



Bloodborne Pathogens Exposure Control Plan

Revised October 2013
Replaces October 2012 version

This document was created using the WISHA Department of Labor & Industries Occupational Exposure to Bloodborne Pathogens Manual and their Exposure Control Plan template, which is derived from Chapter 296-823 WAC. The National Safety Council Bloodborne Pathogens Instructor's Manual was also consulted. Colleges are required to have a Bloodborne Pathogens Exposure Control Plan on file and available to the entire College District.

Information was gathered from WISHA, OSHA, other colleges, and various departments and programs of Skagit Valley College who are required to have their own bloodborne pathogens exposure protocols.

SKAGIT VALLEY COLLEGE

Bloodborne Pathogens Exposure Control Plan

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SKAGIT VALLEY COLLEGE

Bloodborne Pathogens Exposure Control Plan

OVERVIEW

Skagit Valley College (SVC) is committed to providing a safe and healthful work environment for students, faculty and staff. This plan is to eliminate or minimize occupational exposure to bloodborne pathogens.

Employees who have occupational exposure to blood or other potentially infectious material must follow the procedures and work practices in this plan.

This plan includes:

- Overview
- Definitions
- Identification of Employees Who are at Risk for Exposure
- Controlling Employee Exposure to Bloodborne Pathogens
- Employee Training and Hazardous Communication
- Post-Exposure Evaluation and Follow-up
- Record Keeping

THE INFORMATION CONTAINED IN THIS DOCUMENT MAY OR MAY NOT REFLECT
INDIVIDUAL DEPARTMENTAL PRACTICES.

It is the college's intent to ensure, with recognition of the unique needs of individual departments that all departments are in compliance with the law.

Reference: WISHA Department of Labor and Industries Chapter 296-823 WAC,
Occupational Exposure to Bloodborne Pathogens 09/04

<http://www.lni.wa.gov/>

1.800.4BE SAFE (1.800.423.7233)

Occupational Exposure to Bloodborne Pathogens

DEFINITIONS

<p>ACCIDENTAL EXPOSURE is defined as accidentally being exposed to blood/body fluids through a needle stick, skin lesion or non-intact mucosal membrane, or mucosal splash to the eyes, mouth and nose.</p>
<p>ACQUIRED IMMUNOSUPPRESSIVE DEFICIENCY SYNDROME (AIDS) is a disabling or life-threatening illness caused by human immunodeficiency virus (HIV) characterized by HIV encephalopathy, HIV wasting syndrome, or certain diseases due to immunodeficiency in a person with laboratory evidence for HIV infection or without certain other causes of immunodeficiency.</p>
<p>BLOOD: Human blood, components and products made from human blood. Medications derived from blood, such as immune globulins, albumin, and factors 8 and 9.</p>
<p>BLOODBORNE PATHOGENS are pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to: Hepatitis B virus (HBV), and Human Immunodeficiency Virus (HIV).</p>
<p>CONTAMINATED: the presence or the reasonably anticipated presence of blood or other potentially infectious materials (OPIM) on an item or surface.</p>
<p>CONTAMINATED LAUNDRY: Laundry that has been soiled with blood or other potentially infectious materials or may contain contaminated sharps.</p>
<p>CONTAMINATED SHARPS: Any contaminated object that can penetrate the skin including, but not limited to: needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.</p>
<p>DECONTAMINATION: The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point they are no longer capable of transmitting infectious particles and surface or item is rendered safe for handling, use, or disposal.</p>
<p>HEPATITIS B (HBV) is an infectious disease of the liver that is characterized by jaundice, fever and liver enlargement. Hepatitis B is caused by the Hepatitis B virus and is spread through blood and body fluids. People who are at higher risk, including people who live with someone with Hepatitis B and health care workers, should get the Hepatitis B vaccine.</p>
<p>HEPATITIS C (HCV) is a virus-caused liver inflammation, which may cause jaundice, fever and cirrhosis. Persons who are most at risk for contracting and spreading Hepatitis C are those who share needles for injecting drugs, and health care workers or emergency workers who may be exposed to contaminated blood. Currently there is no vaccine available for Hepatitis C.</p>
<p>HUMAN IMMUNODEFICIENCY VIRUS (HIV) is a virus that takes over certain immune system cells to make many copies of itself (called replication). HIV causes slow but constant damage to the immune system. Normally, the human immune system is the body's protection against bacteria, viruses, etc., acting like a coat of armor. When HIV enters the body, it starts poking holes in the armor. Eventually, the armor becomes very weak and unable to protect the body. Once the armor is very weak or gone, the person is said to have AIDS-Acquired Immunosuppressive Deficiency Syndrome.</p>
<p>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.</p>
<p>OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) is the federal agency concerned with employee safety.</p>
<p>OTHER POTENTIAL INFECTIOUS MATERIALS (OPIM): Includes all of the following: human body fluids, semen, fecal matter, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid visibly contaminated with blood, all body fluids in</p>

situations where it is difficult or impossible to differentiate between body fluids.

PERSONAL PROTECTION EQUIPMENT (PPE): Includes latex/vinyl gloves, goggles, pick-up tongs, sharps disposal bags, and containers and biohazard disposal containers.

SHARPS: A non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with or without a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.

SOURCE PERSON: A person, living or dead, whose blood or other potentially infectious materials (OPIM) may be a source of occupational exposure to the employee. Examples include: hospital and clinic patients; clients in institutions for developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; individuals who donate or sell blood or blood components.

STERILIZE: The use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

UNIVERSAL PRECAUTION: is an approach to infection control that treats all human blood and certain human body fluids as if they were contaminated with infectious bloodborne pathogens such as HBV and HIV.

WASHINGTON INDUSTRIAL SAFETY AND HEALTH ACT (WISHA) is a part of the state Department of Labor and Industries. This is a state safety-in-the-workplace version of OSHA.

