1. PURPOSE

The University of North Alabama (UNA) is committed to providing a safe and healthful work environment for all personnel. In pursuit of this goal, the following Exposure Control Plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document to assist our campus in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

A. Determination of employee exposure
B. Implementation of various methods of exposure control, including Universal Precautions, engineering and work practice controls, personal protective equipment, and housekeeping
C. Hepatitis B vaccination
D. Post-exposure evaluation and follow-up
E. Communication of hazards to employees and training
F. Recordkeeping
G. Procedures for evaluating circumstances surrounding exposure incidents

2. PROGRAM ADMINISTRATION

A. The Director of Environmental Health and Safety (EHS) is responsible for:

   i. Implementation of the ECP

   ii. Maintaining, reviewing, and updating the ECP whenever necessary to include new or modified tasks and procedures.

B. Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

C. Affected department heads (or their designees) will:

   i. Provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard.

   ii. Ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

D. The Human Resources Department and the EHS Department are responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.

E. EHS Department/Anderson College of Nursing and Health Professions (ACONHP)/Athletics Department will be responsible for training, documentation of training, and making the written ECP available to employees.

3. EMPLOYEE EXPOSURE DETERMINATION

A. List of job classifications in which all employees have occupational exposure:

JOB CLASSIFICATION	DEPARTMENT	TASKS & PROCEDURES
Nurses	Anderson College of Nursing and Health Professions	Providing instruction for use of syringes
Athletics Department Trainers	Athletics	Cleaning up small spills of blood or OPIM
University Police Officer	University Police Dept	Caring for injured persons

B. List of job classifications in which some employees have occupational exposure.

JOB CLASSIFICATION	DEPARTMENT	TASKS & PROCEDURES
Kinesiology Department Professor, with Human Performance Lab oversight	Kinesiology	Collecting/handling specimens that contain/could contain blood or OPIM.
Kinesiology Department Graduate Assistant, performing finger sticks or blood draws in Human Performance Lab	Kinesiology	Collecting/handling specimens that contain/could contain blood or OPIM.
Student Recreation Center Staff	Student Affairs	Cleaning up small spills of blood or OPIM.

4. METHODS OF IMPLEMENTATION AND CONTROL

A. General - All employees will utilize universal precautions to prevent contact with blood or OPIM. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered as OPIM.

B. Exposure Control Plan - Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work shifts by contacting their supervisor, the Director of Environmental Health and Safety, or viewing on the UNA webpage on the Facilities Administration and Planning page under Environmental Health and Safety, Policies (https://una.edu/facilities/environmental-health-and-safety/policies/chapter-8-occupational-exposure-to-bloodborne-pathogens.pdf). If requested, the employee will be provided with a copy of the ECP free of charge and within 15 days of the request.

A team composed of the Environmental Health and Safety Department and impacted departments is responsible for reviewing and updating the ECP to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

C. Engineering Controls and Work Practices - Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. Examples include sharps disposal containers, needless systems, and non-glass capillary tubes.

i. Sharps disposal containers are inspected and maintained or replaced by the owning department whenever necessary to prevent overfilling.

ii. Department Heads/Chairs are responsible for identifying the need for changes in engineering controls and work practices through the review of injury reports, employee interviews, and committee activities.

D. Personal Protective Equipment (PPE) - PPE is readily available and provided at no cost to employees. Training in the use of the appropriate PPE for specific tasks or procedures is provided during initial training and/or when a new type of PPE is obtained.

i. Examples of the types of PPE available to employees include gloves, eye protection, and gowns.

ii. All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in the biohazardous waste receptacles when visibly contaminated with blood or OPIM.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

E. Housekeeping

i. Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section "Labels"), and closed prior to removal to prevent spillage or protrusion of contents during handling.

ii. When sharps disposal containers are nearly full, don disposable gloves, secure lid, and place in biohazardous container.

iii. Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded.

iv. Waste containers will be kept in a secure, designated area away from public access until picked up for disposal.

v. The workplace will be maintained in a clean and sanitary condition. To that end, an appropriate written schedule for cleaning and the method of decontamination will be implemented based upon the location, type of surface to be cleaned, type of soil present, and tasks or procedures being performed. An example is shown below.

Cleaning and Decontamination Schedule
Human Performance Lab

The following schedule describes work areas that should be decontaminated, decontamination frequency and method, and required types of cleaning.

When appropriate, information concerning usage of protective coverings used to help keep surfaces free of contamination (such as plastic wrap) should be included.

