

Exposure Control Plan

Bloodborne pathogens are infectious microorganisms found in human blood that can cause disease in humans. They include the hepatitis B virus (HBV), hepatitis C virus (HCV) and the human immunodeficiency virus (HIV) which causes Acquired Immune Deficiency Syndrome (AIDS).

At FSU, work which exposes employees to bloodborne pathogens is performed in accordance with the [Occupational Safety and Health Administration \(OSHA\) Bloodborne Pathogens Standard](#). The OSHA Standard requires that the University develop a plan, the Exposure Control Plan, to protect employees from bloodborne pathogens by reducing occupational exposure and providing appropriate treatment and counseling for employees potentially exposed to these pathogens. The plan covers all employees who could reasonably anticipate contact with blood and other potentially infectious materials during the course of their work. These infectious materials include body fluids, such as semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluid; any body fluid where blood is apparent; saliva from dental procedures; body fluid where it is difficult to differentiate body fluids; unfixed human tissues and organs other than intact skin and human cell lines.

Several Colleges, Schools, and Departments have developed their own Exposure Control Plan specific to their facilities; others may decide to use the following generic plan and insert material specific to their needs. If the school or department has a plan in place, it should be submitted to the [Biological Safety Office](#) for review to ensure that it covers all the requirements of the OSHA Standard.

Note that this plan does not cover laboratory procedures for employees who work in HBV and HIV laboratories and production facilities. Consult the [Biological Safety Office](#) for information on these topics.

Responsibilities

Responsibility for effective implementation of an Exposure Control Plan (ECP) at the University rests with these groups:

Department of Environmental Health & Safety: The [Biological Safety](#) Office investigates incidents involving exposure to bloodborne pathogens, provides technical and general assistance and guidance for schools/departments to develop their individual exposure control plans, and assists with development and presentation of training and education programs. The program representative of Worker's Compensation keeps records of exposed employees.

The supervisory officer of each affected School or Department: Responsible for developing and maintaining the school or department exposure control plans, enforcement of the requirements of the Standard, identification of position descriptions, tasks and procedures in which employees have occupational exposure to blood or other potentially infectious materials. The supervisory officer is responsible for providing of engineering controls, personal protective equipment, for mandating proper work practices and employee participation in a training and education program. The supervisory officer offers the HBV vaccine to exposed individuals, and notifies the [Biological Safety](#) Office of any employee exposed to potentially infectious material.

Employees: Employees who have occupational exposure to bloodborne pathogens shall participate in training and education programs annually, observe universal precautions, know the routes of transmission of bloodborne pathogens, report their exposures to potentially infectious materials, and comply with other site-specific requirements.

Review and Update

It is up to each affected School or Department to review and update its exposure control plans annually and/or whenever OSHA makes changes to the [Bloodborne Pathogen Standard 29 CFR 1910.1030](#).

Supervisors review the laboratory's or the department's specific plan whenever new or modified tasks are implemented and when jobs are revised that result in changes of occupational exposures. In addition, Schools or Departments will include any modifications to tasks and jobs that results in the reduction or prevention of occupational exposures as recommended by the employee. The Biological Safety Office can assist with the exposure control plans review.

Availability

Each school or department that has the potential to expose employees to bloodborne pathogens should have an Exposure Control Plan readily available to all employees. Schools or departments shall inform employees of the location of their specific exposure control plan. Contact the Department of Environmental Health & Safety for assistance on developing an exposure control plan specific to the school or department.

Risk Determination

Exposure risk determination is identified from position descriptions of tasks and procedures where occupational exposure will occur.

Supervisors shall identify positions where (1) all employees have exposure to human blood or other potentially infectious material (OPIM), and (2) where SOME employees have exposure to human blood or other potentially infectious material. When only SOME employees are exposed, the tasks and procedures where occupational exposure occurs must be identified.

Supervisors shall identify employees at risk for occupational exposure to blood or other potentially infectious materials within 10 days of hire or change of responsibility for the employee, offer training for handling bloodborne pathogens and offer the HBV vaccine.

See [Form EHS 7-4 Exposure Determination Worksheet](#).

General Methods of Compliance

There are two general methods of compliance: work practices and [physical layout](#) (or engineering controls) of a facility.

Compliance can be met through work practices by controlling work procedures. This is accomplished by developing a work task plan that would reduce any hazard. These work practice task plans could be put to use in work areas where a reasonable likelihood of occupational exposure exists. Examples of work practice controls are: washing hands after gloves are removed and as soon as possible after skin contact with blood or other potentially infectious materials, and prohibiting the recapping, removing or bending of needles.

[Universal precautions](#) are another form of work practice compliance. Universal precautions are methods of treating all human blood, tissue and other potentially infectious materials as if it is infectious for HBV and HIV. When it is difficult to distinguish among types of body fluid, all materials shall be assumed to be infectious. The concept of Universal Precautions shall be observed throughout the University.

Good housekeeping is another form of work practice. Schools and Departments should develop cleaning schedules that include appropriate methods of decontamination based on the location of potentially infectious sites within the facility, types of surfaces to be cleaned, and types of contamination present.

Physical layout compliance is done through engineering control. Engineering controls are barriers that can be placed between the worker and the hazard. They reduce employee exposure by either removing or isolating the worker from the hazard. Examples are: the sheath on a self-sheathing needle, puncture-resistant sharps containers, and biological safety cabinets.