EMPLOYEES WHO ARE AT RISK FOR EXPOSURE

The following are employee/student classifications at SVC, in which employees/students could have occupational exposure to bloodborne pathogens:

IDENTIFICATION	DEPARTMENT/LOCATION
Custodians/Groundskeepers/Maintenance	Facilities and Operations/Campus Grounds
Safety and Security Services Staff	Administrative Services/Security Services
Nursing/Medical Assisting Program Staff/Students	Nursing/Medical Assisting Program Labs
Biology Department Staff/Students	Biology Department Labs
Fitness Centers/Gym/Fields Staff/Students	Oak Hall/Duvall Pavilion/Fields
Culinary Arts and Hospitality Services Staff/Students	Cafeteria/Kitchen/Bakery in Cardinal Center
Fire Protection Technology Staff/Students	Fire Training Grounds
Criminal Justice and Academies Staff/Students	Roberts Hall/Fire Tower/Fitness Center/MVPD
Early Childhood Education Program Staff/Students	Skagit/Islands Head Start and ECEAP Locations
Welding/Manufacturing Technology Staff/Students	Welding shop in Reeves Hall
Automotive Technology Staff/Students	Automotive Shop in Reeves Hall
McIntyre Hall Prep Cooks/Students	McIntyre Hall Food Preparation Area
Marine Technology Staff/Students	Anacortes Center of Excellence Facilities
Chemistry Department Staff/Students	Chemistry Department Labs
Diesel Department Staff/Students	Diesel Shop
Campus View Village Staff/Students	Campus View Village

NOTE: Northwest Career and Technical Academy (NCTA-Mount Vernon), Health Sciences Programs (i.e. Nursing/Medical Assisting Programs) and FIRE (EMT) have their own Exposure Control Plan policies and procedures in place.

IMPLEMENTATION OF EXPOSURE CONTROL PLAN AT SVC:

Contact Names and Phone Numbers (September 2012)

Vice President, Administrative Services (College Risk Manager)	(360)416-7719
Executive Director, Human Resources	(360)416-7679
Director, Facilities and Operations	(360)416-7751
Assistant Director, Facilities and Operations (College Safety Officer)	(360)416-7979
Director, Security Services/Criminal Justice/Academies	(360)416-7829
Vice President, Instruction	(360)679-5333
Director, Allied Health	(360)416-7809
Director, Nursing, Mount Vernon Campus	(360)416-7940
Chair, Nursing, Whidbey Island Campus	(360)679-5325
Dean, Academic Education	(360)416-7675
Dean, Workforce Education	(360)416-7729
Athletic Director	(360)416-7714
Executive Director, McIntyre Hall	(360)416-7622
Director, Skagit/Islands Head Start	(360)416-7590
Director, Early Childhood Education and Assistance Program (ECEAP)	(360)679-5347
Building and Grounds Supervisor, Whidbey Island Campus, South Whidbey Center and San Juan Center	(360)679-5285
Director, Marine Technology Center, Anacortes	(360)766-6282 ext. 3002

CONTROLLING EMPLOYEE EXPOSURE TO BLOODBORNE PATHOGENS (BBP)

SVC uses the following methods to control employee exposure:

A. Infection control or isolation system used:

1. **General Campus (staff and students)** are provided information about bloodborne pathogens via the **SVC Safety Manual**, which is updated yearly and available for viewing campus-wide on the college's main web page (students) and the Portal (employees). The Bloodborne Pathogens section explains what BBPs are and what steps should be taken to avoid BBP exposure in a first aid situation and/or what to do if possible BBP exposure occurs. This summary information is taken from the SVC Exposure Control Plan for Bloodborne Pathogens, which is on file in the Office of the Vice President of Administrative Services, the Human Resources Office and available to any employee in each department and division where possible exposure to bloodborne pathogens is present.
2. **The Facilities and Operations Office** is the contact to obtain first aid kits. First aid kits with latex/vinyl gloves are provided to all campus departments and offices. The college provides additional BBP training for a limited number of employees each year. Questions about BBP training can be directed to the District Safety Committee.
3. **Custodial and Maintenance staff** is provided Personal Protection Equipment (PPEs) (i.e., protective gloves, pick-up tongs, and sharps disposal containers). Employees are trained yearly on the proper handling of possible BBP substances encountered on the job. The Assistant Director of Facilities and Operations is the contact regarding procedures and training for this specific department, San Juan Center and South Whidbey Center.
4. **Security Services** has universal BBP exposure control guidelines and procedures in place for staff. The Director of Security Services is the contact regarding procedures and training for this specific department.
5. **Nursing and Allied Health** (Nursing, Medical Assisting, Pharmacy, etc.) staff and students have their own specific trainings and procedures for prevention and post-handling of BBP exposure. Training includes prevention and handling of needle-stick and percutaneous injury. The Dean of Workforce Education and the Director of Nursing are the contacts regarding these specific program procedures on the Mount Vernon Campus. The Chair of the Nursing Department is the contact regarding procedures and training for this specific department on the Whidbey Island Campus.
6. **Biology Department** has universal BBP exposure control guidelines and procedures in place for staff and students, in addition to specific student consent forms for educational activities where the exposure risk may be elevated (i.e. finger sticks for blood typing and release of human blood or blood components for purposes of research or testing). Dean of Academics and the Biology Lead are the contacts for these specific program procedures.
7. **Skagit/Islands Head Start** has universal BBP exposure control guidelines and procedures in place for staff. The Director of Skagit/Islands Head Start is the contact regarding procedures and training for this specific department.
8. **ECEAP** has universal BBP exposure control guidelines and procedures in place for staff. The Director of ECEAP is the contact regarding procedures and training for this specific department.

B. Equipment used to minimize occupational exposure:

1. **First Aid Kits** are supplied to the College departments and offices, and include latex/vinyl gloves to help prevent exposure to BBPs while administering first aid.
2. **Personal Protection Equipment (PPE)** is used by custodial and maintenance personnel. This equipment includes latex/vinyl gloves, goggles, pick-up tongs, sharps disposal bags and containers

and biohazard disposal containers. Sharps disposal containers are inspected and maintained or replaced by the college Safety Officer, within the Facilities and Operations Department on the Mount Vernon Campus. Sharps disposal containers are inspected and maintained or replaced by the Building and Grounds Supervisor for the Whidbey Island Campus, South Whidbey Center and the San Juan Center.

Nursing, Allied Health, Fire Protection Technology, Biology, Fitness Center, Criminal Justice/Academies, ECEAP and Skagit/Islands Head Start have their own PPEs.

3. **Self-Sheathing needles, needleless systems and plastic capillary tubes** and the appropriate disposal containers are used in the specific Nursing/Allied Health programs as appropriate. Sharps disposal containers are inspected and maintained or replaced by the Director of Nursing or her designee.
4. **Opportunities to improve controls are identified through:** SVC Accident Reports; review of sharps logs; employee interviews; District Safety Committee activities.
5. **Bloodborne Pathogens training opportunities (4 hour and 7 hour)** are provided either through the Nursing/Allied Health program or from the Security Services Department upon request.

