

STUDENT HANDBOOK

Part III

Exposure Control Plan

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**SOUTHEASTERN LOUISIANA UNIVERSITY
SCHOOL OF NURSING**

EXPOSURE CONTROL PLAN

A. INTRODUCTION AND PURPOSE

This Exposure Control Plan (ECP) has been developed in accordance with the Occupational Health and Safety Administration (OSHA) Bloodborne Pathogens Standard, 29 CFR 1910. 1030.

In addition to this plan, students and faculty must follow the Exposure Control Plan (ECP) of affiliating clinical agencies.

The purposes of this exposure control plan are as follows:

1. Eliminate or minimize occupational exposure of faculty, staff, and students to blood or certain other body fluids;
2. Describe protocol for reporting, treating, and following-up of an exposure.

B. DEFINITIONS

A glossary is included at the end of the Exposure Control Plan. These definitions are derived from the following document:

Department of Labor, Occupational Safety and Health Administration. Federal Register. December 6, 1991.

Inclusion of these definitions serves to make faculty/staff/students aware of terms to facilitate eliminating or minimizing occupational exposure.

C. MANAGEMENT/STUDENT RESPONSIBILITIES

1. Management Responsibilities
 - a. Provides an Exposure Control Plan.
 - b. Ensures the availability of appropriate personal protective equipment to all employees who are exposed to blood or other potentially infectious materials.
 - c. Develops and implements a written schedule for cleaning and methods of decontamination as provided for in the School of Nursing Safety Manual.
 - d. Ensures waste is disposed of according to appropriate guidelines.
 - e. Makes available the Hepatitis B vaccination to occupationally exposed faculty and students.

- f. Provides for post exposure evaluation and follow-up after reported exposure incident. (Refer to Section E on pg. 7)
- g. Provides orientation related to occupational exposure.
- h. Provides protocol for reporting of exposure incidents within 24 hours to appropriate personnel.
- i. Maintains health and education records as required by OSHA.
- j. Performs an annual review of the Exposure Control Plan and whenever necessary.
- k. Complies with SLU-SON health requirements.

2. Student Responsibilities

- a. Complies with Exposure Control Plan of SLU-SON.
- b. Complies with OSHA regulations at Southeastern Louisiana University School of Nursing (SLU SON) and affiliated agencies.
- c. Uses and disposes of required PPE and equipment when performing exposure prone tasks.
- d. Complies with hygienic practices/Standard Precautions.
- e. Reports exposure incidents to faculty immediately
- f. Complies with the School of Nursing Safety Manual for School Laboratories.
- g. Complies with SLU-SON health requirements.

This policy has been developed with guidance from various national organizations and academic health care institutions. It should be considered flexible and subject to updates as new and additional knowledge is acquired.

D. ENGINEERING - WORK PRACTICE CONTROLS - COMPLIANCE METHODS

Standard precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized. Engineering controls and work practice controls may include, but are not limited to, the following:

1. Handwashing

- a. Hands or any other skin area should be washed with soap and water, or mucous membranes flushed with water immediately or as soon as feasible following contact of such body areas with blood and other potentially infectious materials; or,
- b. When provision of handwashing facilities is not feasible, an appropriate antiseptic hand cleaner or antiseptic towelettes will be used. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

2. Handling and Disposal of Needles and Sharps

- a. Needles and other sharps will not be bent, recapped, broken or reused.
- b. Scoop method to cover needle is recommended.
- c. Contaminated sharps shall be disposed of immediately after use in an appropriate container. These containers must be puncture resistant, labeled as biohazard, and leak proof on sides and bottom. Containers that are moved from one location to another must have fully sealable caps.
- d. Sharp containers must be disposed of when 2/3 full.

3. Handling and Disposal of Non-sharp Infectious Waste

Non-sharp infectious waste is placed in a designated infectious waste container.

The container used for this purpose will be labeled or color-coded in accordance with the requirements of the OSHA standard. When a facility utilizes Standard Precautions in the handling of all specimens, the labeling/color coding of specimens is not necessary provided containers are recognizable as containing specimens.

If outside contamination of the primary container occurs, the primary container shall be placed within a second container, which prevents leakage during handling, processing, storage, transport or shipping of the specimen. Any specimens that could puncture a primary container will be placed within a secondary container that is puncture resistant.

4. Transport of Biological Waste

A designated transport company will pick up all biological waste including sharps and non-sharps.

The designated transporter picks up biohazard waste monthly at Baton Rouge Center and as needed when called.

The designated transporter picks up biohazard waste at Mims Hall when notified by Skills Lab Coordinator.

5. Personal Protective Equipment (PPE)

Appropriate PPE will be available to faculty/students exposed to infectious materials. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials.

Personal protective equipment will be considered “appropriate” only if it does not permit blood or other potentially infectious materials to pass through or reach the faculty or student’s clothing, 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.

