Exposure Control Plan
to Bloodborne Pathogens and Airborne Pathogens/Tuberculosis
Athens Technical College
2024-2025

REVIEWED: Michele Jackson **DATE:** 4/3/2024
EXPOSURE CONTROL COORDINATOR
Athens Technical College

APPROVED: Andrea D. Davis **DATE:** 4/17/2024
PRESIDENT/EXECUTIVE
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EMERGENCY MANAGER
TECHNICAL COLLEGE SYSTEM OF GEORGIA

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TECHNICAL COLLEGE SYSTEM OF GEORGIA

ATHENS TECHNICAL COLLEGE

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ATHENS - ELBERT - WALTON

Exposure Control Plan

2024 – 2025

The following Hazard Communication Plan has been established to inform employees and students of the hazardous properties of chemicals with which they work or study, of safe handling procedures and of measures to take to protect employees and students from these chemicals.

Submitted By:

Michele Jackson
Exposure Control Coordinator

Athens Technical College
Exposure Control Plan for Occupational Exposure to Bloodborne Pathogens and Airborne Pathogens/Tuberculosis
2024 - 2025

INTRODUCTION

The State Board of the Technical College System of Georgia (SBTCSG), along with its technical colleges and work units, is committed to providing a safe and healthful environment for its employees, students, volunteers, visitors, vendors and contractors. SBTCSG Policy II.D. Emergency Preparedness, Health, Safety and Security compels technical colleges and work units to eliminate or minimize exposure to bloodborne and airborne pathogens in accordance with OSHA Standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens" as well as Centers for Disease Control (CDC) "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Facilities, 2005." In pursuit of this goal, the Exposure Control Plan (ECP) is maintained, reviewed, exercised and updated at least annually to ensure compliance and protection for employees and students.

This Exposure Control Plan includes:

- clarification of program administration
- determination of employee and student exposure
- implementation of various methods of exposure control
    - standard precautions
    - engineering and administrative controls
    - personal protective equipment (PPE)
    - housekeeping
    - laundry
    - labeling
- vaccination for hepatitis B
- evaluation and follow-up following exposure to bloodborne/airborne pathogens (tuberculosis)
- evaluation of circumstances surrounding exposure incidents
- communication of hazards and training and
- recordkeeping

I. PROGRAM ADMINISTRATION

A. Michele Jackson serves as the Exposure Control Coordinator (ECC) and is responsible for the implementation, maintenance, review, and updating of the Exposure Control Plan (ECP). The ECC will be responsible for ensuring that all required medical actions are performed and that appropriate health records are maintained. Further, the ECC will be responsible for training, documentation of training as well as making the written ECP available to employees, students, and any compliance representatives.

Contact Information for Exposure Control Coordinator
Michele Jackson, RN, MSN
(O) 706-552-0997
Office location: A210
mjackson@athenstech.edu

B. Those employees and students who are determined to be at risk for occupational exposure to blood, other potentially infectious materials (OPIM) as well as at risk for exposure to airborne pathogens/tuberculosis must comply with the procedures and work practices outlined in this ECP.

C. The Athens Technical College is responsible for the implementation, documentation, review, and training/record keeping of standard precautions with respect to the areas of personal protective equipment (PPE), decontamination, engineering controls (e.g., sharps containers), administrative controls, housekeeping, laundry, and labeling and containers as required as assigned to designees. Further, adequate supplies of the aforementioned equipment will be available in the appropriate sizes/fit. See section **II. Exposure Determination** for a list of all job and student program classifications that have a potential for occupational exposure.

Contact Information for Responsible Person(s) or Department(s):

- Michele Jackson 706-552-0997, Instructor, Associate of Science Nursing Program
- John Gaissert 706-355-0539, Director of Safety & Security

D. Athens Technical College engages in the following contractual agreement regarding exposure control with Stericycle for medical and pharmaceutical waste management.

E. Athens Technical College engages in the following training, drills, and exercises regarding exposure control. Active shooter drill, which includes inclusion of the ECP (Exposure Control Plan), EOP (Emergency Operation Plan), and BCP (Business Continuity Plan). The campus and local police, fire safety, and hospitals actively participate in the drill which is performed yearly. The protocol for the retention of training records is during employment and 7 years post-employment.

F. The protocol for the annual review of the Athens Technical College ECP is yearly. The protocol for the retention of the ECP is 30 years.

II. EXPOSURE DETERMINATION

Employees/or students are identified as having occupational exposure to bloodborne/airborne pathogens based on the tasks or activities in which they engage. These tasks or activities are placed into categories as defined by the 1987 joint advisory notice by the U.S. Department of Labor and the U.S. Department of Health and Human Services. The relative risk posed by these tasks or activities, as well as the measures taken to reduce or eliminate risk of occupational exposure are also determined by the category.

Category I: A task or activity in which direct contact or exposure to blood, other potentially infectious materials, or airborne pathogens (tuberculosis) is expected and to which standard precautions apply.

