Revised, 2/14/12

OSHA EXPOSURE TO BLOODBORNE PATHOGENS 29 CFR 1910.1030

WESTERN NEW ENGLAND UNIVERSITY DEPARTMENT OF ATHLETICS

EXPOSURE CONTROL PLAN

OVERVIEW

The purpose of this Exposure Control Plan is to establish a system that will assure that employees in the Department of Athletics who have potential contact with blood/body fluids are protected from infectious agents. The plan is intended to reduce the risk of all categories of Department employees who may have occupational exposure with human blood and other potentially infectious materials during the performance of their duties. OSHA has defined occupational exposure as meaning any "reasonably anticipated" skin, eye, mucous membranes or parenteral contact with blood or other potentially infectious material (OPIM) through such events as administering first aid or assisting injured players.

CONTENTS

- I. EXPOSURE DETERMINATION:
 - A) ANTICIPATED RISK GROUP
 - Tasks for which exposure might occur
 - **B) PRECAUTIONARY RISK GROUP**
 - Excluded from contact or response to a blood or "OPIM" incident
 - C) RISK GROUPS FOR OTHER EMPLOYEES
 - Public Safety
 - Housekeeping
- **II. METHODS OF COMPLIANCE:**
 - A) ENGINEERING CONTROLS
 - **B) WORK PRACTICE CONTROLS**
 - Standard precautions
 - o Personal Protective Equipment
 - Contaminated Laundry
 - Training Programs
 - o Hepatitis B Vaccine
 - Exposure Incident Procedure
 - Recordkeeping
- **III. IMPLEMENTATION:**
 - A) PROGRAM ADMINISTRATION
 - B) RECORDKEEPING

I. EXPOSURE DETERMINATION

A) ANTICIPATED RISK GROUPS

The following members of the Athletics Department are considered by this plan to be "reasonably anticipated" to be exposed to blood and OPIM in the performance of their assigned duties.

- Athletic Trainers, full or part time.
- Certified Athletic Trainers hired by WNE as temporary staff.
- WNE students employed to perform athletic training functions.
- Students from other colleges assigned to perform athletic training functions.
- Head Coaches and Assistants.
- Laundry Operators.
- Lifeguards.
- Any other WNE employee or student required by Athletic Department policy to be First Aid Certified.

TASKS FOR WHICH EXPOSURE MIGHT OCCUR

- Administering first aid.
- Assisting injured players out of the field of play.
- Collecting used dressing or other biohazard materials.
- Decontaminating surfaces or equipment.
- Laundering contaminated clothing.

B) PRECAUTIONARY RISK GROUP

The following categories are considered NOT "reasonably anticipated" to be exposed to blood and OPIM in the performance of their assigned duties. They are given consideration, including training and information, to ensure that unintentional exposure does not occur.

• Staff and Students employed in the Fitness Center, Strength Room, Event Staff and Intramural Officials/staff not already included in the Anticipated Risk Group.

Staff and Students employed in the Fitness Center, Strength Room, Event Staff, Intramural officials/staff who encounter blood or OPIM will be required to get assistance of someone covered by the Plan.

C) RISK GROUPS FOR OTHER EMPLOYEES

Security Officers from the Public Safety Control Desk and Public Safety officers are protected by the programs of the University's Department of Public Safety.

Housekeepers, the plumber and the ESRM from the Facilities Management Department covered under a separate University program.

Faculty working with infectious fluids are covered under a separate University program

II. METHODS OF COMPLIANCE:

A) ENGINEERING CONTROLS

The administration of first aid during athletic events limits the opportunities for engineering controls. However, whenever possible, the use of engineering controls that are available should be a consistent and habitual practice. This would include:

- The use of cutting tools such as scissors or knives or other sharps equipment with designs that protect the cutting edge or point from unintentional injury.
- The use of medically proven techniques demonstrated to reduce sharps related injury.
- The use of brooms and other handled tools to clean up broken glass or sharps hazards.
- The proper use and management of sharps containers.
- The incorporation of new and innovative medical techniques or practices designed to prevent infection into injury management activities.

