

POLICY ON INFECTION CONTROL FOR STUDENTS, FACULTY AND STAFF

College of Nursing
Student Health Center

I. INTRODUCTION

The College of Nursing and UTC Student Health Center will provide an environment for the safe conduct of its mission in education, research, community service, and patient care. This policy is intended to provide reasonable protection for students, faculty and staff against the transmission of infectious diseases within the environment of an educational institution that houses professional programs. The health of the students, faculty and staff at University of Tennessee at Chattanooga is managed by the UTC Student Health Center.

The populations in the university setting, particularly students, are vulnerable to communicable diseases such as measles, mumps, rubella, diphtheria, polio, meningitis, varicella, and tuberculosis. These diseases are susceptible to control by appropriate immunizations.

The populations in the university setting who practice in a health care environment, school, or other care facility have special risks other than the general university population. statements made herein pertain to all students, faculty and staff in the College of Nursing and the Student Health Center.

Infectious Disease Control Program

The center for Disease Control and the Tennessee Occupational Safety and Health Administration have determined that employees in any occupation where they are directly exposed to body fluids are considered to be at substantial risk of occupational exposure to HIV (human immunodeficiency virus) and/or HBV (hepatitis B virus). The following program establishes UTC's rules to protect the employees from occupational exposure to such bloodborne diseases.

This program applies to all employees who have contact with human blood or body fluids while performing their duties at UTC. Everyone in the following job titles are specifically included:

- Student Health Center Employees
- Faculty and Students in School of Nursing

II. LABORATORY PRACTICE

The safe handling of infectious agents in research and clinical laboratories is managed in accordance with the U.S. Centers for Disease Control (CDC) and National Institutes of Health (NIH) publication, *Biosafety in Microbiological and Biomedical Laboratories*. This publication

outlines procedures for the safe handling of biologically hazardous agents/waste to assure protection of laboratory, animal care, housekeeping, and emergency personnel. Chairs and principal investigators are responsible for assuring adherence to these guidelines by employees and students.

At times, students, faculty and staff members may come in contact with bodily fluids. Safe handling practices apply to contact with human blood and other potentially infectious materials including semen, vaginal secretions, cerebrospinal fluid, synovial fluid, amniotic fluid, saliva in dental procedures and any body fluid visibly contaminated with blood. The program does not apply to feces, nasal secretions, sputum, sweat, tears, urine, vomitus or saliva **unless** they contain visible human blood.

All faculty, staff and students are to follow these procedures:

1. Standard Precautions

Standard precautions also known as universal precautions shall be followed at all times. All body fluids are assumed to be infected with hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), and all personnel and students exposed to direct contact with body fluids must be protected as though such body fluids are known to be infected.

2. Personal Protective Equipment (PPE)

Personal Protective Equipment shall be worn during all contact with body fluids. Bloodborne pathogens can enter the body through a needle stick injury, through contact of non-intact (i.e. chapped or cut) skin with infected blood or through a splash of infected blood to the eye, nose or mouth of the employee. The personal protective equipment listed below must be worn to prevent entry of infectious material into the body.

a. Gloves

- Disposable latex or vinyl gloves shall be worn during patient / blood contact. Gloves shall be discarded and hands washed immediately after each patient contact
- Small, medium, and large gloves should be available. Employees and students shall wear the correct size of gloves.

b. Gowns

- Faculty and students and other personnel shall use fluid-resistant disposable gowns when splashes to the clothing with body fluids may occur such as when drawing human blood or when treating a patient with profuse bleeding. “A gown should be used during procedures and patient care activities when contact of clothing and/or exposed skin with blood, body fluids, secretions, or excretions is anticipated: (stated straight from the CDC website) didn’t know how you wanted to word it or if we needed to change it.

c. Masks and Eye Protection

- Masks and eye protection shall be worn when splashes to the face may occur such as when drawing human blood or when treating a patient with profuse bleeding.

d. Pocket masks shall be used for resuscitation.

- e. Gloves, masks, eye protection, and gowns shall be worn when drawing human blood.