Both front-line workers and management officials are involved in this process improvement by:

- Frequent employee/supervisor communication of BBP incidents
- Weekly custodians/supervisor safety meetings
- Regular training on BBP prevention and handling of contaminants.

C. Personal Protective Equipment (PPE)

1. **PPE is provided to college employees at no cost. The types of PPE available to employees include:** latex/vinyl gloves; goggles; pick-up tongs; sharps disposal bags and containers; and biohazard containers. Sharps disposal containers and biohazard waste containers are inspected and maintained or replaced by the college Safety Officer (Facilities and Operations Department) or the Director of Nursing.
2. **PPE Locations:** College first aid kits, strategically located in selected department and division offices, labs and prep rooms, contain latex/vinyl gloves. Custodial offices and custodial closets located in all the campus buildings, Maintenance offices and maintenance and grounds vehicles. PPE for Nursing/Medical Assisting, Criminal Justice, Automotive Technology, Fire Protection Technology, Welding, Culinary Arts, ECEAP and Skagit/Islands Head Start programs are located in their specific offices, centers, classrooms and clinic/lab areas. All Motor Pool vehicles have first aid kits on board.
3. **All employees using PPE must observe the following precautions:** *NOTE: The Nursing/Medical Assisting, Biology, Custodial, Fire Protection Technology, Fitness Center, ECEAP and Skagit/Islands Head Start have their own specific PPE and procedures, as identified in their specific plans.*
 - a. 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.
 - b. Wear appropriate gloves when you:
 - Can reasonably anticipate hand contact with blood or OPIM
 - Handle or touch contaminated items or surfaces
 - c. Replace gloves if torn, punctured, contaminated, or otherwise damaged.
 - d. Decontaminate reusable gloves if they don't show signs of cracking, peeling, tearing, puncturing, or other deterioration. Never wash or decontaminate disposable gloves for reuse.
 - e. Wash hands immediately or as soon as feasible after removal of gloves or other PPE.
 - f. Remove PPE after it becomes contaminated, and before leaving the work area.
 - g. Dispose of contaminated PPE in designated containers:
 - Sharps container
 - Biohazard waste container or bag
 - h. Remove blood or OPIM contaminated garments immediately or as soon as feasible, in a manner that avoids contact with the contaminated surfaces.

4. The Procedure for handling used PPE is:

- Always treat any blood or bodily fluid as if it is contaminated.
- Clean infected item (i.e., face shields, eye protection, resuscitation equipment, etc.) with germicidal disinfectant. These disinfectants will effectively treat contaminated items.
- After being treated, contaminated items can be disposed of in regular trash receptacles.
- For Criminal Justice/Academies, use germicidal disinfectant on mats and defensive tactics equipment. Handcuffs will be cleaned ultrasonically prior to disinfecting and oiling. Other applications may be cleaned using a 10% bleach/water solution.
- Disinfectant can be found in Maintenance, Grounds or Custodial shops/office areas. Contact the Assistant Director of Facilities and Operations for the Mount Vernon Campus. Contact the Building and Grounds Supervisor for the Whidbey Island Campus, South Whidbey Center and the San Juan Center.

The following will maintain and provide all the necessary PPE, controls to their specific areas (such as sharps containers, labels, and red bags as required) and make sure that adequate supplies of the PPE are available in the appropriate sizes and types.

Director, Facilities and Operations	(360)416-7751
Assistant Director, Facilities and Operations (College Safety Officer)	(360)416-7979
Director, Security Services/Criminal Justice/Academies	(360)416-7829
Director, Allied Health	(360)416-7809
Director, Nursing, Mount Vernon Campus	(360)416-7940
Chair, Nursing, Whidbey Island Campus	(360)679-5325
Dean, Academic Education	(360)416-7675
Dean, Workforce Education	(360)416-7729
Athletic Director	(360)416-7714
Executive Director, McIntyre Hall	(360)416-7622
Director, Skagit/Islands Head Start	(360)416-7590
Director, ECEAP	(360)679-5347
Building and Grounds Supervisor, Whidbey Island Campus, South Whidbey Center and San Juan Center	(360)679-5285
Director, Marine Technology Center	(360)766-6282 ext. 3002

D. Work practices used to minimize occupational exposure

The Washington State Bloodborne Pathogens Standard (WAC 296-823-140) establishes requirements designed to reduce the risk of workers being exposed to biological agents, including bloodborne pathogens.

1. Occupational Exposure

Occupational exposure is the anticipated contact with blood or body fluids (that are potentially infectious) on your skin, in your eye, nose or mouth, or anticipated parenteral contact (piercing of the skin, e.g., needle sticks or human bites) with blood or body fluids that may result from the performance of an employee’s job duties. Certain SVC employees may be at greater risk of exposure to contaminated blood and body fluids as a function of their employment than are other members of the general population.

2. Bloodborne Exposure Determination

Bloodborne pathogens (blood-borne diseases) are germs and viruses that live in the following materials making them “infectious materials”: Blood, any body fluid contaminated with blood (urine, feces, vomit, etc.), semen/vaginal secretions, cerebrospinal fluid, synovial (joint) fluid, pleural (chest cavity) fluid, amniotic fluid, and saliva. Viruses that live in these “infectious materials” include Hepatitis B (HBV), Hepatitis C (HCV), and HIV (human immunodeficiency virus).

3. **Control Methods**

Employees incur risk of infection and illness each time they are exposed to blood or other potentially infectious materials. Therefore, SVC employs controls to eliminate or minimize employee exposure to blood or other potentially infectious materials. These controls seek to remove the hazard or isolate the employee from exposure, without reliance on self-protective actions of employees (e.g., puncture-resistant sharps containers).

E. **Universal Precautions**

Universal Precautions are made known to all SVC employees via the SVC Safety Manual.

