



Bloodborne Pathogens

PURPOSE

This program is designed to meet the requirements of 29 CFR 1910.1030 regarding occupational exposure to Bloodborne pathogens. The implementation of and compliance with this program will aid Berea College employees in protecting themselves from exposure to Bloodborne pathogens.

It is the goal of Berea College to properly inform all employees of safety and health hazards existing in the work place as identified under 29 CFR 1910.1030. The aim of Berea College is to take all reasonable safeguards to minimize risks for exposure to any hazards encountered in the workplace.

DEPARTMENT HEAD RESPONSIBILITIES

1. Development of a Bloodborne pathogen program and procedure that is in compliance with this standard.
2. Ensure that all departmental employees are provided with and have access to the required protective equipment.
3. Ensure that all employees and students are properly trained in the requirements of the Bloodborne pathogen standard.
4. Maintain files of all required training documentation and certification as maybe required by Berea College or any other Federal or state agencies.
5. Maintain a safe and healthy work environment that is free of hazard for all departmental employees and student laborers.
6. Provide and maintain an adequate supply of appropriate personal protective equipment for use by employees and student laborers.

EMPLOYEE RESPONSIBILITIES

1. Employees are responsible for attending all scheduled departmental training sessions and those provided by other agencies.
2. Employees are responsible for adhering to safety policies and procedures of their department and safe work policies and procedures of Berea College.
3. Employees are responsible for taking proper safety precautions as outlined within this policy.
4. Employees are responsible for wearing proper protective equipment as specified and/or specified by their supervisor, department policy, and/or the Campus Policy.
5. Employees are responsible for reading all warning labels and following warnings and instructions.

DEFINITIONS

As defined by The Kentucky Occupational Safety and Health Standards for General Industry

Blood: Means human blood, human blood components, and products made from human blood.

Bloodborne Pathogen: Means pathogenic microorganisms 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).

HBV: means hepatitis B virus

HIV: means human Immunodeficiency virus

Universal Precautions: is an approach to infection control. According to the concept of HIV, HBV, and other Blood borne pathogens.

Personal Protective Equipment: is specialized clothing or equipment worn by employees for protection against a hazard. General work clothes (e.g., shirts, or blouses) not intended to function as protection against a hazard is not considered to be personal protective equipment.

Work Practice Controls: Means the controls that reduce the likelihood of exposure by alerting the manner in which a task is performed (e.g. prohibiting recapping of needles by a two handed technique).

Sterilize: Means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

Source Individual: Means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.

Regulated Waste: means liquid, semi - liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi - liquid state if compressed. Items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling, contaminated sharps; and pathological and micro biological wastes containing blood or other potentially infectious materials.

Contaminated: means the presence or the reasonably anticipated presence of blood or other potential infectious materials on an item or surface.

Contaminated sharps: means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Contaminated Laundry: Means laundry that has been soiled with blood or other potentially infectious materials or may contain sharps.

Exposure Incident: Means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employees duties.

Hand washing facilities: means a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

Occupational Exposure: Means a reasonably anticipated skin, eye, mucous membrane, or parental infectious materials that may result from the performance of an employee's duties.

EXPOSURE CONTROL

EXPOSURE DETERMINATION

Each department that is covered by the Bloodborne Pathogen Program shall be responsible for the following:

1. The determination occupational exposure hazard of each job classification within each department.
2. Each department shall be required to maintain a current list of all job classifications that have an occupational exposure.
3. Each department shall maintain a current list of all tasks and procedures or groups of closely related tasks and procedures in which occupational exposure occurs and that are performed by employees that are in the current job classifications.
4. Each department shall make exposure determination without regard to the use of personal protective equipment.
5. Each department shall make sure that a copy of the department's exposure control plan is accessible to all departmental employees.
6. Each department shall make sure that a current copy of the department's exposure control and compliance program is on file with Berea College Environmental Health and Safety.
7. Each department shall be required to develop a schedule and method of implementation for compliance with the Bloodborne Pathogen Standard Program.
8. Each department shall be required to annually review its exposure control and compliance program on an annual basis in order to reflect any new or modified tasks and procedures which affect occupational exposure or any new or modified employee positions.

METHODS OF COMPLIANCE

Universal precautions shall be observed 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 WORK PRACTICE CONTROLS

All engineering and work practice controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used. Each department shall be required to develop and maintain work practice controls that are in compliance CFR 1910.1030.

