

**EXPOSURE CONTROL PROGRAM
FOR
BLOODBORNE PATHOGENS**

NAPA VALLEY COMMUNITY COLLEGE DISTRICT



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BACKGROUND

On December 6, 1991, OSHA issued its final regulation on occupational exposure to bloodborne pathogens (29 CFR 1919.1030). Based on a review of the information, OSHA has determined that employees face a significant health risk as a result of occupational exposure to blood and other potentially infectious materials (OPIM) because they contain bloodborne pathogens. These pathogens include: HBV, which causes Hepatitis B, a serious liver disease, and HIV, which causes Acquired Immune-Deficiency Syndrome (AIDS). The agency has concluded that this hazard can be minimized or eliminated using a combination of engineering and work practice controls, personal protective clothing and equipment, training, medical surveillance, Hepatitis B vaccination, signs, labels and other provisions.

The California version of this legislation became effective on January 8, 1993. The text of the law can be found in Section 5193 of Title 8 of the California Code of Regulations (8CCR5193).

BLOODBORNE PATHOGEN PROGRAM

PURPOSE

Napa Valley Community College District (NVCCD) has determined that certain employees may be exposed to blood and other potentially infectious materials (OPIM) because they contain bloodborne pathogens. The purpose of this program is to eliminate or minimize employee occupational exposure to blood and certain other potentially infectious materials (OPIM).

LOCATION

A copy of this Program can be found at the following locations:

- Facilities Services - Office
- College Police
- Health Center
- District's Intra-Net website <http://www.napavalley.edu>

ELEMENTS EXPOSURE CONTROL PROGRAM (ECP)

- Determination of employee exposure
- The schedule and method of implementation for:
 - ❖ Communication of hazards to employees
 - ❖ HBV vaccination and post-exposure evaluation and follow-up
 - ❖ Recordkeeping
- A procedure for the evaluation of circumstances surrounding exposure incidents.
- A procedure for gathering the information required by the sharps injury log.
- A procedure for identifying currently available engineering controls and selecting such controls for the appropriate work areas
 - ❖ Universal precautions
 - ❖ Engineering and work practice controls
 - ❖ Personal protective equipment
 - ❖ Housekeeping
- A procedure for obtaining information from employees as part of the program review process.
- Ensure that a copy of the ECP is accessible to employees.
- Ensure that the ECP is reviewed and updated at least annually.

RESPONSIBILITIES

Program Administrator

The Program Administrator for NVCCD is the Risk Manager. The Program Administrator is responsible for implementing the Bloodborne Pathogen Program. Duties of the program administrator include:

1. Will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures.
2. Determined employees who have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.
3. Assist person or departments who will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags.
4. Assist person or department who will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.

Supervisors/Managers

1. Ensuring affected employees' comply with the Exposure Control Program, including the introduction of the Hepatitis B vaccination series within ten days of employment if the employee has not been vaccinated before. Employee must provide written proof of vaccination series or immunity (HBsAB).
2. Ensuring affected employees have initiated training on department specific safe work practices relative to exposure to blood or other potentially infectious substances/materials.
3. Monitoring their departments to ensure compliance with the Exposure Control Program, including always having an adequate supply of protective equipment to comply with the Bloodborne Pathogen Standard.
4. Ensuring that affected employees attend and complete training sessions to comply with the Bloodborne Pathogen Standard.
5. Ensuring that affected employees who are appointed to an affected job classification are referred for training and, if necessary, are offered the Hepatitis B vaccination series within ten days.
6. Report compliance failures to the Program Administrator.

7. Ensuring that the individual(s) responsible for decontaminating equipment or working surfaces with infectious materials/substances is knowledgeable about Universal Precautions.

Program Coordinator

1. Administrative Assistant to the Risk Manager to serve as the Program Coordinator and advisor in the development and implementation of the training program.
2. Ensuring that each affected employee has started the Hepatitis B vaccination series or has signed the declination form.
3. Maintaining Hepatitis B vaccination records or declination forms.
4. Coordinating post-exposure follow-ups with medical contractor.
5. Maintaining records relative to post-exposure follow-up to bloodborne pathogens, including first aid providers.