1. Assume that all blood and other biological agents are infectious materials.
2. Avoid direct skin contact with body fluids whenever possible. Use latex/vinyl gloves provided in first aid kits and in job classifications where Personal Protective Equipment is provided.
3. Practice good personal hygiene by thoroughly washing your hands at regular intervals or as needed throughout the day (e.g., before eating, after use of a rest room, etc.) **Hand washing is most important in preventing the spread of disease.** This requires the use of soap with vigorous scrubbing for 5-10 seconds, followed by rinsing under a stream of water for another 5 seconds.
4. Wear disposable latex/vinyl gloves when touching the blood or body fluids of another individual or a contaminated surface (e.g., treating nose bleeds, bleeding abrasions, etc.). Wear gloves when disinfecting contaminated items. Wash all skin surfaces that become contaminated and wash hands immediately after removal of gloves.
5. Wear masks and protective eyewear or face shields during procedures likely to produce blood or body fluids.
6. During the administration of first aid, use a barrier between yourself and the victim's blood or other body fluids (e.g., gloves or several layers of dressings). When performing CPR, place a barrier between your own mouth and that of the victim (e.g., one-way valve resuscitation devices, face shield). Do not handle sharp items with the hands. Any contaminated sharp items must be handled in a way to prevent punctures or cuts.
7. Unprotected employees with open wounds, weeping sores/cuts, or chafed skin are to wear gloves when in contact with contaminated sources and when preparing or serving food. Contaminated gloves and clothing should be removed as soon as possible. They are to be placed in an impervious plastic bag as near as possible to the incident to control the spread of contamination.
8. Practice good housekeeping and waste disposal practices by following cleaning/decontamination procedures. For assistance with clean-up of body fluids such as vomit, blood, feces or urine, contact the following offices:

Assistant Director, Facilities and Operations, Mount Vernon Campus	(360)416-7979
Building and Grounds Supervisor, Whidbey Island Campus	(360)679-5285
Program Coordinator, South Whidbey Center	(360)679-5304
Director, San Juan Center	(360)378-3265
Director, Marine Technology Center	(360)766-6282 ext. 3002

In certain circumstances a contracted service may be required. Place contaminated materials in impervious containers and label. Contact the offices noted above to arrange for disposal.

9. **IF AN EXPOSURE INCIDENT OCCURS (direct contact with blood/body fluids):**

- ❖ Cleanse skin with soap and running water. Flush eyes for 15 minutes. Rinse mouth thoroughly. Blow nose and wipe out the inside of nostrils.
- ❖ Report the exposure immediately to your supervisor. Contact Campus Security Services. Document the exposure on SVC Accident Report Form and the BBP Exposure Incident Report

form. The Director of Security Services is charged with routing the copies to appropriate levels.

Exception to the Rule for Universal Precautions: *In an unexpected medical emergency where the use of protective equipment is not possible due to the equipment not being available or where the use of the equipment would create a greater hazard to the victim's personal safety.*

F. Cleaning/Decontamination Procedures

These procedures are intended for non-custodial employees who may, on rare occasions, be called upon to attend to the clean-up of a body fluid spill. It is appropriate to contact the offices noted above to request advice or assistance with the clean-up. However, the Facilities personnel may not be able to respond in a timely fashion. Therefore the following procedures should be followed by non-custodial employees:

1. Treat ALL body fluids as if they are infectious.
2. Wear disposable latex or vinyl gloves during the entire cleaning and disposal process.
3. As appropriate for the specific circumstances, use goggles and any other personal protective equipment needed to reduce the likelihood of exposure to body fluids.
4. Use a proper disinfectant for cleaning up body fluids and sanitizing surfaces:
 - Household bleach (1 part bleach diluted with 10 parts water)
 - New solution must be made every 24 hours to be effective.
 - Spray or pour the product on the spill and let it sit for the length of time prescribed by the manufacturer (at least 1 minute).
5. Clean up the body fluid spill and disinfect with paper towels or disposable rags, and place all contaminated articles in a trash bag. If they contain blood, place all articles in a red plastic trash bag. Tie the end of the bag shut and place in the regular trash container or in the dumpster.
6. If the spill involves broken glassware, the glassware should not be picked up directly with the hands. Instead, use mechanical means such as a brush and dust pan, tongs, or forceps to pick up the broken glass. NOTE: Use extreme caution so as not to increase the risk of splatter or contact with sharps or contaminated material when brushing it into a dust pan. If possible wait for trained custodial staff.
7. Any cleaning equipment (e.g., dust pans or buckets) which are used in body fluid clean-up should be thoroughly rinsed in the disinfectant solution. If a mop is used, it should be soaked in the disinfectant after use and then rinsed thoroughly. Contaminated disinfectant solution should be disposed of through the sanitary sewer drain.
8. Gloves should be disposed of in the regular trash container, unless visibly contaminated with blood, in which case they should be placed in the biohazard bag. GLOVE REMOVAL PROCEDURE: Grasp the top or wrist of one glove, being careful not to touch anything but the glove. Pull the glove off, turning it inside out. Continue to hold the glove and insert a finger into the top of the other glove, taking care not to touch its outside surface. Pull the glove off, turning it inside out and pulling it over the first glove. Both gloves should now be inside out, one inside the other, ready for disposal into an approved waste container.
9. Wash hands thoroughly after removing gloves.

NOTE: The Nursing/Medical Assisting Departments, Biology Department, Fitness Center, Custodial/Maintenance/Grounds/Security Services and other high-risk departments all have their own exposure control plans and post-exposure protocols.

G. Housekeeping

1. Written schedules for cleaning and methods of decontamination:
 - See individual plans for specific departments (Nursing, Medical Assisting, Biology, Custodial/Maintenance/Grounds, Security Services, and Criminal Justice).
2. Regulated waste is placed in containers which:
 - Contain all contents.
 - Do not leak.
 - Are appropriately labeled or color-coded.
 - Are closed prior to removal to prevent contact spilling or protruding during handling.
3. Contaminated sharps are discarded immediately or as soon as possible in containers that are:
 - Closable
 - Puncture-resistant
 - Leak-proof on sides and bottoms
 - Labeled or color-coded appropriately.
4. Sharps disposal containers:
 - See individual plans for specific departments (Nursing/Medical Assisting, Biology, Fitness Center, Custodial/Maintenance/Grounds/Security Services, Criminal Justice).
 - Must be easily accessible and as close as feasible to the immediate area where sharps are used.
5. The procedure for handling sharps disposal containers is:
 - See individual plans for specific departments (Nursing/Medical Assisting, Biology, Fitness Center, Custodial/Maintenance/Grounds, Security Services, and Criminal Justice).
6. The procedure for handling other regulated waste:
 - See individual plans for specific departments (Nursing/Medical Assisting, Biology, Fitness Center, Custodial/Maintenance/Grounds, Security Services, and Criminal Justice).
 - Bins, cans and pails intended for reuse are cleaned and decontaminated as soon as feasible after visible contamination.
 - Broken glassware that may be contaminated is picked up using mechanical means, such as a brush and dustpan.

