

BOISE STATE UNIVERSITY

BLOODBORNE PATHOGENS EXPOSURE CONTROL

MASTER PLAN

Developed by the *Campus Environmental Health and Safety Office*

(Revision date: December 20, 2000)

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SECTION 1.0 INTRODUCTION AND REGULATORY BASIS

Boise State University is committed to providing a safe work environment for its employees and must comply with certain state and federal government regulations. University management personnel at all levels are therefore directly accountable for the health and safety of the employees within the units for which they are administratively responsible. The specific responsibility for developing and enforcing University occupational health and safety programs resides with the Campus Environmental Health and Safety Office. Management personnel are expected to cooperate with required programs, exemplify positive attitudes regarding employee health and safety, and promote an environment where employees are given the resources and training to work safely.

The Bloodborne Pathogens (BBP) Exposure Control Master Plan has been established to minimize or eliminate exposure to *bloodborne pathogens* to employees during the performance of certain assigned or designated job duties shown in Section 2.0 of this document. Special technical terms and phrases used in this document are defined in Section 3.0 and are shown in *italics* throughout the document.

This plan has also been developed to comply in part with the Idaho General Safety and Health Standard¹ (Section 330 - comparable Federal reference: 29 CFR 1910.1030) and this standard provides the basis and framework of the plan.

Management personnel must ensure that employees under their administrative control who perform any tasks involving *occupational exposure to blood* or *OPIM* receive appropriate training, know and follow safe work practice procedures and use correct protective clothing and devices to effectively minimize or eliminate their exposure risks. This plan along with the specific departmental plans and their appendices and forms, if properly completed and followed, will provide affected management personnel with an effective means for fulfilling these management responsibilities.

Any personnel who knowingly disregard the requirements or procedures established in this plan shall be subject to disciplinary action up to and including termination.

¹LEGAL AUTHORITY – The Idaho General Safety and Health Standards are promulgated pursuant to the authority granted the Industrial Commission by Sections 72-508, 72-720, 72-721, 72-722, and 72-723, Idaho Code and are applicable to places of public employment as defined in Sections 72-205 and 72-207 (3-23-98).

SECTION 2.0

SCOPE AND EXCEPTIONS

2.1 SCOPE: This plan applies to all University academic, research and service departments or units with full-time, part-time, permanent, temporary employees or student-employees who at any time may have any *reasonably anticipated* skin, eye, mucous membrane or parenteral (i.e., under the skin) contact with human *blood* or *Other Potentially Infectious Materials (OPIM)* resulting from the performance of their duties (contact with intact skin does not necessarily constitute an *exposure incident*). University employees expected to contact *blood* or *OPIM* (henceforth referred to as *occupationally-exposed employees*) include:

2.1.1 Employees who are trained and designated (i.e., expected as a part of their assigned job duties) to render emergency first aid response in the work place;

2.1.2 Employees who are involved in medical or dental teaching programs or any research activities in a setting where *occupational exposure* to human *blood*, human blood products or *OPIM* is reasonably anticipated;

2.1.3 Employees who are trained and designated to clean up accident scenes or waste contaminated with human *blood* or *OPIM*.

2.2 EXCEPTIONS: This Plan does not apply to employees who administer, as a voluntary action or personal choice, assistance to someone in need of medical attention. These personal actions are considered by various regulatory agencies as "Good Samaritan" acts which imply voluntary assistance given to a person. In addition, University employees, except those so designated, are not expected to clean up spills of human *blood* or body fluids, should these materials be encountered. At most, employees should barricade or tape-off the area of blood or body fluid spills and then contact campus security or supervisory personnel for action.

