

Bloodborne Pathogens Exposure Control Plan

For



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Developed - July 2017

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Signature of Flagler Representative

Print

Sign

Title

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1.0 General Policy

Flagler College 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 standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens." The standard is designed to protect employees from disease-causing microorganisms found in human blood and other body fluids. The Bloodborne Pathogens Standard is the basis for this written Plan and it is the policy of Flagler College to meet or exceed the requirements of the standard.

1.1 Purpose

The purpose of this Plan is to protect Flagler College 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.

Flagler College 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 Vice President of Business Services, CFO, EH&S Coordinator, Athletics Director / Director of Sports Medicine and Health Services Director 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.

Flagler College will solicit input from non-managerial employees responsible for the clean-up of blood and other potentially infectious materials who are potentially exposed to injuries from contaminated sharps in 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 Flagler College 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.


Acknowledgement of the terms of this policy

I _____, acknowledge the terms of this policy and will do my due diligence to inform the employees of Flagler College of all aspects of this policy by direct communication or direction to a qualified individual




Record of Review

Review Date: 5/23/2018

Department / Title	Print Name	Sign	Date
EHS Coordinator	Travis Nierendorf		5/23/18
Facilities Superintendent	Vic Cheney		
Athletics	Cullen Fridley		
CFO / VP of Business Administration	Dave Carson		
Health Services			
Safety Committee / Security Representative			

Review Date: 4/9/2019

Department / Title	Print Name	Sign	Date
EHS Manager	Travis Nierendorf		4/9/2019



2.0 Exposure Determination (Affected Employees)

It has been determined that there are certain Flagler College employees who have been identified as having a 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 Flagler College have been identified as having a potential occupational exposure:

Job Title and Department	Job Duties relating to this Plan
Facilities Management: Housekeeping, Maintenance, Grounds, student summer help	1. Working in and/or around potentially infectious areas. 2. Handler of regulated materials; and 3. Clean-up of blood or other potentially infectious materials / sharps 4. Handling of refuse that may contain potentially infectious substances
Athletics: Sports Medicine, coaches, managers, students	1. Administer first aid 2. Assist students, athletes or staff with wounds, cuts, scrapes 3. Handler of potentially infectious material
Flagler Public Safety / Security	1. Working around or with unruly persons; and 2. Potential to assist employees and/or students who have been injured, first response
Health Services Physicians, RN's, managers, students	1. Working with patients where bloodborne pathogens can be spread / triage. 2. Working with potentially infectious materials and handling regulated medical waste
Science Department Staff and Students	1. Potential exposure with class lectures. 2. Handling of Sharps and biologicals
Mail Services Staff	1. Potential to handle potentially infectious materials 2. Potential to be stuck with sharp objects in packages / broken glass



3.0 Methods of Compliance

3.1 Engineering & Work Practice Controls

Engineering and work practice controls must be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment (PPE) will also be used. PPE must be examined and maintained or replaced on a regular schedule to ensure their effectiveness.

In order to minimize possible employee exposure to bloodborne pathogens, Flagler College will implement the following methods:

- Taking universal precautions when approaching blood and other body fluids;
- Investigating and, if feasible, implementing effective engineering controls;
- Adopting safe work practices;
- Implementing proper housekeeping activities;
- Using properly selected PPE; as directed by EH&S Coordinator
- Properly packaging, labeling, marking, and disposing of potentially infectious materials; and
- Decontaminating surfaces that have come into contact with blood or other body fluids with the appropriate disinfecting chemicals
 - Concentration of Sodium Hypochlorite must be greater than 0.5% but less than 2% so as not to be considered Hazardous Materials, but disposed of as Regulated Medical Waste
 - e.g. -A 10% commercial bleach solution diluted at 10:1 will be 1%
 - Household 5.25% bleach diluted 10:1 is 0.525%
 - **Contact time must be 10 minutes** for potentially infectious material
 - Place all towels, clothes and PPE in the bag that has contacted or potentially contacted any substances

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

Staff have been trained on the locations of spill clean-up kits and instructed on how to appropriately contain and clean-up spills of blood and other potentially infectious material.