Potentially contaminated materials for disposal will be placed in containers used only for this purpose. A Biohazard collection box is located in the Training Room. Management of this container (including disposal) is under the direction of the Head Trainer. All game and practice sites will make use of a red bag and/or biohazard labeled bag that will:

- If containing disposable, contaminated items, be placed into the biohazard box at the end of the event.
- If containing contaminated laundry (i.e. uniforms), remain segregated from other clothing in order to protect typical laundry workers. Contaminated laundry is to be sorted and cleaned by a properly trained individual, utilizing gloves. In addition, contaminated laundry will be washed separately from other non-contaminated clothing. See below.
- The University Trainer will make arrangements for proper disposal of the biohazardous collection box when full.

Cutting implements, such as scissors or razors that may have come into contact with potentially infectious material, must be disinfected before disposal or placed in puncture resistant, leak-proof containers which are then put into the biohazard collection box.

B) WORK PRACTICE CONTROLS

Standard Precautions

Standard Precautions are a set of rules intended to prevent the transmission of bloodborne pathogens from body fluids and human tissues. Athletic activities frequently present an exposure to someone else's bodily fluids. These below standard precautions (#1-#8) must be followed in preparation for (and in response to) an incident involving blood and other potentially infectious materials. Potentially infectious materials include:

- Blood
- Any bodily fluid which cannot be identified or contains blood
- Semen
- Vaginal secretions
- Cerebrospinal fluid
- Synovial fluid

- Pericardial fluid
- Peritoneal fluid
- Amniotic fluid

The following fluids do not contain enough HIV/HBV to cause infection and are therefore not part of the bloodborne pathogen standard:

- Normal saliva
- Feces
- Urine
- Sputum
- Vomit
- Tears
- Sweat
- Nasal secretions

Understand that personal hygiene should still be considered when handling the above materials. Hands should be thoroughly washed with soap and water after any contact. Also recognize that in circumstances in which differentiation between bodily fluid types is difficult or impossible, <u>all</u> blood, body fluids and tissues shall be considered potentially infectious material.

Standard Precautions applicable to athletic events include the following actions that will reduce the likelihood of transferring bloodbourne pathogens:

- 1. Prior to the beginning of any athletic event, cover or otherwise protect any open or damaged skin. This precautionary measure should include all skin areas not covered by clothing plus adjacent areas such as the wrist and forearm. Where long clothing whenever possible.
- 2. The kit containing first aid and other personal protective equipment (see below) assigned to the athletic event should be inspected routinely as to ensure it contains the appropriate items. Restocking of this kit should occur immediately following the use of any item.
- 3. In the event a player is injured, Personal Protective Equipment (see below) should be used to prevent direct contact to a patient's blood or body fluids. Hands or other protected skin areas should be washed immediately after the removal of PPE. Washing means the use of soap and water. In situations where running water in not immediately available, prepackaged towelettes or bottled disinfectants may be used but washing with soap and running water should be done at the next available opportunity.
- 4. Cutting tools such as scissors or knives should be selected with designs that protect the cutting edge or point from unintentional injury.
- 5. Contaminated PPE should be disinfected before use on another patient. Disposable items should be placed immediately after use into the biohazard collection box.
- 6. If possible, ask the patient to hold dressings in place or to remove their own dressings and place them directly into a collection bag.

- 7. The need to launder contaminated material should be avoided whenever possible. Disposable wipes such as paper towels should be used to clean contaminated surfaces and materials rather than cloth towels.
- 8. Contaminated wound dressings or clean-up materials should be placed in the proper collection containers and brought to the training room for addition to the biohazard box directly after use.
- 9. Contaminated uniforms, clothing or other items for laundry should be properly identified and collected separately from non-contaminated items. The items must be laundered separately from the non-contaminated items.

