

# Exposure Control Plan



**HARFORD**  
COMMUNITY COLLEGE

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# Purpose of the Bloodborne Pathogen Exposure Control Plan

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It is the policy of Harford Community College to establish processes for compliance with federal, Maryland state, and local regulations that promote and provide a safe workplace for employees and students.

This Exposure Control Plan is developed in accordance with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, and its amendments. Its purpose is to eliminate or minimize employee and student exposure to blood or other possibly infectious body fluids.

## Introduction

The Occupational Health and Safety Administration (OSHA) published the Bloodborne Pathogens Standard (29CFR 1910.1030) in 1991 in response to concerns of transmission of HIV to healthcare workers. The standard covers all employees with a potential to contact human blood and other potentially infectious materials as a result of performing their job duties. The standard requires the following:

- A written Exposure Control Plan
- Documented annual training of affected employees
- Use of Universal Precautions
- Use of appropriate personal protective equipment
- Provision of hepatitis B vaccine at no cost to employee
- Exposure determination for all job functions

Bloodborne pathogens are microorganisms such as viruses or bacteria that are carried in blood and can cause disease in humans. While there are many different Bloodborne pathogens, the Bloodborne Pathogens Standard specifically addresses Hepatitis B (HBV) and Human Immunodeficiency Virus (HIV). Occupational routes of transmission of these pathogens are by needle stick or a cut from a contaminated sharp object, such as glass; splash to the eyes, nose or mouth; and contact with broken skin. In addition to blood, the standard also refers to other potentially infected materials (OPIM); these include the following body fluids: semen, vaginal secretions, peritoneal fluid, amniotic fluid, saliva in dental procedures and other body fluid that is visibly contaminated with blood. In this Exposure Control Plan, blood and OPIM will be used to include all potentially infectious body fluids.

## Exposure Control Plan

The Exposure Control Plan is a written document that outlines how Harford Community College will comply with the Bloodborne Pathogen Standard. The plan includes employee responsibilities; a list of affected employee positions; practices that minimize/eliminate employee exposure to bloodborne pathogens, to include training elements and task specific procedures, Universal Precautions, engineering controls and personal protective equipment; Hepatitis B vaccination requirements; medical and procedural follow-up obligations following an exposure incident; and record keeping requirements.

All employees covered by the standard will receive an explanation of the Exposure Control Plan and documented job specific training during their initial training session. The plan and the training will be reviewed annually with affected employees and the training will be documented. A copy of the Exposure Control Plan and the OSHA regulatory text of the Bloodborne Pathogen Standard will be placed in each building and on the college's website. The Manager of Health and Safety will review and update the Exposure Control Plan annually or as needed to reflect updates in regulations, technical procedures, or changes in employee job activities/positions. The plan is to be made available upon request to the Assistant Secretary of Labor of Occupational Health and Safety or the Director of the National Institute for Occupational Safety for examination and copying.

## Responsibilities

### 1. The Manager of Health and Safety shall:

- a. Distribute the Exposure Control Plan to each building/department via the G Drive;
- b. Annually review the Exposure Control Plan for effectiveness and update the plan according to new technologies, amendments, and employee job functions;
- c. Develop/provide/coordinate training for all employees/contracted employees who have routine or potential exposure to bloodborne pathogens as described in the standard;
- d. Maintain training records as required by the standard;
- e. Assist departments/divisions in identifying employee job classifications in which occupational exposure to human blood may occur;
- f. Establish and maintain in each building a Bloodborne Pathogen Response kit;
- g. Coordinate disposal of regulated waste;
- h. Coordinate medical evaluations and vaccinations of affected employees;

- i. Coordinate the purchase of supplies and personal protective equipment required for compliance with the Exposure Control Plan;
- j. Document all exposure incidents to include a written follow-up report that includes recommendations for future avoidance of incidents.

**2. Unit Managers and Deans shall:**

- a. Ensure that affected employees participate in the required Exposure Control Plan training; are provided with the necessary supplies and personal protective equipment at no cost to the employee; and follow established safe practices;
- b. Work with the Manager of Health and Safety to develop and provide specific work practice training to affected employees;
- c. Maintain copies of training records for any job specific training performed within the Department.

**3. College Employees with occupational exposure to human blood or other potentially infectious materials shall:**

- a. Complete annual safety training requirements, including overview of the Exposure Control Plan and safe job specific work practices;
- b. Adhere to the requirements outlined in the Exposure Control Plan;
- c. Report all suspected exposure incidents.