Category II: A task or activity performed without exposure to blood or other potentially infectious materials, or airborne pathogens (tuberculosis) and to which standard precautions apply, but exposure to another person's blood or to OPIM might occur as an abnormal event or an emergency or may be required to perform unplanned Category I tasks or activities.

Category III: A task or activity that does not entail normal or abnormal exposure to blood or other potentially infectious materials, or airborne pathogens (tuberculosis) and to which standard precautions do not apply.

Employees or students who engage in tasks or activities which are designated as Category I or II, as well as their occupational area, are considered to be "covered" by the parameters of the ECP, including part-time, temporary, contract and per-diem employees.

The following is a list of job and/or student program classifications which have Category I or II occupational exposure. Included is a list of the tasks or activities or groups of closely related tasks or activities in which occupational exposure may occur for these individuals.

CATEGORY I TASKS

"A task or activity in which direct contact or exposure to blood, other body materials, or air borne pathogens to which Universal Precautions/Standard precautions apply is normal."

CATEGORY I TASK LISTING

Category I tasks performed in classroom, laboratory and clinical activities for each occupational training program/course are to be listed below:

Certified Nursing Assistant

- Collecting and handling of body fluid specimens
- Emergency resuscitation/CPR
- Handling and cleaning of body fluid spills
- Nursing care of infectious/isolated patients
- Perform post mortem care
- Vital signs, oral and rectal temps

Dental Assisting

- Application and removal of matrix bands
- Assisting with administration of anesthesia
- Assisting with and/or polishing teeth
- Assisting with endodontic procedures
- Assisting with general dentistry procedures
- Assisting with maxillofacial and oral specialty procedures
- Assisting with pediatric and orthodontic procedures
- Assisting with periodontal procedures
- Assisting with placement and/or removal of temporary cement
- Exposing radiographs
- Infection control
- Isolation-placement and removal of cotton rolls
- Oral evacuation
- Preparation and seating of temporary crowns and bridges
- Respond to and assist in the management of chair-side emergencies

Dental Hygiene

- Exposing radiographs on patients
- Extra and Intra oral exam
- Instrument sharpening during procedure
- Instrumentation
- Irrigation
- Local anesthesia procedures, gauze, handling needles, cartridges/disposal
- Polishing
- Prepare for sterilization
- Probing
- Sealants
- Ultra-sonic instruments cavipo/densonic

Early Childhood Care and Education

- Bathing/skin care of non-intact skin
- Cleaning of spills of body fluids
- Hair and skin care of children with non-intact skin
- Resuscitation/CPR
- Wound care: examination, cleaning, bandaging

Emergency Medical Technology / EMT

- Airway and ventilation care
- Assisting with biopsy, spinal tap, thoracentesis or other invasive procedures
- Bleeding control, managing frank blood
- Blood glucose monitoring (Glucometer)
- Care of newborn/cord care
- Collection of body fluids specimens
- Delivery of infant, postpartum care
- Dressing care
- Foley catheter insertion and care
- Fracture care
- Handling of contaminated linens and equipment
- Naso, oral, and gastric intubation
- Oral and tracheal suctioning
- Wound care: irrigation, packing, bandaging, examination

Medical Assisting

- Administer intramuscular, intradermal, and subcutaneous injections
- Assisting with minor surgical procedures
- Blood glucose monitoring (Glucometer)
- Collection of blood and urine specimens
- Handling and cleaning contaminated instruments and equipment
- Microscopic procedures, analysis of body fluid specimens
- Oral and rectal temperatures
- Prepare smears and gram-stain of slides
- Testing of body fluids using dipsticks, tapes, tablets, specific gravity
- Throat cultures
- Venipuncture, management of sharps

Nursing

- Administration of enemas and douches
- Administration of medications involving exposure to blood, body fluids, and/or exposure to sharps: intravenous, intramuscular, subcutaneous, intradermal, oral, optic, otic, rectal, vaginal
- Assisting with chest tube insertion and removal
- Assisting and administering blood and blood products
- Assisting with lumbar punctures, amniocentesis, thoracentesis, other procedures for the collection of body fluids
- Blood glucose monitoring (Glucometer)
- Collecting and handling of body fluid specimens
- Collection of culture specimens
- Emergency resuscitation/CPR
- Emptying drainage containers – catheters, Hemovac, Jackson-Pratt containing body fluids
- Handling and cleaning of body fluid spills
- Handling contaminated linens and equipment
- Handling of sharps
- Nasopharyngeal suctioning
- Nursing care of infectious/isolated patients
- Perform postmortem care
- Postpartum and newborn care/cord care
- Selected IV procedures as defined by the clinical facility, may include venipuncture, IV dressing changes, discontinuing intravenous cannula
- Suture/clip removal
- Tracheostomy care and suctioning
- Vital signs, oral and rectal temps
- Wound care, examination, irrigation, packing, dressing changes

