

# EMPLOYEE HEALTH PROGRAM

The purpose of the Employee Health Program is to monitor the occupational health of the University of Miami community. This includes informing relevant personnel of federal mandates relating to employee health, training employees on appropriate policies and procedures, and inspecting clinical areas routinely to ensure compliance with University policy and federal regulations. The primary policies addressed by this program are the Bloodborne Pathogens Policy and Procedures, and the Tuberculosis (TB) Infection Control Policy and Procedures.

## **Bloodborne Pathogens Policy and Procedures (Exposure Control Plan)**

The purpose of the Exposure Control Plan is to comply with OSHA's **Bloodborne Pathogens Standard, 29 CFR§1910.1030**. The plan is designed to eliminate or minimize occupational exposure of employees to bloodborne pathogens and other potentially infectious materials.

The Exposure Control Plan includes mandated implementation of exposure determination and risk assessment, training, notification of employees' rights, Standard Precautions (formerly known as Universal Precautions), engineering controls, personal protective equipment, and medical surveillance. For specific information regarding laboratory compliance with the Exposure Control Plan, contact **EHS**.

The Hepatitis B Virus (HBV) is the major infectious occupational hazard in the health-care industry. Despite the similarities in the modes of transmission, the risk of HBV infection in the health-care environment far exceeds that for other viruses of great concern, such as the Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV). Some chemical agents (biocides) that are effective in inactivating most viruses are listed in *Table IX*. All chemicals used to inactivate these viruses must be tuberculocidal and EPA approved.

## Standard Precautions

As a result of the occupational hazards presented by HBV, HCV, HIV, and other infectious materials, Standard Precautions must be implemented. These include the treatment of all activities involving contact with blood, tissue and body fluids (including the handling of contaminated or potentially contaminated equipment or materials) as if dealing with contaminated infectious material.

The following standards of practice must be observed and conspicuously posted near first aid equipment and in all areas where the possibility of contamination by infected materials may occur:

- ! Hands must be washed if there is any likelihood of contact with blood, body fluids or human tissue. If soap and water are not immediately available, an antiseptic towelette shall be used as an interim measure.
- ! Gloves shall be worn when breaks in the skin are present or when contact with any of the following is anticipated: blood, body fluids, tissues, mucous membrane or contaminated surfaces.
- ! An impervious gown or apron shall be worn when splattering of clothing is likely to occur.
- ! If splattering, atomization or aerosolization is anticipated, appropriate protective equipment (face shield, eye protection, etc.) shall be worn at all times.
- ! Emergency personnel must have mouthpieces, resuscitation bags and other resuscitation devices for use in areas where the need for resuscitation is likely.
- ! Sharp objects shall be handled carefully.

## Post Exposure Evaluation

The department and the Principal Investigator (PI) must make available to all employees who have had an exposure incident, post exposure evaluation and follow up at no cost to the employee. Following an exposure incident, the employee must *immediately* notify **EHS** who will make the necessary arrangements for confidential medical evaluation and follow up. **The immediate notification of EHS is absolutely necessary to determine the need for emergency medications which are most effective within two hours of exposure.** EHS can be contacted for exposure incidents on a twenty-four hour basis.

**Table IX Examples of Disinfectants**

Recommended Agents <sup>1</sup>	Minimum Concentration	Effective Concentration
Sodium hypochlorite	0.02%	0.5%
Sodium hydroxide	30mM	30mM
B-propiolactone	1:400 dilution	1:400 dilution
Hydrogen peroxide	0.3%	1%
Ethyl alcohol	25%	50%
Isopropyl alcohol	30%	50%
Lysol	0.5%	1%
NP-40 detergent	1%	1%
Quaternary ammonium chloride	0.08%	1%
Acetone/alcohol mix	1:1	1:1

<sup>1</sup>Recommended concentrations may be higher than minimum effective concentrations to assure potency of these agents during laboratory usage conditions.

### **Tuberculosis (TB) Infection Control Policy and Procedures**

OSHA requires the University to perform TB screening of all Health Care Workers and applicants who have been offered employment. The policy of the University is to screen all employees and "new hires" (including **physicians, faculty, and temporary employees**) on the Medical Campus, and any other employees who are assigned to areas or buildings where patients or human subjects are seen. Screening of non-health care workers is required secondary to recirculating air in buildings or areas where persons with TB may receive healthcare.