**4. College Instructors shall:**

- a. Ensure that students who are working with human blood or other potentially infectious material are provided with a written copy of Universal Precautions;
- b. Ensure that students obtain the supplies and personal protective equipment to minimize/eliminate exposure to bloodborne pathogens;
- c. Conduct their labs in accordance with safety practices developed at the Departmental level as well as in accordance with the requirements of the Exposure Control Plan.

## **Exposure Determinations**

The following job classifications have been identified as ones in which employees have potential exposure to bloodborne pathogens. The assessment is made without regard to any current work practices that utilize engineering controls or the use of personal protective equipment. The determination has been made that all of the employees in each of the job classifications listed below may have occupational exposure to bloodborne pathogens. There

are currently no job classifications at Harford Community College where only some of the employees have occupational exposure. For each job classification, a determination has been made of the task and procedures during which occupational exposure to bloodborne pathogens occurs.

Department	Job Classification	Tasks
Academic Departments <ul style="list-style-type: none"> <li>• Biology</li> <li>• Nursing/Allied Health</li> <li>• Athletic</li> <li>• Non Credit Allied Health</li> </ul>	Biology Instructors Science Lab Technicians Science Lab Aids Trainers/equipment managers Nursing /Medical Assisting Instructors	May use human materials or human blood in lab experiments Work with patients in hospital setting Overseeing laboratories
Plant Services	Housekeeping contract employee Security contract employee Plumber/maintenance mechanic	Clean up of blood spills Respond to medical emergencies/administer CPR Unclog plumbing lines by snaking or work on septic system

## Universal Precautions

Universal Precautions is the name given to describe a widely accepted prevention strategy in which all blood and potentially infectious materials are treated as though they are infectious for HIV, HBV, or other bloodborne pathogens. Universal Precautions are intended to prevent occupational exposure to human blood and are used in all situations where exposure to blood is possible. Universal Precautions include the following practices:

- Wear gloves when hands may come into contact with human blood or other potentially infectious materials. Replace gloves when they become torn or contaminated.
- To prevent exposure of mucous membranes of the mouth, nose and eyes, wear masks and protective eyewear whenever splashes spray, or spatter of blood or potentially infectious materials are likely to occur.

- Wear protective suits, gowns or aprons during procedures that are likely to generate splashing of potentially infectious materials.
- Wash hands and other skin surfaces immediately following contact with human blood or other potentially infectious substances, and after gloves are removed.
- Use care when handling needles, scalpels, razors and other sharp objects contaminated with blood or other potentially infectious materials. Use tongs or forceps if possible.
- Use appropriately-labeled and constructed containers for disposal, storage, and transport of any potentially infectious material.
- Employees responsible for first aid should use protective resuscitation masks for mouth-to-mouth resuscitation.
- Health care workers, such as nursing faculty, or first aid providers must cover skin lesions and wear gloves when treating patients or when handling health-care equipment.
- Avoid eating, drinking, applying cosmetics or lip balm, smoking, or handling contact lenses in work areas where there is likelihood of occupational exposure.
- Avoid keeping food and beverages in refrigerators, freezers, shelves, cabinets, or on countertops where human blood or other potentially infectious materials are present.

## **Personal Protective Equipment, Engineering Controls, and Work Practices**

Safe work practices and the proper use of available engineering controls and personal protective equipment eliminate or minimize employee exposure to bloodborne pathogens. Details on the equipment and practices follow.

### **Personal Protective Equipment**

Harford Community College employees are provided with the personal protective equipment needed to comply with Universal Precautions. All employees who have the potential of skin, eye, mouth, or mucous membrane contact with human blood or OPIM are required to wear personal protective equipment to act as a barrier to these materials. The type of protective clothing will depend on the job being performed. All disposable personal protective equipment used in the cleanup of human blood or OPIM shall be disposed of in properly labeled infectious waste containers and shall not be reused.

- Gloves are required to be worn when there is a possibility of direct hand contact with human blood or OPIM. Disposable gloves, such as latex, nitrile, or vinyl, are recommended for use; this avoids the need to decontaminate a reusable glove. If an employee is allergic to latex or the powders used in gloves, latex/powder free gloves shall be provided. All gloves should be inspected prior and during use and shall be replaced if they become torn. During strenuous activities such as cleaning up a blood spill, a double layer of thin gloves will provide an appropriate barrier.