Contact names and phone numbers of responsible person or department who will provide sharps and other containers as required:

Director, Facilities and Operations	(360)416-7751
Assistant Director, Facilities and Operations (College Safety Officer)	(360)416-7979
Director, Security Services/Criminal Justice/Academies	(360)416-7829
Director, Allied Health	(360)416-7809
Director, Nursing, Mount Vernon Campus	(360)416-7940
Chair, Nursing, Whidbey Island Campus	(360)679-5325
Dean, Academic Education	(360)416-7675
Dean, Workforce Education	(360)416-7729
Athletic Director	(360)416-7714
Executive Director, McIntyre Hall	(360)416-7622
Director, Skagit/Islands Head Start	(360)416-7590
Director, ECEAP	(360)679-5347
Building and Grounds Supervisor, Whidbey Island Campus, South Whidbey Center and San Juan Center	(360)679-5285
Director, Marine Technology Center	(360)766-6282 ext. 3002

H. Laundry

1. Custodial and Maintenance Operations: Laundry procedures for this department on the Mount Vernon Campus can be obtained by contacting the Assistant Director of Facilities and Operations. Laundry procedures for this department on the Whidbey Island Campus, San Juan Center and South Whidbey Center can be obtained by contacting the Building and Grounds Supervisor.
2. Automotive/Diesel Departments: Local laundry service provides shirts and coveralls. Laundry is collected on a scheduled basis. Any laundry that is possibly contaminated is put in a separate biohazard bag to identify the possibility of contamination, and then placed in the usual laundry bag provided by the laundry service.
3. SVC Fitness Center Staff/Worker Requirements:
 - Wash hands frequently.
 - Wear disposable gloves when wiping down equipment and pay close attention to areas where the hands come in contact.
 - When gathering dirty towels use disposable gloves. If towels show evidence of possible contamination, utilize the biohazard kit.
 - When dealing with body fluids, clean up using the biohazard kit, wear Personal Protective Equipment and dispose of contaminated materials in biohazard bags.
 - For all first aid incidents, be aware of and comply with SVC's Safety Manual and the SVC Bloodborne Pathogen Exposure Control Plan.
4. Nursing/Medical Assisting: Local laundry service launders certain uniforms, towels, sheets, blankets, etc. Any laundry that is possibly contaminated is put in a separate biohazard bag to identify the possibility of contamination, and then placed in the usual laundry bag provided by the laundry service.
5. Skagit/Islands Head Start: Laundry procedures at these facilities can be obtained by contacting the Director of Skagit/Islands Head Start.
6. ECEAP: Laundry procedures at this facility can be obtained by contacting the Director of ECEAP.
7. Marine Technology: Laundry procedures at this facility can be obtained by contacting the Director of the Marine Technology Center.

I. Using Labels

Disposal containers are pre-labeled, i.e., "USED NEEDLES ONLY" or "BIOHAZARD ONLY". Name of responsible person or department who will maintain and provide labels and red bio-hazard bags as required:

Director, Facilities and Operations	(360)416-7751
Assistant Director, Facilities and Operations (College Safety Officer)	(360)416-7979
Director, Security Services/Criminal Justice/Academies	(360)416-7829
Director, Allied Health	(360)416-7809
Director, Nursing, Mount Vernon Campus	(360)416-7940
Chair, Nursing, Whidbey Island Campus	(360)679-5325
Dean, Academic Education	(360)416-7675
Dean, Workforce Education	(360)416-7729
Athletic Director	(360)416-7714
Executive Director, McIntyre Hall	(360)416-7622
Director, Skagit/Islands Head Start	(360)416-7590
Director, ECEAP	(360)679-5347
Building and Grounds Supervisor, Whidbey Island Campus, South Whidbey Center and San Juan Center	(360)679-5285
Director, Marine Technology Center	(360)766-6282 ext. 3002

J. Hepatitis B Vaccination

1. The hepatitis B vaccination series is available:

- At a nominal fee at unit discretion after training (reimbursed).
- Within 10 days of initial assignment to employees identified in this plan, as Employees Who Are At Risk For Exposure.
- Vaccination is encouraged unless:
 - ❖ There is documentation that the employee has previously received the series.
 - ❖ Antibody testing reveals that the employee is immune.
 - ❖ Medical evaluation shows that vaccination is contraindicated.
- A copy of the Health Care Professional's Written Opinion (see Appendix A) will be provided confidentially to the employee by the college's Human Resources Office.
- Employees who choose to decline vaccination must sign a Hepatitis B Declination form (see Appendix A) if required by the department. They may request and obtain the vaccination at a later date.
- Vaccinations are available for a nominal fee at:
 - Skagit County Health Department**
 - 700 S. 2nd Street**
 - Administration Building Room 301**
 - Mount Vernon, WA 98273**
 - (360)336-9477**

EMPLOYEE TRAINING AND HAZARD COMMUNICATION

All employees who have occupational exposure to bloodborne pathogens receive training. Training will be provided before initial assignment to tasks where occupational exposure may take place, annually, and when changes in tasks or procedures take place that affect occupational exposure.

This training will include:

1. Epidemiology, symptoms, and transmission of bloodborne pathogens.
2. Copy and explanation of Chapter 296-823 WAC, Occupational Exposure to Bloodborne Pathogens.
3. Explanation of the Exposure Control Plan and how to obtain a copy. This must also be done at the annual refresher training.
4. Methods used to identify tasks and other activities that may involve exposure to blood and OPIM (Other Potential Infectious Material).
5. What constitutes an exposure incident.
6. The use and limitations of controls, work practices, and PPE.
7. The basis for PPE selection and an explanation of:
 - ❖ Types
 - ❖ Uses
 - ❖ Location
 - ❖ Handling
 - ❖ Removal
 - ❖ Decontamination
 - ❖ Disposal
8. Information on the Hepatitis B vaccine, including:
 - ❖ Effectiveness
 - ❖ Safety
 - ❖ Method of administration
 - ❖ Benefits of being vaccinated
 - ❖ Offered at health districts, local clinics and hospitals
9. Actions to take and persons to contact in an emergency involving blood or OPIM.
10. Procedures to follow if an exposure incident occurs, including:
 - ❖ How to report the incident
 - ❖ Medical follow-up available
 - ❖ Employee's evaluation and follow-up after an exposure incident
11. Signs, labels, and color coding used
12. Interactive questions and answers with the trainer.