Engineering and work practice controls are often used together. For instance, needle sticks are a major workplace hazard; their control is based on not recapping needles (work practice) and disposing of them properly in the sharps container (engineering control).

[Personal protective equipment \(PPE\)](#) such as uniforms, protective gloves, and facemasks shall be used as supplemental protection when occupational exposure remains after instituting engineering and work practice controls.

In addition to these primary work practice and general compliance methods, supervisors are advised to insert site-specific information into their own exposure control plan here. Please consult with the [Biological Safety](#) Office if you have questions or need assistance.

Hazard Communication

Labels and signs bearing a [red Biohazard warning symbol](#) shall be affixed to locations and containers used to store, transport, and ship blood or other potentially infectious materials.

Training

Employees occupationally exposed to blood and other potentially infectious materials (OPIM) shall be provided with information and appropriate site-specific training within 10 working days of commencement of employment or reassignment.

Information and training shall be provided by schools/departments initially within 10 working days of employment and then at least annually thereafter. Additional training shall be offered when existing tasks are modified or new tasks introduced which affect the employee's exposure to bloodborne pathogens. It is the Schools' and Departments' responsibility to contact EH&S for the required training. Personnel from EH&S are available to provide information, resources, and help.

Training shall cover the following topics:

- How to obtain a copy of the regulatory text and an explanation of its contents;
- Information on the epidemiology and symptoms of bloodborne diseases;
- Ways in which bloodborne pathogens are transmitted;
- Explanation of the Exposure Control Plan and how to obtain a copy;
- Information on how to recognize tasks that might result in occupational exposure;
- Explanation of the use and limitations of work practices, engineering controls and personal protective equipment;
- Information on the types, selection, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
- Information on the Hepatitis B vaccination such as safety, benefits, efficacy, methods of administration and availability;
- Information on what to do and whom to contact in an emergency;

- Information on how to report an exposure incident and on the post-exposure evaluation and follow-up;
- Information on warning labels and signs, where applicable, and color-coding;
- Opportunity for questions and answers on any part of the training.

Obtaining the HBV Vaccination Series

Supervisors shall offer the Hepatitis B vaccination to individuals who have occupational exposure to human blood or other potentially infectious material during the course of their work. **This must be done within 10 days** of hire or change of responsibility for the employee, after the employee has received training and information:

- The employee will be offered the Hepatitis B vaccine and the cost of Hepatitis B vaccination for occupational exposure is the responsibility of each individual school or department.
- For employees involved in sponsored research, EH&S will offer the Hepatitis B vaccine and will cover the cost of the vaccine.

Post Exposure Evaluation and Follow-Up

If an employee has been exposed to blood or other potentially infectious materials (OPIM), a healthcare provider should evaluate the exposed employee as soon as is possible within 24 hours of the exposure.

Supervisors should offer post exposure evaluation and follow-up to any employee who is exposed to blood or OPIM during his/her work.

Following the post-exposure evaluation and follow-up, the supervisor should notify EH&S as soon as possible and ask for the Medical Monitoring Program at 644-5374 or 644-9117.

If the employee has been exposed by a source individual's blood, the source individual's blood shall be tested as soon as feasible, and after consent is obtained, in order to determine HBV and HIV infection potential, unless the information is already available. It is the Department's responsibility to pay for the source individual's testing.

If possible, the employee will be given confidential information (if obtainable) on the HBV and HIV status of the source individual, and will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

If applicable, Workers' Compensation Insurance will cover the cost of post-exposure evaluation services for the exposed employees. Procedures and required paperwork for Workers' Compensation can be obtained through the Risk Management and [Workers' Compensation](#) section of [EH&S](#).

Exposure Determination Records

The following documents ([available here](#)) are required for each employee to determine exposure potential and administrative procedures for employees classified as potentially occupationally exposed to blood and other potentially infectious materials (OPIM).

- **Exposure Determination Worksheet**, a list of questions to help the supervisor identify the job classifications whose incumbents are included in the Exposure Control Plan. In addition, it also includes a section to outline an individual employee's job description and identify work procedures that may expose the employee to blood or OPIM. This then would require the employee to receive appropriate training and be offered the HBV vaccine.

- **Hepatitis B Vaccine Record**, a list of questions to help the supervisor identify if the employee has previously received or now wishes to receive or decline the Hepatitis B vaccine. Note that if the employee initially declines the Hepatitis B vaccine, the employee may request it at any time during employment if the employee's duties and responsibilities have not changed.

Supervisors should review the Exposure Determination Worksheet for their School, Department, or group. If the answer to any question is YES, the OSHA Standard applies to the employees.

Medical Records

Medical records (HBV status, records on post exposure follow up) will be kept by the medical facility performing services, such as workers' compensation contract medical provider, or other health care facility. Records must be kept for 30 years after termination of employment.

EH&S will maintain training records, which include training dates, location, summary of training, qualifications of trainer, name, job titles of trainees, and sign-up sheet. Training records shall be maintained for 3 years from the date of training. All records must be made available to the Assistant Director and Director of OSHA or designee upon request.

An [Exposure Determination Worksheet](#) for each employee is to be kept in the Exposure Control Plan by each school, department or group by the individual Principal Investigator (PI) or supervisor. The employer must keep these documents for 30 years after termination of employment.

A Hepatitis B Vaccine Record for each employee is to be kept in the Exposure Control Plan by each School, Department or group, by the individual PI or supervisor. The employer must keep these documents for 30 years after termination of employment.