Policy & Procedure No. 4.011

Nunez Community College

Title: Bloodborne Pathogen Exposure Control Policy

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Termination:

Department/Office: Facilities

Bloodborne Pathogen Exposure Control Policy

PURPOSE

It is a policy of Nunez Community College to prevent employee exposure to blood or other potentially infectious materials. Any employee who has a reasonably anticipated risk of occupational exposure, despite the degree of risk, is covered by the OSHA Bloodborne Pathogens Standard.

SCOPE

This policy applies to all persons having an employment relationship with Nunez Community College.

POLICY

Definitions

OSHA defines occupational exposure as "Reasonably anticipated skin, eye, mucous membrane, or potential contact with blood and other potentially infectious materials that may result from the performance of an employee's duties."

Potentially infectious materials are defined as follows:

1. Semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, anybody fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between blood and body fluids.
2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).
3. HIV-containing cell or tissue cultures, organ cultures, and HIV, HBV or HCV containing culture medium or other solution; and blood, organs or other tissues from experimental animals infected with HIV, HBV or HCV.

Exposure Determination List

This list of jobs and procedures are based on risk of occupational exposure incurred without the use of personal protective equipment (PPE). This list is used to identify employees that must be offered Hepatitis B vaccine and that must receive special training in exposure controls.

In the following lists of job classifications and procedures all employees may have occupational exposure.

Job Classifications

1. Registered Nurses
2. Licensed Practical Nurses
3. Nursing Assistants, Unit Nurse Aides, or Nurse Technicians
4. Emergency Medical Technicians
5. Laboratory and other lab workers with body substance contact.
6. Technical Instructors
7. Culinary Instructors
8. Biology & Chemistry Instructors
9. Computer Engineering Technology Instructors
10. Secretaries/Receptionists/Admin Assistant
11. Maintenance Personnel
12. Housekeeping Employees
13. Campus Police Officers

Procedures

1. Instrument re-processing procedure

2. Procedures that require touching body substances, handling specimens, medical waste or soiled linen. See the specific procedures and precautions in each department manual.

Exposure Control Methods

1. **Standard Universal Precautions**
   The concept of Standard Universal Precautions is that all human blood and certain body fluids are treated as if to be infectious for HIV, HBV, HCV and other blood borne pathogens. Use of Standard Universal Precautions is required for the handling of blood and potentially infectious materials. See Infection Control Manual, "Standard Universal Precautions."

2. **Engineering Controls**

Engineering controls are the first line of protection. If not available, use work practice controls.

Engineering Controls are devices or products that isolate or remove the bloodborne pathogen hazard from the workplace.

Use of available engineering controls is required whenever possible to eliminate employee exposure. This may include needle-stick risk reduction devices, sharps disposal containers, and biosafety cabinets. Various departments, such as the Safety & ADA Committees, will identify new engineering controls. The controls will be evaluated for purchase in cooperation with the Purchasing Agent and appropriate procedure.

Experience indicates the controls are not serving their purpose. This may occur because of formal and informal surveys, accident investigation reports, and other reports.

3. **Work Practice Controls**

Work practice controls are the second line of protection. If not available, use personal protective equipment (PPE).

Work practice controls reduce the likelihood of exposure by altering the manner in which a task is performed. See procedure for Standard Universal Precautions.

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

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

All procedures involving blood or other potentially infectious materials will be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited. See department manuals for department specific work practice controls.

4. **Personal Protective Equipment (PPE)**

PPE are the third line of protection use if engineering controls and work practice controls do not provide adequate protection.

PPE is specialized clothing or devices (e.g., gloves, gown, apron, mask and goggles or face shield used by an employee for protection against a hazard.

PPE used is mandated in the policy and procedure for Standard Universal Precautions. The

following are additional requirements.

Disposal gloves must be changed when they become contaminated, torn or punctured. Disposal gloves are not to be washed or decontaminated and then reused. Departments or units are responsible for identifying employees who are allergic to gloves that are normally provided. In cooperation with the Purchasing Department the unit must order an alternative such as hypoallergenic gloves, glove liners, powder less gloves, or simply change to another brand of glove.

Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. They must be discarded if they are cracked, peeling, torn, punctured, or exhibit signs of deterioration, or when their ability to function as a barrier is compromised.

Non-prescription safety glasses with solid side shields are considered protective eyewear. A chin length face shield may replace glasses with side shields combined with a mask covering the nose and mouth except in procedures with a risk of contaminating a patient.

The use of protective body clothing such as aprons, lab coats, caps or shoe covers and the degree of such PPE to resist penetration is performance based. Department/units must evaluate the task and the type of exposure expected and based on that evaluation select the appropriate PPE. See department manuals for department-specific use of PPE.

5. **Housekeeping/Cleaning/Disinfect ion/Sterilization**

Department/units responsible for cleaning disinfecting, sterilizing and decontaminating the environment, equipment and work surfaces must follow a written schedule for cleaning and method of decontamination based on the location with the facility, type of surface to be cleaned, and type of soil present. See Department/Unit specific policy and procedure manuals. See the Infection Control Manual for the Standard Universal Precautions procedure and the Cleaning and Disinfections procedure.

A. Waste

All waste is placed in a leak-resistant container and closed before removal. Infective waste is handled in accordance with the Louisiana State Regulations. See the procedure for Infective Waste in the Infection Control Manual.

B. Handling and Disposal of Sharps

Sharps containers are inspected routinely by a contracted agency and unit HCW's so that they may be replaced when three quarters filled. (See the Infection Control Manual for "Standard Universal Precautions" and the Housekeeping Manual.)

Evaluation of sharps disposal containers for the purpose of purchasing must include the following requirements. It must be closable, puncture resistant, leak proof on sides and bottom, and red in color or if not, red it must be labeled with a biohazard sign.

Contaminated reusable sharp instruments must be placed in puncture resistant, leak proof container until they are reprocessed. Employees must not reach into sudsy water to retrieve sharp instruments. An alternative is to use a perforated tray or forceps retrieval.

C. Equipment

Equipment which may become contaminated with blood or other potentially infectious materials will be examined before servicing or shipping and be decontaminated as necessary, unless the employee can demonstrate that decontamination of such equipment or portions of such equipment is not feasible. A readily observable biohazard label will be attached to the equipment stating which portion remains contaminated. See the procedures, Cleaning Equipment from Patient Care Areas and Biohazard Communication.

6. Employee Training

All areas are responsible for annually training employees in the proper use of engineering devices and safe work practices. See procedure for Employee Training.

7. Biohazard Communication to Employee

Biohazardous materials will be made easily recognizable to an employee by signs, labels, or red color of containers. Employees must be alerted to biohazards of blood or by other potentially infectious materials through labels, signs, and colors. See the procedure on Soiled Laundry Handling, and the procedure for infectious Waste.

A. Sharps will be placed in a red sharps box or a sharps box with a biohazard sign.

B. Non-sharp infectious waste will be placed in a red bag or a bag with a biohazard sign.

C. User departments/units must place a fluorescent orange or orange-red biohazard label (with lettering or symbols in a contrasting color) on the following:

1) Refrigerators and freezers containing blood or other potentially infectious materials.
2) Containers used to store, transport or ship blood or other potentially infectious materials. Examples include specimen transport containers, transfusion product transport

containers, transport containers for sharps boxes and infectious waste bags.

3) Contaminated equipment sent for servicing or repair must be cleaned by the user to the extent possible. The label must specify the parts that were impossible to clean.

Note: Labeling is **NOT** required for:

1. Individual containers of blood or other body fluids inside a secondary labeled container.
2. Specimen containers (because Standard Universal Precautions are taken with all contaminated laundry).
3. Laundry bags or containers (because precautions are taken with all contaminated laundry).
4. Infectious waste that has been decontaminated (autoclaved, incinerated, etc.).
5. Equipment that has been completely decontaminated.

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Chancellor's Signature/Approval

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Chancellor