

BLOODBORNE
PATHOGENS
EXPOSURE
CONTROL
PLAN

## Introduction

Pasadena Area Community College District ("District") is committed to providing our staff with a safe and healthy work environment. Our Bloodborne Pathogens Exposure Control Plan (ECP) is designed to effectively minimize the risk of occupational exposure to bloodborne pathogens in accordance with the OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Path to effectively minimize the risk of occupational exposure to bloodborne pathogens in accordance with the OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

Bloodborne pathogens are microorganisms, such as viruses or bacteria in human blood or body fluids, that can cause sickness, disease, and sometimes death. The Hepatitis B virus (HBV), Hepatitis C virus, and Human Immunodeficiency Virus are all examples of BBP's. Bloodborne Pathogens may also be found in Other Potentially Infectious Materials (OPIM).

The ECP is a crucial document that assists the District in implementing and maintaining compliance with the standard while prioritizing the well-being of our employees. It encompasses several key components, including:

- Assessing employee exposure levels
- Implementing various methods for exposure controls
- Effectively communicating hazards to employees and providing comprehensive training
- Maintaining accurate records
- Establishing procedures to evaluate circumstances surrounding exposure incidents

This ECP provides detailed guidance on the implementation methods for these standard elements.

#### **Program Administration**

The Assistant Superintendent/Vice President of Business & College Services, Executive Director of Business Services, Assistant Superintendent/Vice President of Human Resources, Executive Director of Facilities & Construction Services, and Chief of Campus Police & Safety Services collectively serve as the Administrators. Their primary responsibility is to implement the ECP. The Administrators are committed to maintaining, reviewing, and updating the ECP annually or as needed, as well as whenever necessary to incorporate new or modified tasks and procedures. The contact information for the Administrators, including their location, email, and phone number, is on the District website and directory at https://pasadena.edu/directory/index.php.

The Administrators, managers, and supervisors overseeing departments with potential exposure to blood or other infectious materials (OPIM) are designated as Responsible Parties. They are responsible for adhering to this ECP's procedures and work practices.

The Responsible Parties are responsible for providing and maintaining all necessary personal protective equipment (PPE), engineering controls (such as sharps containers), labels, and red bags as mandated by the standard. They are also responsible for ensuring an adequate supply of the mentioned equipment in appropriate sizes.

Furthermore, the Responsible Parties perform all required medical actions outlined by the standard and maintain appropriate employee health and OSHA records. They must provide training, document it, and make the written ECP readily available.

The Responsible Parties must ensure that employees identified to have occupational exposure to blood or OPIM must adhere to the procedures and work practices specified in this ECP.

The contact information for the Administrator and Responsible Parties, including their location and phone number, is located on the District website and directory at https://pasadena.edu/directory/index.php for more details.

#### **EMPLOYEE EXPOSURE**

Employees in certain departments may encounter occupational hazards that could impact their well-being. These employees must be mindful of the potential risks associated with their day-to-day tasks. The District departments that encompass various job classifications that may involve heightened occupational exposure are the Campus Police & Safety Services, Career Technical Education, Child Development, Culinary Arts & Hospitality Management, Fire Technology, Facilities & Construction Services, Health Services, Natural Sciences, Kinesiology, Health & Athletics, and Disabled Student Services. Individuals working in these departments should be aware of the potential risks associated with their tasks and take necessary precautions to ensure their safety.

## **EXPOSURE CONTROL**

The Exposure Control Plan provides an explanation of bloodborne pathogens. Employees will receive ECP during their annual training. Employees can conveniently request a copy of their department's ECP from their supervisor or download a copy from the Risk Management Services webpage at https://pasadena.edu/business-administrative-services/risk-management/safety-and-training.php.

The ECP will be reviewed and updated annually, or as necessary, by the Responsible Parties. This guarantees that any new or modified tasks and procedures that could impact occupational exposure and any changes in employee positions involving occupational exposure are accurately documented in the plan.

### **UNIVERSAL PRECAUTIONS**

Universal precautions for bloodborne pathogens are guidelines and procedures designed to prevent transmitting infectious diseases through blood or other potentially infectious materials. All employees will utilize universal precautions, such as those listed below.

*Hand Hygiene:* Wash hands thoroughly with soap and water or use an alcohol-based hand sanitizer before and after contact with blood or potentially infectious materials.

*Personal Protective Equipment (PPE):* Use gloves, masks, gowns, and eye protection when there is a risk of exposure to blood or bodily fluids.

*Engineering Controls:* These include safety devices such as sharps containers, needleless systems, and biohazard waste disposal containers to minimize the risk of injury and exposure to bloodborne pathogens.

*Work Practice Controls:* Follow proper procedures for handling and disposing of contaminated materials, including safe needle disposal techniques, proper cleaning and disinfection protocols, and minimizing splashing or spraying blood or bodily fluids.

