

Contact:

Director of Risk Management – 541-956-7061

Legal References:

- OAR 437, Division 2, Subdivision Z – *Bloodborne Pathogens*
- OSHA 29 CFR 1910.1030 – *Occupational Exposure to Bloodborne Pathogens*
- CDC Guidelines for Infection Control in Dental Health-Care Settings (2016, 2024 update)
- CDC Guidelines for Phlebotomy and Laboratory Biosafety (2023 update)
- Oregon Health Authority (OHA) – *Infection Prevention and Control Standards*
- Oregon Board of Dentistry – *Infection Control Rules (OAR 818-012-0040)*

Purpose

The purpose of this program is to establish consistent infection prevention and communicable disease control practices to protect **students, faculty, staff, patients, and the public** from exposure to infectious agents.

This program applies to all **Rogue Community College (RCC) Allied Health, Nursing, EMS, and Dental programs**, with special provisions for those that provide **live patient care**.

Programs covered include:

- **Dental** – patient treatment performed under faculty supervision.
- **Phlebotomy** – live patient blood draws under clinical supervision.
- **Nursing and Medical Assistant** – simulated patient procedures only.
- **EMS** – live IV starts only under faculty supervision.

Program Goals

- Prevent the spread of infection in educational and clinical settings.
- Ensure compliance with **OSHA, OHA, and CDC** infection control standards.
- Define cleaning, disinfection, and sterilization requirements.
- Establish clear exposure and reporting procedures.
- Maintain coordinated communication with public health authorities during communicable disease events.

Standard Precautions

All human blood, body fluids, secretions, and excretions (except sweat) must be treated as **potentially infectious**, regardless of visible contamination or known diagnosis.

Standard Precautions include:

- **Hand Hygiene:** Wash hands before and after all patient or specimen contact, glove removal, or contact with contaminated items.
- **Personal Protective Equipment (PPE):** Use gloves, masks, protective eyewear, and gowns/lab coats when exposure to blood or fluids is possible.
- **Sharps Safety:** Dispose of all needles and sharps immediately into approved containers without recapping or bending.
- **Respiratory Hygiene:** Cover coughs and sneezes; discard tissues immediately and perform hand hygiene.
- **Environmental Cleaning:** Disinfect all surfaces, equipment, and work areas between each patient or use.

Engineering and Work Practice Controls

Engineering Controls

To isolate or eliminate exposure risks, RCC uses:

- Self-sheathing needles and puncture-resistant sharps containers.
- Autoclaves and approved sterilization equipment.
- Barriers and splash shields at dental operatories and phlebotomy stations.
- Hands-free sinks, soap, and towel dispensers.
- Clearly labeled biohazard containers for regulated waste.

Supervisors and Risk Management verify annually that all engineering controls are functional and maintained.

Work Practice Controls

Work practices minimize the risk of exposure through behavior and procedural standards:

- Perform procedures in ways that prevent splashing or aerosol generation.
- Never handle personal items (phones, pens, food) in clinical areas.
- Avoid hand-to-face contact when wearing gloves.
- Place contaminated instruments directly into designated bins for reprocessing.

- Do not eat, drink, or apply cosmetics in patient care or specimen collection areas.

Personal Protective Equipment (PPE)

RCC provides PPE to all employees, faculty, and students at no cost.

Dental Clinic (Live Patients)

- Gloves, surgical masks, eye protection or face shields, and clinical jackets/gowns are required during all patient care.
- Change gloves and masks between patients and whenever torn or contaminated.
- Replace surface barriers between each patient and disinfect all operatory surfaces.

Phlebotomy (Live Patients)

- Gloves are required for all venipuncture and specimen handling.
- Masks and protective eyewear must be used when splashing is possible.
- Lab coats or disposable gowns must be worn during specimen collection and processing.
- Dispose of sharps and vacutainers directly into approved sharps containers.

Medical Assistant and Nursing (Simulated Patients)

- Gloves and protective eyewear are required during practice of simulated procedures.
- Masks and disposable gowns must be used when working with fluids or simulated specimens.

EMS (Other students serving as patients)

- **Gloves and appropriate PPE** (gloves, eye protection, and masks when splash risk exists) are required for all IV starts and handling of blood-contaminated materials.
- **Participation must be voluntary**, with informed consent, and all procedures performed **under the direct supervision** of qualified EMS instructional staff.
- **Aseptic techniques** must be followed at all times, including proper site preparation, equipment handling, and immediate post-procedure care.
- **All sharps must be disposed of immediately** into an approved sharps container—no recapping, bending, or passing needles between students.

PPE must be removed before leaving the laboratory or clinical area and replaced if visibly soiled or damaged.

Hand Hygiene and Skin Care

- Wash hands with soap and warm water for **at least 20 seconds** after contact with any potentially infectious material.
- Alcohol-based hand rubs may be used when hands are not visibly soiled.
- Keep fingernails short; avoid artificial nails or chipped polish.
- Cover cuts, scrapes, or dermatitis with waterproof dressings before gloving.
- Remove all jewelry that may tear gloves or harbor pathogens.