- Eyewear such as goggles with solid side shields or facemasks with face shield shall be worn when there is a risk from the splashing of human blood or OPIM. This reduces the chance of exposure of the mucous membranes of the eyes to potential pathogens. When splashes, sprays, spatter, or drops of blood may expose the eyes, nose or mouth to bloodborne pathogens, goggles or facemasks should be worn.
- Resuscitation masks are suggested for personnel who perform cardiopulmonary resuscitation. Most are disposable and are handled as contaminated waste after use; they are provided with a one-way valve that prevents the transfer of saliva from victim to rescuer.
- Clothing such as lab coats that are resistant to fluids shall be worn when there is a risk of human blood or OPIM spattering on an employee's skin or clothing. Disposable lab coats are recommended for use. Reusable clothing should be removed and properly laundered prior to reuse.

Employees using personal protective equipment shall observe the following precautions:

- Wash hands immediately upon removal of gloves or other personal protective equipment; be aware of where hand-washing equipment is in each work area.
- Remove gloves, goggles, and lab coats that have been contaminated prior to leaving the work area.
- Used personal protective equipment is to be considered contaminated and possibly infectious and shall be disposed of in properly labeled containers as infectious waste.
- Never wash or otherwise decontaminate disposable equipment such as gloves for reuse.
- Never use gloves if their integrity has been compromised by rips or tears.
- Remove immediately, or as soon as possible, blood-contaminated garments in such a way as to avoid skin contact with the outer contaminated surface.

### **Engineering Controls**

Engineering and work practice controls are tools that isolate or remove the bloodborne pathogen hazard from the work place. Personal protective equipment will be used when occupational exposure remains after instituting these controls. Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure their effectiveness. They include the following:

- Sharps (puncture-proof) containers

- Hand washing facilities
- Autoclaves
- Self-sheathing needles
- Disinfectants
- Biosafety signs

### **General and Task Specific Work Practices**

Work practices are developed following Universal Precaution guidelines and are often department or task specific. All affected employees receive annual training in the practices required by their tasks.

#### **1. General Work Practices**

- Do not eat, drink, smoke, apply cosmetics or lip balm, or handle contact lenses in an area where human blood or OPIM are present. This includes laboratory classrooms.
- Do not store food in areas, including laboratory refrigerators, where human blood or OPIM are present.
- Wear gloves or other personal protective equipment when handling contaminated materials, including boxed or bagged infectious waste.
- Remove gloves with care to avoid touching the outside of the gloves with hands while placing gloves in biohazard waste receptacle.
- Handle contaminated materials, especially sharps such as glass, needles, and lancets, with tongs, or dustpan and broom, because gloves do not provide adequate protection.
- Dispose of contaminated material such as broken glass, needles and lancets in sharps containers. Sharps containers are puncture-resistant, leak proof on the side and bottom, and color coded red or have the biohazard label on the outside of the container as pictured below.
- Place contaminated materials such as paper towels, gloves, and clothing in appropriately labeled biohazard bags. Biohazard bags are color coded red or

contain the fluorescent orange or orange red symbol, as pictured above.



- Bring the sharps container and the biohazard bag to the site where the materials are being generated, rather than carry the contaminated materials to the biohazard bag.
- Wash hands with soap and water as soon as possible; in the absence of hand washing facilities, use a waterless, antiseptic hand cleaner, but wash with soap and water soon thereafter.
- Do not mouth pipette or suction blood or OPIM.
- Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed; shearing or breaking of contaminated needles is prohibited.
- Equipment that may become contaminated with blood or OPIM shall be examined prior to shipping or servicing and shall be decontaminated as necessary.
- Know the location of the nearest Bloodborne Pathogen Response Kit.

## **2. Exposure Incidents**

- If human blood or OPIM touches intact skin (skin without cuts or lesions) the employee should wash the contaminated skin with soap and water immediately or as soon as possible.
- If human blood or OPIM touches the eyes, nose, or mouth, immediately flush the affected area with water for 15 minutes; if human blood or OPIM comes into contact with broken skin or if a sharp contaminated object penetrates the skin, the employee should immediately wash the areas with soap and water. In each of these instances, the employee should contact the supervisor and the Manager of Health and Safety, who will offer the opportunity for an immediate medical evaluation.
- The supervisor shall ensure that an employee who has had an exposure through mucous membranes or broken/penetrated skin is offered the opportunity for an immediate medical evaluation. If the employee refuses the evaluation, the refusal shall be documented using [Appendix F](#). The Manager of Health and Safety shall

document all incidence of exposure on Appendix D and will provide appropriate follow up reports, to include future avoidance of incident.