*Training And Education:* Ensure healthcare workers receive appropriate training on bloodborne pathogens, including infection transmission, proper precautions, and emergency response procedures.

These precautions are crucial where there is a higher risk of exposure to bloodborne pathogens. Employees can protect themselves and prevent the spread of infectious diseases by following these guidelines. It's important to note that specific precautions may vary depending on the type of bloodborne pathogen and the nature of the exposure risk. Always consult official guidelines and regulations from reputable sources such as the Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) for the most up-to-date information.

# ENGINEERING CONTROLS & WORK PRACTICES

Engineering and work practice controls are implemented to prevent or minimize exposure to bloodborne pathogens. Engineering controls are strategic measures designed to protect workers from hazardous conditions. These measures create barriers between workers and hazards. Engineering controls include using, maintaining, and inspecting fume hoods,

biological safety cabinets, sharps disposal containers, self-sheathing needles, biohazard waste containers, hand-washing facilities, and air ventilation systems that remove harmful substances. To prevent overfilling, sharps disposal containers are to be inspected and maintained or replaced by designated departmental staff under the guidance of the Responsible Party.

The Responsible Parties will evaluate the need for engineering controls and work practices improvements by reviewing OSHA records, conducting employee interviews, and engaging in committee activities. They will also regularly assess new procedures and products. This process involves the active participation of department management and staff. The Responsible Parties bear the responsibility of ensuring the implementation of these recommendations.

# PERSONAL PROTECTIVE EQUIPMENT

Employees are provided with PPE at no cost to them. The department supervisors and managers will provide the necessary PPE and training on using PPE appropriately for specific tasks or procedures. The available types of PPE include single-use gloves, gloves, eye protection, protective garments such as gowns, aprons, lab coats, uniforms, and masks, as well as face shields, safety goggles, glasses, hoods, hair nets, and shoes or boot covers.

Employees using PPE must adhere to the following precautions:

- Wash hands promptly after removing gloves or other PPE.
- Remove contaminated PPE before leaving the work area.

- Dispose of used PPE in appropriate containers for storage, laundering, decontamination, or disposal.
- Wear suitable gloves when there is a likelihood of hand contact with blood or other
  potentially infectious materials or when handling contaminated items or surfaces.
  Replace gloves if torn, punctured, contaminated, or if their ability to act as a barrier is
  compromised.
- Utility gloves can be decontaminated for reuse if their integrity is intact. Discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Do not wash or decontaminate disposable gloves for reuse.
- Use appropriate face and eye protection when there is a risk of splashes, sprays, spatters, or droplets of blood or OPIM coming into contact with the eye, nose, or mouth.
- Immediately remove any garment in contact with blood or OPIM, avoiding contact with the outer surface.

By following these guidelines, we can ensure the safety and well-being of all employees.

### HOUSEKEEPING

**Regulated Waste** is placed in closable containers, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded, and closed before removal to prevent spillage or protrusion of contents during handling. The procedure for handling other regulated waste involves several essential steps to ensure proper disposal and minimize environmental impact. This includes identifying and segregating the waste according to its specific classification, documenting the waste generation and disposal process, and adhering to all applicable regulations and guidelines. It is also crucial to

safely use appropriate containers and labeling to store and transport the waste to designated disposal facilities. By following these procedures diligently, we can effectively manage regulated waste and contribute to a cleaner and safer environment.

**Sharps Disposal.** The procedure for handling sharps disposal containers is essential in ensuring that sharps are safely and properly disposed of. Once a sharps disposal container is filled, it should be closed and sealed according to the manufacturer's instructions. The container should be placed in a designated area for pickup or taken to a designated disposal facility.

Contaminated Sharps. Immediately or as soon as possible, discard contaminated sharps in closable, puncture-resistant, leakproof containers on sides and bottoms that are appropriately labeled or color-coded. Sharps disposal containers are available from the department supervisor or a designated storage area.

Bins and Pails, such as wash or emesis basins, should be cleaned and decontaminated promptly and thoroughly after each use if any visible contamination is present.

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

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#### **LAUNDRY**

Contaminated laundry should be handled with minimal agitation and as little contact as possible. The guidelines are as follows:

- Contaminated laundry should be bagged or containerized where it was used. It should not be sorted or rinsed in the area where it was contaminated.
- When handling contaminated laundry, place and transport it in bags or containers labeled or color-coded according to the standard.
- If the contaminated laundry is wet and there is a reasonable chance of it soaking through or leaking from the bag or container, it should be placed and transported in bags or containers to prevent fluids from seeping.

To ensure safety, all employees who come into contact with contaminated laundry must wear protective gloves and other appropriate personal protective equipment.

#### **LABELS**

Warning labels are essential for containers holding regulated waste, and for refrigerators and freezers storing blood or OPIM. Containers for storing, transporting, or shipping blood or OPIM should also be labeled.

