

Volume E2: Environment, Health, Safety & Security	E2.5 Exposure Control Program Effective Date: 05/01/2014	Responsible Office: Safety Program
		Responsible Officer: Safety Officer

POLICY STATEMENT

Northeastern Illinois University (the "University") is responsible for safeguarding its employees from potential hazards associated with occupational exposure to Bloodborne Pathogens (BBP), body fluids, and Other Potentially Infectious Materials (OPIM).

PURPOSE OF THE POLICY

The University's Exposure Control Program shall provide a regulatory overview to assist applicable departments in developing their own specific Exposure Control Plans in order to eliminate or minimize employees occupational exposures to BBP, bodily fluids, and OPIM in compliance with 29 CFR 1910.1030 Occupational Exposure to Bloodborne Pathogens (BBP) Standard which is administered by the Occupational Safety and Health Administration and enforced by the Illinois Department of Labor.

Elements of the Exposure Control Program include, but are not limited to: Exposure Determination, Universal Precautions, Engineering Controls and Work Practices, Labeling and Signs, Employee Information and Training, Housekeeping, Hepatitis B Vaccinations and Post-Exposure Follow-up, Documentation and Record keeping.

Northeastern will annually evaluate the effectiveness of each component of this Exposure Control Program to assure employees are provided with a safe and healthy workplace in accordance with federal and state statutes.

WHO IS AFFECTED BY THIS POLICY

The scope of this Exposure Control Program covers only those employees who Northeastern has determined are affected by way of either the job description or as determined by the University Safety Coordinator to have occupational exposure to BBP, body fluids, and OPIM in the course of their employment.

DEFINITIONS

Blood means human blood, human blood components, and products made from human blood.

Bloodborne Pathogens means 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) and human immunodeficiency virus (HIV).

Clinical Laboratory means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.

Contaminated means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Contaminated Laundry means laundry which has been soiled with blood or other potentially infectious materials or may contain sharp objects.



Contaminated Sharps means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Decontamination means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles, and the surface or item is rendered safe for handling, use, or disposal.

Director means the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

Engineering Controls means controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace.

Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee's duties.

Licensed Healthcare Professional is a person whose legally permitted scope of practice allows him or her to independently perform Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up activities.

HBV means Hepatitis B virus.

HIV means human immunodeficiency virus.

Needleless systems means a device that does not use needles for:

(1) The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established; (2) The administration of medication or fluids; or (3) Any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.

Occupational Exposure means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

Other Potentially Infectious Materials (OPIM) means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate among body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

Personal Protective Equipment is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

Sharps are any object that can penetrate the skin including needles, scalpels, and broken capillary tubes.

Sterilize means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

Universal Precautions is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Work Practice Controls means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).



Worker's Compensation Coordination

Northeastern Illinois University Office of Human Resources assists in the coordination of claims with the State of Illinois.

PROCEDURES

1. EXPOSURE DETERMINATION

The Exposure Determination is a list of employees whose job classifications or general responsibilities may cause occupational exposures to BBP.

1.1. CATEGORY I

Job classifications in which ALL employees in those job classifications may have occupational exposures to BBP:

- Health Services Staff
- University Police
- Child Care Center Staff

1.2. CATEGORY II

Job classifications in which ONLY SOME employees may have occupational exposures to BBP:

- Physical Education Staff including, but not limited to, Athletic Trainers, Coaches, Equipment Managers
- Facilities Management, including but not limited to, Plant Operating Engineers, Building Service Workers, Buildings and Grounds, Electricians, and laborers
- First Aid/CPR/Athletic Training teachers/instructors
- Biological Science faculty (academic and research)

1.3. CATEGORY III

Job responsibilities and procedures in which occupational exposures to BBP may occur:

- Handling of biomedical and epidemiologically active pathogens in the course of health care services conducted by Health Services Staff;
- Handling of biomedical and epidemiologically active pathogens in the course of biological studies and research;
- Standard emergency medical services and first aid treatment used by staff when providing emergency medical aid to those persons coming under their care;
- Law enforcement tasks relating to infectious materials exposure in the apprehension, custody, processing and transport of suspects, victims and prisoners; and
- Routine maintenance or building service duties involving the clean up or other necessary handling of materials that exhibit the presence or the reasonably anticipated presence of blood or OPIM on an item or surface

The Safety Coordinator, with the Office of Human Resources' Benefits Department will conduct a review of the job classifications and the various responsibilities performed within departments to update the Exposure Control Program.



