Community College
BLOODBORNE PATHOGEN
EXPOSURE CONTROL PLAN**

ADDENDUM I:

**INFORMATION AND TRAINING RECORD FOR
EMPLOYEES WITH POTENTIAL EXPOSURE
TO BLOODBORNE PATHOGENS**

Date(s) of training: _____

Trainer(s) name and qualifications: _____

Names and Job Titles of all employees attending this training: (See Attached)

Agenda and/or materials presented to participants included:

- An accessible copy of the text of the OSHA Standard.
- A general explanation of the epidemiology and symptoms of bloodborne diseases.
- An explanation of the modes of transmission of bloodborne pathogens.
- An explanation of the exposure control plan and the means by which employees can obtain a copy of the written plan.
- An explanation of the appropriate methods for recognizing tasks/activities that may involve exposure to blood and other potentially infectious materials.
- An explanation of the use and limitations of methods that will prevent or reduce exposure: i.e., engineering controls, work practices, and personal protective equipment.
- Information on the types, proper use, location, removal, handling, decontamination, and disposal of personal protective equipment or other contaminated items.
- An explanation of the basis for selection of personal protective equipment.
- Information on the HBV vaccine, its efficacy, safety, method of administration, benefits of vaccination, and provision at no cost to the employee.
- Information on the appropriate actions to take and persons to contact in an emergency involving blood and other potentially infectious materials.
- An explanation of the procedure to follow if an exposure incident occurs, the method of reporting, and the medical follow-up that is available.
- Information on the post-exposure evaluation and follow-up that is provided.
- An explanation of the signs, symbols, and color-coding of biohazards.
- A question and answer session between the trainer(s) and employee(s).
- List of contacts within the health community that can be resources to the employees if they have questions after training.

Signature of Training Coordinator: _____