Sterilization and Disinfection Procedures

Dental Clinic (Live Patients)

- All reusable instruments and handpieces are **cleaned, packaged, and sterilized** between patients.
- Use **autoclave sterilization** verified by **biological and chemical indicators**.
- Store sterilized instruments in clean, closed cabinets.
- Disinfect operatory surfaces between each patient with **EPA-registered, tuberculocidal disinfectants**.
- Replace disposable barriers between patients.
- Document sterilization cycles daily with operator name, date, and verification results.

Phlebotomy (Live Patients)

- Clean and disinfect phlebotomy chairs, armrests, and work surfaces between patients.
- Use single-use collection devices whenever possible.
- Dispose of all sharps immediately into puncture-resistant containers.
- Disinfect laboratory counters and specimen handling areas after each session using an **EPA-approved disinfectant**.
- Keep a **Sharps Disposal Log** and ensure containers are replaced before reaching three-quarters capacity.

Medical Assistant and Nursing (Simulated Patients)

- Clean simulation mannequins, equipment, and counters after each use.
- Disinfect with **EPA-registered products** according to manufacturer instructions.

- Launder linens and reusable items regularly using hot water and detergent.

EMS (Other students serving as patients)

- **Disinfect all IV practice areas**, including chairs, arm boards, and work surfaces—between each student to maintain aseptic conditions.
- **Use single-use IV catheters and supplies only** and perform all cannulation attempts using proper aseptic technique under instructor supervision.
- **Dispose of all needles and sharps immediately** into approved puncture-resistant sharps containers; no recapping, passing, or manipulating needles after use.
- **Maintain a Sharps Disposal Log**, ensuring containers never exceed three-quarters capacity and disinfecting all practice areas after each training session with an EPA-approved agent.

Environmental and Housekeeping Controls

The **Facilities Department** and program faculty share responsibility for maintaining clean and sanitary conditions in labs and clinics.

Procedures include:

- Daily disinfection of clinical and lab surfaces.
- Immediate cleanup of blood or body fluid spills using absorbent materials and approved disinfectants (10-minute minimum contact time).
- Use of **biohazard waste containers** for contaminated disposables.
- Routine flushing and maintenance of dental unit waterlines and suction traps.
- Retention of cleaning and disinfection logs for inspection and annual review.

Exposure Incidents

An exposure incident occurs when blood or other potentially infectious material contacts mucous membranes, non-intact skin, or enters the body via needlestick or other injury.

Response Steps:

- **Perform first aid immediately** - wash area thoroughly or flush with water.
- **Notify the instructor or supervisor immediately.**
- **Contact the Director of Risk Management (541-956-7061).**
- **Seek medical evaluation** promptly.
- **Complete an online Accident/Injury Report.**

- Follow all post-exposure follow-up requirements outlined in RCC's **Infection Control Plan**.

Immunizations and Health Requirements

To ensure compliance with regulatory and clinical site requirements:

- **Dental and Phlebotomy Programs (Live Patients):**
 - Must comply with program-specific immunization policies and maintain records of required vaccinations.
- **Allied Health, EMS, and Nursing Programs (Simulated Patients):**
 - Must comply with program-specific immunization policies and maintain records of required vaccinations.

All student health records are maintained confidentially by the program's administrative office. All employee health records are maintained by Human Resources.

Infection Surveillance and Reporting

- Faculty and clinical supervisors monitor compliance with infection control practices.
- Any suspected infection, communicable disease, or exposure must be reported to **Risk Management** immediately.
- Risk Management will coordinate with **Facilities, Program Directors, and OHA Public Health** when appropriate.

Education and Training

All faculty, staff, and students in covered programs must complete infection control training that has been approved by Risk Management:

- **Upon entry or hire** and **annually thereafter**, and
- **Whenever new procedures, equipment, or hazards** are introduced.

Training topics include:

- Standard and transmission-based precautions,
- Proper PPE use,
- Cleaning, disinfection, and sterilization,
- Sharps and waste handling,
- Exposure incident procedures, and

- Communicable disease reporting and communication.

Attendance and completion records are maintained by program departments and Risk Management.

Record Retention

Risk Management, Human Resources, and program directors maintain the following records:

- Training attendance and content
- Exposure and injury reports
- Sterilization, disinfection, and autoclave logs
- Immunization and health documentation
- Post-exposure follow-up results

All records are retained **for between 3 years and the duration of employment plus 30 years depending on the record.**

Program Review

This program will be reviewed **annually** by:

- **Director of Risk Management**
- **Director, Nursing and Allied Health Occupations**
- **Director, Dental Programs**
- **EMS Department Chair**

Revisions will reflect updates to OSHA, OHA, CDC, and RCC policies or changes to clinical program operations.

Questions

For any questions, exposure concerns, or reporting of unsafe conditions, contact:

Director of Risk Management
541-956-7061