Paramedic Technology

- Administering blood and blood products
- Administration of medications via other routes: optic, otic, rectal, oral, vaginal
- Airway and ventilation care
- Assisting with biopsy, spinal tap, thoracentesis, or other invasive procedures
- Blood glucose
- Care of newborn infant/cord care
- Collection and handling of body fluid specimens
- Control of bleeding, management of frank blood
- Cricothyroidotomy
- Dressing changes and wound care, irrigation, packing, bandaging, examination
- Emergency delivery of infant/postpartum care
- Fracture care
- Handling and cleaning contaminated linens and equipment
- Insertion of urinary catheters
- Intraosseous, intramuscular, intravenous, subcutaneous injection/medications administration
- Intubation - oral, nasal, gastric
- Management of multi-trauma patients
- Oral and tracheal suctioning
- Pleural decompression
- Rectal and/or oral temperatures
- Resuscitation/CPR
- Tracheostomy care
- Venipuncture – starting and maintaining IV’s

Phlebotomy

- CPR
- Handling linens soiled with body fluids
- Perform skin puncture
- Perform venipuncture with both syringes and evacuator tube

Practical Nursing

- Administration of enemas and douches
- Administration of medications involving exposure to blood, body fluids, and/or exposure to sharps: intravenous, intramuscular, subcutaneous, intradermal, oral, optic, otic, rectal, vaginal
- Assis with chest tube insertion and removal
- Assisting and administering blood and blood products
- Assisting with lumbar punctures, amniocentesis, thoracentesis, other procedures for the collection of body fluids
- Blood glucose monitoring (Glucometer)
- Collecting and handling of body fluid specimens
- Collection of culture specimens
- Emergency resuscitation/CPR
- Emptying drainage containers: catheters, hemovac, Jackson-Pratt containing body fluids
- Handling and cleaning of body fluid spills
- Handling contaminated linens and equipment
- Handling of sharps
- Nasopharyngeal suctioning
- Nursing care of infectious/isolated patients
- Perform postmortem care
- Postpartum and newborn care/cord care
- Selected IV procedures as defined by the clinical facility, may include venipuncture, IV dressing changes, discontinuing of IV cannula
- Suture/clip removal
- Tracheostomy care and suctioning
- Vital signs, oral and rectal temps
- Wound care – examination, irrigation, packing, dressing changes

Radiography

- Assisting in surgical procedures requiring mobile radiography or C-arm fluoroscopy
- Assisting with angiography
- Assisting with arthrography
- Assisting with fluoroscopic or CT guided biopsy procedures
- Assisting with lumbar puncture/fluid collection during myelography
- Assisting with venipuncture/IV contrast administration
- Handling of linens or equipment soiled with blood or body fluids
- Handling of soiled immobilization devices and dressings
- Radiography of a patient with acute GI bleed
- Radiography of a trauma patient
- Radiography of biopsy specimen

Surgical Technology

- Assistance during thoracentesis, vaginal exams, intracranial monitoring procedures, lumbar punctures, bone marrow aspiration, organ procurement, joint aspiration, endoscopy
- Assisting anesthesia or recovery room personnel with suctioning and intubation/extubation
- Care and maintenance of wound drainage devices
- Care of newborn
- Circulating duties on all surgical procedures
- Collecting and processing specimens (blood and tissue)
- Decontamination of equipment
- Decontamination of soiled surgical instruments
- Handling linens and articles soiled with blood
- Operating room housekeeping duties
- Resuscitation
- Scrub duties on all surgical procedures
- Transfusion therapy
- Trauma care
- Urethral catheterization

CATEGORY I TASK STANDARD OPERATING GUIDELINES
Definition

A Category I Task is one in which there is a normal occurrence for exposure to blood, other potentially infectious body materials or airborne pathogens that warrant the use of exposure controls. **Faculty Positions Involved:**

The technical college faculty positions involved in the performance Category I Tasks are:

- Certified Nursing Assistant instructors
- Child Care Instructor and Part-time instructors
- Dental Assisting instructors
- Dental Hygiene instructors and adjuncts
- EMT instructors and adjuncts
- Medical Assisting instructors and Medical Lab assistants
- Nursing instructors and adjuncts
- Paramedic instructor and adjuncts
- Phlebotomy instructors and adjuncts
- Physical Therapist Assistant instructors and adjuncts
- Practical Nursing instructors and adjuncts
- Radiography instructors and adjuncts
- Surgical Technology instructors and adjuncts

Student Occupational Training Programs/Courses Involved: The technical college student occupational programs or courses involved in the performance of Category I tasks are:

- Certified Nursing Assistant
- Dental Assistant
- Dental Hygienist
- Early Childhood Care and Education
- EMT
- Medical Assistant
- Nursing
- Paramedic
- Phlebotomy
- Physical Therapist Assistant
- Practical Nurse
- Radiography
- Surgical Technology