2. EXPOSURE CONTROL

2.1. UNIVERSAL PRECAUTIONS-STANDARD OPERATION PROCEDURE FOR BODY FLUIDS CLEAN UP

Precautions must be undertaken when dealing with body fluids of any types and amounts. It should be assumed that body fluids may contain the infectious HIV, HBV, or various other BBP and should be considered potentially infectious.

In order to protect the safety and health of University employees, visitors, patients, emergency responders, and Health Services staff, Northeastern mandates the use of Universal Precautions when performing specifically defined task, jobs, operations, or procedures. This program requires that at a minimum all employees use Universal Precautions as an accepted method of control to protect employees from exposure to all human blood and other potentially infectious materials.

2.2. ENGINEERING CONTROLS

Engineering controls are used to separate the employee from the hazard, thus reducing the employee exposure. The University will implement a sharps disposal and biohazard containers system to assure that all BBP hazards are isolated or removed from the workplace. Personal Protective Equipment (i.e. gloves, safety glasses) and Work Practice Controls are used to reduce exposure by altering the manner in which a task is performed (i.e. prohibiting recapping of needles by a two-handed technique).

2.3. WORK PRACTICES

Standard work practices that restrict body contact, eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses during the cleaning of bodily fluids shall be followed. Additional practices that shall be followed include, but are not limited to:

- Washing hands when gloves are removed and as soon as possible after skin contact with blood or other potentially infectious materials occurs;
- Changing street clothing when it becomes soiled; and
- Washing affected areas of the body.

Each affected department shall establish appropriate engineering controls and work practices to prevent or minimize exposures to BBP. Such engineering controls shall be conspicuously displayed within the department.

Each department shall also establish potentially infectious medical waste (PIMW) disposal procedures that comply with all applicable local, state and federal regulations. Such procedures shall include, but are not limited to, proper on-site storage, transport and disposal documentation.

2.4. PERSONAL PROTECTIVE EQUIPMENT

The use of personal protective equipment (PPE) helps prevent occupational exposures to infectious materials. Each operational department head shall make available appropriate PPE for employee use. Safe handling of personal protective equipment shall adhere to the following procedures:

- Remove protective equipment before leaving the work area or when a garment becomes contaminated;
- Place used protective equipment in appropriately designated areas or containers when being stored, washed, decontaminated, or discarded;
- Wear gloves when an employee may have contact with blood, other potentially infectious materials, and handling or touching contaminated items or surfaces;
- Never wash or decontaminate disposable gloves for reuse;
- Wear appropriate face and eye protection such as a mask with glasses with solid side shields or a chin-length face shield when splashes, sprays, spatters, or droplets of blood or other potentially infectious materials pose a hazard to the eye, nose, or mouth; and



- Wear appropriate protective body coverings such as gowns, aprons, caps, and boots when occupational exposure is anticipated. The type and characteristics will depend upon the task and degree of exposure anticipated.

2.5. HOUSEKEEPING

Efforts to reduce workers' occupational exposures to blood, other potentially infectious materials, and regulated waste may include using specific housekeeping procedures for the cleaning and sterilization of the work environment. These procedures will be based upon the location of the facility, the type of surface to be cleaned and other environmental factors in the area and will be conspicuously displayed.

Departmental procedures on decontamination of facilities shall include, but are not limited to, the following guidelines:

- Clean and sterilize all equipment and environmental and work surfaces that have been contaminated with body fluids and other potentially infectious materials with a 10% bleach solution or equivalent;
- Always use mechanical means such as tongs, forceps, or a brush and a dust pan to pick up contaminated broken glassware; never pick up with hands even if gloves are worn;
- Place other regulated waste (liquid or semi-liquid fluids) in closeable and biohazard labeled red bags or containers;
- Handle contaminated laundry and bags of waste as little as possible and with minimum of agitation;
- Use appropriate personal protective equipment when handling contaminated laundry; and
- Place contaminated laundry in leak-proof, labeled red biohazard bag.

2.6. LABELING SIGNS

A key element of the Northeastern Exposure Control Program is to provide immediate information about the hazards of human blood, other potentially infectious materials, and regulated waste by using labels, signs, specially marked containers, storage areas, refrigerators, and freezers. Departments are responsible for the proper use of labels which shall include, but are not limited to, the following:

- All containers of potentially infectious blood, blood components, or blood products at this facility must be properly labeled. A proper label must include at least the use of the BIOHAZARD symbols, fluorescent orange, or orange-red or predominantly so background.
- Ensure proper techniques are used when employees handle, store, or transport containers of blood, other potentially infectious materials, and regulated waste.
- Containers, refrigerators, and freezers containing blood and other potentially infectious materials are properly labeled so as to inform everyone to the hazards associated with the use, transport, shipping, and storage of blood, other potentially infectious materials, and regulated waste.
- If an individual finds a container of blood, other potentially infectious materials, and regulated waste that is not properly labeled, he/she should contact the Department Head responsible for the area where the container was found.