### 3. Clean up and Decontamination of Surfaces

Surfaces that have been contaminated by human blood or OPIM shall be cleaned up and disinfected. Laboratory faculty and staff shall disinfect laboratory classrooms in Aberdeen Hall, Maryland Hall, and Joppa Hall that have become contaminated during routine classroom experiments. Housekeeping staff shall disinfect public areas on campus such as classrooms, offices, hallways, bathrooms, and grounds. Occasionally College Security will assist in initial decontamination after an emergency incident. All materials needed for cleanup and disinfection are located in the Bloodborne Pathogen Response kit located in each building. The contents of these kits are listed in Appendix B. Appropriate personal protective equipment shall be worn during cleanup and the methods employed during cleanup and decontamination should minimize splashing, spraying, or spattering. Clean up procedures shall be documented using [Appendix G](#). **The following instructions will be posted with the Bloodborne Pathogen Response Kit.** Follow these methods for cleaning up a spill:

- Wear the personal protective equipment required by the level of spill; generally, small spills will require gloves, while larger spills with the potential of splashing or splattering will also require goggles, face or eye shields, or even a lab coat.
- Remove any contaminated sharp objects using tongs or a dustpan and brush; place the sharp objects in a sharps container.
- Spread a layer of paper towels over the contaminated surface and apply the disinfectant found in the blood borne pathogen kit to the paper towels. If the disinfectant is supplied in a spray bottle, apply it with the spray bottle set at fine mist.
- Allow the disinfectant to remain on the paper towels for the length of time indicated on the bottle; it will be labeled.
- The disinfectants used are commercial disinfectants that are effective against the following types of bloodborne pathogens: TB, HIV-1, and various bacteria, viruses, and fungi. The disinfectant should be able to be autoclaved and is within its shelf life limits. A 10% bleach solution is sometimes used as an appropriate disinfectant if it is prepared within 24 hours of use; however, its use is discouraged because Science Laboratory staff could be exposed to chlorine gas when autoclaving the biohazard bag.
- Pick up the paper towels (wearing gloves!) and wipe the surface as needed with paper towels that have been sprayed with the disinfectant in order to remove all traces of the blood. If scrubbing is required to remove the blood, put on goggles/eye shields.

- Place all contaminated paper towels and the used gloves into the properly labeled biohazard bag; a biohazard bag is red or has the following emblem on it:



- There is a bag with each Bloodborne Pathogen Response kit; bring the bag to the cleanup site; do not transport contaminated articles to the bag.
- Tie or tape the biohazard bag shut and contact College Security x2272 or Health and Safety x2285 to transport the contaminated materials to Aberdeen Hall room 206.

#### **4. Removal of human blood or OPIM from grounds**

There may be occasions where human blood or other infectious materials are found on the campus grounds. Other infectious materials can include needles, razors, condoms, bandages, or other items. These materials are to be removed and disposed of in biohazard containers; personal protective equipment such as gloves are to be worn and the grounds disinfected as described above. Please contact College Security x2272 or Health and Safety x2285 to transport the contaminated materials to Aberdeen Hall room 206.

#### **5. Housekeeping/plumbing activities**

The exposures experienced during routine housekeeping (such as cleaning bathrooms) and plumbing activities (such as plunging) are not regulated through OSHA's Bloodborne Pathogen Standard. Activities such as drain repairs involving snaking are considered to be an occupational exposure requiring compliance with this Standard; training and appropriate personal protective equipment shall be provided. Routine sewage spills are also not regulated but should be cleaned up in a way to minimize employee exposure to potential diseases found in sewage. The area of the spill should be disinfected by guidelines provided by the Manager of Health and Safety.

#### **6. First Aid and CPR Providers**

Employees are often first at the scene of an injury and may make efforts to provide preliminary first aid while awaiting help from Security or from an ambulance crew. All employees are to receive an orientation to this Exposure Control Plan and will know that there are employees trained in First Aid/CPR and in bloodborne pathogen protocols. All buildings will have a Bloodborne Pathogen Response Kit, which will contain the items listed in Appendix B. Disposable CPR masks with one-way valves and gloves are available in these kits for use during emergency response measures. College

Security also has gloves and one-way valve CPR masks in their vehicles and office. Employees trained in CPR and responsible for responding to campus emergencies will receive task specific bloodborne pathogen training during CPR and first aid training.