The requirements of CFR 1910.1030 are as follows:

1. Hand washing facilities shall be provided that are readily accessible to all employees.
2. When provision of hand washing facilities is not feasible, the employer shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelette. When antiseptic hand cleaners or towelette are used, hands shall be washed with soap and running water as soon as feasible.
3. Employers shall insure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
4. Employers shall ensure that t wash hands and any other skin with soap and water, or flush mucous membrane with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.
5. Contaminated needles and other contaminated sharps shall not be bent recapped or removed.
6. Contaminated needles and other contaminated sharps shall not be recapped or removed unless the employer can demonstrate that no alternative is feasible or that such an action is required by a specific medical procedure. Such recapping must be accomplished through the use of a mechanical device or a one handed technique.
7. Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly processed. These containers shall be:
 - A. Puncture resistant
 - B. Labeled or color-coded in accordance CFR 1910.1030
 - C. Leak proof on the sides and bottom

8. 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.

9. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or other potentially infectious material are present.

10. All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

12. Mouth pipetting / suctioning of blood or other potentially infectious materials is prohibited.

13. Specimens of blood or other potentially infectious material shall be placed in a container that prevents leakage during collection, handling, processing, storage, transport, or shipping.

TRANSPORTATION OF CONTAINERS AND CONTAMINATED EQUIPMENT

The container for storage, transport, or shipping shall be label or color coded accordingly and closed prior to being stored, transported, or shipped.

Berea College shall ensure that this information is conveyed to all affected employees, the servicing, and/or the manufacturer, as appropriate, prior to handling, servicing, or shipping so that appropriate precautions will be taken.

PERSONAL PROTECTIVE EQUIPMENT

When there is occupational exposure, Berea College shall provide, at no cost to the employee, appropriate personal protective equipment such as but not limited to gloves, gowns, laboratory coats, face shields or mask and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if does not permit blood or other potentially infectious materials to pass through or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

Berea College shall insure that the employee uses appropriate personal protective equipment. Unless Berea College shows that the employee temporarily and briefly declined to use personal protective equipment when, under rare and extraordinary circumstances, it was the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety services or would have posed an increased hazard to the safety of the worker or co - worker. When the employee makes this judgment, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

Berea College shall insure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees. Hypoallergenic gloves, glove liners, powder less gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normal provided.

Berea College shall clean, launder, and dispose of personal protective equipment as required by this program at no cost to the employee. Berea College shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee. If a garment is penetrated by blood or other potentially infectious materials, the garment shall be removed immediately or as soon as feasible. All personal protective equipment shall be removed prior to leaving the work area. When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage washing, decontamination or disposal.

GLOVES

Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucus membrane, and non-intact skin. Disposable (single use) gloves such as surgical or examination gloves shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. Disposable (single use) gloves shall not be washed or decontaminated for re-use. Utility gloves maybe decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

MASKS, EYE PROTECTION AND FACE SHIELDS

Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can e reasonably anticipated.

GOWNS, APRONS, AND OTHER PROTECTIVE EQUIPMENT

Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated. Surgical caps or hoods and / or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated.

HOUSEKEEPING

Berea College shall ensure that the worksite is maintained in a clean and sanitary condition. Berea College shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of work shift if the surface may have become contaminated since the last cleaning.

Protective coverings, such as plastic wrap, aluminum foil, or imperiously backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the work shift if they may have become contaminated during the shift

All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.

Broken glassware which may be contaminated shall not be directly picked up with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pans, tongs, or forceps.

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

REGULATED WASTE

Contaminated sharps discarding and containment

Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are Closeable, puncture resistant, leak proof on sides and bottom, labeled color-coded in accordance with this program.

During use containers for contaminated sharps shall be:

1. 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
2. Maintained upright throughout use

3. Replaced routinely and not allowed to overfill.

When moving containers of contaminated sharps from the area of use the containers shall be closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping. The container shall be placed in a secondary container if leakage is possible. This secondary container shall be Closeable, constructed to contain all contents and prevent leakage during handling, storage, transport, and shipping. The secondary container shall also be color-coded or labeled in accordance with this program.

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

OTHER REGULATED WASTE

Other regulated waste shall be placed in containers that Closeable, constructed to contain all contents and prevent leakage of fluids during handling, labeled or color-coded in accordance with this program. If outside contamination of the regulated waste container occurs, it shall be placed in a second container. This secondary container shall be Closeable, constructed to contain all contents and prevent leakage during handling, storage, transport, and shipping. The secondary container shall also be color-coded or labeled in accordance with this program.

Disposal of all regulated waste shall be in accordance with applicable regulations of the United States, States and Territories, and political subdivisions of states and territories.