If blood or other potentially infectious materials penetrate a garment, the garment(s) shall be removed immediately or as soon as possible. All PPE shall be removed prior to leaving the work area. When PPE is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination, or disposal.

a. Gloves

1. Gloves must be worn for the following:
 - a. When it can be reasonably anticipated that there will be exposure to blood, body fluids, mucous membranes or non-intact skin of any patient.
 - b. When demonstrating procedures in skills lab.
 - c. When faculty/student has non-intact skin such as cuts, lesions or chafed hands or dermatitis. The student with weeping dermatitis may not practice in skills lab until lesions are no longer weeping.
2. Gloves should be of appropriate size, material, and quality.
3. The use of gloves does not exclude the necessity for handwashing.
4. 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 the integrity of the glove material is compromised.
5. Disposable (single use) gloves are not to be reused.

b. 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 be reasonably anticipated.

Students are expected to wear eye protection in skills lab for demonstration of procedures. Students are to bring their own protective eyewear.

Students are expected to use a mask with a one way valve while performing CPR. Students are to provide their own CPR mask.

c. 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 shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.

d. Surgical Caps, Hoods, Shoe Covers or Boots

Surgical caps or hoods and/or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated (operating room, delivery room)

e. Uniforms

1. All students and faculty must carry a change of clothing or second uniform/lab coat with them during all clinical assignments.

2. Uniforms, lab coats and other apparel that is soiled with blood or other body fluid must be handled as contaminated laundry.

a. In the clinical agency, remove it immediately when noticed, if feasible, and have it decontaminated by the clinical facility, if provided.

b. For faculty/students in non- clinical or non-traditional health care settings, apparel must be removed, appropriately bagged and transported.

c. When removed at home, wash the item as a single item in hot water and bleach solution.

d. Appropriately labeled biohazard bags must be used to contain and transport contaminated apparel.

6. General Guidelines

Skills lab will be maintained in a manner to eliminate or minimize occupational exposure.

a. Faculty/students are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses in areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials.

- b. All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.
- c. If a faculty/student's skin or mucous membranes come into contact with blood, he or she is to wash with soap and water and flush eyes with water immediately.
- d. Faculty/students must wash their hands immediately or as soon as feasible after removing protective equipment. If soap and water are not immediately available, other handwashing measures must be employed, such as moist towelettes. Faculty/students still must wash with soap and water as soon as possible.
- e. Specimens of blood or other potentially infectious materials will be placed in a container that prevents leakage during the collection, handling, processing, storage, and transport of the specimens.
- f. All equipment and environmental and working surfaces shall be cleaned and decontaminated with appropriate disinfectant solution. (Refer to Safety Manual, Section VIII)

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

E. POST EXPOSURE EVALUATION AND FOLLOW UP

Students should report any incident considered to place them at risk (needle stick, puncture or cut from a potentially contaminated source) to faculty and to the appropriate clinical agency personnel. Faculty/student exposure incidents must be reported to the Department Head within 24 hours of the exposure incident.

NOTE: ALL COSTS INCURRED RELATIVE TO EXPOSURE INCIDENTS, INITIAL AND FOLLOW-UP, ARE THE RESPONSIBILITY OF THE INDIVIDUAL STUDENT.

1. Clinical Agency

Summary of actions to be taken when an exposure incident occurs:

- a. Report the incident to faculty/clinical agency/ Department Head.
- b. Seek immediate medical attention/testing.
- c. File required paperwork at SLU SON and clinical agency.
- d. Complete post exposure follow up and record keeping according to OSHA Guidelines.

2. Skills Lab

Summary of actions to be taken when an exposure incident occurs:

- a. Report incident to faculty, skills lab coordinator, and Department Head.
 - b. Complete Accident/Incident Report Form # 118
 - c. Complete the ORM-Loss Prevention questionnaire regarding accident/incident.
 - d. Post exposure follow up and record keeping will be according to OSHA Guidelines.
3. Community Clinical Experiences
- a. Report the incident to faculty/community agency (if applicable) /Department Head.
 - b. Seek immediate medical attention/testing
 - c. File required paperwork at SLU SON and community agency (if applicable).
 - d. Complete post exposure follow up and record keeping according to OSHA Guidelines and SON protocol.

F. COMMUNICATION OF HAZARDS

Education regarding hazards and warning labels is discussed in the orientation program for faculty and students and at least annually thereafter. Additional information shall be made available to faculty /students when changes such as modifications of tasks or procedures or institution of new tasks or procedures affect the faculty/student's occupational exposure.

G. RECORD KEEPING

Student and faculty health records are maintained in separate files from performance records.

The Department Head shall establish and maintain an accurate record for each faculty/student with an occupational exposure. These records are separate from health and performance records and is kept in the departmental office. Confidentiality is maintained in that only the Department Head has access to these records.

H. TRAINING RECORDS

The Campus Coordinator at the Baton Rouge center submits letters to all Baton Rouge area clinical agencies verifying that SLU faculty/students viewed the videos recommended by the Greater Baton Rouge Nursing Education Consortium and successfully passed the written exam for Standard Precautions content per OSHA guidelines.

Faculty/students utilizing clinical agencies other than Baton Rouge area attend presentations on Standard Precautions at the individual agency.