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## 1.0 General Policy

The University of New Haven is committed to providing a safe and healthy work environment for our employees. A Bloodborne Pathogens Exposure Control Plan (Plan) eliminates or minimizes occupational exposure to bloodborne pathogens in accordance with OSHA 29 CFR 1910.1030. The Plan is designed to protect employees from exposure to blood and other potentially infectious materials (BIPIM) found in human blood and other body fluids. The Bloodborne Pathogens standard is the basis for this written exposure control plan, and it is the policy of the University of New Haven to meet or exceed the requirements of the standard.

### 1.1 Purpose

The purpose of this Plan is to protect University of New Haven employees from exposure to blood and other potentially infectious material since exposure could result in transmission of bloodborne pathogens which could lead to serious illness or death.

The University of New Haven adheres to the Plan to ensure the safety and wellbeing of all employees who could be reasonably anticipated, as a result of performing their job duties, to face contact with blood and other potentially infectious materials (affected employees).

### 1.2 Review

The Associate Vice President of Public Safety & Administrative Services will review and update this Plan whenever necessary or at least annually through ongoing observations of potential occupational exposure to employees, based on the following:

- Changes in job duties, employee assignments, processes or operations that would change the potential for occupational exposure or change which employees would be affected; or
- Changes in applicable regulations; or
- Changes in technology that could eliminate or reduce exposures; or
- Observed discrepancies or inadequacies of this Plan.

The University of New Haven will solicit input from non-managerial employees responsible for the clean-up of blood and other potentially infectious materials as well as those who are potentially exposed to injuries from contaminated sharps regarding the identification, evaluation, and selection of effective engineering and work practice controls and will document the solicitation.

All the elements of this Plan are considered University of New Haven policy and may be enforced as

such. Failure on the part of the employees to follow the policies and safety requirements of this Plan may result in disciplinary action.

## 2.0 Exposure Determination (Affected Employees)

It has been determined that there are certain University of New Haven employees who have been identified as having potential occupational exposure. Those employees are subject to all the provisions of this Plan.

Employees with the following job classifications who engage in any of the following activities at the University of New Haven have been identified as having a potential occupational exposure:

Job Title and Department	Job Description(s)
Housekeeper / Custodial Services	<ul style="list-style-type: none"> <li>• Handler of regulated waste</li> <li>• Clean-up of blood or other potentially infectious materials</li> </ul>
Facilities	<ul style="list-style-type: none"> <li>• Working in and around potentially infectious areas</li> </ul>
First Responders	<ul style="list-style-type: none"> <li>• Administer first aid</li> <li>• Assist employees who have been injured</li> </ul>
University of New Haven Police	<ul style="list-style-type: none"> <li>• Taking unruly persons into custody</li> <li>• Potential to assist employees and/or students who have been injured</li> </ul>
On-site Nursing Staff	<ul style="list-style-type: none"> <li>• Administering vaccinations, working with patients</li> </ul>
Dental Hygiene Staff	<ul style="list-style-type: none"> <li>• Working around patients</li> </ul>
Resident Directors/Residential Assistants	<ul style="list-style-type: none"> <li>• Potential to assist students who have been injured</li> </ul>
Biology and Forensic Science Instructors	<ul style="list-style-type: none"> <li>• Potential exposure with class lectures and laboratory preparation</li> </ul>
Sports Coaching Staff	<ul style="list-style-type: none"> <li>• Administer first aid</li> <li>• Assist students who may have been injured</li> </ul>
Mail Room Staff	<ul style="list-style-type: none"> <li>• Potential to handle potentially infectious materials</li> </ul>



Employees must wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment. Employees must wash their hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

### 3.3 Contaminated Sharps

A sharp is defined as any object that can penetrate the skin. Contaminated sharps at the University of New Haven may include spent needles and broken glass that have come in contact with blood or other potentially infectious materials. Contaminated sharps may also include a tool, metal part or any other sharp object that has come into contact with blood or other body fluids and is capable of breaking the skin.

Contaminated needles and other contaminated sharps must not be bent or recapped. Shearing or breaking of contaminated needles is prohibited. If contaminated sharps are discovered or generated by an accident (such as broken glass), they must not be handled directly with the hands, but rather with mechanical means such as a dustpan and brush or forceps and placed into a proper sharps container. If cleanup tools are to be re-used, they must be decontaminated with an effective disinfectant before being placed back in service.