3.2 Hand Washing

Flagler College provides hand washing facilities which are readily accessible to employees within all buildings. There are public restrooms as well as wash sinks with soap in maintenance closets.

In the event hand washing facilities are not feasible, Flagler College will provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. The EH&S Coordinator or Physical Plant Superintendent will always have a stocked supply, and distribute packages of towelettes to supervisors and managers as needed. Flagler Security personnel should always have antiseptic towelettes available so in the event of an off hours emergency they can properly disinfect their skin within a reasonable time.

When antiseptic hand cleansers or towelettes are used, hands must be washed with soap and running water as soon as feasible. Employees must wash their hands immediately or as soon as feasible after removal of gloves or other PPE. 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.

Flagler College persons who have potentially come in contact with infectious pathogens should avoid interaction with any door handles, sink handles, walls, steering wheels, other people or animals, or anywhere that an infection could spread. When possible, a second person will assist them to a hand washing facility. If no one is available, and a door handle or sink lever must be activated with a potentially contaminated hand or arm, an area 8-12 inches around the contaminated lever or handle will be disinfected with the bleach solution outlined in *section 3.1*.

3.3 Contaminated Sharps

A sharp is defined as any object that can penetrate the skin. Contaminated sharps at Flagler College 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.

3.3.1 Handling Contaminated Sharps

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.

3.3.2 Discarding Contaminated Sharps

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 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

Flagler College will ensure that all work areas are 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 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.

3.6 Personal Protective Equipment

When there is occupational exposure, Flagler College will provide, at no cost to the employee, appropriate PPE such as, but not limited to, gloves, gowns, laboratory coats, face shields, masks, eye protection, mouthpieces, resuscitation bags, pocket masks or other ventilation devices.

PPE will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through and 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.

3.6.1 PPE Accessibility

Flagler College will ensure that appropriate PPE in the appropriate size is readily accessible or is issued to employees. Hypoallergenic gloves, glove liners, powder-less gloves or other similar alternatives will be readily accessible to those employees who are allergic to the gloves normally provided.

3.6.2 Cleaning, Laundering, and Disposal

Flagler College will clean, launder, and/or dispose of PPE at no cost to the employee. Additionally, the College will repair or replace PPE as needed to maintain its effectiveness, at no cost to the employee.

If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) will be removed immediately or as soon as feasible.

All PPE will be removed prior to leaving the work area.

- Example: Health Services staff may not leave infirmary or touch door handles with nitrile gloves or respiratory masks on

When PPE is removed it will be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

3.6.3 Gloves

Gloves will be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, non-intact skin and when handling or touching contaminated items or surfaces.

Disposable (single use) gloves such as surgical or examination gloves will 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 will not be washed or decontaminated for re-use. If torn or punctured, the skin and wrists must be sanitized prior to donning PPE again.



Utility gloves may be 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. The process for decontaminating must be addressed before this function may take place.

Please contact the Flagler EH&S Coordinator Travis Nierendorf, 904-819-6422

3.6.4 Masks, Eye Protection, and Face Shields

Masks in combination with eye protection devices, such as goggles or safety glasses with solid side shields, or chin-length face shields will 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 be reasonably anticipated. This is reasonably expected in the infirmary as a part of health services. All persons must wear a mask or face shield while performing first aid or triage to patients where it is expected that bloodborne pathogens may be present. Athletic trainers must don a mask or face shield if it is reasonable to suspect potentially infectious bloodborne pathogens are present while performing first aid or triage.

3.6.5 Gowns, Aprons, and Other Protective Body Clothing

Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments will be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.

3.7 Packaging and Containment of Regulated Waste

Regulated waste must be placed in containers which are:

- Closable;
- Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping;
- Labeled or color-coded as a biohazard; and
- Closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport or shipping.

If outside contamination of the regulated waste container occurs, it must be placed in a second container. The second container must meet the leakproofness, closure and labeling standards as the contained regulated waste container.



Disposal of all regulated waste must be in accordance with all applicable local, state, and federal regulations, which includes the proper preparation of the shipment according to the USDOT hazardous materials regulations of 49 CFR 100-185.

