

BLOODBORNE

PATHOGENS

WRITTEN

PROGRAM

HIBBING COMMUNITY
COLLEGE

April 29, 2009

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PURPOSE

On December 6, 1991, the Occupational Safety and Health Administration (OSHA) published the "Occupational Exposure to Bloodborne Pathogens" Standard. The purpose of this standard is to limit occupational exposure to blood and other potentially infectious materials since any exposure could result in transmission of bloodborne pathogens which could lead to serious disease or death.

Occupational exposure relates to the reasonable anticipation that blood or other infectious body fluids will come in contact with an employee's mucous membranes (eyes, nose, mouth), or skin, or through parenteral contact (skin piercing) while performing job duties. In colleges, blood is the body fluid that will be of greatest concern. Additional fluids include semen, 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 and all body fluids in situations where it is difficult or impossible to differentiate between those body fluids.

COLLEGE POLICY

Hibbing Community College has developed the following Bloodborne Pathogens and Exposure Control Plan to comply with OSHA's Bloodborne Pathogen Standard. This standard has been specifically enacted to "reduce exposure to hepatitis B virus (HBV), human immunodeficiency virus (HIV) and other bloodborne pathogens exposure.

The main objective of this plan is to protect employees from potential workplace hazards by reducing occupational exposure to HBV, HIV and other bloodborne pathogens. Employees will be informed and trained so that they can contribute to the reduction and elimination of exposure.

Program Management

Exposure Control Officer is responsible for the overall management and support of the college's Bloodborne Pathogen Compliance Program. The Exposure Control Officer will ensure all employees exercise proper control procedures. The Emergency Medical Services Department has been designated as the college's Exposure Control Officers.

Training Instructors are responsible for providing information and training to all employees who have the potential for exposure to bloodborne pathogens. The college will utilize the EMS and Safety & Health Departments for training.

Employees have the most important role in the Bloodborne Pathogen Compliance Program, for the final success of this plan is dependent upon them. Employees should be aware of tasks they perform that involve exposure to bloodborne pathogens, attend annual bloodborne training sessions, and follow appropriate work practices and procedures outlined in this plan to reduce exposure to blood or other body fluids.

Review/Update of Plan

The Exposure Control Plan and accompanying records are public documents and available for public review. Copies will be made available upon request. Copies of the Plan are kept in the locations listed below.

To ensure that the Plan is kept up to date, it will be reviewed and amended annually and whenever tasks are implemented which may affect occupational exposure.

LOCATIONS:

Employee's Lounge – M110

Hibbing Community College Web Page -
<http://www.hcc.mnscu.edu/eservices.html>

EXPOSURE ASSESSMENT / DETERMINATION

In order to conduct the assessment, the college has listed the most logical job titles/work areas that may have the potential for exposure to blood or other potentially infectious material and could reasonably anticipate such exposure. Based on the results of the assessment, employees are categorized into the following job classifications:

- **Classification 1**

Employees whose primary job description is administering first aid, clean up or have other occupational exposure to bloodborne pathogens. Employees included in Classification 1 will comply with all components of the Bloodborne Pathogen Standard, including wearing the necessary personal protective equipment. They would also be required to be offered the Hepatitis B vaccination. The college has determined that the following job titles/work areas are Classification I:

- Coaches
- Maintenance

- **Classification 2**

Employees who provide first aid as an auxiliary component of their position and may be exposed to blood or other potentially infectious material. They would be required to be offered the Hepatitis B vaccination. The college has determined that the following job titles/work areas are Classification II:

- Athletic Director;
- Dental;
- MLT.

- **Classification 3**

This classification would include all remaining employees not previously addressed in Classification I or II. Initial and overview training will be given to this group however; no vaccination would be required to be offered to this group. Personal protective equipment would also be available for this group. The college has determined that the following job titles/work areas are Classification III:

- All other faculty & staff not previously identified.

- **Implementation Option**

OSHA allows an employer to determine whether the designation of “first aid provider” whose primary job responsibility is not the provision of first aid, necessitates a pre-exposure vaccination. However, irrespective of whether pre-exposure vaccination is provided, all other components of the regulation apply.