For regulated waste, the labels must display "BIOHAZARDOUS WASTE" or "SHARPS WASTE," as specified in Health and Safety Code Sections 118275 through 118320. These labels should predominantly feature fluorescent orange or orange-red colors, with contrasting lettering and symbols.

To ensure their effectiveness, labels should either be an integral part of the container or securely attached using string, wire, adhesive, or any other method that prevents accidental removal.

While red bags or containers can be used as label substitutes, sharp containers or regulated waste red bags require specific labeling. However, labels on red bags or containers do not need to be color-coded.

Containers of blood, components, or products properly labeled and released for transfusion or clinical use are exempt from the above labeling requirements. Individual containers of blood or OPIM placed inside a labeled container during storage, transport, shipment, or disposal are also exempt from this labeling requirement.

Labels for contaminated equipment should comply with the labeling requirements and indicate which parts remain contaminated. Decontaminated regulated waste does not require labeling or color-coding.

In addition to labels, signs must be posted at the entrance to specified work areas containing blood, contaminants, or OPIM. The signs should bear the following statement: "BIOHAZARDOUS MATERIALS," or the universal biohazard symbol and the word "BIOHAZARD."

Employees must inform a Responsible Party if they encounter regulated waste containers, refrigerators with blood or OPIM, or contaminated equipment that lacks proper labels.

# HEPATITIS-B EXPOSURE

Employees exposed to Hepatitis B must promptly inform their supervisor and the Risk Management Services department. After receiving initial first aid, the employee will be advised to contact the District's occupational injury triage service, Company Nurse. The care coordinator at Company Nurse will collect information about the injury and evaluate the employee's immediate condition. In the case of a minor injury, the employee will be instructed to seek medical assistance and testing from a local healthcare facility. If the exposure leads to a significant injury, the employee will be referred for emergency treatment at an appropriate urgent care facility or hospital. Treatment options may vary depending on the specific circumstances and the individual's immune status.

The Company Nurse coordinator will prepare an incident report and forward it to the District Risk Management Services department. A Risk Management Analyst will follow up with the employee regarding the incident and the claim process.

All employees with occupational exposure to bloodborne pathogens receive initial and annual training from the department's Responsible party. Training is also available through the Keenan Safe Colleges online course, accessible at <a href="https://pasadena-keenan.safecolleges.com/login">https://pasadena-keenan.safecolleges.com/login</a>.

#### **EMPLOYEE TRAINING**

All employees who have occupational exposure to bloodborne pathogens receive comprehensive training conducted by the department's Responsible Party or an external contractor engaged by the department. The training encompasses epidemiology, symptoms, and transmission of bloodborne pathogen diseases. Additionally, the training program covers the following key elements:

- Explanation of the OSHA bloodborne pathogen standard
- Clarification of the Exposure Control Plan (ECP) and how to obtain a copy
- Identification of tasks and activities that may involve exposure to blood and OPIM, including defining an exposure incident
- Understanding the use and limitations of engineering controls, work practices, and personal protective equipment (PPE)
- Familiarization with different types, uses, locations, removal, handling, decontamination, and disposal of PPE
- Explanation of the rationale behind PPE selection
- Information on the hepatitis B vaccine, including its efficacy, safety, administration, benefits, and the provision of free vaccination
- Guidance on appropriate actions and contacts in case of an emergency involving blood or OPIM
- Procedures to follow in the event of an exposure incident, including reporting and access to medical follow-up

- Information on post-exposure evaluation and follow-up required by the employer after an exposure incident
- Understanding of the signs, labels, and color coding mandated by the standard and used in this facility
- Interactive opportunities for questions and answers during the training session

In addition to training by the department's Responsible Party, it is also available through the Keenan Safe Colleges online course, accessible at

https://pasadena-keenan.safecolleges.com/login.

## TRAINING RECORDS

Training records are kept for each employee upon completion of training. These documents will be kept for at least three years by the department and for facilities employees in the Risk Management Services Department.

The training records include the following:

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

Employee training records may be provided to the employee or authorized representative upon written request within 15 working days. Such requests should be addressed to the department Responsible Party.

# SHARPS INJURY LOG

A Sharps Injury Log will be used to document any injuries caused by contaminated sharps. It is essential to include the following information in each incident report:

- Date of the injury
- Type and brand of the device involved (e.g., syringe, suture needle)
- · Department or work area where the incident occurred
- Explanation of how the incident happened.

By maintaining a comprehensive Sharps Injury Log, we can effectively track and address these incidents for the safety and well-being of our staff.

This log is reviewed as part of the annual program evaluation and maintained for at least five (5) years following the end of the calendar year covered.

For more information about the Bloodborne Pathogens: Exposure Control Plan, contact a District Administrator or Responsible Party.