POST EXPOSURE EVALUATION AND FOLLOW-UP

Berea College shall make available post-exposure evaluation and follow up to all employees who have had an exposure incident. Berea College shall also ensure that all post exposure evaluation and follow up are:

1. Made available at no cost to the employee
2. Made available at a reasonable time and place.
3. Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed health care professional.
4. Provided according to recommendations of the US. Public Health Service current at the time these procedures take place.
5. Berea College shall ensure that all laboratory tests are conducted by an accredited laboratory at no cost to the employee.

Following a report of an exposure incident, Berea College shall make immediately available to the exposed employee a confidential medical evaluation and follow-up that shall include the following:

1. Documentation of the route of exposure and the circumstances under which the exposure incident occurred.

2. Identification and documentation of the source individual, unless Berea College can establish that the identification is infeasible or prohibited under 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 and HIV infectivity. If consent is not obtained, Berea College 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 or HIV, testing for the source individual's known HBV 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 identity and infectious status of the individual.

The exposed employee's blood shall be collected as soon as feasible and tested after consent is made. 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 90 days. If, within the 90 days of the exposure incident, the employee selects to have the baseline sample tested, such testing shall be done as soon as feasible.

Berea College shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation. The healthcare professional's written opinion for post-exposure evaluation and follow up shall be limited to the following:

1. That the employee has been informed of the results of the evaluation.
2. That the employee has been told any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
3. All other findings or diagnoses shall remain confidential and shall not be included in the written report.

HEPATITIS B VACCINATION

Berea College shall make available the hepatitis B vaccine and vaccine series to all employees who have occupational exposure. The vaccination shall be made available after the employee has received the required training and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccine series. The healthcare professionals written opinion for hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for the employee, and if the employee has received such vaccination.

Berea College will not make participation in a prescreening program a pre-requisite for participation for receiving a hepatitis B vaccination. If the employee initially declines hepatitis B vaccination but at a later date while still covered by this program decides to accept the vaccination, Berea College shall make the vaccination available at that time. Berea College shall assure that employees who decline to accept hepatitis b vaccine must sign a release. If a booster dose of hepatitis b vaccine is recommended by the US. Public Health Service at a future date, such a booster dose will be made available in accordance with this program.

RECORDKEEPING

Berea College shall establish and maintain an accurate record for each employee with occupational exposure. Berea College shall ensure that all records required to be maintained by this program shall be made available to the Assistant secretary or Director for examination and copying.

Berea College will comply with the requirements involving the transfer of records set forth in 29 CFR 1910.1030. Berea College shall be required to maintain these records for the duration of the employees' employment plus 30 years. This record shall include the following:

1. The name and social security number of the employee.
2. A copy of the employee's Hepatitis B vaccination status including the dates of all the Hepatitis B vaccinations and any medical records relative to the employees' ability to receive vaccination as required.
3. Medical records that are required by this program shall be maintained in accordance to 29CFR 1910.103 Employee medical records shall 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 1910.1030.
4. A copy of all medical examinations, medical testing, and follow up procedures.

5. Berea College's copy of the health care professional's written opinion.

6. A copy of the information provided to the health care professional.

7. Berea College will ensure that employee medical records are kept confidential as required by 29CFR 1910.1030.

The employees record shall not be disclosed or reported without the employees expressed written consent to any person within or outside the workplace except as required by law.

TRAINING RECORDS

Employee training records shall be provided upon request for examination and copying to employees, to employee representatives, to the Director and to the assistant secretary. All employee training records shall include the following items:

1. The dates of the training session

2. The contents or summary of the training session

3. The names and qualifications of the person conducting the training and the names and titles of the persons attending the training session.

All training records shall be maintained for 3 years from the date in which the training occurred.

HAZARD COMMUNICATION

Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials. All labels will be required to contain the following:

1. These warning labels shall be fluorescent orange or orange - red or predominately so, with lettering or symbols in a contrasting color.
2. Labels shall be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.
3. Red bags or red containers maybe substituted for labels
4. Containers for blood, blood components, or blood products that are labeled as to their contents and have been released for transfusion or other clinical use are exempted from the labeling requirements of this program.
5. Individual containers of blood or other potentially infectious materials that are placed in a labeled container during storage, transport, shipment, or disposals are exempted from the labeling requirement.
6. Labels required for contaminated shipment shall be in accordance with this program and shall also state, which portions of this equipment remain contaminated.
7. Regulated waste that has been decontaminated need not be labeled or color coded.

WARNING SIGNS

Berea College shall post signs at the entrance to work areas specified HIV and HBV research Laboratories and production facilities. These signs shall be fluorescent orange - red or predominately so, with lettering or symbols in a contrasting color.