Employees shall never remove, deface, or change a label on a container without first getting specific directions from their Department Head.

3. HEPATITIS B VACCINATION AND POST-EXPOSURE FOLLOW-UP

The Office of Human Resources Workers Compensation Coordinator and Health Services or Occupational Health provider shall make available to all employees with potential occupational exposures to the BBP the Hepatitis B vaccination series. Employees may decline the Hepatitis B vaccination series, but shall sign and file a declination waiver with The Office of Human Resources in order to continue to work.

The Office of Human Resources Workers Compensation Coordinator or Occupational Health provider will also make available a post-exposure evaluation and follow-up if any employee is involved with a BBP exposure incident. The cost of the BBP exposure evaluation, follow-up, Hepatitis B vaccination, procedures, and prophylaxis will be paid for by the University and will be provided at a reasonable time



and place. All procedures will be performed by a licensed health care professional and in accordance with the U.S. Department of Health and Human Services current procedures.

3.1. NEEDLE STICK INJURY PROCEDURES

During the course of work, employees may be exposed to injury from needles or glass that may have been exposed to BBP, including but not limited to HIV or HBV. In the event of such an injury the following procedures shall be followed:

- **Clean-Up – Employee:** Immediately clean the injured area of the body in the manner following previous training. This includes thoroughly washing the affected body part (s) with strong soap and with antibacterial and antiviral soap as soon as possible afterwards.
- **Clean-Up -- Needle, Glass, or Sharp Object:** The employee should not attempt to secure the sharp object, but should call his/her Department Head after cleanup. The Department Head will ensure that a qualified individual carefully secures the needle, glass, or sharp object in a separate and marked sharps container and forwards to the occupational health provider for testing purposes.
- **Reporting:** Employees will report the needle stick injury to his/her Department Head immediately. The Department Head will report the needle stick injury to the Workers Compensation Coordinator and Safety Coordinator.

Department Head Investigation

In addition to securing the needle, glass or object, the Department Head will conduct an investigation to determine how the injury happened, who was involved, their name, address, phone number, and any health details that the individual provides. The Department Head must document the incident information on the workers' compensation injury report form and forward a completed report to Human Resources. All notes, memorandum, or other document not included in the workers compensation injury report form but used in the course of the investigation must be maintained by the Department Head for a period of 3 years. Department Heads must not ask whether the person has tested positive for HIV or HBV. Other personnel will ask the appropriate questions about HIV or HBV.

HBV/HIV Screening

An employee who has been involved in a needle stick injury may, at his or her option, submit to a confidential screening program for exposure to HBV/HIV. This confidential screening program may be administered by the local Occupational Health provider or Emergency Room (Swedish Covenant). All counseling sessions, both pre-screening and post-screening will be conducted by Swedish Covenant occupational health services.

4. EMPLOYEE INFORMATION AND TRAINING PROGRAMS

Employee information and training programs provide the needed tools (information, equipment, materials, and skills) to make the necessary informed decisions to protect themselves.

Northeastern will provide initial BBP general awareness training to new hire employees who may be in an affected job.

The University's Office of Human Resources will coordinate an annual BBP general awareness training for all affected employees at no cost and during working hours. The affected departments will be given the dates and times of these classes and are expected to schedule their employees accordingly. The Department Heads will be responsible for implementing this Exposure Control Program to their department employees.

Training shall consist of, but is not limited to, the following:

- An annual Exposure Control Plan Training Program will be presented to all affected employees. This training program may consist of written materials, lectures, discussion groups, videos, and questions and answers to present all the material covered in the blood borne pathogens Standard and the written Exposure Control Program. This training program is provided during work hours at no cost to the employee.
- Affected employees will receive specific training when they are called upon to perform certain duties which are considered by the Department Head to require additional training when an



- employee is assigned to a new department or job function. Employees will also receive training when there is a modification of tasks or procedures.
- Affected employees should know about the existence, availability and location of the written Exposure Control Program, emergency response and first aid equipment and procedures, and accessible copy of the OSHA regulations and any specific explanations of how the OSHA Standard affects the workplace.
 - Affected employees will receive specific training on the epidemiology, symptoms, and modes of transmission of Blood Borne Pathogens.
 - Affected employees will receive specific training about the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
 - Affected employees will receive specific training about use and limitations of various methods that employees can use to prevent or reduce exposure including engineering controls, work practices, and personal protective equipment. They should understand the proper process for selecting, using, storing, handling, decontamination, and disposal of the personal protective equipment.
 - Affected employees will receive specific training about the facility program to provide Hepatitis B vaccination series, post-exposure evaluation, and follow-up if any employee is involved with a BBP exposure incident. Employees should understand the basics of the Hepatitis B vaccine, its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccination will be offered free of charge to the employee.
 - Affected employees will receive specific training about the program to assure that areas with BBP are posted with signs and that all containers of potentially infectious blood, blood components, or blood products at this facility must be properly labeled.