III. IMMUNIZATION AGAINST MEASLES, RUBELLA, MUMPS, DIPHTHERIA, POLIO, TETANUS, VARICELLA, INFLUENZA, MENINGOCOCCUS, AND HEPATITIS B FOR STUDENTS

The UTC College of Nursing requires that all entering students undergo tuberculin skin testing and have documentation of prior immunity or immunization for the following: measles, mumps, rubella, diphtheria, polio, and tetanus by recorded evidence of immunization or appropriate titer results. Documentation of receipt of two doses of measles (Rubeola) vaccine after the first birthday is required unless born prior to 1957. Anyone with an unknown or negative history of varicella must undergo serological testing. If serology and history are negative, the vaccine is required. The UTC Student Health Center will determine whether immunization documentation is adequate. Students who are unable to document immunity to these infections may be enrolled provided required immunization or TB testing is obtained within ten days of enrollment. Students may be excused from this requirement if contraindications are established by a provider in the UTC Student Health Center or the student presents a signed statement from a health care provider or clergy indicating the reason for waiving the requirement. Annual influenza immunizations are required for all students. If the student does not take the influenza immunization vaccine, reason for refusal must be documented. If the student does not meet the requirements for immunization as defined by the UTC CON and clinical facilities, he/she will not be able to meet the course objectives as stated in the syllabus. The student must comply with the most stringent requirements of UTC CON's contracted clinical sites.

New incoming students at any public institution of higher learning in Tennessee who live in on-campus student housing shall sign a waiver for meningococcal vaccine and return the completed waiver to the University Student Health Center. A waiver form shall indicate that the institution has provided detailed information to the student concerning meningococcal disease, the availability and effectiveness of the vaccine, and that the student has received and reviewed the information and has chosen to be vaccinated or not to be vaccinated for meningitis.

According to the guidelines established by the Centers for Disease Control to insure protection of students against transmission of blood borne pathogens, the UTC Student Health Center is required to assure that students in colleges where students are susceptible to Hepatitis B are immunized against Hepatitis B. Students who have had the Hepatitis B series must show proof of a positive Hepatitis B titer of equal or greater to 10 miu per CDC guidelines. The Hepatitis B series will be repeated one time if the past series has negative results. Students known to be Hepatitis B antigen or antibody-positive (or already immune) or for whom contraindications are established by a healthcare provider or the UTC Student Health Services may be exempted from this immunization.

IV. EARLY DETECTION OF TUBERCULOSIS FOR STUDENTS

All College of Nursing students are required to receive the tuberculin skin test annually. Students without documented testing within previous 12 month period will have a 2-step tuberculin skin test. Students who have been vaccinated with Bacillus Calmette-Guerin (BCG) and do not provide documentation of a past positive tuberculin skin test are required to have an initial tuberculin skin test to determine PPD status. Persons who test positive or have previously tested

positive are required to show proof from the Hamilton County Health Department of being free of tuberculosis.

Treatment for tuberculosis will be managed through the local Hamilton County Health Department. Those students who have tested positive and have a chest xray indicating no active disease will only need to have another chest xray if symptoms of active TB develop.

<http://www.cdc.gov/tb/pubs/tbfactsheets/skintesting.htm>

V. HIV INFECTION AND AIDS

Human immunodeficiency virus (HIV) may be transmitted by the transfusion of blood or blood-products, sharing of contaminated needles, or intimate sexual contact. Exposures occur through needlesticks or cuts from other sharp instruments contaminated with an infected patient's blood or through contact of the eye, nose, mouth, or skin with a patient's blood. Based on current scientific evidence, the disease is not spread by casual contact.

The College of Nursing subscribes to the guidelines of the American College Health Association (ACHA), CDC guidelines, and the Occupational Safety and Health Administration's standard on blood borne pathogens.

A. Admission of Students with HIV Infection

The existence of HIV infection is not a factor in decisions regarding admission to UTC so long as the individual's physical condition is such that he or she can participate fully in the required activities of the program to which application is made. It is recognized, however, that this latter proviso might prevent acceptance of certain infected persons, particularly those with clinically evident AIDS. Confidential counseling is available to students who self-identify as HIV positive.

B. Screening for HIV Infection

The University will not undertake programs of routinely screening students for antibody to HIV. It is strongly recommended that all health-care workers know their antibody status. The Student Health Center in conjunction with the Chattanooga Hamilton County Health Department offer free HIV testing one afternoon each month during the hours posted in the Center and on the UTC Student Health Center Website. In addition, free testing is available at the Health Department at any time.

