

BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

1. Job Classifications having occupational exposure to bloodborne pathogens.

A) Job classification in which employees have occupational exposure.

School Nurse/Special Education Teacher/Special Education Technician - Those responsible for students who may pose a threat with behaviors leading to body fluid exposure, i.e., biting, injury to self & others.

B) Job classifications and tasks in which some employees have occupational exposure.

Secretaries - Those providing first aid treatment when the nurses are unavailable.
Custodians - Those responsible for cleaning bodily fluid spills, the nurses' office, and resource rooms.

2. Implementation control measures.

A) Universal Precautions

All blood and other potentially infectious materials (OPIM) will be treated as if they are infectious.

B) Engineering Controls, work practice controls and personal protective equipment.

1) All employees will wear protective gloves when dealing with blood or OPIM.

2) All spills of blood or OPIM will be cleaned up using an EPA approved agent, i.e., Stat#3 or chlorine bleach 1:10 parts water dilution. Discard bleach solution after 24 hours.

a. The custodians are responsible for cleaning body fluid spills in all buildings.

b. In the event there is a blood or body fluid spill, and a custodian is not on duty, the administrator of the building will call the supportive services staff person identified to do the clean up immediately. Until that identified person arrives the area must not be accessible to students or staff. If the incident occurred in an unsupervised area, the administrator of the building must secure that area until the clean up is complete.

3) All employees will wash their hands after contact with blood or OPIM even if they were wearing gloves.

4) First aid will be administered by designated individuals when available.

5) Students who bloody their clothing will change into clean clothes. The bloody clothing will be double bagged and sent home.

6) Contaminated broken glass and other materials will not be picked up with the hands. It will be picked up or swept up by mechanical means and be disposed of in a puncture proof container (i.e. plastic jug or box.)

7) All blood soaked materials will be double bagged and appropriately disposed of at the time of occurrence. Prior to removal, spray the bag with a disinfectant. After the removal of the trash bag the trash can, must be cleaned with disinfectant

8) Custodians will disinfect these items daily, using disposable gloves (in nurses office).

bed	soap dispenser	towel dispenser
sink	faucets	door knobs
chairs	light switches	scales
tables	floor	bathroom seat
waste containers	pillow	

9) Custodians will disinfect bathrooms daily using disposable gloves.

sinks	floors	toilet paper dispenser
soap dispenser	faucets	railings
door knobs	sanitary	toilets
sanitary napkin dispenser & can mirror		

10) Different colored trash bags will be used in the nurses' office, resource rooms, and the girls' bathrooms. (Not Red)

C) Contaminated Equipment/Supplies

Contaminated equipment will be decontaminated if feasible. If not, send it out for decontamination or disposal. (i.e. mops, towels, blankets)

D) Personal Protective Equipment

Employees will be provided appropriate personal protective equipment at no cost to the employee. It will be chosen based on the anticipated exposure and will help prevent blood or OPIM from reaching the skin or mucous membranes.

1) Each employee will be given two pairs of protective gloves. He/she will have gloves available when supervising students. Latex are the better choice for protection. Vinyl may be used as an alternative when a person is sensitive to latex.

Gloves which have been contaminated will be removed and appropriately disposed.

Gloves will be worn only once and then disposed.

The employee will wash his/her hands after removing gloves. If unable to wash hands immediately use an antiseptic wipe and then wash as soon as possible.

2) Utility gloves can be washed, disinfected and reused if they are intact.

3) Information regarding replacement of gloves may be obtained from the nurses.

4) Gowns - Gowns shall be worn when the employee's clothes may come in contact with another person's body fluids. An example would be lifting an incontinent student from a wheelchair.

5) Masks & goggles - Protective face masks and goggles will be worn when students are spitting or when closely assisting a student with tooth brushing or feeding.

6) CPR masks will be used whenever performing CPR when available.

E) The following materials will be used for decontamination:

1) Chlorine bleach 1:10 parts water dilution (discard bleach after 24 hours).

2) Stat#3

3. Hepatitis B Vaccine

A) All employees identified as having potential occupational exposure will be offered the vaccine free of charge. The vaccine will be offered within ten days of initial assignment, unless the employee has already had the vaccine or antibody testing shows sufficient immunity.

B) Employees who don't want the vaccine must sign a declination statement. Employees who decline the vaccine can change their minds and have the vaccine provided at no cost, at any time.

C) Administration of vaccines will be done according to the protocols.

4. Post Exposure Evaluation and Follow-up

When an employee has an exposure he/she is responsible to report to a supervisor and school nurse immediately.

A) All employees who have an exposure will be offered post exposure evaluation and follow up. This will include:

- 1) Documentation of route of exposure and circumstances of incident.
- 2) Documentation of source individual and his/her HIV/HBV status if known. We will try to get permission to test the source individual's blood for HIV/HBV.
- 3) The exposed employee being offered emergency room services that include post exposure treatment by the latest U.S. Public Health Service Recommendations,
- 4) The exposed employee being offered testing for HBV/HIV. The blood sample will be saved for 90 days to allow the employee to decide if he/she wants it to be tested for HIV. If the employee decides during that period, the blood sample can be dealt with appropriately.
- 5) The exposed employee being given counseling, as necessary, regarding precautions to take during the Period after the exposure incident and Potential illnesses for which to be alert.
- 6) Making the results available to the exposed employee if the source individual is tested. The employee must obey all confidentiality requirements.
- 7) The superintendent, assuming that this policy will be effectively carried out.

B) Interaction with health care professionals

The Madison Area Health Center physicians will evaluate employees for us. We will obtain a written evaluation post care. This will include:

- 1) Determining whether hepatitis immunization is necessary.
- 2) The employee being informed of the results of the evaluation.
- 3) The employee being told about medical conditions resulting from exposure (the report to their employer will not contain personal medical information).

4) Documentation of the treatment given by the medical care providers. The report will be obtained by the school nurse and kept in the employee's record.

5) The school nurse making sure that the forms agreed to be used by local physicians and hospitals, meet CSHA requirements.

5. Training

Employees will be trained before assignments to tasks where occupational exposure may occur. The employee's immediate supervisor will coordinate training with the school nurse. The training will include:

- 1) an explanation of the standard for bloodborne pathogens
- 2) epidemiology and symptoms of bloodborne diseases
- 3) how bloodborne pathogens are transmitted
- 4) an explanation of the Exposure Control Plan
- 5) acts which could cause exposure to blood or OPIM
- 6) control methods used at the school
- 7) a list of personal protective equipment available and who to contact about obtaining supplies
- 8) post exposure evaluation and follow-up
- 9) signs and labels used in the school
- 10) the hepatitis B vaccine program at the school

6. Record Keeping

The Superintendent will keep records required by the standard. Medical records will be maintained for the duration of employment plus an additional 30 years. Training records will be kept for 3 years.

Should an employee seek employment elsewhere, he/she will be responsible for obtaining their own training records from the Superintendent's Office.

7. Supervision

The immediate Supervisor of the employee is responsible for monitoring adherence to the plan. Disciplinary action will be taken as per board policy.

8. Amendments

Revise/change as required by Federal & State Regulations.

Policy Adopted: 6/9/93