EXPOSURE DETERMINATIONS

The OSHA BBP Standard requires a determination be made as to which employees may be at risk for occupational exposure to BBP. This section identifies those job classifications and work activities at the above named facility for which there is a risk of exposure. Employees determined to be at risk need to be included in special programs designated by the standard. Such programs include special training, issuance of personal protective gear (i.e., gloves and airways for Cardiopulmonary Resuscitation (CPR)), and immunization for hepatitis B virus (HBV). Employees in the following job classifications have the potential for exposure to BBP in the course of their assigned duties:

Department & Job Classification	Task or Activity with Potential Exposure
Maintenance & Operations: Maintenance Mechanic Custodian Groundskeeper	Cleaning up after blood spills, bodily fluid release, cleaning bathrooms, cleaning contaminated lab trash. Handling soiled feminine hygiene products. Including hazardous/bio waste. Possibly hidden needle exposure in trash.
Child Care Center: Center Director Child Care Teacher /Specialist Support Staff	Potential exposure from children's wounds, bloody mucous or stools while changing diapers, cleaning and bandaging wounds, or from human bites.
Health Occupations: Instructional Assistant	Instruction and supervision of students involved in patient care. Parenteral invasion, handling body fluids in the clinical areas. Handling biohazardous waste and clean up of patient care areas
Culinary Arts/Dietary Executive Chef Assistant Chief Food Server	Clean up blood from cuts and assist with first aid. Handling food contaminated with vomits, blood, or OPIM
Physical Education/Adaptive P.E: Coach Instructional Assistance Athletic Trainer Equipment Room Attendee	Emergency First Aid (primary duty), cleaning up blood spills First aid, bandaging, splinting, etc., CPR and providing patient therapy
Public Safety: Community Service Officer Police Officer	Response to accidents, disturbances, altercations, CPR, cleaning up blood spills First Aid. Involvement in physical altercations involving blood or other body fluids. Retrieving blood or other body fluids as evidence.

Department & Job Classification (cont.)	Task or Activity with Potential Exposure (cont.)
Life Science/Biology Anatomy: Instructional Assistant	Clean up blood from cuts and assist with first aid. Blood typing, cleaning up labs (sharps, soiled dressings), I.V. penetration

METHODS OF COMPLIANCE AND SCHEDULE OF IMPLEMENTATION

Universal Precautions

All NVCCD employees will observe Universal precautions to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

Engineering and Workplace Controls

NVCCD will use engineering and workplace controls to eliminate or minimize employee exposure. The District shall continually evaluate these controls compared with new or more advanced equipment and substitute new methods as determined by the Program Administrator.

OSHA requires engineering controls to be examined and maintained regularly to ensure their effectiveness. OSHA requires work practice controls to be evaluated and updated on a regular basis as well.

Hand Washing Facilities

These shall be readily available.

Hand Washing

This shall be done immediately before and after glove removal. Hand washing shall also be done as soon after hand contamination as possible. If water is not available, antiseptic hand cleaners must be used with clean cloth, paper towels or antiseptic towelettes.

Needleless Systems

Shall be used when information indicates the system is more effective in reducing sharps injuries than the current system being used.

Needle Devices

If needleless systems are not used, needles with engineered sharps injury protection shall be used.

Non-Needle Sharps

If sharps other than needle devices are used, these items shall include engineered sharps injury protection.

Prohibited Practices

- Shearing or breaking of contaminated needles and other contaminated sharps is prohibited.
- Bending, recapping or removal of contaminated sharps by hand is prohibited.
- Sharps that are contaminated with blood or other potentially infectious materials (OPIM) shall not be stored in a manner that requires employees to reach by hand into the containers where these sharps have been placed.
- Disposable sharps shall not be reused.
- Broken glassware, which may be contaminated, shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dustpan, tongs, or forceps.
- The contents of used sharps containers shall not be accessed.
- Sharps containers shall not be opened, emptied or cleaned manually or in any other manner which would expose an employee to the risk of sharps injury.
- Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses are prohibited in work areas where there is a likelihood of occupational exposure.
- Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or OPIM are present.
- Mouth pipetting/suctioning of blood or other potentially infectious substances/materials is prohibited.