## **7. Handling, Storage and Disposal of Regulated Wastes**

Regulated wastes (to include blood contaminated clothing, gloves, paper towels, needles, lancets, collection bags and tubes) are temporarily stored in biohazard bags or sharps containers. Biohazard bags are to be leak proof; be a thickness of no less than 3mm; be closed during transport by means of twist-ties or tape; should never contain materials that could puncture; and are color coded red or orange and contain the following biohazard emblem:



Sharps containers are to be closable; maintained in an upright position; opened only when sharps are placed inside; filled to now more than  $\frac{3}{4}$  of capacity; puncture resistant; and leak proof on the sides and bottom. Employees are to never reach into the sharps container when placing materials inside and should never attempt to retrieve materials from a sharps container. If there is danger of the container leaking, it should be placed into a biohazard bag.

Central storage of regulated wastes in biohazard bags or sharps containers is Aberdeen Hall, room A206. Housekeeping staff and Security shall bring bagged, closed wastes to the designated area in this room. Notify lab staff of the delivery. If transport occurs after hours, employees should leave a message at X2150 describing the source of the waste to the Science Laboratory staff. All employees shall wear gloves when transporting a biohazard bag.

The Science Laboratory staff autoclaves all biohazard bags and sharps containers prior to placing the bags and containers into biohazard boxes that are hauled away by a licensed regulated waste hauler for ultimate incineration. It is critical that the bags and sharps containers placed in these boxes not be leaking as the hauler cannot removed

wet biohazard boxes. The Science Laboratory staff manages the removal of biohazard wastes from Harford Community College.

Harford Community College does not normally generate contaminated laundry so does not have a method of applying Universal Precautions to this procedure. In the event that a work uniform becomes contaminated with blood or OPIM, it will be isolated in a labeled biohazard bag. It is recommended that the laundry be bagged where it was generated. The Manager of Health and Safety shall make arrangements to have the clothing appropriately laundered.

## **8. Classroom Activities/Athletics Environment**

There are several laboratory courses that use human blood in the classroom. The source of the blood is generally from the students. All instructors who teach these courses are considered to have occupational exposure to bloodborne pathogens. It is the responsibility of the instructor to conduct the classroom activities in accordance with the guidelines provided in this plan and through annual training. Specifically, the instructor shall ensure that the students receive an orientation to Universal Precautions; use and properly dispose of the provided gloves; properly use the sharps containers and the biohazard bags provided by the Science Laboratory Manager (only waste considered to be a biohazard is to be placed in these containers); and refrain from eating, drinking, and applying cosmetics during the laboratory. Any incidence of blood spilling onto laboratory surfaces shall be reported to the Laboratory Manager who is responsible for disinfections and cleanup. Students and instructors are required to wear goggles when centrifuging blood as this presents a splashing hazard.

Biology labs, such as Microtechniques or Microbiology, may occasionally use pathogenic organisms or human tissue. Instructors will receive training in biosafety protocols from the Science Laboratory staff and will ensure that the students follow the established guidelines. Waste generated during these labs is placed in biohazard bags that are autoclaved. These bags, once autoclaved, are considered to be acceptable for placing in a regular trash receptacle. Housekeeping staff members assigned to Aberdeen Hall are to receive training in recognizing the autoclaved biohazard bags as an acceptable waste.

Nursing and Allied Health faculty and students in the nursing/allied health program have occupational exposure to bloodborne pathogens and receive specialized training in task specific procedures. Orientation and training is developed and documented by

the Nursing and Allied Health Department and copies of these training records are provided to the Manager of Health and Safety.

The athletics environment requires the use of Universal Precautions, as there are many opportunities for occupational exposure to blood or other infectious materials to occur. Training for the employees in this area is developed in cooperation with the athletic department. Elements incorporated into this training include but is not limited the following practices:

- Employees who are responsible for the treatment of wounds shall be provided with and shall use personal protective equipment such as gloves.
- Athletes shall cover all open wounds and lesions prior to participation in the sporting event.
- Sharing of common towels and water bottles shall be discouraged to avoid the transmittance of disease through infectious body fluids.
- Contaminated surfaces shall be disinfectant as described in this document.

## Training

- Harford Community College is required to offer a training program to all employees who have occupational exposure to bloodborne pathogens. The training is offered at no cost to employees and during working hours. The training shall be provided at the time of initial assignment to tasks where occupational exposure may take place; thereafter, mandatory training will be offered annual. Additional training shall be offered when a change in technology or an amendment to the standard occurs that directly affects work procedures, when a new occupational exposure is created by a modification of task, or when an exposure incident indicates the need for repeated training.
- The training material's content and vocabulary shall be offered at the educational level, literacy, and language of the affected employee.
- The training program shall be coordinated by the Manager of Health and Safety, who shall ensure that the trainer is knowledgeable in the subject matter covered by the elements in the training program as they relates to Harford Community College. Departments conducting their own task specific training shall provide copies of the training materials and a list of the employees who attended the training to the Manager of Health and Safety.