If an employer chooses to exercise this option, it is imperative that they fully understand and follow the additional requirements of the first aid log and vaccination option within 24 hours. It is generally considered administratively prohibitive to follow these optional procedures than to provide the pre-exposure vaccination.

METHODS OF COMPLIANCE

In order to effectively eliminate or minimize exposure to bloodborne pathogens at HCC, the following areas are addressed in detail in this Exposure Control Plan:

- Use of Universal Precautions
- Establishing appropriate engineering controls
- Implementing appropriate work practice controls
- Using necessary personal protection equipment
- Implementing appropriate housekeeping procedures

Universal Precautions

- Universal Precautions shall be implemented when dealing with blood or other potentially infectious materials. Universal Precautions means that all human blood and certain human body fluids are to be treated as if known to be infected with HIV and HBV and other bloodborne pathogens. Exposure to body fluids other than blood is unlikely.

Any employee encountering blood or other body fluids listed above is to treat them as being infectious, and is to use necessary personal protection and work practice controls.

Universal Precautions Defined

Universal Precautions are practices and procedures that assist in the prevention of contact with blood and other body fluids. They are the best protection against HIV, the virus that causes AIDS, hepatitis B and other infectious agents.

Safe Work Practices

- Assume everyone is infected with HIV, hepatitis B or other bloodborne pathogens.
- Avoid skin exposure to infected fluids. Fluids to be concerned about are:
 - ✓ blood
 - ✓ cerebrospinal fluid--a clear fluid surrounding the brain and spinal cord that may leak out of the nose, ears or mouth as a result of severe head injuries
 - ✓ amniotic fluid--the fluid in the uterus present during labor and delivery
 - ✓ semen, vaginal fluids and breast milk may also contain bloodborne pathogens, but are not common in first aid situations.
 - ✓ any fluid containing blood
 - ✓ pericardial, peritoneal, pleural and synovial body fluids
- Use a barrier (cloth, paper towel, etc.) to keep fluids from contact with your skin.
- Dispose of sharps such as needles, lancets or contaminated broken glass in a puncture resistant container. Use tongs or other equipment to pick up broken glass contaminated with blood or other potentially infectious material.
- Use disposable equipment whenever possible.
- Dispose of items soiled with potentially infected fluids in leak proof bags or containers.
- Wash hands thoroughly 15-20 seconds, minimum, with soap and water.
- Clean up spills of potentially infected fluids with soap and water and then disinfect spill area with a bleach-water solution, diluted 1 part bleach to 10 parts water or other appropriate disinfectant.

Engineering & Work Practice Controls

Using appropriate engineering and work practice controls should eliminate or minimize employee exposure to bloodborne pathogens. The procedures and controls listed in this section will be reviewed periodically and updated as required.

The following engineering and work practice controls and policies are to be used throughout the college:

A. Work Practices

1. Wear disposable gloves. Do not re-use disposable gloves and wash hands with soap and water after removing gloves.
2. Wear safety goggles if contaminants could splash in the eyes.
3. Wear a mask if contaminants could splash into the mouth or nose.
4. If your skin is not covered, wear additional protective clothing.
5. Use an absorbent material (paper towel/cloth) as a barrier between you and the blood source.
6. In the event you become exposed to any blood or other potentially infectious material, wash the area with soap and water or flush mucous membranes immediately and report it to the department head, supervisor or Exposure Control Officer so an evaluation can be made and, if necessary, professional medical attention can be provided, including hepatitis B vaccine, if prescribed by a physician.
7. Remove immediately or as soon as feasible any garment contaminated by blood or other potentially infectious material.
8. Remove PPE after it becomes contaminated and before leaving the work area.
9. If regulated waste is generated, it must be properly bagged, labeled and disposed of through MLT.