CATEGORY II TASK LISTING

Category II tasks performed in classroom, laboratory and clinical areas for each occupational training program/course are listed below:

Certified Nursing Assistant

- General patient care and patients not requiring invasive procedures
- Vital signs
- Bed baths
- Ambulating patients
- Feeding patients
- Surgical/procedural observations

Early Childhood Care and Education

- If a child bites another child or teacher
- Accidents that involve blood
- Mouth care
- Handling contaminated linens
- Changing diapers
- Handling tears, comforting crying children

Cosmetology

- Haircutting with scissors, razors, or clippers, whereby the patron or student is cut
- Chemical reactions on patrons or students involving permanent waving, chemical hair relaxers, color services, bleaching
- Exposure to non-intact skin or skin disorders and diseases during facial treatments, scalp treatments, and/or hair removal
- Manicuring/pedicuring, student or patron contact: artificial nails, filing, cuticle treatment, glue reaction
- Thermal styling, student or patron contact, burns

Dental Assisting

- Processing dental films
- Assisting with and/or applying topical fluoride
- Performing vital signs
- Preparation of dental materials
- Selecting and preparing tray set-ups
- Observation of dental materials
- Providing preventative oral care information instructions to the patient

Dental Hygiene

- Clean-up, disinfection, and disposal in clinic
- Processing radiographs
- Set-up ultrasonic, etc., and clean-up
- Cleaning dentures/RPD's
- Biohazard waste disposal
- X-ray procedure
- Fluoride treatment

Emergency Medical Technology/EMT

- Patient assessments, including vital signs
- General patient care with patients not requiring invasive procedures
- General patient observations

Medical Assisting

- Obtaining vital signs
- General patient care with patients not requiring specimen collection or invasive procedures
- General patient observation

Paramedic Technology

- Obtaining vital signs
- General patient care and observation

Practical Nursing

- General patient care and patients not requiring invasive procedures
- Vital signs
- Bed baths
- Ambulating patients
- Feeding patients
- Surgical/procedural observations
- Physical examinations and assessments

Surgical Technology

- Patient transportation and transfer
- Patient pro-op interviews
- Assistance with combative patient during anesthetic induction
- Handling soiled patient equipment (not designated category I)
- Instrument processing in Central Supply (after decontamination)
- Pre- and post-operative patient care: positioning, vital signs, I&O, institution lab simulation (practicing use of sharps)

Nursing

- General patient care and patients not requiring invasive procedures
- Vital signs
- Bed baths
- Ambulating patients
- Feeding patients
- Surgical/procedural observations
- Physical examinations and assessments

Physical Therapy

- Patient transportation
- Dressing and undressing patients
- Ambulation and gait training
- Patient treatment
- Routine assessments
- Vital signs
- Patient positioning
- Handling of soiled equipment

Radiography

- Taking routine x-rays and diagnostic tests
- Monitoring invasive medical equipment attached to patient
- Transportation and transfer of patients
- Insertion of enema tip
- Assisting a patient who is vomiting
- Routine housekeeping duties

Campus Security Officers

- CPR
- Handling linens soiled with bodily fluids
- Accidents that involve blood
- General care not requiring invasive procedures
- General observations

CATEGORY II TASK STANDARD OPERATING GUIDELINES

Definition:

A Category II Task is one in which there is a potential for, although not planned, contact with blood or other potentially infectious materials or airborne pathogens.

Faculty Positions Involved:

The faculty positions involved in the performance of Category II tasks are:

- Campus Security Officers and staff
- Certified Nursing Assistant instructors
- Child Care instructors and adjuncts
- Cosmetology instructors and adjuncts
- Dental Assisting instructors and lab assistants
- Dental Hygiene instructors and adjuncts
- EMT instructors and adjuncts
- Medical Assisting instructors and Medical Assisting Lab assistants
- Nursing instructors and faculty
- Paramedic instructors and adjuncts
- Phlebotomy instructors and adjuncts
- Physical Therapy instructors and adjuncts
- Practical Nursing instructors and adjuncts
- Radiography instructors and faculty
- Surgical Technology instructors and adjuncts
- Veterinary Technology instructors and adjuncts

Student Occupational Areas Involved:

The technical college student occupational programs or courses involved in the performance of Category II tasks are:

- Certified Nursing Assistant
- Cosmetology
- Dental Assisting
- Dental Hygiene
- Early Childhood Care and Education
- EMT
- Medical Assistant
- Nursing
- Paramedic
- Phlebotomy
- Physical Therapy
- Practical Nurse
- Radiography
- Surgical Technology
- Veterinary Technology

CATEGORY III TASKS STANDARD OPERATING GUIDELINE

Definition:

A Category III Task is one in which there is not potential for exposure to blood, other potentially infectious body materials or airborne pathogens that warrant the use of exposure controls.

No special precautions are required when performing Category III tasks.