- Training shall be documented using [Appendix C](#) and Training Questionnaire.
  
- The training program shall include the following elements:
  - A review of where employees can find in each building or on the college's G drive the copy of Harford Community College's Bloodborne Exposure Control Plan and the OSHA regulatory text of the Bloodborne Pathogen Standard;
  - A general description of the epidemiology and symptoms of bloodborne diseases;
  - An explanation of the modes of transmission of bloodborne pathogens;
  - An explanation of the appropriate methods for recognizing the tasks that may involve an occupational exposure to bloodborne pathogens;
  - An explanation of the use and the limitations of the methods that will prevent or reduce exposure; these methods will include engineering control, personal protective equipment (to include its location, proper use, types, removal and disposal) and procedures as detailed in this Exposure Control Plan;
  - An explanation of the basis for the selection of the available personal protective equipment;
  - Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that it is offered free of charge;
  - Information on the appropriate actions to take and who to contact in an emergency that involves blood or other potentially infectious material;
  - An explanation of the procedures that the employee should follow in the event of an exposure, including a description of what an exposure is and how to report it;
  - An explanation of the medical follow up, including the health professional's report, that will be made available following an exposure;
  - An explanation of the post-exposure report that will be written by the Manager of Health and Safety following an incident;
  - An explanation of the signs and labels and/or color coding of biohazard containers;
  - An opportunity for employees to ask questions of the trainer.

## Hepatitis B Vaccination

Employees with occupational exposure to bloodborne pathogens will be offered the hepatitis B vaccination at no charge, within ten days of initial assignment. Employee training with regard to the Bloodborne Pathogen Standard will include a description of the vaccine, to include a discussion of its safety, benefits, efficacy, methods of administration, and where the employee should go to receive the vaccine. Employees are encouraged to receive the vaccine but can decline; any employee who declines is required to sign a declination form that will remain on file in Human Resources. A copy of the declination form is found in [Appendix A](#). Employees who decline may request and receive the vaccination at a later date. An employee who has previously had the vaccination, or has had antibody-testing showing the immunity, or has had a medical evaluation showing that vaccination is contraindicated, should provide this medical documentation for their file.

## Post-exposure Evaluation and Follow Up

An exposure incident occurs when a mucous membrane (eyes, nose, and mouth) or broken skin (also through a puncture with a contaminated sharp) has contact with human blood or other potentially infectious materials in the performance of the employee's job duties. The initial first aid response is to clean any wound with soap and water, and flush eyes or mucous membranes with water for 15 minutes. The employee shall be encouraged to seek medical evaluation as soon as possible. The medical evaluation and follow up procedures shall include the following elements:

- Harford Community College shall provide the following information to the Healthcare Professional: a description of the exposed employee's duties as they relate to the exposure incident; documentation of the route of exposure and the circumstances under which the exposure incident occurred; results of the source individual's blood testing, if available; and all medical records relevant to the appropriate treatment of the employee, such as vaccination status.
- Harford Community College is responsible for the identification and documentation of the source individual, unless such identification can be proven unfeasible or prohibited by state or local law. The source individual, upon consent, shall provide a blood sample for analysis and documentation for HBV and HIV. If the source individual is already known to be positive for these diseases, additional testing will not be required. If consent isn't obtained, Harford Community College shall document this. Results of the source individual's blood test shall be made available to the exposed employee; at this time, the employee shall be informed of pertinent laws and regulations regarding the disclosure of the identity and infectious status of the source individual.
- The exposed employee's blood, upon consent, shall be collected and tested for HIV and HBV serological status. If the employee consents to baseline sampling but not HIV testing, the sample shall be preserved for at least 90 days. If, within 90 days of the

exposure, the employee elects to have HIV testing, the test shall be done as soon as is feasible.

- The Healthcare Professional shall administer any post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service, and shall provide counseling.
- The Healthcare Professional evaluating the exposed employee shall provide a written copy of their evaluation to Harford Community College. The written evaluation shall be limited to the following information: that the employee has been informed of the results of the evaluation and that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment. This can be done using [Appendix H](#). All other findings or diagnosis shall remain confidential and shall not be a part of the written report.