B. Handwashing

1. Hand washing facilities are available and should be immediately utilized upon contact with blood or other potentially infectious material.
2. Proper hand washing procedures includes the use of warm water. Hands should be wetted and soap applied to hands and wrists to reach any organisms that may have traveled above the hand. Be sure to scrub between fingers and use a nail brush for fingernails. Scrub a minimum of 20 seconds. Dry hands.

C. Handling of Contaminated Sharps

1. Mechanical devices such as tongs or dust pan and broom will be available to pick up contaminated sharps such as blood-covered broken glass etc. to avoid any direct contact. **Contaminated glass will not be picked up by hand.**
2. Needles and other contaminated sharps should not be bent, recapped or removed. Shearing or breaking off contaminated needles is absolutely prohibited.
3. As soon as possible after use, contaminated sharps should be placed in appropriately marked sharps storage/disposal containers.

D. Sharps Container

1. Sharps containers are located in the MLT, dental, nursing, restrooms and other areas as necessary. If needed, a biohazard disposal container is located in the MLT lab C131-132.
2. Containers are puncture-resistant, labeled, red in color, leak proof on sides and bottom, and are able to be closed after each use.

E. Blood/Other Potentially Infectious Material Spill Cleanup

1. Use Gloves. Do not reuse disposable gloves. If utility gloves are used, decontaminate after use with soap and water and appropriate disinfectant.
2. Use absorbent materials to absorb spill.
3. Clean spill area with soap and water.
4. Utilize proper disinfectant and follow procedures (example: bleach 1:10).
5. Dispose of waste in a proper container.
6. Wash hands thoroughly with warm water and soap.
7. Department head or supervisor will be contacted and the spill evaluated.

F. Cleanup of Objects Contaminated with Blood or Other Potentially Infectious Material

1. Use gloves. Do not reuse disposable gloves.
2. Discard contaminated items that cannot be cleaned into a lined container.
3. Wash objects using warm water and general purpose cleaner.
4. Disinfect the object using approved disinfectant solution or a 1:10 bleach solution.
5. Rinse after disinfecting if object is to be placed in mouth.

6. Dispose of contaminated cleaning material in a lined container.
7. Notify department head or supervisor if exposure potential exists.

G. Self-Management.

Wherever possible and appropriate, employees should practice self-management of injuries. The principle of self-management is that the person whose blood or other body fluids are exposed should themselves, if possible, manage, treat, clean and dispose of the contaminated materials, thereby avoiding contact by a second party.

H. First Aid/Healthcare

1. Use gloves or other personal protective equipment (PPE).
2. Use paper toweling to wipe injury and, if appropriate, allow person to rinse injury with running water.
3. Place soiled materials into a lined waste container and direct person to perform as much of these procedures as possible.
4. Assist in cleaning affected area; use cotton swabs to apply medicine if appropriate.
5. Follow other procedures for care in minimizing direct contact with blood or body fluids.
6. Wash hands thoroughly.

Note: If you do not have access to PPE, help the injured person to care for themselves. Demonstrate how to do this, i.e. holding paper towels over bloody nose and applying pressure. Instruct person in cleanup of any blood spills. Place a barrier between yourself and the injury if you need to provide assistance.

I. Eating, Drinking, Smoking/Other.

Eating, drinking, smoking, applying cosmetics or lip balm and contact lens handling are prohibited in work areas where there is a reasonable likelihood of occupational exposure. Also, food and drink should not be stored in close proximity to where blood or potentially infectious materials are present.

J. Mouth Pipetting/Suctioning.

Mouth pipetting/suctioning of blood or other potentially infectious material **is prohibited**.

The college shall monitor procedures to ensure Universal Precautions, engineering controls and work practices are implemented and utilized appropriately to reduce/eliminate exposure.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Optimally, the use of engineering controls would eliminate or minimize the exposure to blood or other infectious body fluids. When an exposure potential exists after the engineering controls are in place, personal protective equipment should be utilized. The college will provide PPE as appropriate to employees at no cost.

