ROGER WILLIAMS UNIVERSITY BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

I. STATEMENT OF POLICY

It is the policy of Roger Williams University (RWU) to limit or prevent occupational exposure to blood or other potentially infectious materials by strict adherence to the Center for Disease Control (CDC) defined universal precautions and by providing suitable personal protective equipment (PPE), training, and Hepatitis B immunization. This Exposure Control Plan describes the procedures necessary to comply with the Occupational Safety and Health Administration's (OSHA) Bloodborne Pathogen Standard (29 CFR 1910.1030).

II. SCOPE

This policy applies to all Roger Williams University employees whose occupational exposure to blood or other potentially infectious materials in the performance of their regular duties may be reasonably anticipated.

III. INTRODUCTION

More than 5.6 million workers are exposed to bloodborne pathogens in the performance of their jobs. Bloodborne pathogens are microorganisms in human blood that cause disease in humans. Although approximately a dozen diseases are known, the main concern is from exposure to the Hepatitis B & C Viruses (HBV & HCV) and the Human Immunodeficiency Virus (HIV), which causes AIDS. To prevent illness, chronic infection, and even death, OSHA has developed a Bloodborne Pathogen Standard to protect workers from exposure to blood and other potentially infectious body fluids. OSHA estimates that the Standard will prevent more than 200 deaths and 9,200 infections annually.

Employees are at risk of contacting infectious diseases each time they are exposed to bloodborne pathogens. It is the policy of Roger Williams University to prevent exposure incidents whenever possible. To protect workers and to comply with OSHA's Bloodborne Patho-2 (CPl)-2 (v7)4 * [(90CPl

IV. DEFINITIONS

<u>Bloodborne Pathogens:</u> Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV).

<u>Contaminated:</u> The presence or reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

<u>Engineering Controls:</u> Controls (ex. sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems (n)-9ua that isolate or remove the bloodborne pathogens hazard from the workplace.

<u>Occupational Exposure:</u> Reasonably anticipated skin, eye, mucous membrane, or other parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

<u>Other Potentially Infectious Materials:</u> (1 (n)-9uaThe following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid,

VII.

IX. NEEDLESTICK PREVENTION

Devices that are capable of reducing or eliminating the potential for needlestick and other sharp instrument injuries are now available. Examples of such technology include needle-less delivery systems, self-sheathing needles and catheters, retractable hypodermic needles, and needle guards and shields. It is vitally important that the use of these devices becomes a standard practice in clinical and research laboratories. They should be used wherever and whenever possible. Those employees who use these devices the most (ie. nurses and phlebotomists) should be consulted for input in the type of needlestick prevention equipment purchased.

X. POST EXPOSURE EVALUATION AND FOLLOW-UP

- 1. All exposures to blood or other potentially infectious materials are to be reported to Human Resources. Following the report of an exposure incident, confidential medical evaluation, treatment and follow-up shall be made available within 24 hours to the employee who experiences such exposure. Such services shall be provided at no cost to the employee.
 - RWU Human Resources Department is responsible for documenting all exposures and medical actions taken.
 - RWU Human Resources Department is responsible for retaining bloodborne pathogen exposure related correspondence (ex. bloodborne pathogen exposure checklist, bloodborne pathogen exposure form, healthcare professional's written opinion, etc) with an exposed employee's attending healthcare provider(s). These records are maintained in accordance with governing law.
 - Environmental Health and Safety is responsible for evaluating the circumstances surrounding an exposure incident, and shall recommend appropriate safety equipment and/or changes in procedure to prevent further exposures of this type.
- 2. At the RWU off-site locations, exposures to blood or other potentially infectious material should be evaluated as soon as possible by the nearest heal

obtained, the employer shall establish that legally required consent cannot be obtained. When the law does not require the source individual's consent, the source individual's blood, if available, shall be tested and the results documented.

- When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.
- Results of the source individuals testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual within the confines of state and federal law.
- Collection and testing of the exposed individuals blood for HBV and HIV status.
- The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.
- If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. 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.
- Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service.
- Counseling done prior to collection of the blood.
- Evaluation of reported illnesses.
- 4. Information provided to the Healthcare Provider the University shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided with a copy of this regulation.
 - The University shall further ensure that the healthcare professional evaluating an employee after an exposure incident is provided with the following information:
 - a. A description of the exposed employee's duties as they relate to the exposure incident
 - b. Documentation of the route(s) of exposure and circumstances under which exposure occurred
 - c. Results of the source individual's blood testing, if available
 - d. Medical records relevant to the appropriate treatment of the employee including vaccination status, which are RWU's responsibility to maintain.

- 5. Healthcare Professional's Written Opinion The employer shall 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 healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for the employee, and if the employee has received such vaccination.

- b. A general explanation of the epidemiology and symptoms of bloodborne diseases.
- c. An explanation of the modes of transmission of bloodborne pathogens.
- d. An explanation of RWU's exposure control plan and the means by which an employee can obtain a copy of the plan.
- e. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
- f. An explanation of the use and limitations of the method that will prevent or reduce exposure, including appropriate work practices and personal protective equipment.
- g. Information on the types, proper use, location, removal, handling, maintenance (including decontamination) and disposal of personal protective equipment.
- h. Information on the basis for selection of personal protective equipment.
- i. Information on the Hepatitis B vaccine as described in section VI of this document.
- j. Information on the appropriate actions to be taken and persons to contact in an emergency involving blood or other potentially infectious materials.
- k. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- 1. An explanation of the pertinent signs and warning labels in use at RWU.
- m. An opportunity for questions and answers.
- The Office of Environmental Health and Safety shall maintain training records, as appropriate. Such records shall be retained for a minimum of three years, in accordance with OSHA standards.

XII. ANNUAL REVIEW

This RWU Bloodborne Pathogens Exposure Control Plan will be reviewed at a minimum on an annual basis and updated as necessary to reflect changes in RWU policies and procedures, as well as any changes indicated or mandated by law.