Training materials are located in the various departments. Training records are maintained for each employee upon completion of training. These documents will be kept for at least 3 years.

The training record includes the following information about training sessions:

- ❖ Date
- ❖ Contents or a summary
- ❖ Names and qualifications of trainers
- ❖ Names and job titles of all attendees.

Training records are provided to employees or their authorized representatives within 15 working days of a request.

Name of responsible person or department for training and location of records:

Executive Director, Human Resources	(360)416-7679
Director, Facilities and Operations	(360)416-7751
Assistant Director, Facilities and Operations (College Safety Officer)	(360)416-7979
Director, Security Services/Criminal Justice/Academies	(360)416-7829
Director, Allied Health	(360)416-7809
Director, Nursing, Mount Vernon Campus	(360)416-7940
Chair, Nursing, Whidbey Island Campus	(360)679-5325
Dean of Academic Education	(360)416-7675
Dean, Workforce Education	(360)416-7729
Athletic Director	(360)416-7714
Executive Director, McIntyre Hall	(360)416-7622
Director, Skagit/Islands Head Start	(360)416-7590
Director, ECEAP	(360)679-5347
Building and Grounds Supervisor, Whidbey Island Campus, South Whidbey Center and San Juan Center	(360)679-5285
Director, Marine Technology Center	(360)766-6282 ext. 3002

POST-EXPOSURE EVALUATION AND FOLLOW-UP

A. Do the following after initial first aid treatment is given:

After the initial first aid treatment such as wound cleansing, flushing eyes or other mucous membranes, the following will be performed as soon after exposure as possible:

1. Document the routes of exposure and how the exposure occurred using the Employee Exposure Incident Report form.
2. Identify and document the source individual, unless that isn't possible or is prohibited by federal, state or local law (i.e., HIPAA).
3. Obtain consent and arrange to test the source individual as soon as possible to determine HIV, HCV, and HBV infectivity (the Center for Disease Control recommends treatment within a 24-72 hour period for individuals who have been exposed to HIV). If the source individual is already known to be HIV, HCV and/or HBV-positive, new testing is not needed.
4. Document that the source individual's test results were conveyed to the employee's health care provider.
5. Provide the exposed employee with the source individual's test results. Provide the exposed employee with information about laws on confidentiality for the source individual.
6. Obtain consent and provide a blood test for the exposed employee as soon as possible for HBV, HCV, and HIV.
 - If the employee does not give consent for HIV serological testing, preserve the baseline blood sample for at least 90 days.
 - If the exposed employee decides to have the sample tested during this time, perform testing as soon as feasible.
 - Provide the exposed employee with a copy of the Health Care Professional's Written Opinion.

B. Administration of post-exposure evaluation and follow-up:

Appropriate medical services are available to employees during all work hours. Employees are provided immediate medical evaluation and follow-up services through:

Skagit Valley Hospital
1415 E. Kincaid
Mount Vernon, WA 98273
(360) 424-4111

Whidbey General Hospital
101 S. Main Street
Coupeville, WA 98239
(360)321.5151

C. Review the circumstances of an exposure incident as follows:

The circumstances of any exposure incident will be reviewed to determine:

- Controls in use at the time
- Work practices that were followed
- Description of the device used (including type and brand)
- Protective equipment or clothing in use at the time
- Specific location of the incident
- Procedure being performed when the incident occurred
- Employee's training

D. Record Keeping

1. **Exposure records.** In accordance with WAC 296-823-17005, records are maintained for each employee who has an occupational exposure to bloodborne pathogens. These confidential records are kept for at least 30 years beyond the length of employment. All exposure records are kept in the SVC Human Resources Office, (360)416-7679. The exposure records will include all of the following that apply:

- Name and Social Security Number (or other identifying number) of the employee.
- Copy of the employee's Hepatitis B vaccination status, including the dates of all Hepatitis B vaccinations.
- Any exposure records related to the employee's ability to receive vaccinations.
- Hepatitis B vaccination declination statement (see Appendix A).
- Copy of all results of examinations, medical testing, and follow-up procedures related to post-exposure evaluations.
- Copy of the Health Care Professional's Written Opinion (see Appendix A).
- Copy of the information provided to the employee as required.
- Make sure employee exposure records are kept confidential and not disclosed or reported to any person without the employee's written consent, except as required by law.

2. **Sharps Injury Log.** In addition to WAC 296-823-17010, Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in the Sharps Injury Log (see Appendix A). This log must include:

- Date of injury
- Type and brand of the device involved
- Where the incident occurred
- How the incident occurred

This log is reviewed at least once a year at the department level as part of the annual program evaluation and is kept for at least 5 years following the end of the calendar year. Copies that are provided upon request must have any personal identifiers removed or redacted.

Name of person and department who is responsible:

- To make sure all medical actions that are required by law and policy are performed.
- To review exposure incidents as required.
- To maintain exposure and/or Sharps Injury Log in their area of responsibility.

Executive Director, Human Resources	(360)416-7679
Director, Facilities and Operations	(360)416-7751
Assistant Director-Facilities and Operations (College Safety Officer)	(360)416-7979
Director, Security Services/Criminal Justice/Academies	(360)416-7829
Director, Allied Health	(360)416-7809
Director, Nursing, Mount Vernon Campus	(360)416-7940
Chair of Nursing, Whidbey Island Campus	(360)679-5325
Dean of Academics	(360)416-7675
Dean of Workforce Education	(360)416-7729
Athletic Director	(360)416-7714
Executive Director, McIntyre Hall	(360)416-7622
Director, Skagit/Islands Head Start	(360)416-7590
Director, ECEAP	(360)679-5347
Building and Grounds Supervisor, Whidbey Island Campus, South Whidbey Center and San Juan Center	(360)679-5285
Director, Marine Technology Center	(360)766-6282 ext. 3002

APPENDIX A - FORMS

- Bloodborne Pathogen Employee Exposure Incident Report
- Occupational Exposure to Bloodborne Pathogens: Sharps Injury Log
- Accident/Injury or Incident Report Form and Accident/Injury Reporting Procedures
- Health Care Professional's Written Opinion for Post-Exposure Evaluation
- Occupational Exposure to Bloodborne Pathogens: Hepatitis B Vaccine Declination
- Occupational Exposure to Bloodborne Pathogens:: Training Documentation Form

SKAGIT VALLEY COLLEGE

Bloodborne Pathogen Employee Exposure Incident Report

This form is to be kept confidentially on file in the Human Resources Office.