IMPORTANT: Although this plan covers a limited number of employees specifically determined to be *occupationally-exposed to blood* or *OPIM*, any University employee who does receive an unanticipated or unexpected contact with human *blood* or *Other Potentially Infectious Materials (OPIM)* as a result of performing their work (e.g., needlestick when handling trash; laceration with blood-contaminated glassware, etc.) must be instructed to take the following actions:

- ❑ **WASH** the contaminated body part(s) immediately with soap/water (and, if applicable, flush eyes and mouth with water).
- ❑ **REPORT** the incident to a supervisor or department head as soon as possible but before the work shift ends. If knowledgeable of appropriate *post-exposure incident* follow-up procedures that may be required to be offered to the employee,

that supervisor or department head must then initiate such actions on behalf of the employee as soon as possible but before the work shift ends. If not knowledgeable in follow-up procedures, the supervisor or department head must contact the *Campus Environmental Health and Safety Office* for instructions on further action OR seek assistance from a community medical clinic or professional licensed health care provider.

SECTION 3.0 DEFINITIONS

Blood: Human *blood*, human *blood* components, and products made from *blood*.

Bloodborne pathogens: Pathogenic microorganisms present in human *blood* or *OPIM* and which can cause serious or fatal disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C (HCV) and the human immunodeficiency virus (HIV).

Occupationally exposed employee: Full-time, part-time, permanent, temporary employees or student-employees who may have any reasonably anticipated skin, eye, mucous membrane or parenteral (i.e., under the skin) contact with human *blood* or *Other Potentially Infectious Materials (OPIM)* resulting from the performance of their duties.

Exposure incident: Any specific eye, mouth, other mucous membranes, *non-intact* skin or parenteral contact with *blood* or *OPIM* that results from the performance of an employee's duties (contact with intact skin does not necessarily constitute an *exposure incident*).

Occupational exposure: Any reasonably anticipated skin, eye, mucous membrane or parenteral contact with *blood* or *OPIM* that results from the performance of an employee's duties.

Other Potentially Infectious Materials (OPIM): Any of the following body fluids: semen; vaginal secretions; cerebrospinal, synovial, pleural, pericardial, peritoneal and amniotic fluids; fluid visibly contaminated with *blood*; all body fluids in situations where it is difficult or impossible to differentiate between fluids; any unfixated tissue or organ (other than intact skin) from a human (living or dead); HIV-containing cell, tissue and organ cultures; HIV- or HBV-containing culture medium, *blood* and organs; tissues from experimental animals infected with HIV or HBV.

Regulated Waste: Liquid or semi-liquid *blood* or *Other Potentially Infectious Material (OPIM)*; contaminated items that would release *blood* or *OPIM* in a liquid or semi-liquid state if compressed; items that are caked with dried *blood* or *OPIM* and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing *blood* or *OPIM*. OSHA does not generally consider discarded hygiene or minor first aid products, used to absorb *blood*, to fall within the definition of *regulated waste*. OSHA expects the waste containers into which these products are discarded to be lined in a way that protects employees from physical contact with the contents.

Universal precautions: A mandated approach to infection control, i.e., employees must treat all human *blood* and *OPIM* as if known to be infectious for HIV, HBV and other *bloodborne pathogens*.

Work practice and engineering controls: Work practice controls are protective measures or items that reduce the likelihood of exposure by altering the manner in which an employee performs a task or which reduce exposure potential (e.g., usage of gloves and hand washing). *Engineering controls* are items such as "sharps" disposal containers or self-sheathing needles that isolate or remove the *bloodborne pathogen* hazard from the workplace.

SECTION 4.0

RESPONSIBILITIES: *Departments with Occupationally-Exposed Employees*

- 4.1 Determination of Employees with *Occupational Exposure*:** Deans, Directors and Department Heads or their designated supervisors shall determine if they have employees under their administrative control who are *occupationally exposed to blood or other potentially infectious material (OPIM)* during the performance of their work². [For assistance in fulfilling this or any of the following responsibilities, contact the Campus Environmental Health and Safety (EHS) Office.]
- 4.2 Written Department Bloodborne Pathogens (BBP) Exposure Control Plan:** Management personnel who have determined that they have *occupationally-exposed employees* within their respective department shall develop and strictly follow a Department Bloodborne Pathogens (BBP) Exposure Control Plan using model written materials and assistance from the Campus Environmental Health and Safety Office. The Department BBP Exposure Control Plan shall meet the requirements of this BBP Exposure Control MASTER Plan, and where applicable, federal, state or local regulations. Copies of the written Department BBP Exposure Control Plans shall be made readily available to the following:
- (a) Existing *occupationally-exposed employees* during initial training;
 - (b) All newly hired *occupationally-exposed employees* during new employee orientation;
 - (c) Supervisors of *occupationally-exposed employees*; and
 - (d) The Campus Environmental Health and Safety Office.
- 4.3 Pre-exposure Hepatitis B (HBV) Vaccinations:** With specific guidance and forms contained within their respective Department BBP Exposure Control Plans, departments shall ensure that

