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## **PURPOSE**

The purpose of this program is to minimize risk to and protect all employees who have occupational exposure to blood and other potentially infectious materials (OPIMs) as outlined by MIOSHA Rule 325, Bloodborne Infections Diseases (see attachment or copy available through Environment, Health, & Safety), and provide useful guidelines to University Departments required to comply with these University and regulatory requirements and to clarify program responsibilities.

## **SCOPE**

These guidelines apply to all University Departments who have employees that have occupational exposure to blood and OPIMs.

## **RESPONSIBILITIES**

Health and safety is a shared responsibility between employees and the employer. To ensure the success of this program, there are many responsibilities shared by Environment, Health, & Safety (EHS), departments, and employees. Below is a listing of many of those responsibilities.

### *Departments*

- ✓ Departments shall determine which employees are impacted by 29CFR 1910. 1030 and MIOSHA Part 325 in conjunction with EHS.
- ✓ Coordinate training with EHS.
- ✓ Write and maintain a departmental Exposure Control Plan (ECP) in accordance with Rule 325.70004 of MIOSHA standard.
- ✓ Provide task or worksite specific training to employees.
- ✓ Purchase and provide Personal Protective Equipment (PPE) to employees.
- ✓ Coordinate with EHS the required medical monitoring, vaccines, and post exposure follow up.

- ✓ Complete and maintain appropriate records as required.
- ✓ Department Head/supervisor shall effectively enforce compliance with these guidelines as well as their department specific procedures by the use of corrective progressive disciplinary action where necessary.

#### *Employees*

- ✓ Employees shall comply with the Bloodborne Pathogens Program Guideline and departmental ECP.
- ✓ Read and become familiar with employee's departmental ECP.
- ✓ Select, use, and maintain appropriate PPE.
- ✓ Follow safe work practices and standard operating procedures relevant to occupational exposure to bloodborne pathogens and OPIMs.
- ✓ Employees must immediately consult with their supervisor, EHS, or other appropriate knowledgeable management personnel whenever there are any questions regarding their protection, prior to beginning any task involving potential risk of exposure to body fluids.
- ✓ Employees must report any exposure incident immediately to their supervisor and EHS.

#### *Environment, Health, & Safety Department*

- ✓ EHS will provide initial general overview training to employees.
- ✓ EHS will provide assistance to departments in determining which employees are affected by the provisions of the standard.
- ✓ EHS will maintain the training records for EHS sponsored training and for medical monitoring and vaccinations.
- ✓ EHS will provide assistance to departments in determining the processes necessary to ensure control of exposure risks for their personnel.
- ✓ EHS will assist departments by reviewing departmental ECPs and making recommendations when requested. Refer to the list of required elements for the departmental ECPs.
- ✓ EHS will coordinate the Hepatitis B vaccinations between the University medical provider and Category A employees identified by departments, and requesting the vaccinations.
- ✓ EHS will coordinate the disposal of bloodborne pathogen waste or other infectious waste material.

## **DEPARTMENTAL EXPOSURE CONTROL PLANS**

As identified in the above "Department Responsibilities" section, departments with employees that have "Category A" employees, or employees that must develop and implement a department specific ECP. The departmental ECP must contain at least the following provisions and elements:

- A. An explanation of the exposure determination process for identifying Category A employees.
- B. Proper methods of compliance including administrative controls, engineering controls, personal protective equipment, housekeeping, and proper waste disposal practices to minimize employee risk of bloodborne pathogens.
- C. An explanation and summary of the contents of department specific training.

- D. Procedures for evaluation of the circumstances surrounding exposure incidents. (see example flow chart)
- E. Effective communication to at-risk employees on workplace exposure to bloodborne pathogens.
- F. Task-specific standard operating procedures (SOPs) that address the following areas:
  - a. Employee recognition of reasonably anticipated exposure to blood and OPIMs.
  - b. Selection, use, maintenance and disposal of personal protective equipment (PPE).
  - c. Contingency plan for foreseeable circumstances that prevent an employee from following the recommended SOPs. (For example, if water is unavailable for washing hands after exposure the contingency plan might consider the use of disinfectant hand wipes or waterless hand sanitizer).
- G. Recordkeeping of training, exposures, and follow-up procedures must be performed.**
- H. Identify departmental policies that are consistent with University policies addressing the inadvertent exposures, such as needle sticks or mucus membrane exposures.
- I. Provisions for review and updating, as necessary, by the departmental ECP annually.
- J. Provide an electronic copy of the departmental ECP to EHS upon request or whenever changes are made.
- K. The departmental ECP shall be available for employees or the regulatory agency to read and copy if requested.