Other Precautions

- All procedures involving blood or other potentially infectious substances/materials shall be performed in such a manner as to minimize splashing, spraying, splattering and generation of droplets of these substances.
- Specimens of blood or other potentially infectious substances/materials shall be placed in a container, which prevents leakage during collection, handling, processing, storage or transportation.
- Contaminated clothing and equipment must be removed before entering a food consumption area.
- Splattering or the generation of droplets or aerosols of contaminated material must be avoided. If potential for this exists, face protection shall be required.
- Contaminated reusable equipment must be decontaminated to the extent possible. Employees shall wear appropriate personal protective equipment.
- Personal protective clothing must be worn to prevent body contamination and shall be provided by the District.
- Personal protective equipment (splash shields, clothes, gloves, etc.) must not be

taken home by the employee and shall remain at work.

- If splashing occurs onto protective clothing, inspect clothing to ensure that blood or OPIM is not soaked through the material.
- Biohazard labels will be affixed to containers, refrigerators and freezers containing blood or other potentially infectious substances/materials and any other containers used to store or transport blood or other potentially infectious substances/materials.

Requirements for Handling Contaminated Sharps

- All procedures involving the use of sharps in connection with patient care shall be performed using effective handling techniques and other methods designed to minimize the risk of a sharps injury.
- Immediately, or as soon as possible, contaminated sharps shall be placed in an approved sharps container.
- The containers shall be maintained in the upright position throughout use, where feasible.
- The containers shall be replaced as necessary to avoid overfilling.

Sharps Containers for Contaminated Sharps

- All sharps containers for contaminated sharps shall be:
 - ❖ Rigid
 - ❖ Puncture resistant
 - ❖ Leakproof on the sides and the bottom
 - ❖ Portable, if necessary to ensure easy access by the user
 - ❖ Properly labeled
- The sharps container shall be closeable and sealable so that when sealed, the container is leak resistant and incapable of being reopened without great difficulty.
- Filled containers shall be collected by Facilities Services staff or disposed by Health Services staff.

PERSONAL PROTECTIVE EQUIPMENT (PPE) AND CLOTHING

NVCCD shall analyze employee tasks and the type of exposure expected in order to select personal protective clothing and equipment, which shall provide adequate protection. This shall be accomplished in view of the fact that there is no standardized method of testing and classification of the resistance of clothing to biological hazards.

The District shall provide, at no cost to the employee, appropriate personal protective equipment. The District/Employee must clean, repair and replace the equipment when necessary. The type and amount of PPE shall be chosen to protect against contact with blood or OPIM based upon the type of exposure and quantity of these substances reasonably anticipated to be encountered during the performance of a task.

Gloves

Gloves shall be worn when it is reasonably anticipated that employees will have blood or OPIM contact with hands, non-intact skin, or mucous membranes; when performing vascular access procedures; and when handling or touching contaminated items or surfaces..

Disposable (single-use) gloves used at NVCCD are not to be washed or decontaminated for re-use, and are to be replaced when they become contaminated, or if they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for re-use provided that the integrity of the gloves is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibits other signs of deterioration or when their ability to function as a barrier is compromised.

Mouth, Eye and Face Protection

Employees must use masks for CPR. Employees are also to use masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin length face shields, whenever splashes, spray splatter, or droplets of blood or OPIM may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

Cal/OSHA requires additional protective clothing such as lab coats, aprons, clinic jackets, or similar outer garments when needed to protect clothing from becoming contaminated. The type and characteristics of such protective clothing will depend upon the task and degree of exposure anticipated. The following situations at NVCCD require such protection: administering first aid for injuries with spurting blood.

PPE Accessibility

Supervisors shall ensure that the appropriate PPE in the appropriate sizes is readily accessible at the work site or is issued without cost to employees. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

HOUSEKEEPING

NVCCD District Supervisors shall ensure all work sites are maintained in a clean and sanitary condition. Supervisors shall develop and implement an appropriate written schedule for cleaning and decontamination of the all equipment and working surfaces.

The method of cleaning or decontamination used shall be effective and shall be appropriate for the:

- Location within the facility;
- Type of surface or equipment to be cleaned
- Type of soil or contamination present; and
- Tasks or procedures being performed in the area.

All contaminated work surfaces will be decontaminated after completion of contaminating procedures and immediately after any spill of blood or OPIM. At the end of the work shift any surface that may have become contaminated since the last cleaning must also be cleaned.