Employee Name: _____

Department: _____

Location Exposure Occurred: _____

SVC Accident Report Form has been completed / submitted to Security Services: Yes No

Type of Injury/Exposure	Circle	Circle	Part of Body Injured/Exposed	Severity of Injury/Exposure
Skin Exposure	Yes	No		<input type="checkbox"/> Incident only-no first aid indicated <input type="checkbox"/> First Aid "in house"- returned to duties. <input type="checkbox"/> ER/HCP*, Evaluated, treated, released, returned to work. <input type="checkbox"/> ER/HCP*, Evaluated, treated, released. Off work/school. <input type="checkbox"/> Hospitalization *Health Care Professional.
Mucous Membrane	Yes	No		
<u>Needle Stick:</u> Bleeding Puncture Wound?	Yes	No		
Injection of Blood/Bloody Fluid?	Yes	No		
Human Bite?	Yes	No		
Fluid Type: (Please Circle)				
Blood Saliva Vomitus Urine Fecal Semen/Vaginal Other: _____				
Non-Bloodborne Pathogen: (Please Circle)				
Puncture/Laceration Foreign Body Burn Dermatitis Irritations Respiratory Other (Explain)				
Have you ever been treated for Bloodborne Pathogen Exposure in the past?				
<input type="checkbox"/> YES (If "YES" Please Explain) <input type="checkbox"/> NO				
Have you attended a safety orientation and/or annual update? <input type="checkbox"/> YES <input type="checkbox"/> NO				

EMPLOYEES: In accordance with WAC 296-15-070(4), I have been informed of my right to file a Workers' Compensation claim for this injury/illness. If I decline to file a claim at this time, I may still do so for up to one year from the date of injury (RCW 1.28.040) and up to two years from the date I have written notice from a physician of the existence of an occupational disease (RCW 51.28.055).

As a responsible employee, I have made sure that all of the above information is correct and true to the best of my knowledge and I hereby agree to comply with all attendance, performance, safety Workers' Compensation and other applicable FHS policies and procedures while recovering from any on-the-job injury or illness. If I have any questions, I will address them to the Regional Workers' Compensation Office.

EMPLOYEE SIGNATURE _____ **Date:** _____

Incident Manager-Verification of Completion of Post-Exposure Protocol

Print name: _____

Signature: _____ **Date:** _____

SKAGIT VALLEY COLLEGE

Occupational Exposure to Bloodborne Pathogens

Sharps Injury Log

This Log to be kept on file for 5 years in the College Department. DO NOT LIST EMPLOYEE NAMES.

College Department: _____ **Year:** _____

Definition

Sharps {with engineered sharps injury protections (SESIP)}: A non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.

The Bloodborne Pathogen rule requires the establishment and maintenance of a Sharps Injury Log to record all contaminated sharps injuries in a facility. The purpose of this log is to help you to evaluate and identify problem devices or procedures that may require attention.

The Sharps Injury Log requires the following:

- ❖ Maintain sharps injuries separately from other injuries and illness kept on the injury and illness log as required by WAC 296-823-17010, Recordkeeping and Reporting.
- ❖ Include ALL sharps injuries that occur during a calendar year.
- ❖ Retain Log for 5 years beyond the completion of that calendar year (WAC 296-823-17010).
- ❖ Preserve the confidentiality of affected employees. Do not list the name of affected employees.

SHARPS INJURY LOG					
Date	Case Report #	Type of Device (syringe, scalpel, etc.)	Brand Name of Device	Work Area Where Injury Occurred	Description of How Incident Occurred

Chapter 296-823 WAC, Occupational Exposure to Bloodborne Pathogens



ACCIDENT/INJURY or INCIDENT REPORT FORM

Return to: Campus Security

Mount Vernon Campus
2405 East College Way
Mount Vernon, WA 98273

Whidbey Island Campus
1900 SE Pioneer Way
Oak Harbor, WA 98277

ACCIDENT INJURY INCIDENT

CAMPUS: MV WI SW SJ Head Start ECEAP
Other please specify _____

All accidents, injuries or incidents that occur on Skagit Valley College property and/or in the scope of duty **must be reported within 24 hours to the Campus Security Office**, (Mount Vernon 360.416.7777 or Whidbey Island 360.770.5393). A death occurring on campus requires immediate notification of Human Resources (360.416.7679).

ANSWER ALL QUESTIONS

TO BE COMPLETED BY THE AFFECTED PARTY

Name: _____
First M.I. Last

Status: Faculty Staff Student Employee Student Visitor Contractor

Unit/Department: _____ Job Title (if applicable): _____

Home/Local Address: _____

Telephone Number: Home _____ Street _____ City _____ State _____ Zip Code _____
Work/Message _____ Cell _____

Employee/Student ID Number: _____ Date of Birth: _____ Age: _____

DESCRIBE THE ACCIDENT/INCIDENT/INJURY THAT OCCURRED

Completely describe how the accident/injury/incident occurred (BE SPECIFIC – Example: fell down north stairs, Ford Hall).

Date of accident/injury/incident: _____ Time of accident/injury/incident: _____

Brief Description (please provide a detailed description on the attached Supplement Form): _____

Describe Injury (name of body part affected, symptoms, nature/extent of injury, or property damage/loss)

Witness(es) Contact Information (add additional sheets for more than two witnesses, and for witness statements)

1. _____

2. _____

Medical Attention: Staff first aid Provided by _____ 911 Called

Ambulance Care Only Ambulance Care /Transport Transport by private vehicle Refused Medical Care Refused Transport

Where was the injured party taken (if known)? _____

Who was notified? Campus Security MV Police Dept. MV Fire Dept. Other Agency _____

Were photographs taken? Yes No A Supplemental Narrative Report/Additional Pertinent Information is attached

If this incident involved an apparent hazardous condition, was the condition reported? Yes No To whom? _____

When? _____ Was it corrected? Yes No

Signature of reporting party: _____ Date reported: _____

Security printed name: _____ Security signature: _____ Date: _____



ACCIDENT/INJURY or INCIDENT REPORT FORM

Return to: Campus Security

Mount Vernon Campus
2405 East College Way
Mount Vernon, WA 98273

Whidbey Island Campus
1900 SE Pioneer Way
Oak Harbor, WA 98277

EMPLOYEE ACCIDENT/INJURY INFORMATION

(To be completed only if you are an employee or a volunteer at Skagit Valley College)

Was accident/injury work-related? Yes No Undetermined Is it a REOCCURRENCE? Yes No

Date of occupational disease, injury, or disability _____ Time injury occurred _____ a.m. p.m.