INFORMATION TRAINING

Berea College shall ensure that all employees with occupational exposure participate in the Bloodborne Pathogen training program which will be provided at not cost to the employee during working hours.

Training shall be provided as follows:

1. At the time of initial assignment to tasks where occupational exposure may take place.
2. Employees who have received training on Bloodborne Pathogens preceding the effective date of this program, only training with respect to the provisions of this program which were not included needs to be provided.
3. On an annual basis: Annual training for all employees shall be provided within one year of their previous training.
4. Berea College will provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the employees' occupational exposure. The additional training may be limited to addressing the new exposures created. Material appropriate in content and vocabulary to educational level, literacy, and language of employees shall be used.

TRAINING PROGRAM CONTENTS

The person conducting the training shall be knowledgeable in the subject matter covered **by the** elements contained in the workplace training program as it relates to the workplace that the training will address.

The training program shall contain the following minimal elements.

1. An accessible copy of the regulatory text of 29 CFR 1910.1030 and an explanation of its contents.
2. A general explanation of epidemiology and symptoms of blood borne diseases.
3. An explanation of the modes of transmission of blood borne pathogens

4. An explanation of Berea College's exposure control plan and the means by which the employee can obtain a copy of the program.
5. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
6. 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.
7. Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment.
8. An explanation of the basis for proper selection of personal protective equipment.
9. Information on the Hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge.
10. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
11. 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.
12. Information on the post - exposure evaluation and follow up that Berea College is required to provide for employees following an exposure incident.
13. An explanation of the signs and labels and /or color coding required
14. An opportunity for interactive questions and answers with the person conducting the training.

Additional Training for HIV and HBV Laboratories and Production Facilities Employees in HIV or HBV production facilities shall receive the following initial training:

Berea College shall assure that employees demonstrate proficiency in standard microbiological practices and techniques and in the practices and operations specific to the facility before being allowed to work with HIV or HBV. Berea College shall also ensure that employees have prior experience in the handling of human pathogens or tissue cultures before working with HIV or HBV. Berea College shall provide a training program to employees who have no prior experience in handling human pathogens. Initial work activities shall not be shall not include the handling of infectious agents. A progression of work activities shall be assigned as techniques are learned and proficiency is developed.

Berea College shall assure that employees participate in work activities involving infectious agents only after proficiency has been demonstrated.

APPENDIX A. PUBLIC SAFETY

PERSONAL PROTECTIVE EQUIPMENT

All public safety employees who have potential exposure to infectious materials will be provided at no charge the following Personal Protective Equipment:

1. Latex, vinyl or utility gloves
2. Antiseptic hand cleansers
3. Mouthpieces for resuscitation
4. Eye protection

EXPOSURE INCIDENT PROCEDURES

An exposure incident is defined by OSHA as "a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (cuts, needle sticks, etc.) contact with blood and other potentially infectious materials that results from performance of an employee's duties".

When an employee sustains such an injury:

1. Wash the area with soap and water and bandage if appropriate. Wash contaminated mucosal and adjacent sites with large quantities of water.
2. Vaccinations, evaluation, and follow-up services are provided at no cost to the employee. Laboratory testing will be provided at Berea Hospital or a Berea College designated medical provider. Follow-up services are initiated at the time the incident is reported.

APPENDIX B. FACILITY MANAGEMENT -

PERSONAL PROTECTIVE EQUIPMENT

All Facility Management employees who have potential exposure to infectious materials will be provided at no charge the following Personal Protective Equipment:

1. Latex, vinyl or utility gloves
2. Antiseptic hand cleansers
3. Eye protection

EXPOSURE INCIDENT PROCEDURES

An exposure incident is defined by OSHA as "a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (cuts, needle sticks, etc.) contact with blood and other potentially infectious materials that results from performance of an employee's duties".

When an employee sustains such an injury:

1. Wash the area with soap and water and bandage if appropriate. Wash contaminated mucosal and adjacent sites with large quantities of water.
2. Vaccinations, evaluation, and follow-up services are provided at no cost to the employee. Laboratory testing will be provided at Berea Hospital or a Berea College designated medical provider. Follow-up services are initiated at the time the incident is reported

APPENDIX C. ATHLETIC TRAINERS

PERSONAL PROTECTIVE EQUIPMENT

All Athletic Department employees who have potential exposure to infectious materials will be provided at no charge the following Personal Protective Equipment:

1. Latex, vinyl or utility gloves
2. Antiseptic hand cleansers
3. Mouthpieces for resuscitation
4. Eye protection

EXPOSURE INCIDENT PROCEDURES

An exposure incident is defined by OSHA as "a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (cuts, needle sticks, etc.) contact with blood and other potentially infectious materials that results from performance of an employee's duties".