Personal Protective Equipment

The Athletics Department will provide Personal Protective Equipment of the proper type and size needed to minimize contact with infectious material.

- Disposable (single-use) gloves must be replaced as soon as possible when contaminated or when their ability to function as a barrier is compromised. Removal should be done by pulling the interior of the glove over the exterior, contaminated surface. Once removed these glove should be placed directly into a collection bag.
- Re-useable utility gloves can be reused if decontaminated, but must be discarded if cracked, discolored, punctured, or showing signs of deterioration.
- CPR Mouthpieces should be used for all resuscitation attempts. They should be decontaminated after use or disposed of as biohazard.
- Masks, gowns, face shields and other personal protective equipment should be available for use in the event of a severe injury

Athletic Department Laundry procedures

Personally owned clothing items that become contaminated during job related activities will be removed and laundered by the Athletic Department equipment facility. The owner of the clothing will bring it to the facility and load it directly into a washing machine.

All University owned clothing or towels that become contaminated in response to a blood Infectious material incident will be laundered by the Athletic Department equipment facility.

- Contaminated clothing and towels will be transported to the equipment room in a container other than those used for clean laundry. These soiled laundry carts should easily identifiable and not be used for any other purpose.
- Use of gloves when handling soiled laundry. This procedure means: Wearing gloves when handling soiled laundry until it has completed the wash cycle, washing gloves prior to removal, and washing hands just after removal.
- Laundry will be washed at high temperature (160°F or higher) or at a lower temperature with a separate rinse cycle containing a chlorine bleach.

Training Programs

Initial training on Bloodborne Pathogens and Universal Precautions is part of the First Aid, Athletic Trainer, and other certifications required for inclusion into this program. The Athletic Department is responsible for explaining the University's Exposure Control Plan to new employees entering the plan. A training kit is available in the Athletics Department that includes a media presentation on DVD, the text of the OSHA Bloodbourne Pathogen Standard, the Exposure Control Plan, and additional explanatory material.

The Environmental, Safety and Recycling Manager (ESRM) will conduct an annual review and training program. This program will include:

- 1. Any revisions of the OSHA standard.
- 2. New information concerning bloodbourne diseases and transmission modes.
- 3. New procedures that may reduce an exposure.
- 4. Review existing control methods and personal protective equipment.
- 5. New vaccinations and other preventative techniques.

Hepatitis B Vaccine

Employees in the Anticipated Risk Group will be offered the Hepatitis B vaccine, at no cost to the employee. Employees who decline the vaccine must sign a declination statement. Employees who initially decline the vaccine but who later wish to have it may then have the vaccination at no cost. Health Services will administer the vaccination, and the Athletic Department Office will be responsible for offering the vaccination, and all associated records.

NOTICE: It should be understood that the HBV vaccination does not completely eliminate the possibility of acquiring HBV. Employees must use Standard Precautions, personal protective equipment, and other appropriate procedures. Failure to do so may cause an individual to acquire HBV, even though they may have been vaccinated.

NOTICE: All University students must provide HVB vaccination records as part of their enrollment process.

Exposure Incident Procedure

When an employee or student worker incurs an exposure incident, it will be reported to their supervisor who then will report it to the Director of Athletics. The Director will consider if any elements of the Exposure Control Plan should be changed to reduce the likelihood of a similar exposure incident.

All employees who incur an exposure will be offered post-exposure evaluation by Health Services and follow-up to include the following:

- 1. Documentation of the route of exposure and the circumstances related to the incident.
- 2. If possible, the identification of the source individual, and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent) for HIV/HBV infectivity.
- 3. Results of the testing of the source individual will be made available to the exposed employee.

4. Provide HBV and HIV serological counseling, and safe and effective post-exposure prophylaxis following the current recommendations of the U.S. Public Health Service.