A. PPE may include but is not limited to:

- Gloves--used for first aid, cleanup, handling of sharps, and when in contact with any blood or other potentially infectious material. Disposable or single use gloves for providing first aid should be disposed of after use in leak-proof bags.
 - Before putting on gloves, you must first wash your hands. After you have put the gloves on, check for proper fit and punctures. Pull them snug to insure a good fit.
 - To remove gloves and minimize contamination, gloves should be rolled or pulled from the wrist to the fingers so that the glove is inside out. Disposable gloves should be disposed of immediately, and under no circumstances should they ever be reused.
- Lab coats may be used to prevent potential contamination.
- Face shields/masks may be used during a serious accident and cleanup to prevent the splashing of fluids, thereby, protecting the mucous membranes from exposure.
- Eye protection may be used where the potential for exposure to eyes or mucous membranes from blood splashing exists.
- Other personal protective equipment if appropriate.

B. **Use.** The college will ensure that employees use appropriate PPE.

C. **Accessibility.** The college will ensure that appropriate PPE is readily accessible in the work area. Department heads, supervisors or foreman are responsible for ordering needed PPE.

D. **Upkeep.** The college will repair, replace, clean, launder or dispose of PPE at no cost to employee. Hypoallergenic gloves or appropriate substitutes shall be provided to employees who are allergic to the gloves normally provided. College policy dictates that employees inform the Exposure Control Officer of faulty, worn, dirty or other problematic PPE.

E. **Disposal of Contaminated PPE.** Contaminated PPE may be disposed of in the MLT lab – Room C131-132. See department head for details.

HOUSEKEEPING

The college will maintain clean and sanitary conditions in the work site.

- A. All contaminated equipment, and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious material.
- B. Broken glassware which may be contaminated will be picked up by mechanical means only. See page 8 for details.
- C. Most waste can be disposed of in the regular waste stream; however, other regulated waste should be placed in containers in MLT Lab which are designed for this waste stream.

HEPATITIS B VACCINATION & POST EXPOSURE

Hepatitis B Vaccination Policy

The hepatitis B vaccination series is provided for all employees who have occupational exposure to blood or other potentially infectious material. This would be Classification 1 employees.

If you have implemented the OSHA alternative for auxiliary/collateral provisions of first aid and have not provided pre-exposure vaccination, any first aid incident involving blood or other potentially infectious material will necessitate the provision of the hepatitis B vaccine within 24 hours.

The college will make the Hepatitis B vaccination series available at no cost after initial employee training and within 10 days of initial assignments to all employees identified in the exposure determination section of this plan. Vaccination is encouraged unless:

1. employee who has received vaccine series previously.
2. antibody testing has revealed that employee is immune.
3. medical reasons.

If an employee may decline the HBV vaccination, the employee must sign a declination statement. The employee may, at a later date, request the vaccine; the college shall grant the request at that time. Documentation of refusal of the vaccination is kept in the employee's personnel file in Human Resources. Vaccination will be provided by one of the local healthcare clinics.

VACCINATION CONSENT FORM

Employee Name	Date
Job Classification	Employee ID Number

I have been given a copy of and have read or have had explained to me the information about the Hepatitis B Vaccine. I have had a chance to ask questions which were answered to my satisfaction. I believe I understand the benefits and risks of the Hepatitis B Vaccine, and request that it be given to me.

Employee Signature

Date

College Representative Signature

Date

VACCINATION DECLINATION FORM

Employee Name	Date
Job Classification	Employee ID Number

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 (HBV) infection. I have been given 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 the hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Signature

Date

College Representative Signature

Date

EXPOSURE INCIDENTS

An exposure incident is a specific eye, mouth, other mucus membrane, non-intact skin, or parenteral (through the skin) contact with blood and other potentially infectious material, other than one's own, that occurs during the performance of an employee's duties. It includes a needle prick, being cut by a bloody piece of glass, or being splashed with blood when providing first aid.

Procedure

Any employee, regardless of job title or duties, who has an exposure incident at work shall immediately inform the department head or supervisor and will fill out an Illness/Injury/Incident Data Form (IDF) <http://www.hcc.mnscu.edu/hr-services.html> and Exposure Report on pages 15 – 19 in this program. The IDF will be returned to human resources and the Exposure Report to HCC's Exposure Control Officer (Emergency Medical Services Dept.) If such an exposure should occur, contact the Exposure Control Officer immediately.