## **EXPOSURE DETERMINATION**

Each department or unit who has an employee(s) with occupational exposure shall prepare an exposure determination. This exposure determination shall contain the following:

1. A list of all job classifications in which all employees in those job classifications have occupational exposure;
2. A list of job classifications in which some employees have occupational exposure
3. A 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 in job classifications.
4. This exposure determination shall be made without regard to the use of personal protective equipment.

## **HEPATITIS B VACCINE**

All employees who have been identified as having exposure to blood or OPIMs will be offered the Hepatitis B vaccine, at no cost to the employee.

1. Employees who decline the Hepatitis B Vaccine will sign a declination form. The declination form will be kept and copy provided to EHS. Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided at no cost.
2. The employee's department is responsible for assuring that the vaccine is offered or the declination form is signed and provided to EHS. EHS will make arrangements for the administration of the vaccine at the request of the supervisor.

Employees who have not previously received the Hepatitis B vaccine shall be offered the vaccine

within 24 hours after the first exposure incident as per R325.70013 (5-8). If the employee has previously had the vaccine, the regular exposure incident procedures will be followed.

## **POST EXPOSURE MANAGEMENT**

Any employee exposure to potentially infectious material must be regarded as a serious incident, reported promptly to the employee's supervisor and EHS, and steps taken to be immediately evaluated by an occupational medical physician (approved provider). The UM Risk Management Work Connection's Illness/Injury Report Forms are available on-line:

<http://www.umich.edu/~connect> and must be used to report the exposure. EHS, UM-Flint's Human Resources, and UM Risk Management Services/Work Connections work closely to provide illness and injury support services for employees.

### *Definition of Exposure Incident*

An exposure incident is defined as a specific eye, mouth, or other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM that results from the performance of a student's duties.

### *If an Exposure Occurs*

When an exposure occurs, the employee must IMMEDIATELY wash the infected area with plenty of soap and water or flush mucous membranes with plenty of water. If soap and water is not readily available, antiseptic hand cleaner in conjunction with clean cloth/paper towels or antiseptic wipes should be used. However, when these alternative methods are used, students must wash the affected areas with soap and water as soon as possible.

### *Report the Exposure Immediately*

An exposure incident must be reported IMMEDIATELY after first aid to the employee's supervisor and EHS. Employees are expected to complete Work Connection's Injury and Illness Report form with their supervisor. These forms are available in pdf format at the following site: <http://www.umich.edu/~connect/pdf/iirf.pdf> Submit the completed form with the supervisor's signature to EHS by fax at 810-424-5572, email at [EHS@list.umich.edu](mailto:EHS@list.umich.edu), or in person at 801 North Bank Center.

### *Confidential Post Exposure Evaluation and Consultation*

Employees who experience an exposure incident will be offered post exposure evaluation and follow up by the University's medical provider. The post exposure follow up should include:

- ✓ Post exposure prophylaxis, if appropriate, in accordance with the current recommendations from the U.S. Public Health Service and the Centers for Disease Control and Prevention.
- ✓ Documentation of the route of exposure and the circumstances related to the incident.
- ✓ Identification of the source individual and his/her status, if possible. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity or other pathogens.

- ✓ Results of testing of the source individual and information regarding the applicable laws and regulations will be provided to the exposed student.
- ✓ The exposed employee will be offered the option of having his/her own blood collected for testing for HIV/HBV serological status.
- ✓ The employee will be given appropriate, confidential counseling concerning precautions to take during the period after the exposure incident. Counseling on risk reduction and the risk and benefits of HIV testing. They will also be given information on what potential illnesses to be alert for and to report any related experiences or symptoms to appropriate personnel.

## **ATTACHMENTS**

MIOSHA Bloodborne Pathogen Standard

UM OSEH BBP Guidelines (pdf)

UM-Flint EHS BBP Guidelines 2013 (ppt)

UM-Flint Departmental Exposure Control Plans

1. Public Safety
2. Recreational Department
3. North Bank Center
4. Facilities and Operations
5. School of Health Professions and Studies (SHPS)
6. Early Childhood Development Center (ECDC)
7. Biochemistry/Chemistry
8. Event & Building Services