

Hamilton College Occupational Health and Safety Procedures

PROCEDURE 3.0—EXPOSURE CONTROL PLAN

3.1 INTRODUCTION

Purpose

Acquired Immunodeficiency Syndrome (AIDS) and hepatitis B warrant serious concerns for workers occupationally exposed to blood and certain other body fluids that contain bloodborne pathogens. In recognition of these potential hazards, the Occupational Safety and Health Administration (OSHA) has implemented a regulation (Bloodborne Pathogens 29 CFR 1910.1030) to help protect workers from the transmission of bloodborne diseases within potentially exposed workplace occupations. The OSHA standard can be accessed [HERE](#).

Scope

Hamilton College is committed to providing a safe and healthy work environment for its employees, and for the greater college community in general. In pursuit of this endeavor, the following Exposure Control Plan (ECP) has been developed to eliminate or otherwise control occupational exposures to bloodborne pathogens. The ECP addresses the following:

- Identification of Employees at Risk
- Methods of Implementation and Control
 - A. Training and Communication of Hazards to Employees
 - B. Hepatitis B Vaccination
 - C. Recordkeeping
 - D. Universal Precautions & Housekeeping
 - E. Engineering and Work Practice Controls
 - F. Personal Protective Equipment and PPE Precautions
 - G. Labeling and Infectious Waste Disposal
- Exposure Evaluation Procedures

Additionally, the appendix to the ECP contains critical information relative to where certain articles of PPE and other equipment, including Public Access Defibrillators (PAD's) and Cardiopulmonary Resuscitation (CPR) stations, are located on campus.

Applicability

The Associate Director of Human Resources and the Director of Environmental Protection, Safety & Sustainability (EPS&S) will maintain and update the College's written Exposure Control Plan at least annually, or as otherwise necessary so as to include new or modified tasks and procedures.

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3.2 IDENTIFICATION OF EMPLOYEES AT RISK

The College has identified and classified all workers in one of the three exposure categories listed below. This classification is based on the routine work performed by individuals and whether performing tasks that involve the potential exposure to blood and body fluids is considered a condition of employment.

Exposure Categories:

- Category I Employees whose routine work includes tasks that involve exposure to blood, body fluids or tissues. All procedures or other job-related tasks that involve an inherent potential for mucous membrane or skin contact with blood, body fluids, or tissues, or a potential for spills or splashes of them, are Category I tasks.
- Category II Employees whose normal work routine does not include tasks that involve exposure to blood, body fluids, or tissues, but whose employment may require performing unplanned Category I tasks.
- Category III Employees whose routine work does not include tasks that involve exposure to blood, body fluids, or tissues. These individuals are not called upon as part of their employment to perform or assist in emergency medical care or first aid, or to be potentially exposed in some other way.

Job titles classified under each exposure category:

- Category I Athletic Equipment Manager; Athletic Trainers (including Student Athletic Trainers); Custodians; Emergency Medical Technicians; Medical Secretary, Student Health Services; Nurse Practitioner; Registered Nurse; Campus Safety Officers; Lifeguards
- Category II Area Coordinators; Coaches; Fitness Center Staff; Resident Advisors; Grounds Service Workers; Horticultural Grounds Workers; Maintenance Mechanics
- Category III All other Administration, Staff, Faculty, and Maintenance and Operations employees not already identified in Categories I and II.

All exposure determinations for Categories I and II were made without regard to the use of Personal Protective Equipment (PPE).

3.3 METHODS OF EXPOSURE CONTROL

Training & Communication of Hazards to Employees

All employees who have (or are reasonably anticipated to have) occupational exposure to bloodborne pathogens (those in Categories I or II) will receive training conducted by Student Health Services, the Associate Director of Human Resources, the Director of Campus Safety, the Director of EPS&S, or other qualified internal or external personnel. Information may be communicated using a variety of media including videos, written materials and live presentation. The training program will cover, at a minimum, the following elements:

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- An accessible copy and explanation of the applicable OSHA standard;
- Epidemiology and symptoms of bloodborne pathogens;
- Modes of transmission;
- The College's Exposure Control Plan and how to obtain a copy;
- Methods to recognize exposure tasks and other activities that may involve exposure to blood;
- Use and limitations of Engineering Controls, Work Practices, and PPE;
- PPE - types, use, location, removal, handling, decontamination and disposal;
- Hepatitis B Vaccine - offered free of charge. Training will be given prior to vaccination on its safety, effectiveness, benefits and method of administration;
- Emergency procedures - for blood and other potentially infectious materials;
- Exposure incident procedures;
- Post-exposure evaluation and follow-up;
- Signs and labels - and/or color coding;
- Question and answer session.