3.8 Decontamination of Surfaces and Equipment

Surfaces, equipment, machinery, or objects which may become contaminated with blood or other potentially infectious materials will be decontaminated with a suitable disinfecting solution. As outlined in [3.1](#) and [3.2](#), a proper procedure and accurate solution of disinfectant (Sodium Hypochlorite bleach 0.5-2% concentration) will be used if door handles or sink handles must be actuated by a potentially contaminated hand, immediately after disinfecting the aforementioned potentially contaminated hand.

If decontamination is not performed immediately, the contaminated surfaces will be signed or labeled as a biohazard to warn all employees as to its potentially-infectious condition. Once decontaminated, the warnings will be removed.



4.0 Hepatitis B Vaccination Program and Post Exposure Evaluation

Flagler College will make available the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure. Flagler College will also provide post-exposure evaluation and follow-up to all employees who have had an exposure incident. Flagler College will ensure that all medical evaluations are:

- made available at no cost to the employee;
- made available to the employee at a reasonable time and place;
- performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and
- provided according to recommendations of the U.S. Public Health Service current at the time these evaluations and procedures take place.

Flagler College will further ensure that all laboratory tests are conducted by an accredited laboratory at no cost to the employee.

4.1 Hepatitis B Vaccination

Hepatitis B vaccination will be made available within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccination series and antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

The employee will go through the bloodborne pathogens training program prior to vaccination or declining vaccination.

Flagler College will not make participation in a prescreening program a prerequisite for receiving hepatitis B vaccination.

4.2 Declining the Hepatitis B Vaccination

Following training, an employee identified as having an occupational exposure may decline having the hepatitis B vaccination. Flagler College 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, Flagler College 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, Flagler College 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 Flagler College 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 in order to determine HBV and HIV infectivity. If consent is not obtained, Flagler College will 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, will 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 will be made available to the exposed employee, and the employee will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

4.4.1 Collection and testing of blood for HBV and HIV serological status

The exposed employee's blood will be collected as soon as feasible and tested after consent is 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.

4.4.2 Post-exposure preventative treatment

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

Flagler College will ensure that the healthcare professional responsible for the employee's hepatitis B vaccination is provided a copy of the OSHA Bloodborne Pathogens Standard. The healthcare professional's written opinion for hepatitis B vaccination will be limited to whether hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.

4.6 Information Provided to the Healthcare Professional Following an Exposure

Flagler College will ensure that the healthcare professional evaluating an employee after an exposure incident is provided with the following information:

- A copy of the OSHA regulation;
- A description of the exposed employee's duties as they relate to the exposure incident;
- Documentation of the route(s) of exposure and circumstances under which exposure occurred;
- Results of the source individual's blood testing, if available; and
- All medical records relevant to the appropriate treatment of the employee including vaccination status which are the employer's responsibility to maintain.

4.7 Healthcare Professional's Written Opinion Following an Exposure

Flagler College will obtain and provide the potentially exposed 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 will be limited to the following information:

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



- See Appendix C for Healthcare Professional Post evaluation



5.0 Communication of Hazards to Employees

5.1 Warning Labels

Warning labels must 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.



These labels must be fluorescent orange or orange-red with lettering and symbols in a contrasting color. Labels must include the following legend:

- Labels must be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.
- Red bags or red containers may be substituted for labels.
- Containers of 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 requirement.
- Individual containers of blood or other potentially infectious materials that are placed in a labeled container during storage, transport, shipment or disposal are exempted from the labeling requirement.
- Labels are required for contaminated equipment.
- Regulated waste that has been decontaminated need not be labeled or color-coded.

5.2 Signs

Flagler College will post signs that bear the biohazard symbol at the entrance to work areas where blood and other potentially infectious material is stored and/or worked with. The posted sign(s) shall contain the following information:

(see next page)



(Name of the Infectious Agent)



(Special requirements for entering the area)

(Name, telephone number of the responsible person)



6.0 Medical Recordkeeping

Flagler College will establish and maintain an accurate record for each employee with occupational exposure.