Protective coverings may be used to assist in keeping surfaces free of contamination in health services, and other areas. All protective coverings shall be removed and replaced as soon as feasible when they become overtly contaminated.

All bins, cans, pails, and similar receptacles, which may be contaminated, shall be inspected when emptied by the employee assigned to empty them, and decontaminated if necessary. Contaminated reusable sharps shall not be stored or discarded in a manner that requires.

Disinfectant Procedures

Employees will use the following products to clean up spills of blood or OPIM and decontaminate surfaces: Disinfectant products must be used according to manufacturer's instructions, including concentration, volume to be applied on a given surface area and contact time. Use the directions given below.

a) Buckeye Terminator

Disinfection/Virucidal, Fungicidal Directions:

For use, add 8 oz. per gallon of water. Apply use solution to hard, nonporous surfaces. Treated surfaces must remain wet for 10 minutes. Wipe dry with a cloth, sponge or mop or allow to air dry. For heavily soiled areas, a preliminary cleaning is required.

Buckeye TERMINATOR has a broad spectrum of kill claims including: Staphylococcus aureus, Methicillin Resistant(MRSA) and Community Associated Methicillin Resistant (CAMRSA) Staphylococcus aureus, Pseudomonas, Salmonella, Streptococcus, Adenovirus 5&7 [at 8 oz. per gallon], HIV-1 (associated with the AIDS Virus), HBV (Hepatitis B Virus), HCV (Hepatitis C Virus), Influenza A Virus/Brazil, Norwalk Virus, Rotavirus, SARS Associated Corona virus (cause of Severe Acute Respiratory Syndrome), and Vaccine Virus. Kills Pandemic 2009 H1N1 influenza A virus (formerly called swine flu). EPA states that all currently registered influenza A virus disinfectants for use on hard, nonporous products are also effective against the 2009-H1N1 flu strain and other influenza A strains.

For more information, visit <http://www.epa.gov/oppad001/influenza-disinfectan>

b) Household Bleach

Diluted household bleach: Available at grocery or drug stores. Procedure: Mix 3/4 cup household bleach with 1 gallon of water, or put 1/4 cup bleach in a one quart spray bottle and fill with water, or you can mix 1 part bleach to 10 parts water. (Note: dilutions from 1 part bleach to 9 parts water up to 1 part bleach to 100 parts water are listed as effective and acceptable by OSHA.) Solution must be freshly made within 24 hours. Wipe up gross blood or OPIM. Wipe or spray the bleach solution on the contaminated surface. Allow to remain 5 minutes. Rinse and air dry.

For technical information, call the Clorox Co.—1-800-292-2808.

LAUNDRY PRODUCES

Contaminated laundry shall remain on-site for cleaning/disposal.

Contaminated laundry shall be bagged at the location where it was used by employees, utilizing proper personal protective equipment.

- **It shall be placed in an appropriately designated area or container** for storage, washing, decontamination or disposal
- Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through or of leakage from the bag or container, the laundry shall be placed in bags or containers, which prevent soak-through and/or leakage of fluids to the exterior. (When applicable use a red bag with the word BIOHAZARD written on it.)

The employer shall ensure that employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment (e.g., use universal precautions).

REGULATED WASTE DISPOSAL

Regulated biowaste shall be placed in containers, which are closeable and are of the appropriate size to contain all contents. The containers will be strong enough to prevent leakage of fluids during handling, storage and transport. Red bags and red containers will be used by all departments to hold items that are soaked with blood or other potentially infectious substances/materials.

All waste containers must be closed and properly labeled prior to pick-up. If outside contamination of the waste container occurs, it shall be placed in a second clean container before pickup.

Disposal of all regulated waste shall be in accordance with applicable state and local regulations. All regulated waste shall be taken to the secure storage at building 4000.

Supervisors will ensure Biohazard Waste labels will be affixed to all containers used to dispose of blood or other potentially infectious substances/materials, or appropriate identified biohazards bags.