Category III Academic Programs

Business and Education (Christina Wolfe, Dean)

- Accounting
- Applied Technical Management
- Business Technology
- Business Management
- Consumer Economics
- Cosmetology
- Culinary Arts
- Early Childhood Care and Education
- Hotel, Restaurant, and Tourism Management
- Interior Design
- Marketing Management
- Paralegal Studies
- Social Work Assistant
- Technical Specialist

General Education and Online Learning (Shawana Stanford, Dean)

Life Sciences and Public Safety (Stuart Frew, Dean)

- Agricultural Science
- Biotechnology
- Criminal Justice Technology
- Dental Assisting
- Dental Hygiene
- Emergency Medical Technician
- Fire Science Technology
- Healthcare Assistant and Healthcare Science
- Medical Assisting
- Nanotechnology
- Nursing, Associate Degree

- Paramedic
- Phlebotomy Technician
- Physical Therapist Assistant
- Practical Nursing
- Radiography
- Surgical Technology
- Veterinary Technology

Technology, Engineering, and Manufacturing (Christine Wolfe, Dean)

- Air Conditioning Technology
- Automotive Collision Repair
- Automotive Technology
- Commercial Truck Driving
- Computer Support Specialist
- Diesel Equipment Technology
- Drafting Technology
- Electrical Construction Systems Technology
- Engineering Technology
- Engineering Technology and Applied Science
- Industrial Systems Technology
- Machine Tool Technology
- Manufacturing Operations Specialist
- Networking Specialist
- Welding Technology

The technical college faculty positions involved in the performance of Category III tasks are:

- All employees listed under categories I and II
- Administration
- Faculty
- Support / Secretarial / Maintenance Staff
- All employees not designated under categories I and II

The student occupational training program/course involved in the performance of Category III tasks only are:

1. All students involved in standard classroom and Laboratory activities
2. All other areas not designated under categories I and II

III. IMPLEMENTATION OF METHODS OF EXPOSURE CONTROL

A. Standard Precautions: All covered employees and covered students will use standard precautions as indicated by the task or activity.

B. Exposure Control Plan:

1. All covered employees and covered students will receive an explanation of this ECP during their initial training or academic experience, as well as a review on an annual basis. All covered employees and covered students can review this ECP at any time while performing these tasks or activities by contacting respective Program Director, Lisa M. Allgood, RN, and/or any of the individuals identified as 1 C people. If requested, a hard copy of this ECP will be provided free of charge within 3 business days of request.

2. The ECC will review and update the ECP annually, or more frequently if necessary to reflect any new or modified tasks or activities that affect occupational exposure and to reflect new or revised employee classifications or instructional programs with potential for occupational exposure.

IV. PERSONAL PROTECTIVE EQUIPMENT

Follow standard precautions with regard to personal protective equipment for identified Category I and II tasks. The individuals identified in I. C. are responsible for implementing and documenting the following:

A. Appropriate personal protective equipment (PPE) is provided to covered employees at no cost and available to covered students at the student's expense. Training/record keeping in the use of PPE for specific tasks is provided by each respective Program Director/Chair at Athens Technical College.

Types of PPE that are provided include the following:

Example:

Task	**PPE**	**Location**
Drawing blood	gloves, eye protection	Classroom A225 Storage Closet

B. All covered employees and covered students using PPE must observe the following precautions:

1. Wash hands immediately or as soon as feasible after removing gloves or other PPE.

2. Remove PPE after it becomes contaminated and before leaving the work area.

3. Used PPE may be disposed of in properly designated biohazard or sharps containers located in properly selected places in each area per each program director.

4. 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.

5. Utility gloves may be decontaminated for reuse if their integrity is not compromised. Utility gloves should be discarded if they show signs of cracking, peeling, tearing, puncturing, or deterioration.

6. Never wash or decontaminate disposable gloves for reuse.

7. 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.

8. 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.

C. The protocol for handling used PPE is as follows: Dispose of PPE in the proper biohazard containers or red biohazard bags. Sharps must be disposed of in the approved sharps containers and shall not be placed into red bags or the trash. Students at clinical will follow the clinical sites policies and procedures for disposal of soiled PPE. This protocol is reviewed annually.

V. DECOMTAMINATION

Follow standard precautions with regard to decontamination for identified Category I and II tasks. The individuals identified in I. C. are responsible for implementing and documenting the following:

A. The Program Director/Chair for each individual program is identified as the individual who is responsible for training/record keeping for decontamination.

B. The Program Director/Chair for each individual program is identified as the individual who is responsible for determining and overseeing the correct decontamination processes are utilized in their respective area(s) for all category I and II tasks identified in section II of this ECP.