Reusable sharps that are contaminated with blood or other potentially infectious materials must not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.

Contaminated sharps must be discarded immediately or as soon as feasible in containers that are:

- Closable;
- Puncture-resistant;
- Leak proof on sides and bottom; and
- Labeled or color-coded as a biohazard.

During use, containers for contaminated sharps must be:

- Easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found;
- Maintained upright throughout use; and

- Replaced routinely and not be allowed to overfill.

When moving containers of contaminated sharps from the area of use, the containers must be:

- Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping; and
- If leakage is possible, place it in a secondary container. The second container must be closable, constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping; and labeled or color-coded as a biohazard.

Reusable containers must not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury.

### 3.4 Housekeeping

The University of New Haven will ensure that the work area is maintained in a clean and sanitary condition.

All equipment and working surfaces will be cleaned and decontaminated after contact with blood or other potentially infectious materials. Contaminated work surfaces will be decontaminated with an appropriate disinfectant immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials.

All trash containers, pails, cans, and similar receptacles intended for routine re-use which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials will be decontaminated as soon as possible if visibly contaminated.

A readily observable label must be attached to the equipment stating which portions remain contaminated.

### 3.5 Avoid Food and Drink Around Infectious Materials

Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure. Food and drink will not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present or in areas that have been specifically labeled with the bio-hazardous sticker.









## 4.2 Declining the Hepatitis B Vaccination

Following training, an employee identified as having an occupational exposure may decline having the hepatitis B vaccination. The University of New Haven will assure that employees who decline the hepatitis B vaccination sign the declination statement in Appendix A. If the employee initially declines the hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, University of New Haven will make available the hepatitis B vaccination at that time.

## 4.3 Hepatitis B Vaccination Booster

If a routine booster dose(s) of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) will be made available in accordance with section 1910.1030(f)(1)(ii).

## 4.4 Post-Exposure Evaluation and Follow-up

Following a report of an exposure incident, the University of New Haven will make immediately available to the exposed employee a confidential medical evaluation and follow-up, including at least the following elements:

- Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;
- Identification and documentation of the source individual, unless the University of New Haven can establish that identification is infeasible or prohibited by state or local law;
- The source individual's blood will be tested as soon as feasible and after consent is obtained

obtained. If the employee consents to baseline blood collection but does not give consent at that time for HIV serologic testing, the sample will 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 will be done as soon as feasible.

Post-exposure treatment that may prevent onset of the disease will be administered, when medically indicated, as recommended by the U.S. Public Health Service, counseling and evaluation of reported illnesses.

#### 4.5 Information Provided to, and Written Opinion of, the Healthcare Professional

- That the employee has been informed of the results of the evaluation;
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records will be maintained for the duration of employment plus 30 years.

Employee medical records will be provided upon request for examination and copying to the subject employee, to anyone having written consent of the subject employee, to the Director and to the Assistant Secretary in accordance with 29 CFR 1910.1020.



- An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
- An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices and personal protective equipment;
- Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
- An explanation of the basis for selection of personal protective equipment;
- Information on the Hepatitis B vaccine including information on its efficacy, safety, method of administration, the benefits of being vaccinated and that the vaccine will be offered free of charge;
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available;
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident;
- An explanation of the signs, labels and color coding; and
- An opportunity for interactive questions and answers with the person conducting the training session.

## 7.2 Training Records

Training records will include the following information:

- The dates of the training sessions;
- The contents or a summary of the training sessions;
- The names and qualifications of persons conducting the training; and
- The names and job titles of all persons attending the training sessions.

Training records will be maintained for 3 years from the date on which the training occurred and will be provided upon request for examination and copying to employees, to employee representatives, to the Director and to the Assistant Secretary.

## 7.3 Transfer of Records

The University of New Haven will comply with the requirements involving transfer of records set



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## HEPATITIS B VACCINATION DECLINATION FORM

Date: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Employee ID#: \_\_\_\_\_

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

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Facility Representative Signature

\_\_\_\_\_  
Date