## **Evaluation of Exposure Incident**

In the event that there is an occupational exposure to blood or other potentially infectious material, the Manager of Health and Safety will review the incident and write a follow-up report using [Appendix D](#). The report will be shared with the supervisor and any recommendations for additional training will be followed. The report will include the following information:

- Engineering controls and work practices followed;
- Description of any device being used;
- Protective equipment or clothing used at time of exposure incident;
- Procedures being performed when incident occurred;
- Employee's training;
- Recommendations for additional training or change in procedures.

## **Communication of Hazards to Employees**

Employee exposure to bloodborne pathogens is reduced or eliminated by the use of Universal Precautions, engineering controls, safe work practices, and by proper communication of the potential hazards to all employees. All Harford Community College employees, through the Emergency Response Guide, will receive training that blood spills or a spill of other possibly infected materials is to be cleaned up only by trained college employees or contractors.

All collected contaminated materials shall be put in proper disposal containers clearly marked or identified as biohazard waste. A biohazard-warning label shall also be attached to any equipment such as refrigerators or freezers where human blood or other potentially infectious materials are stored; to containers that are used to store, transport or ship these materials; and to equipment that has not yet been decontaminated. All employees will be taught to recognize the biohazard label and be trained to avoid handling materials containing this label.

## Record keeping

The following record keeping is required in keeping with the requirements of the Bloodborne Pathogen Standard:

- **Medical Records:** Medical records shall be maintained for each employee who has been determined to have occupational exposure to bloodborne pathogens. The records shall be kept for duration of employment plus thirty years. The records include the following information: employee name and social security number; copy of employee's hepatitis B vaccination status to include dates of vaccination; copy of any exposure incident evaluation reports; copy of all results of examinations, medical testing and follow-up procedures relating to an exposure incident; and a copy of any Healthcare Professional's written report regarding the incident. Human Resources will maintain these records. Employees may receive copies of their records upon written request to Human Resources. Harford Community College shall ensure that the employee medical records are kept confidential and not disclosed or reported either within or outside of the workplace unless the college secures the express written consent from the employee.
- **Training Records:** Employees with occupational exposure to bloodborne pathogens will receive documented training annually. The training records will be maintained by the Manager of Health and Safety and will include the following information: dates and content of training sessions; names and qualifications of trainers; names and job titles of employees attending the training sessions. These records will be maintained for three years after the date of training. Employees may receive copies of the training records upon written request to the Manager of Health and Safety.
- Harford Community College shall ensure that all records be made available upon request to the Assistant Secretary of Labor of Occupational Health and Safety or the Director of the National Institute for Occupational Health and Safety for examination and copying.
- **OSHA record keeping:** All exposure incidents must be evaluated to determine if the case meets OSHA's Record keeping Requirements with respect to 29 CFR 1904. This purpose of this rule is to require employers to record and report work-related fatalities, injuries and illnesses. 29 CFR 1904.8(a) has a basic requirement of recording all work-related needle stick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material. Incidents meeting

these requirements must be logged on the OSHA 300 Log as an injury; to protect the employee's privacy, the employee's name is not entered. The Manager of Health and Safety and Human Resources will share the responsibility for reviewing the ruling and the incident for applicability.

## Appendix A: Declination of Hepatitis B Vaccine (1910.1030 App. A)

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 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.

Print name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## Appendix B: Contents of Bloodborne Pathogen Response Kit

1 pair of powder free latex gloves

2 pair of non-latex gloves, such as vinyl or nitrile

2 pair of heavy-duty gloves

1 pair of eye shields

2 large biohazard bag

2 small biohazard bags

1 pair forceps/tongs

Tie/tape for bag closure

1 disposable lab coat

Disposable Clean up towels

1 small sharps container

1 bottle of disinfectant, with information on bottle as to length of time disinfectant needs to be in contact with the spill and the expiration date

1 bottle or towelettes of germicidal hand wash

Scooper and Scraper

List of Universal Precautions, kept in a sheet protector

List of steps to take in clean up of a biohazard spill, kept in a sheet protector

CPR one-way valve mask



## Appendix D: Bloodborne Pathogen Exposure Report

### EMPLOYEE IDENTIFICATION

Name: \_\_\_\_\_

Ext: \_\_\_\_\_

Position: \_\_\_\_\_

### *OTHER EXPOSED INDIVIDUALS*

\_\_\_\_\_

### *DATE/TIME/LOCATION OF EXPOSURE*

Month/Day/Time: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

### BODY FLUIDS INVOLVED

Blood \_\_\_\_ Vomit \_\_\_\_ Urine \_\_\_\_ Feces \_\_\_\_ Tears \_\_\_\_ Saliva \_\_\_\_

Did body fluid: Touch unprotected skin \_\_\_\_ Soak through protective clothing \_\_\_\_