Training will be given to employees initially within ten (10) days of employment, and annually thereafter.

Hepatitis B Vaccination

Employees in Categories I and II will be offered the Hepatitis B vaccination without charge within ten (10) days of employment. Employees who elect not to be vaccinated at that time must sign a declination waiver. Employees who have waived the Hepatitis B vaccination may change their minds and receive the vaccine free of charge at a later point in time. The form used to document both the vaccination and the declination is included in Attachment 1 below.

Recordkeeping

Training records (including the dates of training, name of person(s) conducting the training, and the names/job titles/signatures of all attendees) will be maintained by the office(s) conducting the training for their personnel. Alternatively, departments may choose to store training records in the Office of EPS&S. Confidential medical records for any employee who has been exposed to bloodborne pathogens and has sought medical diagnosis and/or treatment will be maintained by the Office of Human Resources or Student Health Services, dependent upon the division in which the employee works. All medical records will be maintained for at least the duration of employment, plus 30 years. This information will include:

- Name and social security number;
- Copy of employees hepatitis B vaccination status including dates of vaccinations and relevant supporting records,
- Copy of all results of examinations, medical testing, and follow up procedures;
- Copy of any healthcare professional's written opinion; and
- Copy of any exposure incident evaluation reports.

Universal Precautions & Housekeeping

Universal precautions will be observed by all employees in order to prevent contact with blood

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or other potentially infectious materials. All blood or other potentially infectious materials will be considered infectious regardless of the perceived status of the source individual. Other potentially infectious materials include the following:

- Semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid visibly contaminated with blood, all body fluids in situations where it is difficult or impossible to differentiate between body fluids.
- Housekeeping of contaminated surfaces/equipment will typically be accomplished by utilizing a 10% (minimum) solution of chlorine bleach.
- All contaminated work surfaces, tools, objects, etc. will be decontaminated immediately or as soon as feasible after any spill of blood or other potentially infectious materials. The bleach solution or disinfectant must be left in contact with contaminated work surfaces, tools, objects, or potentially infectious materials for at least 10 minutes before cleaning.
- Equipment that may become contaminated with blood or other potentially infectious materials will be examined and decontaminated before servicing or use.
- Broken glassware will not be picked up directly with the hands. Sweep or brush material into a dustpan.
- Known or suspected contaminated sharps shall be discarded immediately or as soon as feasible in containers that are closeable, puncture-resistant, leak-proof on sides and bottom, and marked with an appropriate biohazard label. If a sharps container is not pre-labeled, biohazard labels are available through EHS.
- When containers of contaminated sharps are being moved from the area of use or discovery, the containers shall be closed immediately before removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.
- Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner that would expose employees to the risk of percutaneous injury.

Engineering & Work Practice Controls

Engineering and work practice controls will be utilized to eliminate or minimize all employee exposures, as follows:

- Employees must wash their hands or other skin with soap and water, or flush mucous membranes with water, as soon as possible following an exposure incident (such as a splash of blood to the eyes or an accidental needle stick). *
- Employees must wash their hands immediately (or as soon as feasible) after removal of gloves or other personal protective equipment. *

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*Employees shall familiarize themselves with the nearest hand washing facilities for the buildings in which they work. Because most college buildings are public access, they will have available hand washing facilities in public restrooms. (If hand washing facilities are not available, employees will be provided with either an antiseptic cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. If these alternatives are used, then the hands are to be washed with soap and water as soon as feasible.)

- Employees who encounter improperly disposed needles shall notify the Director of Environmental Protection & Safety (or the Director of the Health Center) to look into and resolve the matter through the use of sharps containers.**

**Needles should never be recapped, and needles should only be handled by using a mechanical device or tool (forceps, pliers, broom, dust pan).