² Most non-healthcare setting maintenance and custodial personnel are not normally expected to perform tasks that place them at risk of acquiring a bloodborne-transmitted disease. For example, it is expected that custodians occasionally transport products such as discarded sanitary napkins and other waste contaminated with *blood* or other potentially infectious materials (*OPIM*) discarded into waste containers which are lined in such a way as to prevent contact with the contents. These employees in a non-healthcare facility setting are not reasonably expected to have *occupational exposure* (see definition in Section 3.0) and thus are not considered *occupationally-exposed employees*. This same interpretation is applied to trades such as plumbers, pipe fitters and others engaged in routine maintenance activities in non-healthcare facilities.

Nevertheless, it is still University management's responsibility to determine which of their workers' job classifications or specific tasks and procedures may place employees at a particular risk for human blood exposure. For example, workers performing repairs or maintenance in research laboratories where human *blood* or *OPIM* is processed may need to be classified as *occupationally-exposed employees* and thus be included in their department's BBP Plan. Please contact the Campus Environmental Health and Safety Office for details or further assistance on employee "exposure determinations".

their *occupationally-exposed employees* are offered³ pre-exposure Hepatitis B (HBV) vaccinations and that if given, they are provided:

- (a) Free of charge to the employee and at a reasonable time and place;
- (b) By or under the supervision of a licensed physician or by or under the supervision of another licensed health care professional; and
- (c) In accordance with section 330.11 of the State of Idaho General Safety and Health Standard on Bloodborne Pathogens [comparable reference; section (f) of the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030] and according to the current recommendations of the U.S. Public Health Service.

4.4 Post-Exposure Incident Investigation and Medical Follow-up: With specific guidance and forms contained within their respective Departmental BBP Exposure Control Plans, departments with *occupationally-exposed employees* shall:

- (a) Require that any *exposure incident* involving *blood* or *other potentially infectious material (OPIM)* is reported to the employee's supervisor as soon as possible but before the end of the work shift in which the incident occurred;
- (b) Investigate and file a written incident report on any *exposure incident* involving *blood* or *other potentially infectious material (OPIM)* as soon as practical after the incident is reported; and
- (c) Offer a free medical follow-up evaluation to the affected employee as soon as possible but within twenty-four (24) hours of an exposure incident, in accordance with applicable sections of the State of Idaho General Safety and Health Standard on Bloodborne Pathogens (330) of and according to the current recommendations of the U.S. Public Health Service.

4.5 Training of Occupationally-exposed Employees: With specific guidance and forms contained within their respective Departmental BBP Exposure Control Plans, departments with *occupationally-exposed employees* shall ensure that all new and existing *occupationally-exposed employees* receive appropriate initial BBP training before being assigned duties involving *occupational exposure* and refresher training annually thereafter. The University's *Training and Development* office must then be provided with written documentation of all completed employee training program(s). For audio-visual materials, scheduled training dates and other training resources, contact the University's Training and Development Office or Campus Environmental Health and Safety Office.

³ If a *occupationally-exposed employee* accepts the offer for the HBV vaccine series, he/she needs to be evaluated by a physician or qualified healthcare provider (e.g., by exam or verbal/written questionnaire, etc.) who must document whether the pre-exposure Hepatitis B vaccination series is or is not medically indicated for that person.

4.6 Recordkeeping: With specific forms contained within their respective Departmental BBP Exposure Control Plans and with guidance from the Human Resources Services Office, departments with *occupationally-exposed employees* shall ensure that records for *occupationally-exposed employee* HBV vaccination status, *exposure incident* and post-exposure medical follow-up evaluations are accurately established, maintained and kept confidential in accordance with applicable sections the State of Idaho General Safety and Health Standard on Bloodborne Pathogens (330) [comparable reference; section (h) (1) of the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030].

