

ISU College of Pharmacy Exposure Control Plan

POLICY

The College of Pharmacy at Idaho State University is committed to providing a safe and healthful work environment for our staff and students. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 *CFR* 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our students. This ECP includes:

- Determination of employee/student exposure
- Implementation of various methods of exposure control, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment
 - Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to students and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding exposure incidents. Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

PROGRAM ADMINISTRATION

- The members of the Technology Committee are responsible for implementation of the ECP. The Technology Committee will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact location/phone number:

Technology Committee
ISU College of Pharmacy
Campus Stop 8288
Pocatello ID 83209-8288
(208) 282-2175

- Those students who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.
- The Technology Committee will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. The Technology Committee will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes. Contact location/phone number:

Technology Committee
ISU College of Pharmacy
Campus Stop 8288
Pocatello ID 83209-8288
(208) 282-2175

- The Associate Dean of the College of Pharmacy will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained. Contact location/phone number:

Office of the Associate Dean
ISU College of Pharmacy
Campus Stop 8288
Pocatello ID 83209-8288
(208) 282-3475

- The Associate Dean of the College of Pharmacy will be responsible for training, documentation of training, and making the written ECP available to students, OSHA, and NIOSH representatives. Contact location/phone number:

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EMPLOYEE EXPOSURE DETERMINATION

The following is a list of all job classifications at our establishment which have occupational exposure:

Student Pharmacists

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions

All students will utilize universal precautions.

Exposure Control Plan

Students covered by the bloodborne pathogens standard receive an explanation of this ECP during their P1 Orientation. It will also be reviewed in their annual refresher training. All students can review this plan at any time by accessing the ECP document on the website:

<http://pharmacy.isu.edu/live/current/pharmd.html>

If requested, we will provide an employee/student with a copy of the ECP free of charge and within 15 days of the request. The Technology Committee at the College of Pharmacy is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Engineering Controls and Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

- Sharps containers
- Needleless systems or safety needles whenever possible
- Single-use lancets

Sharps disposal containers are inspected and maintained by the Pharmacy Practice Department. Full sharps disposal containers are replaced by the Technical Safety Office at the Pocatello site of Idaho State University College of Pharmacy every quarter or whenever necessary to prevent overfilling. This facility identifies the need for changes in engineering controls and work practices through Review of OSHA records. Full sharps disposal containers are replaced by the Technical Safety Office at the Meridian site of Idaho State University College of Pharmacy every quarter or whenever necessary to prevent overfilling. This facility identifies the need for changes in engineering controls and work practices through Review of OSHA records.

We evaluate new procedures and new products regularly by reviewing new products available from Henry Schein (supplier) and reviewing material from conferences such as APhA and ASHP.

Both front-line workers and management officials are involved in this process in the following manner: The Technology Committee has student, staff, faculty, and administrative members and meets at least every semester. The Pharmacy Practice Department is responsible for ensuring that these recommendations are implemented.

Personal Protective Equipment (PPE)

PPE is provided to our students at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided by faculty teaching Introduction to Pharmacy Practice. The types of PPE available to students are as follows:

Gloves, lab coats

PPE is located in the AV closet upstairs near the Pharmacy Practice Lab at the Pocatello site of Idaho State University College of Pharmacy or in the Room 709 at the Meridian site of Idaho State University College of Pharmacy and may be obtained through any faculty member of the Pharmacy Practice Department. Students will obtain PPE upon request to any faculty member of the Pharmacy Practice Department; this department is responsible for ensuring that PPE is available.

All students using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in the autoclave room upstairs in Leonard Hall.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

The procedure for handling used PPE is as follows:

Anything with blood products or OPIM will be placed in sharps containers.

Housekeeping

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section “Labels”), and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling sharps disposal containers is:

In Pocatello, place full container in the autoclave room upstairs in Leonard Hall. The Technical Safety Office of ISU checks regularly and removes containers for disposal.