- Breaking or shearing of needles is prohibited.
- No eating, drinking, smoking, applying cosmetics or lip balm, or handling contact lenses is allowed in a work area where there is a reasonable likelihood of occupational exposure.
- No food or drinks shall be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.
- Employees must perform all procedures involving blood or other potentially infectious materials in such a manner as to minimize splashing, spraying, splattering, and generation of droplets of these substances.

Personal Protective Equipment (PPE)

Personal Protective Equipment (PPE) must be used if occupational exposure remains after instituting engineering and work practice controls, or if those controls are not feasible. Training will be provided in the use of the appropriate personal protective equipment for employee's specific job classifications and tasks/ procedures they will perform. Articles of PPE include but are not limited to:

- Gloves, gowns, lab coats, face shields, masks, eye protection (splash-proof goggles or safety glasses with side shields), resuscitation bags and mouthpieces.

PPE Precautions

As a general rule, all employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
- Remove protective equipment before leaving the work area and after a garment becomes contaminated.

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- Place used protective equipment in appropriately designated areas or containers when being stored, washed, decontaminated or discarded.
- Wear appropriate gloves when it can be reasonably anticipated that you may have contact with blood or other potentially infectious materials and when handling or touching contaminated items or surfaces. Replace gloves if torn, punctured, contaminated, or if their ability to function as a barrier is compromised.
- Following any contact of body areas with blood or any other infectious materials, you must wash your hands and any other exposed skin with soap and water as soon as possible. Employees must also flush exposed mucous membranes (eyes, mouth, etc.) with water.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised. The decontamination procedure will consist of soaking in a chlorine solution 2%, diluted 10:1. Discard utility gloves when they show signs of cracking, peeling, tearing, puncturing or deterioration.
- Never wash or decontaminate disposable gloves for reuse or before disposal.
- 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.

Labeling, Collection and Handling of Regulated Medical Wastes

Regulated medical waste shall be placed in sturdy containers that are closeable, constructed to contain all contents and prevent leakage of fluids during handling, storage, transportation or shipping. The waste must be labeled or color coded and closed before removal to prevent spillage or protrusion of contents during handling, storage, or transport. Biohazard bags and labels are available through the EHS department office.

Following departmental generation, all biohazard waste will be transported to the Science Facility Biohazard Storage Room, to await shipment offsite.

3.4 Post Exposure Evaluation Procedures

Immediate Response to an Exposure

- Wash blood or potentially infectious fluid from the contaminated body area(s) with soap and running water.
- Be evaluated immediately by **one of the following** to determine if the exposure is **significant** and needs medical follow-up:
 1. The nursing personnel at the Student Health Service during the hours that they are open. (Monday through Friday 8:30 am – 4:30 pm during the academic year);
 2. The Hamilton College EMT's. (during the hours that the Health Center is closed during the academic year);

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3. The Director or Assistant Director of Campus Safety or the Coordinator of HCEMS during college breaks or any other time the Health Service and HCEMS are closed.
- If the exposure is determined to be significant, **proceed immediately** to a local hospital emergency department for further medical evaluation. The emergency department will follow specific procedures to determine if prophylactic medication for Hepatitis B and HIV should be initiated.
 - If the exposure is not significant, no further medical follow up is necessary. Documentation of this assessment will be kept in the exposed individual's employee health record by either the Human Resources Office, or the Office of Student Health Services.
 - The supervisor of the exposed individual should be notified as soon as possible

Definition of Significant Exposure

Criteria in both (1) and (2) must be met for the exposure to be considered a significant exposure which would require immediate clinical follow-up at a local hospital Emergency Department*:

1. The body substance was:

- Blood, semen, vaginal secretions, an internal body fluid (e.g., cerebrospinal, peritoneal, pericardial, pleural, amniotic, synovial or joint fluid), **OR**
- Any other body fluid visibly contaminated with blood; **OR**
- Exposure was to a body fluid during a circumstance where it was **difficult or impossible** to differentiate the fluid type involved and is therefore considered potentially hazardous;

AND

2. The type of injury or contact provided a portal of entry;

- Percutaneous exposure (e.g., a penetrating injury with a contaminated implement that went through the skin such as needlestick or cut),
- Mucous membrane contact (e.g., the body fluid splashed in the eyes or mouth),
- Non-intact skin contact** (e.g., the body fluid came in contact with open skin such as dermatitis or abrasion).