III. <u>IMPLEMENTATION:</u>

A) PROGRAM ADMINISTRATION

Personal protective equipment (PPE) will be available at the AHLC Training Room. PPE will also be made available at event locations elsewhere in the AHLC, other WNE campus facilities, and WNE Team events at other sites. Minimum PPE available will gloves (rubber or latex), mouthpieces, and ventilation or resuscitation devices.

The University's Department of Athletics will be responsible for:

- 1. The implementation of the Exposure Control Plan.
- 2. Using the provided training kit to ensure new employees entering the plan are adequately trained. Training dates for each employee should be documented using the form in Attachment 1 to this plan.
- 3. Ensuring the HVB vaccination process is offered to new employees entering the plan. This process should be initiated within 10 days of the new employees hire. The vaccination process can be documented using the form in Attachment 1 to this plan.

The University's ESRM will be responsible for:

- 1. Maintaining the master copy of written Exposure Control Plan.
- 2. Conducting the Annual review of the plan and training operations performed by the Department of Athletics.
- 3. Informing the Department of Athletics of any revisions to the OSHA BBP Regulation.

The University's Health Services Department will be responsible for:

- 1. Administering hepatitis B vaccinations as needed
- 2. Performing post exposure examinations as needed, and forward copies of pertinent records to the Career and Human Resources Office.

The University's Human Resources Department will be responsible for:

1. Maintaining the full time personnel records generated by this Exposure Control Plan and the record keeping requirements of 29 CFR 1910.1020.

NOTICE: The Athletics Department must maintain all records generated by this exposure control plan for part time and temporary employees. Training and vaccination records can be documented using Attachment 1. Records from post exposure examinations must be obtained from the Health Services Department.

B) RECORDKEEPING

Full time, employee specific records generated by this program will be maintained by the WNE Career and Human Resources Office. These will be maintained for a period of thirty years past the last date of employment. See the note above concerning the maintenance of part time and temporary Athletics' Department employees.

Medical records will include the following:

- 1. Employee's HBV vaccination record.
- 2. Result of examinations, medical testing, and post-exposure evaluation and follow-up procedures.
- 3. Health care professional's written opinion.
- 4. A copy of the information provided to the health care professional.

Medical records will be kept confidential and maintained for at least the duration of employment plus 30 years.

OSHA EXPOSURE TO BLOODBORNE PATHOGENS 29 CFR 1910.1030 EXPOSURE CONTROL PLAN FOR WESTERN NEW ENGLAND UNIVERSITY DEPARTMENT OF ATHLETICS

New Employee or Newly Assigned Employee in the "Reasonably Anticipated" exposure to Bloodborne Pathogens job responsibilities.

Name:	Position:	
Training Certifications:	DATE	LOCATION
First Aid Certified		
Certified Athletic Trainer		
Emergency Medical Technician		
Review of exposure control plan and the training kit. This includes watching the 14 minute video <u>Bloodborne Pathogens in Athletics.</u>		
CONFIRMATION BY ATHLETIC DEPARTMENT	SIGNED:	DATE:

Hepatitis B Vaccination:

New Athletics Employees* or Newly Assigned Athletics Employees* with job responsibilities that would be "Reasonably Anticipated" to have exposure to Bloodborne Pathogens must be sent to the Health Services Department to complete the Hepatitis B vaccination/declination process. New employees or newly assigned employees that have previously had the Hepatitis B vaccination should still report to the Health Services Department as to inform them of their vaccination date. This should be done after the training certification section above has been completed but within 10 days of their initial assignment to the potential exposure.

* Since Western New England Students are required to have this vaccination upon enrollment, this requirement is not necessary. Students from other Colleges or Universities should report to the Health Services Department as to inform them of their vaccination Date.

Recordkeeping:

This record should be maintained within Athletic Department files. This record should be considered confidential and be maintained for the duration of employment plus 30 years.

All vaccination files will be maintained by the Department of Health Services.