6.1 Minimum Contents of Medical Records

At a minimum, an employee's medical record will include:

- The name and social security number of the employee;
- A copy of the employee's Hepatitis B vaccination status including the dates of all hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination;
- A copy of all results of examinations, medical testing and follow-up;
- The employer's copy of the healthcare professional's written opinion; and
- A copy of the information provided to the healthcare professional.

6.2 Confidentiality and Accessibility

Flagler College will ensure that employee medical records are kept confidential and not disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by this section or as may be required by law.

Flagler College will maintain an accurate record for each employee with occupational exposure in accordance with 29 CFR 1910.1020 - Access to Exposure and Medical Records. Exposure 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.



7.0 Information and Training

Flagler College will ensure that all employees with a potential occupational exposure participate in a training program which must be provided at no cost to the employee and during working hours. Flagler College staff training will be conducted either classroom style or through an online training system.

Training will be provided as follows:

- At the time of initial assignment to tasks where occupational exposure may take place (as part of the new hire orientation); and
- Annual training for all employees will be provided within one year of their previous training.

Flagler College will provide additional training when job tasks or procedures are modified or, when new tasks or procedures that affect the employee's occupational exposure are added. The additional training may be limited to addressing the new exposures created.

The person conducting the training must be knowledgeable in the subject matter being presented as it relates to the workplace and employees must be given the chance to ask questions of the presenter. Acceptable means to train are both in person and online training. Material appropriate in content and vocabulary to educational level, literacy and language of employees will be used.

7.1 Training Program Content

The training program will contain at a minimum the following elements:

- An accessible copy of the regulatory text of this standard and an explanation of its contents;
- A general explanation of the epidemiology and symptoms of bloodborne diseases;
- An explanation of the modes of transmission of bloodborne pathogens;
- An explanation of the Flagler College Plan and the means by which the employee can obtain a copy of the written plan;
- 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 PPE;
- Information on the types, proper use, location, removal, handling, decontamination and



disposal of PPE;

- An explanation of the basis for selection of PPE;
- 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

Flagler College will comply with the requirements involving transfer of records set forth in 29 CFR 1910.1020(h).

If Flagler College ceases to do business and there is no successor employer to receive and retain the records for the prescribed period, then Flagler College will notify the Director (OSHA), at least three months prior to their disposal and transmit them to the Director if



required by the Director to do so within that three month period.

7.4 Maintaining a Sharps Injury Log

Flagler College will establish and maintain a sharps injury log (Appendix B) for the recording of percutaneous injuries from contaminated sharps. The information in the log will be recorded and maintained in a manner that protects the confidentiality of the injured employee. At minimum, the sharps injury log will include the following:

- type and brand of device involved in the incident;
- department or work area where the exposure incident occurred; and
- an explanation of how the incident occurred.

The sharps injury log must be maintained for five years as required by 29 CFR 1904.6.



FLAGLER COLLEGE
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. [OSHA - 29CFR 1910.1030 App A]

 Employee Signature

 Date

 Healthcare Professional
 (if applicable)

 Date

 Flagler Representative Signature

 Date

Retain this record with all other employee medical documents



FLAGLER COLLEGE
SHARPS INJURY LOG

Date: _____

Employee Name (print): _____

Employee ID#: _____

Product and brand of device involved in the incident

Department or work area where the exposure incident occurred

How did the incident occur?

What was the corrective action, if any, taken to prevent further injury?

Employee Signature

Date

Designated Facility
Representative Signature

Date

The sharps injury log must be maintained for five years as required by 29 CFR 1904.6.



Professional Healthcare
Post Evaluation Confidentiality Acknowledgement

Employee: _____

Healthcare Provider: _____

Healthcare Professional: _____ Title _____

Has the Employee been informed of the results of the Evaluation?

Healthcare Professional Initial

Employee Initial

Has the employee been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment?

Healthcare Professional Initial

Employee Initial

Have all other findings or diagnoses remained confidential and are not to be included in the written report?

Healthcare Professional Initial

Employee Initial

Healthcare Professional Signature

Employee Signature

This document shall be retained with all other medical records and a copy with the incident report





End of Document