#### Active Employee Screening Procedures

- ! *Screening must be done annually.* This includes **physicians, faculty, and temporary employees** on the Medical Campus, and those employees who are assigned to buildings or areas where patients or human subjects are seen. Screening will be done more frequently in areas deemed high-risk by **EHS**.
- ! *Employees will be notified of the screening requirement by letter during their birth month.* The letter will be sent to the covered employee's residences during their birth month, notifying them of the requirement to appear for screening. Employees will receive testing at the Employee Health Office (contact **EHS** for the testing schedule) unless otherwise specified. At the time of testing, the employee will be given an appointment to return for reading after 48 hrs. Any employee who fails to return for reading will be required to be retested in two weeks.
- ! *Employees who have tested positive in the past, and have written proof, will not be retested.* These employees will, however, be required to complete a questionnaire asking about the various symptoms of TB. Individuals exhibiting symptoms may be required to obtain a chest X-ray at University expense. The need for X-ray will be evaluated by the Employee Health Manager on a case by case basis.

! *BCG vaccine is not an acceptable substitute for the screening process.* BCG vaccine is not used in the USA and, because of the variability of the vaccines used throughout the world, the efficacy of the procedure is questionable. Additionally, if the vaccine does produce immunity in an individual, that immunity is generally short lived (less than 10 years). An individual vaccinated in childhood and skin test (PPD) positive in adulthood is more likely to be positive secondary to exposure to TB than to immunity from the vaccine. Therefore any BCG vaccinated employee unable to present written medical documentation that he or she has had a positive PPD in the last 10 years will be tested. If a medical document showing proof of a positive PPD in the last ten years is presented, the employee will not be retested, but will be screened as noted above.

Upon completion of the reading the employee will be given two copies of the test results. One copy (without medical information) signifying completion of the program is required to be placed in the employee's departmental file. The second copy is for the employee's personal record.

Any employee who fails to comply with this policy may be subject to disciplinary action by the University. **All individuals who may have been exposed to TB must report the exposure to EHS for post exposure evaluation. In addition, any individual exhibiting symptoms of TB must be reported to EHS immediately.**

#### New Hire Screening Procedures

The new hire screening procedures include:

! *Upon offer of employment, applicants shall be informed of the requirement of TB screening before reporting for work.* If an applicant has been tested in the past twelve months, written documentation must be provided to the Employee Health Office.

! *Applicants must report to the Employee Health Office regardless of past history of TB screening.* Testing **CAN NOT** be performed on Thursdays or Fridays due to the requirement for reading in 48 hrs after testing. **All NEW HIRES must be sent for screening, including those who claim they have tested positive in the past or those who report having had BCG vaccine.**

Those who have tested positive in the past will not be required to be retested. However, they must complete a screening form, and may be required to have a chest X-ray at University expense. The need for X-ray will be evaluated by the Employee Health Manager on a case by case basis.

! *Applicants must be read 48 hours after initial testing.* At the time of testing the applicant will be given an appointment to return for a reading of the test. Any applicant who **FAILS TO RETURN FOR THIS READING MAY NOT BEGIN EMPLOYMENT DUTIES.** All applicants will be given two copies of the test results. One copy (without medical information) signifying completion of the program, will be required to be placed in the applicant's official personnel file. The second copy is the applicant's personal copy.

! *Any applicant with positive test results will be required to obtain a chest X-ray (at University expense).* The applicant will **NOT BE ALLOWED TO REPORT FOR WORK UNTIL THE RESULTS OF THE X-RAY ARE KNOWN BY THE EMPLOYEE HEALTH OFFICE TO BE NEGATIVE.** This generally will take no longer than 24 hrs.

! *Applicants with positive chest X-rays will be further evaluated.* Any applicant with positive chest X-ray results will be referred to the Public Health Department for further evaluation as required by law, and **WILL NOT BE ALLOWED TO REPORT FOR WORK UNTIL CLEARED BY THAT AGENCY.**

! *Applicants who cannot verify previous TB screening will be subject to further testing.* Any applicant who **CANNOT** present proof of testing within the previous twelve months, **WILL BE REQUIRED TO BE TESTED A SECOND TIME IN TWO WEEKS** (the Two-Step Method for screening for TB). This is done to prevent future confusion if, the then employee, should have a positive test. The Two-Step testing procedure will **NOT** delay an applicant from beginning work duties; however, any applicant who fails to appear for the

second round of testing may be subject to disciplinary action.

All applicants will be required to sign a statement indicating that they have been informed of the University's policy and procedures for the prevention of TB and that they will comply as directed.