An immediately available confidential medical evaluation and follow-up will be conducted by one of the local healthcare clinics. Following initial first aid, the following activities will be performed:

- Document the routes of exposure and how exposure occurred.
- Identify and document the source individual, unless prohibited by law.
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV and HBV infectivity; document that the source individual's test results were conveyed to the employee's healthcare provider.
- If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (confidentiality laws).
- After obtaining consent, collect exposed employee's blood as soon as feasible after the exposure incident and test blood for HBV and HIV serological status.
- If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

POST EXPOSURE EVALUATION

Exposure Control Officer ensures that the healthcare professional responsible for the employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's Bloodborne Pathogens Standard.

The Exposure Control Officer ensures that the healthcare professional evaluates the employee after an exposure incident and receives the following:

- A description of the employee's job duties relevant to the exposure incident;
- Route(s) of exposure;
- Circumstances of exposure;
- If possible, results of the source individual's blood test;
- Relevant employee medical records, including vaccination status.

Review of Incident

The exposed employee, the department head, foreman or supervisor, and college administrator must meet within three weeks of the incident to review the incident including Illness/Injury/Incident Data Form and Exposure Report Form and determine if procedures to avoid a reoccurrence are needed. The safety committee will also investigate the incident according to HCC's AWAIR program. The meeting must produce written recommendations or, if none result, a statement to that effect.

EXPOSURE REPORT

Date of Incident:	Time of Incident:
Employee Name:	Employee ID Number:
Name of Person Completing Form:	Job Being Done When Exposure Occurred:

The following information was obtained to assist in a medical evaluation of the incident:

1. The route of exposure to blood or other potentially infectious material:

- Eyes
- Other Mucous Membrane
- Nose
- Non-Intact Skin
- Mouth
- Needlestick, puncture, bite
- Other

COMMENTS:

2. Type of body fluid/material:

- Blood
- Other Potentially Infectious Material
Specify: _____

COMMENTS:

3. Estimated amount of body fluid or description of amount:

4. Severity of exposure:

- Percutaneous (skin piercing)

Depth of injury: _____

Was source fluid present at site of injury? YES NO

COMMENTS:

- Mucous Membranes

Area covered: _____

Length of time of exposure: _____

COMMENTS:

- Non-Intact Skin

Condition of Skin: Fresh cuts (< 24 hours) Chapped Dermatitis

Other: _____

COMMENTS:

5. Specific job duties being performed at time of exposure:

6. Did handwashing and/or flushing of mucous membrane occur as soon as possible?

Yes No

COMMENTS

7. Was personal protective equipment utilized? (If so, what type, e.g. gloves, face shield etc.)

Yes

No

COMMENTS

8. Was the integrity of the personal protective equipment compromised (e.g. gloves pierced)?

Yes

No

COMMENTS

9. Was clothing contaminated? Did appropriate disposal/laundrying procedures occur?

Yes

No

COMMENTS

It has been determined by _____ that this incident
(department head, foreman, supervisor or designee)

was an exposure _____ was **not** an exposure _____.

I am in agreement with the above determination.

Employee's Signature _____ Date _____

This has been reviewed by the college provost or designee.

Signature _____ Date _____

This form has been filed _____
(location)

IF IT IS DETERMINED THAT THIS IS AN EXPOSURE, PLEASE CONTINUE FILLING OUT THIS FORM.

10. Source individual's blood:

- was tested
- was not tested (consent could not be obtained) Date: _____

Source is known to be infected with:

- HBV HIV Not Applicable

11. Employee consent to blood collection:

- Employee consented to baseline blood collection.
- Employee consented to the serologic testing for HBV: Yes No

- Employee consented to serological testing for HIV:
 - Yes
 - No--Sample is preserved for 90 days. Employee may elect to have test conducted within 90 days.
 - Date: _____

12. Employee has been referred to a healthcare professional for medical evaluation and follow up.

- Yes No

Name & location of professional or clinic:

13. All documents required were provided to professional or clinic on the following date:

Date

Recording of Incidents

Exposure incidents will be recorded on the OSHA 300 log if medical treatment beyond first aid is provided. The incident is recorded as an injury. The specific incident that resulted in exposure is recorded (e.g. needlestick, splashed with blood).