C. Curricular Implications of HIV Infection

The recommendations of the U.S. Public Health Service regarding prevention of HIV transmission must be scrupulously observed by all health science professionals and students.

Because of their special curriculum needs, health professional students may be required to obtain and process blood and other body fluids of patients. Faculty responsible for teaching laboratory techniques will establish guidelines for safe conduct involving blood and body fluids when such

experiences are a part of the curriculum. Faculty responsible for educational training activities for students in hospitals, clinics, schools, community, and day care facilities will establish guidelines to assure that students are only required to perform possibly hazardous procedures if appropriate to their level of training and experience.

The College of Nursing subscribes to the safety guidelines proposed by the Public Health Service for protection of personnel in its hospitals, clinics, clinical laboratories, schools, and day care facilities. The appropriate infection control committees or other responsible groups in university-operated health care facilities establish guidelines and procedures (Exposure Control Plan) for the protection of students and employees against the possible transmission of HIV.

D. Exposure to HIV

The policy of the College of Nursing is to provide aggressive follow-up on student exposure to blood borne pathogens. Any student who is possibly exposed to HIV infection while performing clinical-related duties will be referred to the UTC Student Health Center or the hospital in which the exposure occurred for medical evaluation and counseling. In accordance with current CDC guidelines, treatment should be instituted as soon as possible, preferably within two hours of exposure. Personal medical information is considered confidential, and the student's right to privacy will be protected to the extent allowed by law. Medical information, including test results, will not be released without the written consent of the student or as required by law. After initial treatment and evaluation at the hospital, the student should come to the UTC Student Health Center for follow-up.

VI. HEPATITIS B AND HEPATITIS C

The Hepatitis B and Hepatitis C viruses (HBV or HCV) may be present at high concentrations in blood and serous fluid of carriers and active cases and, to a lesser extent, in other body fluids such as saliva and semen. Transmission occurs when virus-containing materials are introduced by transfusion of blood or blood products, by contaminated needles, or by sexual contact. Infection also can occur by contact of infectious materials with skin lesions or mucosal surfaces. The groups at greatest risk for HBV and/or HCV are those at risk for HIV, including intravenous drug abusers, sexually active persons, patients in hemodialysis units, and health care workers who experience frequent contact with blood.

In the health care environment, students working in clinical areas who have contact with blood or body fluids are also at risk of infection with HBV and/or HCV. Precautions for the transmission of HBV and/or HCV are similar to those designed to prevent transmission of HIV. Barrier methods, including the use of masks, gloves, and protective eyewear, can minimize infection risk. Nevertheless, the only dependable way to prevent Hepatitis B is active immunization. Such immunization is safe and highly effective for health care workers whose activities are likely to involve contact with blood or blood products. However, for Hepatitis C there is currently no vaccine available for its prevention.

Students with an exposure to Hepatitis B and/or Hepatitis C will be treated in accordance with current CDC guidelines and may be referred to a specialist for specialized treatment. Persons

known to have active Hepatitis B and/or Hepatitis C must be counseled by a UTC Student Health Center provider regarding the transmission of this virus and the means to minimize risk of such transmission.

Hepatitis B Vaccination

All faculty and staff in the College of Nursing and Student Health Center who have positions which put them at risk for contact with blood or body fluids shall be offered hepatitis B vaccinations.

Vaccinations shall be given at no cost to the employee at UTC Student Health Center.

Vaccinations are optional but are encouraged as the best means of protection against hepatitis B.

Records of both vaccination and the declination of vaccination for hepatitis B will be maintained in the Student Health Center.

Policy on Needle/Sharps Sticks

Goals

- A. To control employee and student needle stick/sharps injuries.
- B. To comply with OSHA, state regulations, requirements for a sharps safety program.
- C. To monitor sharps injury data and establish trend information.
- D. To establish an evaluation and implementation program for needle safety devices.