In Meridian, place full container in room 709, Medical Lab Sciences. The Technical Safety Office of ISU checks regularly and removes containers for disposal.

The procedure for handling other regulated waste is:

N/A

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded.

Sharps disposal containers are available in the AV closet upstairs near the Pharmacy Practice Lab at the Pocatello site of Idaho State University College of Pharmacy or in Room 709 at the Meridian site of Idaho State University College of Pharmacy.

Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

Labels

The following labeling methods are used in this facility:

All sharps containers are to be red in color with a biohazard label.

The Pharmacy Practice Department is responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Students are to notify the Pharmacy Practice Department if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

HEPATITIS B VACCINATION

The Office of the Associate Dean provides training to students on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability. The hepatitis B vaccination series is a requirement for matriculation in the College of Pharmacy.

Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune; or 3) medical evaluation shows that vaccination is contraindicated.

Following the medical evaluation, a copy of the health care professional's written opinion will be provided by the student to the Office of the Associate Dean within 15 days of the completion of the evaluation.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, follow the instructions delineated in the College of Pharmacy Student Handbook. Fill out the Needlestick/Bloodborne Pathogen Exposure Report available at:

<http://pharmacy.isu.edu/live/current/pharmd.html>

- Identify and document the source individual (unless that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed student is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed student's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status
- If the student does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

The administrative assistant of the Department of Pharmacy Practice ensures that health care professional(s) responsible for the student's post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard. The Office of the Associate Dean ensures that the health care professional evaluating a student after an exposure incident receives the following:

- a description of the employee's job duties relevant to the exposure incident
- route(s) of exposure
- circumstances of exposure
- if possible, results of the source individual's blood test
- relevant employee medical records, including vaccination status

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The Office of the Associate Dean at the College of Pharmacy will review the circumstances of all exposure incidents to determine:

- engineering controls in use at the time
- work practices followed
- a description of the device being used (including type and brand)

- protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- location of the incident (O.R., E.R., patient room, etc.)
- procedure being performed when the incident occurred
- student's training

The Associate Dean will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log. If revisions to this ECP are necessary the Technology Committee will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding students to the exposure determination list, etc.)

STUDENT TRAINING

All students who have occupational exposure to bloodborne pathogens receive initial and annual training conducted by the Associate Dean.

Qualifications: The Associate Dean has a PharmD, a license to practice pharmacy and APhA certification in immunization administration.

All students who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- a copy and explanation of the OSHA bloodborne pathogen standard
 - an explanation of our ECP and how to obtain a copy
 - an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
 - an explanation of the use and limitations of engineering controls, work practices, and PPE
 - an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
 - an explanation of the basis for PPE selection
 - 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 OPIM
 - 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 and labels and/or color coding required by the standard and used at this facility
 - an opportunity for interactive questions and answers with the person conducting the training session.
- Training materials for this facility are available to all students online at:

<http://pharmacy.isu.edu/live/current/pharmd.html>

RECORDKEEPING

Training Records

Training records are completed for each student upon completion of training. These documents will be kept for at least three years at the Office of the Associate Dean.

The training records include:

- the dates of the training sessions
- the contents or a summary of the training sessions

- the names and qualifications of persons conducting the training
- the names and job titles of all persons attending the training sessions

Student training records are provided upon request to the student or the student's authorized representative within 15 working days. Such requests should be addressed to the Associate Dean of the College of Pharmacy.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 *CFR* 1910.1020, "Access to Employee Exposure and Medical Records."

The Associate Dean of the College is responsible for maintenance of the required medical records. These confidential records are kept in the vault in the basement of Leonard Hall for at least the duration of employment plus 30 years. Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the Office of the Associate Dean:

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ISU College of Pharmacy
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OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 *CFR* 1904). This determination and the recording activities are done by the Associate Dean of the College of Pharmacy.

Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidences must include at least:

- date of the injury
- type and brand of the device involved (syringe, suture needle)
- department or work area where the incident occurred
- explanation of how the incident occurred.

This log is reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report.