Soak through regular clothing \_\_\_\_\_

### PERSONAL PROTECTIVE EQUIPMENT WORN DURING EXPOSURE INCIDENT

Gloves \_\_\_\_ Gown \_\_\_\_ Eye Protection \_\_\_\_ Mouth/nose protection \_\_\_\_

Type: \_\_\_\_ Type: \_\_\_\_ Type: \_\_\_\_ Type: \_\_\_\_

Other \_\_\_\_\_

Type: \_\_\_\_\_

***TYPE OF EXPOSURE***

Contact with non-intact skin \_\_\_\_\_ Puncture \_\_\_\_\_ Human bite \_\_\_\_\_

Blood/body fluid to eye, nose, or mouth \_\_\_\_\_ Other \_\_\_\_\_ Intact skin \_\_\_\_\_

**DEGREE OF EXPOSURE**

Massive \_\_\_\_\_ Possible puncture \_\_\_\_\_ Est. amount of blood/fluid: \_\_\_\_\_

Duration of contact: \_\_\_\_\_

**SOURCE INDIVIDUAL**

Source individual known? Y \_\_\_\_\_ N \_\_\_\_\_

Source individual: HIV positive \_\_\_\_\_ HBV positive \_\_\_\_\_ Other: \_\_\_\_\_

**TYPE OF INSTRUMENT CAUSING EXPOSURE**

Hand tool \_\_\_\_\_ Scissors \_\_\_\_\_ Knife \_\_\_\_\_ Other \_\_\_\_\_

## Appendix E: Post-Exposure Follow-up and Evaluation Checklist

Utilize this checklist in order to document the handling of an occupational exposure incident.

\_\_\_ Immediate First Aid (washing skin, flushing mucous membranes, encourage bleeding of punctures)

\_\_\_ Incident reported to supervisor prior to end of shift

\_\_\_ Body Fluid Exposure Report Completed

\_\_\_ Source Individual identified (Indicate on body fluid exposure report if source individual is unknown)

\_\_\_ Source individual has blood sample drawn and tested.

\_\_\_ Exposed employee sent to physician with copy of body fluid exposure report

\_\_\_ Exposed employee is given post-exposure follow-up, including offering HBV vaccination, and counseling. If exposed employee declines medical evaluation they must sign **Appendix F Informed Refusal of Post-Exposure Medical Evaluation.**

## Appendix F: Informed Refusal of Post-Exposure Medical Evaluation

I \_\_\_\_\_ am employed by \_\_\_\_\_. My employer has provided training to me regarding infection control and the risk of disease transmission in the agency.

On \_\_\_\_\_, 20\_\_, I was involved in an exposure incident when I

(Describe incident)

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My employer has recommended and offered to provide follow-up medical evaluation (including testing for HBV and HIV status) in order to assure that I have full knowledge of whether I have been exposed to or contacted and infectious disease from this incident.

However, I, of my own choosing, and despite my employers offer, have elected not to have a medical evaluation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Note: Maintain this record for duration of employment plus 30 years.

## Appendix G: Clean Up Procedure

Staff's Name: \_\_\_\_\_

Client Involved: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Chemicals used to clean up:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal Protective Equipment used:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of clean-up procedure

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Items taken for disposal:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Appendix H: Healthcare Professional Written Opinion

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

Is the HBV vaccination indicated for this employee? \_\_\_\_\_

### POST-EXPOSURE FOLLOW-UP

5. Would you please give a statement that this employee of \_\_\_\_\_ has been informed of the results of this evaluation.

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6. Would you please give a statement that this employee of \_\_\_\_\_ has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials that require further evaluation or medical treatment.

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(Note: All other findings or diagnoses shall remain confidential and shall not be included in this written report.)

Please send completed form to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Appendix I: SHARPS INJURY LOG

Please complete a Log for each employee exposure incident involving a sharp

Harford Community College      Name: \_\_\_\_\_

401 Thomas Run Road

Bel Air, MD 21015

Date: \_\_\_\_\_      By: \_\_\_\_\_      Phone: \_\_\_\_\_

Date of Injury      Time of Injury      Job Classification /Department

\_\_/\_\_/\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_

Type and Brand of sharp involved in the exposure incident: \_\_\_\_\_

\_\_\_\_\_

Department or work area where the exposure incident occurred:

\_\_\_\_\_

Description/Summary of Injury

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did the exposure incident occur:

- During the use of a sharp
- After use and before disposal of sharp
- While putting sharp into disposal container
- Sharp left in inappropriate place