VI. Engineering and Administrative Controls:

Follow standard precautions with regard to engineering and administrative controls for identified Category I and II tasks. The individuals identified in I. C. are responsible for implementing and documenting the following:

A. Engineering and administrative controls are developed and implemented to reduce or eliminate occupational exposure. Specific engineering and administrative controls for specified tasks or are to be followed for each specific program. Each program will have an infection control policy in their program handbook which outlines specific controls to be used.
Example:

Task	**Engineering/Administrative Controls**
Drawing blood	needleless systems, non-glass capillary tubes

B. Protocol and documentation of the inspection, maintenance and replacement of sharps disposal containers is the responsibility of Program Directors/Chairs of each individual program as they are familiar with the needed personal protection equipment needed for each task.

C. The processes for assessing the need for revising engineering and administrative controls, procedures, or products, and the individuals/groups involved are detailed below:
Example:
Academic Program Advisory Groups examine exposure control methods during advisory group meetings, and the recommendations are discussed with the ECC by the academic program manager(s).

VII. HOUSEKEEPING

Follow standard precautions with regard to housekeeping for identified Category I and II tasks. The individuals identified in I. C. are responsible for implementing and documenting the following:

A. Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded, and closed prior to removal to prevent spillage or protrusion of contents during handling.

B. The protocol for handling sharps disposal containers is: When containers are full, they are placed in the biohazard waste room for pickup by the waste disposal company that has been contracted by the College.

C. The protocol for handling other regulated waste is: Other regulated waste is placed into a red biohazard bag and placed into the red biohazard trash receptacle for disposal.

D. 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 at each laboratory that is in use on the college campus.

E. Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.

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

VIII. LAUNDRY

Follow standard precautions with regard to laundry for identified Category I and II tasks. The individuals identified in I. C. are responsible for implementing and documenting the following:

A. The following contaminated articles will be laundered by the Program Director/Chair or his/her designee for each health program as needed. The laundry facility is located on the second floor of the Life Sciences & Public Safety Building.

B. The following laundering requirements must be met: Articles that are laundered will be washed on the sanitary cycle using the hot water mode. De-oxygenated bleach will be used in the wash cycle.

1. Handle contaminated laundry as little as possible, with minimal agitation.

2. Place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use red bags with the biohazard symbol for this purpose.

3. Wear the following PPE when handling and/or sorting contaminated laundry: Gloves, mouth and eye protection as appropriate

IX. LABELING AND CONTAINERS

Follow standard precautions with regard to labeling and containers for identified Category I and II tasks. The individuals identified in I. C. are responsible for implementing and documenting the following:

A. The following labeling methods are used in this facility: Biohazard signs, biohazard waste receptacles, and sharp containers.

Example:

Equipment to be Labeled	**Label Type (size, color)**
specimens, contaminated laundry, etc.	red bag, biohazard label

B. Safety and Security 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 or out of the facility. Covered employees and covered students are to notify Safety and Security Department if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

X.VACCINATION FOR HEPATITIS B

A. The Dean of Life Sciences and Public Safety will ensure training is provided to covered employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability. Program Directors/Chairs will ensure that the same content training to covered students.

B. The hepatitis B vaccination series is available at no cost after initial covered employee training and within 10 days of initial assignment to all covered employees identified in the exposure determination section of this plan. The hepatitis B vaccination series is available to covered students at cost after initial covered student training and within 10 days of initial assignment to all covered students identified in the exposure determination section of this plan.

C. Vaccination may be precluded in the following circumstances: 1) documentation exists that the covered employee or covered student has previously received the series; 2) antibody testing reveals that the employee is immune; 3) medical evaluation shows that vaccination is contraindicated; or 4) following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the covered employee or student within 15 days of the completion of the evaluation. It will be limited to whether the covered employee or covered student requires the hepatitis B vaccine and whether the vaccine was administered.

D. However, if a covered employee or covered student declines the vaccination, the covered employee or covered student must sign a declination form. Covered employees or covered students who decline may request and obtain the vaccination

at a later date at no cost to covered employees or at cost to covered students. Documentation of refusal of the vaccination is kept in the medical records of the individual.

E. Vaccination will be provided by **Piedmont Urgent Care at the Highway 29 North location**. The business office is contacted for information before vaccinations can occur.

XI. POST-EXPOSURE FOLLOW-UP

A. Should an exposure incident occur, contact **Michele Jackson, RN** at the following telephone number 706-552-0997 (office) or mjackson@athenstech.edu.

B. An immediate available confidential medical evaluation and follow-up will be conducted and documented by a licensed health care professional. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

1. Document the routes of exposure and how the exposure occurred.

2. Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).

3. For blood or OPIM exposure:

a. 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/student's health care provider.

b. If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.

c. Exposure involving a known HIV positive source should be considered a medical emergency and post-exposure prophylaxis (PEP) should be initiated within 2 hours of exposure, per CDC recommendations.

d. Assure that the exposed employee/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).

e. After obtaining consent, collect exposed employee's/student's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.

f. If the employee/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.