Universal Biohazard Symbol

HEPATITIS B VACCINATION

1. NVCCD shall make the Hepatitis B vaccination series available to all affected employees listed in the Exposure Determination. In addition, a post-exposure evaluation and follow-up shall be made available to all employees who are exposed to the HBV.
 2. Affected employees will be provided with an authorization memo, which they will turn into the Risk Management for any of these services.
 3. The District shall follow the regulations as stated in CCR, Title 8, Section 5193.
 4. The vaccination and post-exposure evaluation and follow-up including prophylaxis will be:
 - Available at no cost to the employee.
 - Available at a reasonable time and place.
 - Under the supervision of a licensed physician or another licensed health care worker;
 - Provided according to the recommendations of the USPHS (* please see below) and
 - An accredited laboratory shall conduct all lab tests.
- * The medical treatment for bloodborne pathogens may change over time. Cal/OSHA shall accept the CDC/USPHS guidelines current at the time of the evaluation or procedure.

NVCCD will ensure vaccine will be made available after an employee has received required training, within 10 working days of initial assignment. Employees must sign a declination form if they choose not to be vaccinated but may opt later to receive the vaccine at no cost to the employee.

Pre-vaccination screening for antibody status is not required as a condition of receiving the vaccine. The District can make it available at no cost to employees. An employee may decline the pre-screening, and the District must still make the vaccination series available to the employee. If the series is not completed, the vaccine must continue to be available, even if the series must be repeated. Should routine booster doses later be recommended by the USPHS, employees must be offered them.

Designated, or other first aid providers, whose primary job assignments are not first aid but render first aid for workplace injuries as collateral duty (such as a teacher/instructor helping a student) need not be offered pre-exposure vaccine if certain conditions exist, including availability of the full vaccination series as soon as possible, but no later than, 24 hours of

the provision of assistance in any situation involving the presence of blood or other potentially infectious material.

First aid incidents and exposure incidents occurring during normal work hours shall be reported to their supervisor before the end of the shift.

After hours reporting of a situation, including first aid where blood or other potentially infectious materials were present, is required. Such an event after hours or on weekends or during field trips shall be reported immediately to their supervisor.

Designated first aid providers (collateral duty) requirements:

- First aid is not a primary job duty.
- Not employed at a clinic, first aid station or other health care facility where people go to receive first aid.
- The designated employees have been trained.
- Are designated and included in this Program.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

NVCCD realizes the importance of the follow-up and evaluation of HBV, HCV and HIV exposure incidents. The District shall, therefore, follow the regulation as stated below:

1. Following a report of an exposure incident, the employer shall immediately make available to the exposed employee a confidential medical evaluation and follow-up, including at least the following elements:
 - a) Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred.
 - b) Identification and documentation of the source individual, unless the employer can establish that identification is not feasible or prohibited by State or local law.
 - ❖ The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV, HCV and HIV infectivity. If consent is not obtained, the employer shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
 - ❖ When the source individual is already known to be infected with HBV, HCV or HIV, status need not be repeated.
 - ❖ Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
 - c) Collection and testing of blood for HBV, HCV and HIV serological status.
 - ❖ The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.
 - ❖ If the employee consents to baseline blood collection but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be performed as soon as feasible.
 - d) Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service.

- e) Counseling.
- f) Evaluation of reported illnesses.

Counseling and evaluation of reported illnesses is not dependent on the employee's electing to have baseline HBV, HCV and HIV serological testing.

2. Information Provided to the Health Care Professional:

- a) The employer shall ensure that the health care professional responsible for the employee's Hepatitis B vaccination is provided a copy of the regulation(s).
- b) The employer shall ensure that the health care professional evaluating an employee after an exposure incident is provided the following information:

- ❖ A copy of this regulation.
- ❖ A description of the exposed employee's duties as they relate to the exposure incident.
- ❖ Documentation of the route(s) of exposure and circumstances under which exposure occurred.
- ❖ Results of the source individual's blood testing, if available.
- ❖ All medical records relevant to the appropriate treatment of the employee including vaccination status which are the employer's responsibility to maintain.

- c) Health care professional's written opinion:

The employer shall obtain and provide the employee with a copy of the evaluating health care professional's written opinion within 15 days of the completion of the evaluation.

- ❖ The health care professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.
- ❖ The health care professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:

The employee has been informed of the results of the evaluation.

❖ The employee has been informed of any medical conditions resulting from exposure to blood or other potentially infectious materials, which require further evaluation or treatment.

d) All other findings or diagnoses shall remain confidential and shall not be included in the written report.