Work Area/Equipment	Cleaning and Decontamination Frequency	Type of Cleaners or Supplies to be Used	Method of Cleaning to be Used	Responsible Person
PT Lab/Work Surface	At end of shift or when visibly contaminated	Oxyvir, disposable towel	Follow Mfg. instructions, wipe surface.	GA performing blood draw
Regulated Waste Trash Can	Inspect when changing bag; decontaminate between changing bags and when visibly contaminated.	Oxyvir, disposable towel	Follow Mfg. instructions, wipe surface.	GA performing blood draw

v. All equipment and working surfaces will be cleaned and decontaminated after contact with blood or OPIM using an appropriate disinfectant.

vi. Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.

vii. Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

F. Laundry

i. Handle contaminated laundry as little as possible, with minimal agitation.

ii. Place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport.

G. Labels - The following labeling methods are used at UNA:

Equipment to be Labeled	Label Type (size, color)
Biohazardous Waste Containers	Red bag* inside of a labeled cardboard container
Sharps Containers	Rigid red plastic containers
Specimen Containers	Adhesive label with biohazard symbol on specimen container

Contaminated Laundry	Red bag containing biohazard symbol

***** How to Label Biohazardous Waste Without a Red Bag:

1. **Find a Suitable Container:** Use a rigid, leakproof, closable container, such as a sturdy plastic bag or tub.

2. **Obtain a Biohazard Label:**

   - Obtain fluorescent orange or orange-red labels with the universal biohazard symbol and the word "BIOHAZARD" in a contrasting color (usually black). A compliantly-labeled symbol is located in ATTACHMENT 2 for printing on a color printer.

3. **Affix the Label:** Attach the label firmly to the container, using adhesive, string, or wire.

4. **Add Secondary Containment:** For transport or storage, place your labeled container inside another leakproof, lidded secondary container.

Employees are to report to their supervisor if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

5. HEPATITIS B VACCINATION

A. The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in Section 3 of this ECP, *Employee Exposure Determination*. Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune; or 3) medical evaluation shows that vaccination is contraindicated.

B. If an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept in the Human Resources Department

6. POST-EXPOSURE EVALUATION AND FOLLOW-UP

A. Contact your supervisor should an exposure incident occur.

B. An immediately available confidential medical evaluation and follow-up will be conducted by The Occupational Health Center, 2129 Helton Dr., Florence, AL. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

   i. Document the routes of exposure and how the exposure occurred.
   ii. Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).

iii. Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
iv. If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
v. Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
vi. After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status
vii. If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

7. ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

The Human Resources Department and/or the Director of Environmental Health and Safety ensures that the:

A. Health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard.
B. Health care professional evaluating an employee after an exposure incident receives the following:

i. a description of the employee's job duties relevant to the exposure incident
ii. route(s) of exposure
iii. circumstances of exposure
iv. if possible, results of the source individual's blood test
v. relevant employee medical records, including vaccination status

C. the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

8. PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

A. The affected employee’s supervisor and Director of Environmental Health and Safety will review the circumstances of all exposure incidents to determine:

i. engineering controls in use at the time
ii. work practices followed
iii. a description of the device being used (including type and brand)
iv. protective equipment or clothing that was used at the time of the exposure incident
v. location of the incident
vi. procedure being performed when the incident occurred
vii. employee's training

B. If revisions to this ECP are necessary the Director of Environmental Health and Safety will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding

employees to the exposure determination list, etc.).

9. EMPLOYEE TRAINING

All employees who have occupational exposure to bloodborne pathogens receive initial and annual training which covers/includes at a minimum:

i. the epidemiology, symptoms, and transmission of bloodborne pathogen diseases
ii. A copy of the OSHA bloodborne pathogen standard
iii. an explanation of the University's ECP and how to obtain a copy
iv. an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
v. an explanation of the use and limitations of engineering controls, work practices, and PPE
vi. an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
vii. an explanation of the basis for PPE selection
viii. information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
ix. information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
x. 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
xi. information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
xii. an explanation of the signs and labels and/or color coding required by the standard and used at this facility
xiii. an opportunity for interactive questions and answers with the person conducting the training session.

10. RECORDKEEPING

A. Training materials and records are available in the Environmental Health and Safety Department, Athletics Department, and the Anderson College of Nursing and Health Professions. The training records include:

i. the dates of the training sessions
ii. the contents or a summary of the training sessions
iii. the names and qualifications of persons conducting the training
iv. the names and job titles of all persons attending the training sessions

B. Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the Environmental Health and Safety Department, Athletics Department, and the Anderson College of Nursing and Health Professions.

11. MEDICAL RECORDS

A. Medical records are maintained for each employee with occupational exposure in accordance with 29 *CFR* 1910.1020, "Access to Employee Exposure and Medical Records."

B. The Human Resources Department is responsible for maintenance of the required medical records. These confidential records are kept for at least the duration of employment plus 30 years.

C. Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Requests should be sent to the Human Resources Department

ATTACHMENT 1
HEPATITIS B VACCINE DECLINATION (MANDATORY)

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Name_____ _____

Printed Signature

Date:_____

ATTACHMENT 2
BIOHAZARD LABEL

Print this label on a color printer and attach to the container of biohazardous waste.