4. For airborne pathogen (tuberculosis, COVID-19, etc.):

a. Immediately after the exposure of covered employee or covered student, the responsible supervisor, the technical college or work unit Exposure Control Coordinator (ECC) and the authorized contact person at the clinical or work site shall be notified and should receive documentation in writing. Documentation of the incident is to be prepared the day of the exposure; on an Exposure Incident Report and Follow-Up Form for Exposure to Bloodborne/Airborne Pathogens (Tuberculosis, COVID-19, etc.); promulgated within 24 hours of the incident; and recorded in the Exposure Log.

b. The exposed covered employee/student is to be counseled immediately after the incident and referred to his or her family physician or health department to begin follow-up and appropriate therapy. Baseline testing should be performed as soon as possible after the incident. The technical college or work unit is responsible for the cost of a post-exposure follow-up for both covered employees and covered students.

c. Any covered employee or covered student with a positive tuberculin skin test upon repeat testing, or post-exposure should be clinically evaluated for active tuberculosis. If active tuberculosis is diagnosed, appropriate therapy should be initiated according to CDC Guidelines or established medical protocol.

XII. ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

A. Administrative Services or Exposure Control Coordinator ensures that health care professional(s) responsible for the covered employee or student hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of this ECP.

B. Exposure Control Coordinator ensures that the health care professional evaluating a covered employee or student after an exposure incident receives the following:

1. a description of the covered employee’s or covered student’s tasks or activities relevant to the exposure incident

2. route(s) of exposure

3. circumstances of exposure

4. if possible, results of the source individual’s blood test

5. relevant covered employee or covered student medical records, including vaccination status

C. During the period of the 2023 – 2024 academic year, the following incidents surrounding exposure occurred. Athens Technical College reported one incident of exposure which was:

1. A EMT student accidentally stuck herself with a IV catheter needle during a clinical experience. All wound care and exposure protocols were followed. Source patient and student testing came back with negative results.

XIII. PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

A. Exposure Control Coordinator, Michele Jackson, RN will review the circumstances of all exposure incidents to determine:

1. engineering controls in use at the time

2. administrative practices followed

3. a description of the device being used (including type and brand)

4. protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)

5. location of the incident (O.R., E.R., patient room, etc.)

6. procedure being performed when the incident occurred

7. training records of covered employee or student

B. Exposure Control Coordinator, Michele Jackson, RN will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log.

C. If revisions to this ECP are necessary, Exposure Control Coordinator, Michele Jackson, RN will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding individuals/occupational areas to the exposure determination list, etc.).

D. The following protocol is followed for evaluating the circumstances surrounding an exposure incident:

1. The Program Director/Chair is notified of the exposure.

2. The Program Director/Chair is responsible for documenting and reporting exposure to Exposure Control Coordinator by completing the Exposure Incident Evaluation and Follow Up for Accidental Exposure to Blood or Airborne Infectious Bodily Fluids form.

3. The Exposure Control Coordinator is responsible for reviewing circumstances involving exposure, securing all files and documentation related to the exposure, and ensuring that both follow-up and protocols as outlined in the ECP are followed.

XIV. COMMUNICATION OF HAZARDS AND TRAINING

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

1. a copy and explanation of the ECP; and how to obtain a copy;

2. an explanation of methods to recognize tasks and other activities that may involve exposure to blood, OPIM, and respiratory including what constitutes an exposure incident;

3. an explanation of the use and limitations of engineering controls, work practices, and PPE;

4. an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE;

5. an explanation of the basis for PPE selection;

6. 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 to covered employees and at cost to covered students;

7. information on the appropriate actions to take and persons to contact in an emergency involving blood, OPIM, or respiratory hazards;

8. 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;

9. information on the post-exposure evaluation and follow-up that the employer/college is required to provide for the covered employee or covered student following an exposure incident;

10. an explanation of the signs and labels and/or color coding required by the standard and used at this facility;

11. an opportunity for interactive questions and answers with the person conducting the training session.

B. Training materials are available on the **ATC Intranet** (for faculty) and **Blackboard** (for students). The materials may also be made available by Program Directors/Chairs.

XV. RECORDKEEPING

A. Training Records

1. Training records are completed for each covered employee and covered student upon completion of training. These documents will be kept for at least three years at Human Resources.

2. The training records include:

a. the dates of the training sessions

b. the contents or a summary of the training sessions

c. the names and qualifications of persons conducting the training

d. the names and job titles/department of all persons attending the training sessions

3. Training records are provided upon request to the covered employee or covered student or the authorized representative of the employee or student within 15 working days. Such requests should be addressed to Human Resources for faculty, Program Directors/Chairs for students, or Exposure Control Coordinator.

B. Medical Records

1. Medical records are maintained for each covered employee or covered student in accordance with 29 CFR 1910.1020, “Access to Employee Exposure and Medical Records.”

2. Exposure Control Coordinator is responsible for maintenance of the required medical records. These confidential records are kept in Life Sciences and Public Safety building, Exposure Control Coordinator’s office, and/or Human Resources for at least the duration of employment or attendance plus 30 years.