When an employee sustains such an injury:

1. Wash the area with soap and water and bandage if appropriate. Wash contaminated mucosal and adjacent sites with large quantities of water.
2. Vaccinations, evaluation, and follow-up services are provided at no cost to the employee. Laboratory testing will be provided at Berea Hospital or a Berea College designated medical provider. Follow-up services are initiated at the time the incident is reported.

PERSONAL PROTECTIVE EQUIPMENT

All Nursing Department employees who have potential exposure to infectious materials will be provided at no charge the following Personal Protective Equipment:

1. Latex, vinyl or utility gloves
2. Antiseptic hand cleansers
3. Mouthpieces for resuscitation
4. Eye protection

EXPOSURE INCIDENT PROCEDURES

An exposure incident is defined by OSHA as "a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (cuts, needle sticks, etc.) contact with blood and other potentially infectious materials that results from performance of an employee's duties".

When an employee sustains such an injury:

1. Wash the area with soap and water and bandage if appropriate. Wash contaminated mucosal and adjacent sites with large quantities of water.
2. Vaccinations, evaluation, and follow-up services are provided at no cost to the employee. Laboratory testing will be provided at Berea Hospital or a Berea College designated medical provider. Follow-up services are initiated at the time the incident is reported.

Nursing Students (Academic)

All students in the Department of Nursing are required to demonstrate a defined minimum level of proficiency in psychomotor skills used by the professional nurse.

Procedure: Students are required to demonstrate and maintain clinical skills proficiency. Students may not perform clinical skills in the off-campus clinical setting until proficiency is demonstrated. After an unsuccessful attempt to demonstrate competency in any clinical nursing skill, the student will be required to complete remediation activities as assigned by the faculty member. The student should refer to each clinical course syllabus for an identification of clinical

skills competencies required for that course and criteria for demonstration of proficiency. Steps to follow for Remediation are found on pages 33-37.

Expected Clinical Nursing Skills include, but are not limited to:

- Infection Control
- Handwashing
- Use of Personal Protective Equipment
- Standard Precautions
- Medical Asepsis
- Sterile Technique
- Documentation

Berea College Department of Nursing Student Handbook 2019-2020, Essential Clinical Nursing Skills, p.9.

NURSING STUDENT HEALTH STANDARDS & INFECTION CONTROL

Nursing students are expected to carry health insurance according to Berea College policies. <http://catalog.berea.edu/2019-2020/Catalog/Admissions-and-Financial-Aid>

Whether participating in Nursing Clinical Skills Laboratory (NCSL) or off-site clinical activities, the nursing student is expected to follow precautions to prevent transmission of disease. Handwashing is the primary defense against transmission of disease.

SHARPS AND BIO-WASTE POLICY

1. Only Sharps (needles, syringes with needles and lancets with safety engaged are to be placed in the Red Sharps containers).
2. Glass vials and ampules must be placed in the container labeled “Ampules and Vials”. They are NOT to be placed in the Red Sharps Container.
3. Broken Glass must be placed in the container labeled “Broken Glass”. These containers are in all simulation rooms/labs.
4. Simulated blood in blood collection tubes should be treated as real specimens. They should be labeled and placed in Lab transport bag. When the specimen is ready to go to the lab, place the bagged specimen in the basket labeled “Labs.” They will be properly disposed of by staff.
5. Cotton balls, alcohol pads, gloves used for real finger sticks, simulated medication patches, bandages or band aids of any kind with actual/fake blood, fake blood fluids and fake bloody disposable under pads must be placed in the container with a Red Bio-Hazard bag. Gloves, gowns and any other PPE worn during simulated patient care with fake blood must be in the Red Bio-Hazard bag. All other PPE along with packaging, wrappers, and non-bloody gloves can be disposed of in regular trash.
6. All hand-made medication simulation labels must clearly state the word “Simulated” on the label.
7. Safety Data Sheets (SDS) are to be used for all chemicals in the Nursing Clinical Skills Laboratory.

Policy approved August 23, 2017; revision approved August 22, 2018.

All nursing students receive instruction in the use of universal precautions to prevent transmission of disease. All nursing students are required to follow universal precautions at all times during the provision of care. Despite precautions, clinical experiences involve a risk of exposure to blood and body fluids. In the event of exposure to blood or body fluids, the student should report the exposure to the clinical faculty or primary nurse as soon as possible. Facility exposure policies will be followed in the event of student exposure to blood or body fluids.

Nursing Department Student Handbook, 2019-2020, p.14.