Skidmore College

Bloodborne PathogerExposure Control Plan

Table of Contents:	1
Statement of Policy	2
Introduction	2
Glossary of Related terms	2-3
Exposure Determination	3
Training	4
Hepatitis B Vaccination	4-5
Methods of Compliance	5-7
Personal Protective Equipment	7
Blood Waste Disposal	7-8
Procedure for Evaluation of Human Blood Borne Pathogen Exposure	8
Post Exposure Evaluation and Follow Up	8-9

Recordkeeping

NOTEFor the purposes of this policities Department Supervisor for academic faculty and staff (including student employees) and students taking academic cours the factor of the statement of the

Training

- 1. All employees determined to be at risk for bloodborne pathogen exposure will have training 10 days of hire and annual training as required by OSHA.
 - a. Nonacademic employees will review the training video Bloodborne Pathogens: Always Protect Yourself accesseon Learnmore (Login: <u>Here</u>).
 - b. Academidaculty and staf(including student employee**a**) d students taking academic courses will review the online training at <u>CI</u>TContact EHS for access to theining.
 - c. Department supervisors are responsible for signecific trainingSite specific training will include a review of situations that involve potential blood contact, PPE (location and use), procedures for routine cleaning (including name of disinfectant and contact times), waste packaging and disposal, what to do in the event of an exposue, including who to contact and where to be evaluated bite-specific plan will be posted in an appropriate area as a reference for all employ.ees
- 2. Training shall include:
 - A general explanation of the epidemiology and symptoms of bloodborne diseases.
 - An explanation of the modes of transmission of bloodborne pathogens.
 - An explanation of this plan and how an employee can obtain a copy of it.
 - An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
 - An explanation of the use and limitations of the methods used to prevent or reduce occupational exposure, including appropriate work practices and PPE.
 - Information on the basis for selection of PPE.
 - Information on the Hepatitis B vaccination program as described in this document.
 - Information on the appropriate actions to be taken and people to contact in an emergency involving blood or other potentially infectious materials.
 - An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical followup that.8 (0.00(en)-6 (t)0v7 (m)1.9 (n)-5 (d[(r)-1.7 (j 0.0v (

- 4. Employees who schedule vaccination and fail to attend the appoint with how be allowed to work until vaccination or declination of vaccination.
- 5. Employees who initially decline the vaccine will be freered the vaccine annually via training.
- 6. Currently, there is no recommendation for booster doses of the vactfildenited States Public Health standards change to include a booster, the booster will offered to all atrisk employees.

Methods of Compliance

Engineering and work practice controls will be utilized to eliminate or minimize employees ure Department specic training will indude a review of these controls on hire and during annual train train train train to the equipment will be used for infection control when occupational exposure persists despite engineering and work practice controls.

Work Practice Combls:

- 1. Universal precautionsWhendifferentiation between body fluid types is difficult or impossible, all body fluids shall be considered otentially infectious materials.
- 2. Regulated Waste
 - a. Use of appropriate containers for storage, transport, or shipmound or potentially infectious materials and contaminated laundry.
- 3. Safe Work Practices
 - a. Handwashing is the single most important means of preventing the spread of infection and an important measure to decrease occupational exposure to bloodborne pathogens or biohazardous materials. Handwashing facilities are available in laboratories, patient care areas, and training rooms.
 - b. Antiseptic towelettes or antiseptic hand sanitizer will be made available in areas where hand washing facilities do not exist.
 - c. All procedures involving bloedorne or other potentially infectious biohazardous materiarles performed to minimize splashing.
 - d. Awareness of the appropriate disinfectants and sused to assist in cleanup and decontamination surfaces.
- 4. Work Area Restctions
 - a. Eating, drinking, smoking, applying cosmetics, lip balm, and handli-2.9 (pa)-2.9 (p)-0.6 ((s)Tj -0.001 T)-20 T

5. Centrifuge:

Procedure for Evaluation of Blood Exposure

An occupationa<u>l exposure incide</u> int defined as "specific eye, mouth or other mucous membranes; imitate skin, or parenteral contact with blood or other other to the performance of an employee's duties."

Employees/Student Employees:

- 1. After exposure, the mployee will be administered first ai All affected areas of skin must be washed thoroughly, and eyes flushed for 15 minutes if necessary.
- 2. Each incident MUSTe reported to the employee's supervisor immediately.
- 3. Every employee has the right to be evalue at edged 7s(m)+4d(d) ey7 f(s)-(x)-1(p)-0.6 (t)1.7 bhaveedes

- 5. All at risk employees must have annual training
 - a. This training can occur in person or by online video
 - b. The type of training, date, and trainer information must be documented
 - c. Employees must have the opportunity to ask questions.
 - d. Employees should be aware of who to notify after exposure, appropriate disinfectant, collection location of blood waste, location PPE is stored.
- 6. Records of annual training must be kept for 3 years.
- 7. Site Specific planshould be completed and displayed in an azerailable to employees The sitespecific plan can be used as a guide for training.
- 8. Training records should be available ferview.

EMPLOYEE EXPOSURE:

1. Offer

- High-touch surface:
 - Open skin or mucus membranes are

to contact high touch surfaces resulting in more

that the specific employee is requesting vaccination and the specific employee is requesting vaccination and the specific employee's normal scheduled shift. Employees can call to schedule vaccination, 518886-5412. Occupational Medicine is located at 2388 Route 9, Malta, NY 12020. Alternatively, employees may elect to receive vaccination from their primary care physician or a pharmacy. In these cases, the employee would use their private the private to cover the cost. Skidmore College will cover the cost only if an employee receives vaccination at Occupational Medicine.

11. I work in an area away from running water. How do I wash my hands if I have been exposed?

Alcohol hand sanitizers are **ptable** and effective at killing germs on the skin surface. It might be a good idea to keep a first aid kit stocked with alcohol hand sanitizer and other first aid supplies in a vehicle or backpack depending onyour job location. As soon as possible, anyous areas exposed to blood should be thoroughly washed, eyes flushed for 15 minutes.

12. How do I prevent exposure to blood borne pathogens?

1h(gh)-0.0.00MC 2.-2.2 (r5.5 (sTj EMC 1.8 (snn2.-2.2 I -4 (r)-1ho6 >>.h5 (1)-5.v H)-3.)-0-2.2 .5 (t)1. [2)-3. (b (

APPENDIX D

Site Specific Platemplate is available<u>https://www.skidmore.edu/safety_committee/SiteSpecificPlan.d</u>ocx

References:

- 1. Occupational Health and Safety Administrati(2011).Most Frequently Asked Questions Concerning the Bloodborne Pathogens Standar& rieved from: https://www.osha.gov/laws-regs/standardinterpretations/1993-021-0
- 2. Occupational Health and Safety Administration 2019).1910.1030 Bloodborne pathogens. Retrieved from: <u>https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1</u>030
- 3. University of WashingtorSite Specific Bloodborne Pathogen Specific Exposure Control Plan ten 2014 (Retrieved from: