Maryland Institute College of Art  
(MICA)

Subject: Occupational/Non-occupational Exposure to Bloodborne Pathogens
Date issued: Revised/January 2008

Authority: Occupational Safety and Health Administration (OSHA), 29 CFR (Code of Federal Regulations) 1910.1030

References: Department of Environmental Health and Safety

Annual Review Date: January 2009

Note: Each annual review takes into consideration and implementation for MICA’s employees of safer medical devices.

Purpose

a. This plan has been established to address the institute’s concern for protecting its employees, students, volunteers, and visitors from the risk of infection from bloodborne pathogens, which include but are not limited to Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), Human Immunodeficiency Virus (HIV), and syphilis. This plan also addresses the services rendered by the institute to individuals who experience an exposure to blood or other potentially infectious materials (OPIM) during an occupational or non-occupational related activity. The university has developed procedures to be followed in the event of an accident involving the unprotected exposure to blood or OPIM, whether work related or associated with institute sanctioned activities of employees, students, volunteers, or visitors, which causes or offers the potential to cause illness.

b. Maryland General Hospital can provide additional guidance relative to HIV (AIDS) (410)225-8000.

Definitions

For the purpose of this plan, exposure to HIV or other bloodborne pathogens is categorized as either occupational or non-occupational. The Department of Environmental Health and Safety (EHS) can provide guidance in assigning categories.

a. Accidents. The occurrence of an event that results in injury and/or illness to an individual.
c. Blood or other potentially infectious materials (OPIM).

1. Any human blood or other body fluids (i.e., semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, and amniotic fluid), saliva in dental procedures, and any body fluid that is visibly or could potentially be contaminated with blood and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and,
3. HIV or hepatitis virus-containing cell or tissue cultures, organ cultures, and culture medium or other solutions and blood organs or other tissues from experimental animals infected with HIV or hepatitis viruses.
d. Exposure incident. A specific eye, mouth, other mucus membrane, non-intact skin, or parenteral contact with blood or OPIM that results from the performance of an employee’s duties.
e. Occupational exposure. Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or OPIM that may result from the performance of an employee's duties.
f. **Non-occupational exposure.** Exposure to blood or OPIM by university students, volunteers, and visitors which occurs while on campus or off campus attending or participating in a university sponsored activity, including but not limited to intramural and recreational sports and activities sponsored by registered student organizations. This category also would be assigned to university employees under the following conditions:
   1. The employee is in a non-work status and is exposed to blood or OPIM while attending or participating in a university sponsored activity.
   2. The employee is on official work status and becomes exposed to blood or OPIM while conducting non-work activities (i.e., jogging, weight lifting, racquetball, basketball, and swimming).

g. **Person-in-charge (PIC).** Any person who is responsible for and supervises activities of other people who have occupational or non-occupational exposures as defined in paragraphs 6034.2 e) and f). This person may be a supervisor, principal investigator, department chair, director, or a person in charge of an institute sponsored program. A principal investigator planning research activities involving blood or OPIM, in addition to complying with all requirements of this plan, must have an approved MICA protocol from the EHS Manager prior to initiating such activity.

h. **University employee.** Faculty, staff, and student employees who receive compensation from the university for their employment and who are covered under Maryland Bureau of Worker's Compensation.

### Procedures and Responsibilities

This section addresses an individual's responsibilities and the procedures to be followed for both occupational and non-occupational exposures to blood or other OPIM. Procedures are based on recommendations and/or requirements of the United States Department of Labor (OSHA), the United States Department of Health and Human Services, and the Maryland State Department of Health. Specific references are given at the end of this plan.

a. **Occupational exposures**

   1. The PIC of any university occupational activity planning work with blood and/or OPIM must report such activity prior to commencing work that offers the potential for exposure to blood or OPIM. In specific, the PIC is required to provide the following information to the Department of Environmental Health and Safety and to the Department of Human Resources.

      a.) A list of job classifications in which all personnel in those classifications have "occupational exposure."

      b.) A list of job classifications in which some employees in those classifications have "occupational exposure."

      c.) A list of all tasks and procedures or groups of closely related tasks and procedures, in which "occupational exposures" occur, that are performed by employees listed in paragraphs (a) and (b) above. Exposure determination is made without regard to the use of personal protective equipment.