COMMUNICATION OF HAZARDS TO EMPLOYEES

Labels and Signs

1. Warning labels shall be placed on refrigerators and freezers containing blood or other potentially infectious materials.
2. Labels shall comply with Title 8, Section 6004, and Health and Safety Code Sections 25080-25082.
3. Labels concerning bio-hazardous waste are covered in Health and Safety Code, Sections 25080-25082. Color coding is described in Title 8, Section 6003.
4. The District shall post signs at the entrance to work areas as described in the regulation.

INFORMATION AND TRAINING

1. The District shall provide training as described below to all affected employees meeting the occupational exposure definition.
 - Training shall occur at the time of initial assignment to tasks where occupational exposure may take place and at least annually thereafter.
 - Retraining shall occur as operations change affecting exposure.
 - The programs shall be provided at no cost and shall be delivered during work hours.
 - The content of the training shall be appropriate for the educational level of the employee.
 - All training sessions must be documented!

2. The content of the training shall include the following topics:
 - An explanation of the Bloodborne Pathogens Standard.
 - An explanation of the Bloodborne Pathogens Exposure Control Program and how to obtain a written copy.
 - Bloodborne disease edipemiology and symptoms.
 - Modes of transmission.
 - Recognition of tasks and activities that expose employees to the viruses.
 - The use and limitations of engineering controls, personal protective equipment, work practices.
 - Types, use, location, removal, handling and decontamination of personal protective equipment.
 - The basis for selection of personal protective equipment.
 - Information on the Hepatitis B vaccine.
 - Handling emergencies involving blood or other potentially infectious materials.
 - Exposure incident procedures and reporting.
 - Information on post-exposure follow-up and evaluation.
 - Signs, labels and other warnings.
 - Questions and other interaction.

3. The content of the training and qualifications of the presenter shall be documented on a training file form or through Keenan Safe Colleges.

RECORD KEEPING

NVCCD shall maintain accurate records on occupational exposure of each employee. These records shall be confidential and released only by the employee's written permission or as required by law or regulation. The records shall be maintained for thirty (30) years beyond the end of employment of the employee.

Content of Records

- Name and social security number of employee.
- Copies of HBV vaccination status and other relevant records.
- Copies of results of medical exams, testing and follow-up.
- Employer's copy of health care professional's written opinion as required in the regulation.
- Copy of the information provided to the health care professional as required in the regulation.

Training Records

- The dates of training sessions.
- Content summary of training.
- Names and qualifications of trainers.
- Names and job titles of all employees attending.

Sharps Injury Log

The District shall establish and maintain a Sharps Injury Log, which is a record of each exposure incident involving a sharp. The exposure incident shall be recorded on the log within 14 working days of the date the incident is reported to the employer. The recorded information shall include the following::

- Job classification of the exposed employee.
- Department or work area where the exposure incident occurred.
- The procedure that the exposed employee was performing at the time of the incident.
- How the incident occurred.
- The body part involved in the exposure incident.
- If the sharp had engineered sharps injury protection (ESIP) and whether it was activated.
- If there were no ESIP, the injured employee's opinion as to whether and how such a mechanism could have prevented the injury.

The employee's opinion about whether any other engineering, administrative or work practice control could have prevented the injury

APPENDIX A

Blood-borne Pathogens: Napa Valley Community College Employee Hepatitis B Vaccine Offer and Declination Form

My job has the potential to expose me to blood-borne pathogens. Because of this I am defined as at risk for infection with a blood-borne pathogen. I further understand that NVCCD must offer me free hepatitis B vaccinations. I have checked the box below that best represents my response to this offer:

- I accept this offer and will receive the hepatitis B vaccine series in the near future.
- I am currently in the process of receiving the vaccine series.
- By my signature below, I certify that I have already completed the three or four injection series of hepatitis B vaccine.
- I have had hepatitis B infection and do not require the vaccine.
- I **DECLINE** to receive hepatitis B vaccine at this time and I have signed and dated this statement at the bottom of the page. I understand that due to my occupational exposure to blood or OPIM I may be at risk of acquiring the hepatitis B virus (HBV) infection. 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 OPIM and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee's name (print): _____