Exposure incidents will also be recorded if the employee later receives a diagnosis of seroconversion (i.e., develops HIV or HBV).

Recordkeeping

Medical records shall be confidential and be in accordance with OSHA's standard 29 CFR 1910.20. The medical records shall include the following:

- A. Name and Social Security number of employee.
- B. Employee's HBV vaccination status.
- C. If exposure incident occurs, archive:
 - . results of exams, medical testing and follow-up procedures.
 - . college's copy of the healthcare professional's written opinion.
 - . Copy of information provided to healthcare professional.
- D. These records shall be kept confidential and not disclosed or reported without the employee's written consent.
- E. College shall maintain records for duration of employment plus 30 years. If an outside agency maintains the college's records, the same requirements apply.

Upon request, the employer shall make employee records available under 29 CFR 1910.20 to the Assistant Secretary of Labor for the Occupational Safety & Health Administration and the Director of the National Institute for Occupational Safety & Health. Records are also to be made available to subject employee for examination and copying.

Training Records

Training records will be maintained for a period of three (3) years and will include name, occupation, name of person doing training (with qualifications) and a brief overview of contents.

LABELS AND SIGNS

For our employee's one of the most obvious warnings of possible exposure to bloodborne pathogens are biohazard labels. Department head or supervisors are responsible for setting up and maintaining this program in their building. The following items in our facility are labeled:

- o Containers of regulated waste.
- o Sharps disposal containers.

Labels and signs are required for identifying contaminated materials. Outside of sharps containers, regulated waste is typically not generated in a college setting; however, this must be evaluated for each facility.

- A. Warning labels will be affixed to containers of regulated waste if any is generated or contaminated equipment that is transported and cannot be completely decontaminated on site. The college also uses red bags and red containers which are properly labeled.
- B. Labels shall:
 - 1. include the biohazard legend.
 - 2. be fluorescent orange or orange-red with contrasting lettering or symbols.
 - 3. be affixed as close as feasible to container by string, wire, and adhesive or other method that prevents their loss or unintentional removal.

INFORMATION AND TRAINING

Annual information and training will be provided to Classification 1 & 2 employees.

- A. Training will be provided:
 - 1. at the time of initial assignment.
 - 2. annually.
- B. Additional training will be provided when changes such as modification or addition of tasks or procedures affect employee's occupational exposure.
- C. The contents of the training program will include:
 - 1. Copy of 29 CFR 1910.1030 Occupational Exposure to Bloodborne Pathogens; Final Rule - <http://www.osha.gov/>
 - 2. Explanation of the epidemiology and symptoms of Bloodborne diseases.
 - 3. Explanation of the modes of transmission of Bloodborne Pathogens.
 - 4. Explanation of college's Exposure Control Plan and its location.
 - 5. Assessment of tasks that may involve exposure.
 - 6. Methods for preventing or reducing exposure.
 - 7. Information on types, proper use, location, removal, handling, decontamination, and disposal of personal protective equipment.
 - 8. Explanation of the basis for selection of PPE.
 - 9. Information on the HBV vaccine.
 - 10. What to do if an exposure occurs.
 - 11. Explanation of procedures to follow when an exposure incident occurs, including reporting methods and medical follow-up.
 - 12. Information on the post-exposure evaluation and follow-up which the college is required to supply following an exposure incident.
 - 13. Explanation of signs, labels and color coding system.
- D. The person conducting the training will be knowledgeable in the material covered during the training course as it relates to the workplace.
- E. Training records will be maintained for a period of three (3) years and will include name, occupation, name of person doing training (with qualifications) and a brief agenda.