The following is to be implemented for injuries with needles/sharps for students:

- 1. The student shall immediately notify the instructor of the injury.
- 2. The instructor will notify the appropriate supervisor in the facility and have the student follow the facilities protocol.
- 3. A copy of the incident report will be placed in the student's permanent file.
- 4. The original copy of the instructions given to the student regarding follow up and the student's responsibility will be placed in the student's permanent file with a copy going to the student. This will be signed and dated by both the instructor and the student.
- 5. For Hepatitis follow-up, if no policy is in place in the facility, the student should contact his/her health care provider. If this is not feasible, the student will report to the UTC Student Health Center for follow-up.
- 6. For HIV follow-up, the procedure noted in step 5 should be followed. Present recommendations are to be tested on the date of injury, at 6 weeks, 3 months, 6 months and at one year.

Students are responsible for any costs incurred for treatment immediately following the needle/sharps stick as well as any follow up required. All students must maintain personal health insurance throughout the program.

The following will be documented for injuries with needles/sharps for faculty, staff and employees of College of Nursing and Student Health Center:

- 1. Documentation of the following:
 - a. Date, time and location of injury

- b. Route of exposure
 - c. The identity of the source patient
 - d. The circumstances of the exposure
 - e. Type/ brand and purpose of device
 - f. Use of PPE when injury occurred
 - g. Notation of signs of visible blood on device
 - h. Specific circumstances associated with injury
 - i. Identification of source (if known) and source status related to bloodborne diseases
2. Collection and testing of the source patient's blood for HIV and HBV if possible
3. Collection and testing of the affected person's blood for HIV and HBV immediately
4. Medical evaluation of the employee by a physician at the University's current workers compensation medical provider
5. If the initial HIV test is negative, further testing for HIV will be at six weeks, 12 weeks, and six months and 1 year post exposure.
6. If the worker has not been vaccinated against HBV or the antibody response is not adequate, post exposure prophylaxis including treatment with immune globulins and the hepatitis B vaccine shall be provided under the direction of a physician.
7. Records of exposure including route of exposure, identity of human blood source, and circumstances of exposure shall be maintained in the office of the Department of Safety & Risk Management. Additionally, records of all follow-up procedures will be kept in the office of the Department of Safety & Risk Management. All exposure records will be maintained for 30 years.

Students with Infectious Diseases

Any student is expected to notify his/her instructor that he or she has been diagnosed as having an infectious disease. He/she will be put on a medical leave of absence pending a health care provider's statement regarding: 1) the vulnerability of the student to a secondary infection from being in the institution, and 2) the potential for infection of others by the student in his/her present medical state. The course instructor, working with the Student Health Center Physician will review the documentation and make a determination regarding returning to class and/or clinical site. Further consultation related to this matter will be obtained as appropriate.

If it is determined that the student is able to continue, but has an infectious disease, one or more of the following actions will be indicated:

1. The student will not be allowed to continue course work in a client contact area if the student or client can not be protected.
2. Within the academic year, the student shall continue on a medical leave of absence until cleared by the health care provider.
3. If the student is currently assigned to a non-client contact area and has been released by his/her health care provider, he/she will be allowed to return to class or the clinical site.
4. If it is determined that no reasonable accommodation is feasible for the student with an infectious disease, the student will continue medical leave of absence for a period of time defined by his/her health care provider and the Dean. Upon termination of the

medical leave of absence, the student will be evaluated for readmission according to department guidelines.

Faculty with Infectious Disease

Faculty are expected to notify the Dean of the College of Nursing that he or she has been diagnosed as having an infectious disease. The Director will make the decision regarding the faculty's workload and clinical assignment depending on 1) the vulnerability to a secondary infection and 2) the potential for infection of others by the faculty's present medical state. A statement from the faculty's health care provider is required.

Assignment of Students to Infectious Disease Clients

Known clients with infectious diseases will not be assigned to student who have not completed a basic introduction of infection control. Students do not have the right to refuse to provide care to clients with infectious diseases. Prior to the first clinical event, the faculty member will ascertain that each student has the knowledge necessary to practice infection control management as required for assignment related to general or specific client care. The faculty member will also orient each student to the policy of the agency to be followed in the event of an injury to the student. If there is no care available to the student within the agency or setting, the faculty member will direct the student to his/her primary care provider or the UTC Student Health Center for appropriate follow up care.