Employee's signature: _____

Date of signature: _____

APPENDIX B

FIRST AID INCIDENTS EXPOSURE TO BLOODBORNE PATHOGENS

EVALUATION OF CIRCUMSTANCES

1. Date of Incident: _____
Time: _____
2. Location of Incident: _____
3. Witnesses: _____

4. Route of exposure _____
5. Exposure Circumstances: _____
 - A) Employee's activity at time of exposure: _____

 - b) Cause of exposure: _____

 - c) Part of body contaminated: _____

 - d) Other employees exposed: _____

 - e) Blood or OPIM present – describe: _____

5. Source individual; or accident victim(s) name; or source subject:

7. Exposed individual (name): _____

Position: _____

6. Exposure incident ID #: _____

Prepared by (name) _____

Position: _____

9. Individuals rendering first aid:

1. _____	Phone _____	PPE: _____
2. _____	Phone _____	PPE: _____
3. _____	Phone _____	PPE: _____

***IMMEDIATELY TAKE COMPLETED FORM TO
RISK MANAGEMENT OFFICE***

APPENDIX C

SHARPS INJURY LOG

1. Date and time of the exposure incident: _____
2. Type and brand of sharp involved in the exposure incident:

3. Description of the exposure incident:

4. Job Classification of the exposed employee: _____
5. Department or work area where the exposure incident occurred:

6. Describe the procedure that the exposed employee was performing at the time of the incident:

7. Description of Incident :

8. List the body part(s) involved in the exposure incident: _____

8. Did the sharp have engineered sharps injury protection and was it activated or not?

9. What is the employee's opinion about whether any other engineering, administrative or work practice control could have prevented the injury?

APPENDIX D

DEFINITIONS

1. **Affected Employee** – An employee who meets the occupational exposure definition based on their job duties. These employees must be included in the District’s Bloodborne Pathogens Program.
2. **Bloodborne Pathogens:** Pathogenic micro-organisms 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).
3. **Contaminated:** The presence or the reasonable anticipated presence of blood or other potentially infectious substances/materials on an item or surface.
4. **Contaminated Laundry:** Laundry that has been soiled with blood or other potentially infectious substances/materials or may contain sharps.
5. **Contaminated Sharps:** Any contaminated object that can penetrate the skin including, but not limited to needles, scalpels, broken glass, broken capillary tubes and ends of dental wires.
6. **Engineering Controls:** Controls that isolate or remove the bloodborne pathogens hazard from the workplace. Examples: Sharps disposal containers, self-sheathing needles, etc.
7. **Exposure Incident:** A specific eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious substances/materials that result from the performance of an employee’s duties.
8. **Occupational Exposure:** Reasonable anticipated skin, eye, mucous membrane or other parenteral contact with blood or other potentially infectious substances/materials that may result from the performance of an employee’s duties.
9. **Other Potentially Infectious Substances/Materials:**
 - A. The following human body fluids: Semen, vaginal secretions, cerebro-spinal fluids, synovial fluids, 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 between body fluids (such as in emergency response).
 - B. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).

- C. HIV-containing cell or tissue cultures, organ cultures and HIV or HBV contaminating culture medium or other solutions; and blood, organs or other tissues from experimental animals infected with HIV or HBV.
10. **Parenteral:** Piercing mucous membranes or the skin barrier through such events such as needle sticks, human bites, cuts and abrasions.
 11. **Personal Protective Equipment:** Specialized equipment worn by an employee for protection against a hazard. General work clothes are not intended to function as protection against a hazard and are not considered personal protective equipment.
 12. **Regulated Waste:** Liquid or semi-liquid blood or other potentially infectious substances/materials, contaminated items that would release blood or other potentially infectious substances/materials in a liquid or semi-liquid state if compressed, items that are caked with dried blood or other potentially infectious substances/materials and are capable of releasing these substances/materials during handling, contaminated sharps and pathological and other micro-biological waste containing blood or other potentially infectious substances/materials. Includes “medical waste” as regulated by California Health and Safety Code, Chapter 6.1.
 13. **Universal Precautions:** Is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain body fluids are treated as if known to be infectious for HIV, HBV or other bloodborne pathogens.
 14. **Work Practice Controls:** Controls that reduce the likelihood of exposure by altering the manner in which a task is performed. (Example: Prohibiting recapping of needles by two-handed technique.)