* If the exposed individual is not satisfied with the determination regarding significant exposure, they should be referred to a local hospital Emergency Department.

** If there has been prolonged contact with intact skin or a massive blood exposure, the exposure should be considered significant.

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Documentation

The following information must be documented through the use of Attachment 2 below:

- The routes of exposure and how exposure occurred;
- The source of the body fluid, unless that identification cannot be established;
- If the exposure was significant or not;
- If the individual was referred to a local hospital Emergency Department for further evaluation;
- The Physician evaluating the exposed individual will provide a written opinion to the college. This opinion is limited to a statement that the employee has been informed of the results of the evaluation and told of the need, if any, for further evaluation and treatment. All other findings are confidential.

Emergency Medical Responders

Members of HCEMS (Hamilton College EMT's), Campus Safety Officers and Hamilton College Lifeguards are considered Emergency Medical Response employees. These individuals would follow the same procedure as above. However, they must notify the **Ryan White Officer** if a significant exposure occurs while responding to an emergency. The *Ryan White Officer* for Hamilton College is the Coordinator of HCEMS. The *Ryan White Officer* is responsible for carrying out the duties of a designated Officer in accordance with the Ryan White CARE Act provisions for ERE's.

A copy of the Ryan White CARE ACT is available in the Office of the Coordinator of HCEMS and Campus Safety Office

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ATTACHMENT 1 OSHA Bloodborne Pathogen Hepatitis B Vaccination & Declination Form

For Completion by the Employee:	
Employee Name	
Social Security #	
Department	
Date of Hire (for new employees)	

I have participated in training provided by Hamilton College that addresses the OSHA regulations on bloodborne pathogens, universal precautions and the Hepatitis B vaccine. The training provided to me was conducted by:

List training provider/date here: _____

Further, I understand that Hamilton College will offer the Hepatitis B vaccine to me at no cost.

At this time, my decision regarding the Hepatitis B vaccination is as indicated:

_____ **Yes**, I wish to receive the vaccination. I understand and commit to the full series of 3 injections.

Employee Signature _____ Date

For Completion by Student Health Services (or other provider administering the Hepatitis B Vaccine):	
Dept. or Provider Administering the Vaccine:	
Employee Name	
Date of 1 st Shot	
Date of 2 nd Shot	
Date of 3 rd Shot	

_____ **No**, I do not want to receive the vaccination. I understand that I may change my mind and receive the vaccine at a later date. *(You must sign the declination statement below if you choose not to have the vaccination even if the reason is that you have already received the vaccination.)*

Hepatitis B Vaccine Declination Statement *Employee Waiver of Immunization*

I understand that due to my occupational exposure to blood and 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. I also understand that 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 that time, at no charge to me.

Employee Signature _____ Date

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APPENDIX

Emergency Medical Equipment/PPE Locations & Procedures

Hamilton College, either by regulatory obligation or as a best management practice, maintains certain emergency medical equipment and/or PPE on campus that is available for use by the greater college community. Generally speaking, this equipment/PPE is in addition to what trained and authorized emergency medical response personnel/departments typically maintain. The purpose of such equipment/PPE is to permit members of the public who are trained and knowledgeable with emergency medical assistance techniques to render first aid as a “good samaritan” between the onset of an emergency medical incident and the arrival of College’s emergency medical response personnel.

1. Public Access Defibrillator Program

Program Purpose

In order to increase the College’s ability to respond to sudden cardiac arrest incidents, and to be able to provide the necessary emergency equipment to certain members of the greater college community, 7 Public Access Defibrillators (PAD’s) are maintained on campus, as follows:

PAD’s Maintained by Emergency Medical Response Personnel

- 1 maintained/carried by the Student Health Center staff
- 1 maintained/carried by Campus Safety staff
- 2 maintained/carried by the Athletic Training Facility staff

PAD’s Stationed in Areas of High Public Occupancy (w/External Signage Indicating Location)

- 1 in the Field House (near the main entrance facing the Science Center)
- 1 in Wellin Hall (near the main entrance from Schambach Hall)
- 1 in the Blood Fitness & Dance Center (near the northeast main entrance)

PAD Use Requirements

Personnel on campus who are authorized to use PAD’s include only those trained and authorized through the Student Health Center as part of a CPR/First Aid/AED training course, or those who have been through equivalent training off-campus and are similarly authorized.