Individual exemptions from above include students with active infections, immuno-suppressed students and pregnant students. In these circumstances, the clinical instructor will determine how the course/clinical objectives will be accomplished.

Documentation will be kept to record exposure to caring for a client with an infectious disease.

Assignment of Students To Clients with AIDS

Consistent with the College of Nursing's Values that all persons have dignity and worth, the faculty will include individuals who have AIDS, ARC (AIDS Related Complex) or are HIV Antibody Positive in their consideration of clients for learning assignments which are consistent with specific course objectives.

Students will accept learning assignment with clients who have AIDS, ARC or are HIV+ unless such assignments would not be compatible with the student's health condition (i.e. pregnancy, immunosuppression).

In their roles in the University , faculty and staff members and students will not discriminate against persons who are known to have or are suspected of having AIDS or ARC or to be HIV +.

Implementation of CDC Guidelines

Students and faculty will comply with current CDC guidelines for infectious diseases.

CDC guidelines protecting individuals from exposure to HIV will be followed.

Current guidelines will be available to students and faculty at all times. A copy of current CDC Guidelines will be kept in a notebook in the Administrative Office and are available to all on the Internet.

Students must pass the Standard Precautions Examination with identified pass rate before entering the clinical area.

VII. EDUCATION

One of the strongest and most effective defenses against infectious diseases is an understanding of their cause and modes of transmission that will lead to behavioral changes, minimizing the spread of infection. It is incumbent upon the leadership of School of Nursing to provide information on the cause and spread of infectious diseases within the environment of its programs.

It shall be the responsibility of the faculty to provide students with information on the cause and spread of infectious diseases as a part of the required education program. Strategies for such educational programs are contained in the American College Health Association (ACHA) and Centers for Disease Control will serve as guidelines for these programs.

Within the UTC College of Nursing, the Infection Control Coordinator will serve as an information resource for these educational activities. Faculty will identify the mechanism for educational activities.

All faculty and staff in College of Nursing shall receive training, which includes the following:

- A. A copy of the current regulations from TOSHA
- B. A general explanation of the epidemiology and symptoms of HIV, HCV and HBV
- C. An explanation of the modes of transmission of HIV, HCV and HBV.
- D. An explanation of the infection control program at UTC.
- E. An explanation of how to determine if a task will fall under this program.
- F. An explanation of the importance of universal precautions and other work practices to reduce worker exposure.
- G. An explanation of the availability, proper use, and disposal of personal protective equipment including the specific circumstances under which PPE is to be worn.
- H. An explanation of the follow-up procedure to follow if actual contact with human blood or body fluids occurs.
- I. An explanation of the labels and signs used.
- J. An explanation of the proper clean up of human blood spills.
- K. An explanation of proper disposal of contaminated items
- L. An explanation of the sterilization procedures for reusable equipments.
- M. An explanation of the risks and benefits of vaccination for HBV, and how to obtain same.

The training will be the responsibility of the department in which the students, staff and

employees work. The Department of Safety and Risk Management is available to assist with this training by supplying training assistance and training aids.

Training records shall be kept in the departments. Training records shall include summary of program contents names and qualifications of persons conducting the training the names and job titles of persons attending the sessions.

VIII. REVIEW OF GUIDELINES AND PROCEDURES

The School of Nursing will review all pertinent guidelines related to specific programs to insure that these are in keeping with the available evidence on the transmission of infectious diseases and blood borne pathogens and meet the requirements of this policy. The School of Nursing establishes a Policy on Infection Control for students based on the best available scientific evidence.

IX. REFERENCES

The following references provide guidelines for meeting College of Nursing responsibility in protecting students and employees from acquisition of blood borne diseases.

Centers for Disease Control - www.cdc.gov

American College Health Association – www.acha.org

National Guideline Clearinghouse – www.ngc.org

Occupational Safety and Health Administration. Occupational Exposure to Blood borne Pathogens: Final Rule. Federal Register, 1910.1030.

CDC. Immunization of health-care workers: recommendations of the Advisory Committee on Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee (HICPAC). MMWR 1997; 46(No. RR-18).

Adapted from The University of Tennessee Health Science Center Memphis “POLICY ON INFECTION CONTROL FOR STUDENTS”.

Reviewed and Revised 9/07, 9/18

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