Departments with *occupationally-exposed employees* shall also complete and maintain written records of all initial and refresher training given to their respective department's *occupationally-exposed employees* and deliver copies of the records to the University's *Training and Development Office*.

4.7 Departmental BBP Plan Review: Departments with *occupationally-exposed employees* shall ensure that their Departmental BBP Exposure Control Plan is reviewed and if applicable, updated at least annually or whenever necessary. The plan shall be updated when new positions are established that may involve exposure to *bloodborne pathogens* or when new or modified job tasks are performed by employees which affect their *occupational exposure* status.

SECTION 5.0

RESPONSIBILITIES: *Campus Environmental Health and Safety Office*

- 5.1 **Master BBP Plan Development:** The Campus Environmental Health and Safety (EHS) Office is responsible for overall development, management and revisions of this *Bloodborne Pathogens (BBP) Exposure Control Master Plan*.
- 5.2 **Departmental BBP Plan Compliance Assistance and Enforcement** - The Campus EHS Office shall ensure that compliance and enforcement assistance and technical consultation are provided to departments with *occupationally-exposed employees*. Specifically, the Campus EHS Office shall:
- (a) Assist management personnel throughout the University system to determine which of their unit's employees, if any, have *occupational exposure* to *blood* or *OPIM* as defined by this BBP Exposure Control MASTER Plan.
 - (b) Provide written materials and technical assistance to departments with *occupationally-exposed employees* to write, set up, review and revise their Department BBP Exposure Control Plans.
 - (c) Provide assistance to revise and update each written Department BBP Exposure Control Plan at least annually and when necessary or requested.
 - (c) Maintain a suitable reference and training material library at the University and distribute periodic information on safety/health issues and current legal requirements related to *bloodborne pathogens* exposure in the workplace.

SECTION 6.0

RESPONSIBILITIES: *University Training and Development Office*

- 6.1 DEPARTMENT TRAINING ASSISTANCE:** The Training and Development Office shall assist departments to ensure that a Bloodborne Pathogen (BBP) training program is delivered to their *occupationally-exposed employees* in accordance with applicable sections the State of Idaho General Safety and Health Standard on Bloodborne Pathogens (330) [comparable reference: section (g) (2) of the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030].
- 6.2 EMPLOYEE TRAINING RECORDKEEPING AND TRACKING:** The Training and Development Office shall ensure that training courses completed by *occupationally-exposed employees* are properly tracked and records kept in accordance with applicable sections the State of Idaho General Safety and Health Standard on Bloodborne Pathogens (330) [comparable reference: section (h) (2) of the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030].

SECTION 7.0

RESPONSIBILITIES: *Human Resources Services*

- 7.1 Recordkeeping** - The *Human Resources Services Benefits Manager* shall assist departments to ensure that all records for *occupationally-exposed employee* HBV vaccination status, exposure incident and post-exposure medical follow-up evaluations are accurately established, maintained and kept confidential in accordance with applicable sections the State of Idaho General Safety and Health Standard on Bloodborne Pathogens (330) [comparable reference: section (h)(1) of the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030].

SECTION 8.0

RESPONSIBILITIES: *Occupationally-Exposed Employees*

- 8.1 Department Bloodborne Pathogens (BBP) Exposure Plan Compliance:** When assigned to perform tasks involving potential contact with human *blood* or *OPIM*, such *occupationally-exposed employees* shall strictly follow all applicable requirements contained in their respective Department BBP Exposure Control Plan.
- 8.2 Training:** *Occupationally-exposed employees* shall attend and successfully complete the University's or their own department's initial BBP training program and thereafter, all annual refresher-training sessions.
- 8.3 Reporting:** *Occupationally-exposed employees* shall report any actual or suspected *exposure incidents* as defined by this plan and report all unsafe conditions involving *blood* or *OPIM* to their supervisor immediately but within the work shift that the incident occurs or condition is discovered.