   2. Employees involved in the work activity, including the PIC, must receive their initial training within ten working days following employment or assignment to a work activity covered by the Bloodborne Pathogen Program. Annual refresher training also is mandatory. EHS will conduct both the initial and refresher training. Training by EHS does not negate the PIC's responsibility for instructing his/her staff on specific procedures in the workplace.

   3. During initial training, EHS will provide the PIC with a copy of the MICA Exposure Control Plan for Bloodborne Pathogens and a copy of the OSHA Bloodborne Pathogen
Blood-Borne Pathogens Exposure Control Plan

Standard (29 CFR 1910.1030). It is the PIC’s responsibility to ensure that all activities involving blood and/or OPIM are conducted in compliance with the contents of the institute’s plan.

4. The PIC is required to report to EHS any accidents in which an employee experiences an unprotected exposure to blood and/or OPIM [refer to paragraph 6034.2 c) for the definition of blood and/or OPIM].

b. Non-occupational exposures
   1. Employees, students, volunteers, and visitors exposed to blood and/or OPIM in a non-occupational incident while attending or participating in any MICA sponsored activity will be offered, at no cost to the participant, the post-exposure medical monitoring program.
   2. Campus Safety responding to accidents or incidents involving non-occupational exposure to blood and/or OPIM will inform any exposed individual of the medical monitoring program. For off-campus facilities or for activities conducted off campus, the PIC will be responsible for informing the participant.
   3. Campus Safety or the PIC is responsible for telephone notification of the incident to EHS and is responsible for contacting Campus Safety for a completion of a MICA Incident Report Form.

c. Responsibilities of the Department of Environmental Health and Safety
   1. Maintain all occupational health records.
   2. Schedule all personnel for occupational health appointments.
   3. Assist in the investigation of all exposure accidents/incidents.
   4. Provide to the Department of Human Resources the names of all employees who decline the Hepatitis B vaccination series.
   5. Provide initial and refresher training on bloodborne pathogens.
   6. Maintain training records for all employees covered by the Bloodborne Pathogen Program.
   7. Notify appropriate parties of changes in regulatory requirements.
   8. Review and revise the university’s Exposure Control Plan for Bloodborne Pathogens at least annually and/or when changes occur.

d. Responsibilities of the Department of Human Resources
   1. Maintain a list of job descriptions in which all employees have occupational exposures to blood and/or OPIM.
   2. Maintain a list of job descriptions in which some employees have occupational exposures to blood and/or OPIM.
   3. Maintain a list of all tasks and procedures or groups of closely related tasks and procedures performed by employees listed in paragraphs 6034.3 d) 1) and 2).
   4. Maintain a list of employees who have declined the Hepatitis B vaccination series.

Reporting Occupational and Non-occupational Accidents/Incidents

a. Accidents/incidents involving occupational exposures
   1. The PIC is responsible for notifying the Department of Campus Safety by telephone (443.423.3333) of any occupational accident/incident that results in an employee’s exposure to blood and/or OPIM. Notification is to be made as soon as possible but no later than 9 am of the next normal workday.
   2. Campus Safety is responsible for completing the MICA Incident Report Form and sending it to the Operations Department. The Health and Safety Department will notify Human Resources of the exposure. Human Resources will complete the OSHA Form 101 and a Worker’s Compensation Claim.

b. Accidents/incidents involving non-occupational exposures
   1. PICs of university sponsored activities are responsible for notifying the Department of Campus Safety by telephone (443.423.3333) of any exposure accident/incident.
Notification is to be made as soon as possible but no later than 9 am of the next normal workday.

2. Campus Safety is responsible for submitting the MICA’s Incident Report form to Operations for accidents/incidents involving the exposure of students, volunteers, and visitors to blood and/or OPIM. The form should be signed by the participant whenever possible. Reports are due to EHS as soon as possible but in no case later than three workdays following the date of the accident/incident.


Medical Monitoring Program

   a. The PIC is responsible for scheduling all pre-employment, baseline, periodic, and post-exposure tests for employees in the occupational exposure category. EHS also will schedule all post-exposure tests for individuals experiencing non-occupational exposures to blood and/or OPIM.
   
   b. The medical monitoring program for employees with occupational exposures will be addressed during the mandatory training sessions. Individuals experiencing a non-occupational exposure to blood and/or OPIM while attending or participating in a university sponsored activity will be offered the following medical services at no cost to the individual.
      1. Blood test to monitor for HBV.
      2. Blood test to monitor for HIV antibodies.
      3. HBV booster immunizations as directed by the attending physician.
      4. Medical counseling as directed by the attending physician.
   
   c. The attending physician shall be appointed by the Institute.
   
   d. Any discussion or reports between physician and patient relative to the presence or absence of disease is confidential, and such information is not provided to EHS.

References

   a. Center for Disease Control (Department of Labor/Department of Health and Human Services), Joint Advisory Notice, Protection Against Occupational Exposure to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV), October 30, 1987.
   
   
   
   d. Maryland Institute College of Art, Exposure Control Plan for Bloodborne Pathogens, as revised.

Note: A copy of the BBP Standard has been given to Mount Royal Medical Associates on 11/24/2007.
1. Types of Exposures:
   - MICA is a non-profit art college; therefore no employee is required to assist in an incident where a possible BBP is present.
   - The Department of Building Services may be exposed while performing the following job tasks:
     - Pulling trash (i.e., sharps injury), cleaning restrooms, and responding to an incident for clean-up.
   - The Department of Campus Safety, as MICA first responders, may assist in first aid administration.

2. Job classifications with potential for exposure:
   - Campus Safety, Building Services, Shop Technicians, EHS Manager, Medical Professionals, non-MICA employees, Continuing Studies, YPS

3. Process for protection from BBP:
   - Annual review of plan
   - Annual training for affected groups
   - BBP kits, including all necessary Personal Protective Equipment
   - Hepatitis B vaccines offered

4. Housekeeping:
   - Bathrooms are sanitized on a regular basis
   - Incidents that contain possible BBP are disinfected
   - Procedures are reviewed in training on proper clean up
   - If necessary, outside contractors can be called in for clean up

5. Disposal Methods:
   - Mount Royal Medical Associates have agreed to dispose of any biohazardous waste for the College

6. When an exposure occurs:
   - Wash exposed area with soap and water
   - Flush splashes to nose, mouth, or skin with water
   - Irrigate eyes with water or saline
   - Report the exposure to Campus Safety and Human Resources
   - Direct the worker to a healthcare professional

7. Post-Exposure Follow-up:
   - Document routes of exposure and how exposure occurred
   - Record injuries from contaminated sharps in a sharps injury log, if required
   - Obtain consent from the source individual and the exposed employee and test blood as soon as possible after the exposure incident
   - Provide risk counseling and offer post-exposure protective treatment for disease when medically indicated in accordance with current U.S. Public Health Service guidelines
   - Provide written opinion of findings to employer and copy to employee within 15 days of the evaluation

8. Biohazard Warning Labels:
   - Warning labels required on: Containers of regulated waste, refrigerators and freezers containing blood and other potentially infectious materials, other containers used to store, transport, or ship blood or other potentially infectious materials
9. Training Elements:
   - Copy of the standard
   - Modes of transmission
   - Site-specific exposure control plan
   - Hazard recognition
   - Use of engineering controls, work practices and PPE
   - Live question and answer sessions

10. Medical Recordkeeping Requirements:
    - Employee’s name and social security number
    - Employee’s hepatitis B vaccination status
    - Results of examinations, medical testing, and post-exposure evaluation and follow-up procedures
    - Health care professional’s written opinion
    - Information provided to the health care professional
    - Employee medical records must be kept confidential and not disclosed or reported without the employee’s written consent (unless required by law)
    - Medical records must be maintained for duration of employment plus 30 years according to OSHA’s rule governing access to employee exposure and medical records