PAD Maintenance and Recordkeeping

Trained and authorized PAD users in the Student Health Center, Campus Safety, and Athletic Training Facility will each be responsible for performing routine equipment checks on the PAD’s maintained in their respective areas, in accordance with manufacturer recommendations. The Student Health Center will further be responsible for equipment checks on the PAD’s located in the Blood Fitness Center, Field House and Wellin Hall. All documentation generated as a result of these equipment checks will be maintained for the life of the equipment by the Student Health Center. In the event manufacturer repairs are required, the Student Health Center will facilitate those repairs directly with the according manufacturer or vendor, and will retain all documentation for the life of the equipment.

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2. Cardiopulmonary Resuscitation (CPR) Equipment Program

Program Purpose

The College is required to stage and make available certain equipment related to the safe performance of CPR in locations designated by the New York State Department of Health. These locations generally include eating/dining facilities, bars, theaters and health/fitness facilities. In order to comply with this requirement, 12 CPR stations are maintained on campus, as follows:

CPR Stations in Eating/Dining Facilities and Bars

- Commons Dining Hall (near west side main entrance on the 1st floor)
- McEwen Dining Hall (within the servery area on the 2nd floor)
- Bundy Dining Hall (near the kitchen area on the 1st floor)
- Howard Diner (near the checkout area on the 1st floor)
- Café Opus 1 in McEwen (near the serving counter on the 1st floor)
- Café Opus 2 in Science (near the serving counter on the 1st floor)
- The Little Pub (near the bar area on the 1st floor)
- Blood Fitness & Dance Center Café/Juice Bar (see below)

CPR Stations in Theatrical Facilities

- Minor Theater (near the west side main entrance on the 1st floor)
- Wellin Hall (next to the PAD near the main entrance from Schambach Hall on the 1st floor)

CPR Stations in Health/Fitness Facilities

- Blood Fitness & Dance Center (next to the PAD near the northeast main entrance on the 1st floor)
 - Note—this CPR station will also serve as the designated device for the Café/Juice bar on the 1st floor of the facility
- Alumni Gymnasium (within in the main office on the 1st floor)
- Field House (next to the PAD near the main entrance facing the Science Center)

CPR Station Contents

Each staged CPR station comes equipped with a sign to properly identify the device and its purpose, and includes the PPE:

- 2 adult exhaled air resuscitation masks
- 2 pediatric exhaled air resuscitation masks
- 8 latex free, exam quality disposable gloves
- 4 antimicrobial wipes
- 1 biohazard bag

CPR Station Use Requirements

Since the College's designated emergency medical response personnel typically carry their own PPE to medical emergencies, the principal purpose of the CPR stations is to provide other members of the public/greater college community with suitable PPE so that they may begin emergency medical assistance in advance of the arrival of designated responders.

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CPR Station Inspection, Maintenance and Resupply

The Director of Environmental Protection, Safety & Sustainability is generally responsible for staging, maintaining and resupplying any CPR stations when their supplies are either used for their intended purpose or otherwise depleted through tampering. However, given the intent and functional location of the CPR stations in the first place, departments or offices managing or otherwise responsible for the activity that requires the stations are charged with performing routine inspections to ensure functionality. Inspections should be conducted on a monthly basis (or as needed based upon use/tampering), and any discrepancies should be reported to the Director of Environmental Protection, Safety & Sustainability, as follows:

- Bon Appétit is responsible for the 5 stations at Commons Dining Hall, McEwen Dining Hall, Bundy Dining Hall, Little Pub and Howard Diner
- Café Opus is responsible for the 2 stations at Opus 1 (in McEwen) and Opus 2 (in Science)
- The Performing Arts Administrator is responsible for the station at Wellin Hall
- The Director of Technical Theater is responsible for the station at Minor Theater
- The Athletics Department is responsible for the 3 stations at the Blood Fitness & Dance Center, Alumni Gymnasium and the Field House