3. Covered employee or covered student medical records are provided upon request of the employee or student or to anyone having written consent of the employee or student within 3 working days. Such requests should be sent to **Human Resources, C/O Athens Technical College, 800 US Hwy 29N, Athens, GA 30601**.

C. 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 Exposure Control Coordinator.

D. Sharps Injury Log

1. In addition to the 29 CFR 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidences must include at least:

a. Date of the injury

b. Type and brand of the device involved (syringe, suture needle)

c. Department or work area where the incident occurred explanation of how the incident occurred.

2. The Sharps Injury 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 redacted from the report. The following protocol is followed for evaluating the circumstances surrounding sharp injuries:

a. The Program Director/Chair is notified of the exposure.

b. The Program Director/Chair is responsible for documenting and reporting exposure to Exposure Control Coordinator by completing the Exposure Incident Evaluation and Follow Up for Accidental Exposure to Blood or Airborne Infectious Bodily Fluids form.

c. The Exposure Control Coordinator is responsible for reviewing circumstances involving exposure, securing all documentation of exposure, and ensuring that both follow-up and protocols as outlined in the ECP are followed.

Occupational Exposure I.C. Program Administration				
Job/Program Classification	**Responsible Authority**	**Office Number**	**Email**	**Exposure Category**
Certified Nursing Assistant	Jennifer Shea	706-583-2829	jshea@athenstech.edu	Category I
Early Childhood Care and Education	Lisa White	706-227-5360	lwhite@athenstech.edu	Category I
Dental Assisting	Jennifer Burrell	706-583-2813	jburrell@athenstech.edu	Category I
Dental Hygiene	Jennifer Burrell	706-583-2813	jburrell@athenstech.edu	Cate gory I
Emergency Medical Technology/EMT	Don Pruitt	706-355-5040	dpruitt@athenstech.edu	Category I
Medical Assisting	Pat Moody	706-355-5066	pmoody@athenstech.edu	Category I
Paramedic Technology	Don Pruitt	706-355-5040	dpruitt@athenstech.edu	Category I
Practical Nursing	Melinda McGee	706-213-2283	mmcgee@athenstech.edu	Category I
Surgical Technology	Denelle White	706-355-5072	dwhite@athenstech.edu	Category I
Nursing	Andraa Perrin	706-583-2529	aperrin@athenstech.edu	Category I
Radiography	Amanda Stanley	706-583-2693	astanley@athenstech.edu	Category I
Phlebotomy	Patty Stripling	706-425-3328	pstripling@athenstech.edu	Category I
Cosmetology	Teresa Bowles	706-355-5089	tbowels@athenstech.edu	Category II
Physical Therapy	Ellen O'Keefe	706-355-5176	eokeefe@athenstech.edu	Category II
Campus Police	Chief John Gaissert	706-355-5182	jgaissert@athenstech.edu	Category II
Exposure Control Coordinator	Michele Jackson	706-583-2755	mjackson@athenstech.edu	Category I

****Exemplar Purposes Only**

Exposure Control Plan Training Log 2023-2024		
Job/Program/Occupational/Area*	**Date**	**Training Topic**
Certified Nursing Assistant	Fifth day of each offered 15 week course through Economic Development	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Early Childhood Care and Education	Fall Semester: Third week of ECCE 1105	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Dental Assisting	Fall Semester: First week of DENA 1050	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Dental Hygiene	Fall Semester: First week of DHYG 1110	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Emergency Medical Technician	Fall Semester: First week of EMSP 1110	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Medical Assisting	Fall & Spring Semester: First week of MAST 1080	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Paramedic Technician	Fall Semester: Third week of EMSP 2110	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Practical Nursing	Spring Semester: First week of PNSG 2030	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Surgical Technology	Spring Semester: First week of SURG 1010	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Nursing	Fall Semester: First week of RNSG 1910 and RNSG 2910	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Radiography	Fall Semester: First week of RADT 1010	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE

Exposure Control Plan Training Log 2023-2024		
Job/Program/Occupational/Area*	**Date**	**Training Topic**
Phlebotomy	Fall & Spring Semester: First week of PHLT 1030	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Cosmetology	Fall Semester: First week of COSM 1000	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Physical Therapy Assisting	Spring Semester: First week of PHTA 1140	Bloodborne/Airborne Pathogen Exposure Follow-up in the Clinical Setting. Standard Precautions/PPE
Campus Police	Upon hire and annually as reflected in Human Resources records. Between 8/20/23-11/30/23	Bloodborne/Airborne Pathogen Exposure/Standard Precautions/PPE Module
All covered College Faculty: all sites	Upon hire and annually as reflected in Human Resources records. Between 8/20/23-11/30/23	Bloodborne/Airborne Pathogen Exposure/Standard Precautions/PPE Module
*AS identified in current college ECP: I.C. Program Administration		