Name of supervisor and unit/dept/ company telephone number _____

Did this accident/injury involve exposure to hazardous chemicals/materials? Yes No If yes, materials involved _____
DOT # _____

Name and address of physician or medical provider: _____

Name and address of treating facility (i.e. emergency room, hospital, clinic): _____

Date of initial treatment: _____

Did you miss work as a result of the accident/injury/incident? Yes No Date returned to work _____

Total Amount of Time Missed: _____ Hours _____ Days

Were restrictions assigned by the treating medical provider making job accommodations necessary? Yes No

Did the employee die as a result of the accident/injury? Yes No If Yes, give date of death _____

If medical treatment is not required at the time of accident/injury/exposure, but is later needed, contact the Director of Human Resources immediately once medical treatment is received.

Will follow-up medical treatment be needed? Yes No Undetermined

SIGNATURE of Reporting Party

Date of Report

PRINTED NAME of Reporting Party

Job Title

TO BE COMPLETED BY SUPERVISOR

Report read and ACCEPTED.

Report read and AMENDED with updated/additional information: _____

Report FORWARDED TO _____ on (Date) _____ for follow-up.

Date Signature and Title of Unit Supervisor/Director

ACCIDENT/INJURY REPORTING PROCEDURES

It is important all SVC faculty and staff observe safety rules and practice accident prevention in their classrooms, shops, labs, and work areas. It would be advisable to ask students if there may be any reason they may need additional or special assistance in the event of injury.

It is difficult to define procedures for every emergency. The following is a guideline for actions concerning an incident involving personal injury. **It is important to remember that an individual administering first aid should act within the scope of their qualifications and training.**

IF AN ACCIDENT/INJURY OCCURS

1. The faculty or staff member present should assess the seriousness of the injury.
2. The injury is considered serious if the injury is life-threatening, has the potential of being life-threatening, or requires emergency hospital treatment.
3. If the injury is considered serious, emergency medical assistance should be summoned immediately – call **911**.
4. **Always** call **911** if a person loses consciousness or has a seizure.
5. If the injury is considered serious, appropriate first aid treatment should be administered to reduce the threat to the life of the individual, or to insure that a person's condition does not deteriorate until professional medical assistance is available. Administer first aid with regard for Occupational Exposure to Bloodborne Pathogens.
6. After Steps 1-4 have been completed, SVC Security Services should be notified for investigation of the accident.
7. If the injury is not considered serious, but may require emergency room treatment, the injured may request one of the following:
 - An ambulance to be summoned for transport (at the injured person's expense).
 - A family member to be called for transport.
 - An alternative means of transport will be found by the injured person. If the injured party chooses an alternative means of transportation, the faculty or staff member should instruct the injured party not to operate a motor vehicle until after they have been examined by a doctor.
8. **At no time should students or staff be solicited or directed to transport an injured person.**
9. Secure the names and addresses of any witnesses. An Accident Report Form will be completed any time a personal injury/accident occurs, even if the injury is considered minor. Accident Report Forms are available at the Security Services Department or in division/department offices (see Appendix A). The appropriate portion of the Accident Report Form is to be completed by the injured party and faculty or staff member within 24 hours of the accident. The original will be submitted to the Security Services Department and one photocopy will be submitted to the Vice President of Administrative Services. The Executive Director of Human Resources receives a copy of employee accident reports. The Safety Officer receives a copy of any accident reports to determine if an unsafe condition or a breach of safety protocol has taken place.

Health Care Professional's Written Opinion for Post-Exposure Evaluation

CONFIDENTIAL

EMPLOYEE'S NAME:	
DATE OF INCIDENT:	
DATE OF EVALUATION:	
HEALTH PROFESSIONAL'S ADDRESS:	TELEPHONE:
	FAX:
HEALTH PROFESSIONAL'S EVALUATION:	
<input type="checkbox"/> The employee named above has been informed of the results of the evaluation for exposure to blood or other potentially infectious materials.	
<input type="checkbox"/> The employee named above has been told about any health conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.	
<input type="checkbox"/> Hepatitis B Vaccination IS required.	
<input type="checkbox"/> Hepatitis B Vaccination IS NOT required.	
HEALTH CARE PROFESSIONAL'S NAME (PLEASE PRINT):	
HEALTH CARE PROFESSIONAL'S SIGNATURE:	
Please return this form to the employer and provide a copy to the employee within 15 days. Please label the outside of the envelope "CONFIDENTIAL".	
Employer's Name:	Skagit Valley College
Employer's Address:	ATTENTION—SECURITY SERVICES 2405 East College Way Mount Vernon, WA 98273
Employer's Phone:	(360)416-7777
Employer's Confidential Fax:	(360)416-6669

SKAGIT VALLEY COLLEGE
Occupational Exposure to Bloodborne Pathogens

Hepatitis B Vaccine Declination Form

This form is to be kept confidentially on file in the Human Resources Office.

I understand that, due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B virus infection.

The college has given me the opportunity to be vaccinated with the Hepatitis B vaccine at no charge to myself.

However, I decline the Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials, and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

I have already received the Hepatitis B vaccination series.

Employee's Name (please print)

Employee's Signature

Date

Chapter 296-823 WAC, Occupational Exposure to Bloodborne Pathogens

SKAGIT VALLEY COLLEGE
Occupational Exposure to Bloodborne Pathogens

Training Documentation Form

This form to be kept on file in the respective college department
NOTE: Training records must be maintained for 3 years after the date of training.

College Department: _____

Training Subject or Title: _____

Training Dates: _____

Contents or summary of the training sessions:

Employees who completed this training:

NAME	JOB TITLE

Trainer(s): _____

Qualifications: _____

Chapter 296-823 WAC, Occupational Exposure to Bloodborne Pathogens

APPENDIX B – INSTRUCTIONAL PROGRAM BBP EXPOSURE PLANS

Biology Department
Facilities and Operations Department
Security Services Department
Nursing/Medical Assisting Departments
Criminal Justice Department and Academies
Fitness Center/Athletics

Due to the size of this document, the individual Bloodborne Exposure Plans for each of the programs/departments listed above are on file in each department's office. Electronic versions are available for review by contacting those departments, or by contacting the Office of the Vice President of Administrative Services:

Administrative Assistant to the Vice President of Administrative Services
(360) 416-7778