Employees will receive specific training by their department head and/or supervisor about their potential for occupational exposures to BBP and OPIM and are provided an opportunity for questions and answers during that training program.

5. DOCUMENTATION AND RECORDKEEPING

A copy of this Exposure Control Program, including Medical records, Hepatitis B vaccination series status, training program content and attendance records, and any other program materials and information will be kept in the Office of Human Resources. Department specific Exposure Control Plans will be retained within each respective department. After consultation with University Counsel, records will be made available upon request to regulatory agency officers, employees, and employee representatives.

AUTHOR REFERENCE

This procedure followed excerpts from the Occupational Exposure to blood borne pathogens, brochure by U.S. Department of Labor, OSHA 3127, dated 1992.

HISTORY

Formerly Administrative Memorandum No. 68 – Bloodborne Pathogen Policy and Exposure Control Plan, effective dated 03/01/1995

APPENDIX

Appendix A – Northeastern Exposure Control Plan Template

RELATED POLICIES AND OTHER INFORMATIONAL MATERIAL

- **Local Medical Emergency Response**
Peterson Occupational Health (773) 910-9514
Swedish Covenant Emergency Room (773) 989-3800
Chicago Fire Department paramedics 9-911



- **Occupational Safety and Health Agency**
OSHA (202) 523-6091
OSHA Laboratory (Cincinnati) (513) 684-2531
OSHA Regional Office (Region V) (312) 353-2220
- **Northeastern Office of Human Resources- Workers Compensation Coordinator**
Workers Compensation Coordinator (773) 442-5203
- **Environmental Health & Safety Department**
Safety Coordinator (773) 442-4936

CONTACT INFORMATION

Please direct questions or concerns about this policy to:

Contact	Phone	E-Mail
Facilities Management Safety Coordinator	(773) 442-4936	R-Matus@neiu.edu

DISCLAIMER

The University reserves the right to modify or amend sections of this policy at any time at its sole discretion. This policy remains in effect until such time as the Responsible Officer calls for review. Requests for exception to any portion of this policy, but not to the policy statement, must be presented in writing to the Responsible Officer.



APPENDIX A – NORTHEASTERN EXPOSURE CONTROL PLAN TEMPLATE

Northeastern **(Insert Dept Name)** Exposure Control Plan (Supplement to NEIU Exposure Control Plan)

Effective Date: **Insert date**
 Reviewed by: **Insert dept head name**

- 1) **Exposure Determination:** **(insert employee titles)** are all employees in **(insert department name)** that have potential occupational exposures to Bloodborne Pathogens.
- 2) **Exposure Control and Universal Precautions:** **(update information)**
 - a) Personal hygiene - wash hands as soon as possible after contact with any potentially infectious materials
 - b) Personal protective equipment - wear disposable gloves whenever handling potentially infectious materials
 - c) Engineering and work practice controls – biohazard bags and/ or sharps containers should be used to place potentially infectious materials in. These items and a biohazard box are located outside the store room door and should be used to store the potentially infectious items until proper off site disposal is performed
 - d) Equipment cleaning and disinfecting – clean and disinfect all equipment and work surfaces contaminated with potentially infectious materials with a 10% bleach solution or equivalent
- 3) **Hepatitis B Vaccination:** Available to all employees identified as having the potential to be exposed to infectious materials through the Office of Human Resources- Workers Compensation Coordinator
- 4) **Post Exposure evaluation and follow up:** The Office of Human Resources will provide access to medical evaluation, counseling, post-exposure treatment (hepatitis B vaccine), follow-up care and documentation. If you think that you have been exposed, it is your responsibility to notify your supervisor immediately.
- 5) **Occupational Safety and Health Agency (OSHA):** General Bloodborne Pathogen training is provided by the University upon initial employment, and annually thereafter. Department specific training is provided by the department head or designee annually thereafter.

I, _____ have read and understand the **(insert department name)** Exposure
 (Name)
 Control plan procedures/policy. I agree to abide by the terms.

 (Signature)

 (Date)