

Maine School Administrative District No. 42

Policy: **EXPOSURE CONTROL PLAN FOR BLOODBORNE PATHOGENS** GBGAA-R

In the interest of protecting employee health and safety, M.S.A.D. #42 hereby adopts the Occupational Safety and Health Administration's 29 CFR Part 1910.1030, "Occupational Exposure to Bloodborne Pathogens; Final Rule" as part of its safety program.

The Superintendent/designee shall comply with Federal Occupational Safety and Health Administration (OSHA) Standard (Title 29, Part 1910.1030) to prevent the spread of bloodborne pathogens and other potentially infectious materials in the workplace. The Superintendent/designee shall develop a written Exposure Control Plan designed to protect employees from possible infection caused by contact with bloodborne pathogens as a result of performing job duties. The bloodborne pathogens include but are not limited to human immunodeficiency virus (HIV) and hepatitis B virus (HBV).

As part of the Exposure Control Plan, the Superintendent/designee shall determine which employees could reasonably be expected to have exposure to bloodborne pathogens and other potentially infectious materials contaminated with blood as a result of performance of job duties. Employees determined to have occupational exposure shall participate in in-service education during their work hours and be offered hepatitis B vaccine at no cost.

Any employee not identified as having risk for occupational exposure in the school unit's exposure determination may petition to be included in the in-service education and/or hepatitis B vaccination program. Any such petition shall be submitted to the Superintendent/designee who will evaluate the request and notify the petitioner of the decision.

The Superintendent/designee may deny a request when there is no reasonable anticipation of contact with blood or contaminated materials as a result of job duties except when acting as a Good Samaritan in giving first aid.

If an employee is exposed to the blood or other potentially infectious material contaminated with blood of another person as a result of performing his/her job duties, the Superintendent/designee shall, as part of the Exposure Control Plan, put in place a system for immediate reporting of the exposure incident by an employee. Within 24 hours of the report, the employee will seek medical attention by a licensed health care provider or agency for which the school unit will provide payment at no cost to the employee. In addition, the school unit will pay for a confidential medical evaluation and follow-up by a licensed health care provider or agency at no cost to the employee. Medical records will be maintained by the school unit for thirty years after the employment of those employees who report exposure to bloodborne pathogens as a result of performance of job duties. Further, the medical records will be stored in compliance with federal, state and local laws regarding privacy

and confidentiality of all medical records and any additional legal protection for information related to HIV infection and AIDS. Records of participation in in-service programs provided by the school unit for employees will be compiled and maintained for three years.

I. PURPOSE

In accordance with the OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030, the following exposure control plan has been developed.

II. SCOPE

This plan is to cover all M.S.A.D. #42 employees who could be “reasonably anticipated,” as the result of performing their job duties, to be exposed to blood and other potentially infectious materials.

Infectious materials include semen, vaginal secretions, cerebrospinal fluid, pleural fluid, pericardial fluid, amniotic fluid, saliva in dental procedures, and body fluid visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. They also include any unfixed tissue or organ other than intact skin from a human (living or dead) and human immunodeficiency virus (HIV) containing culture medium or other solutions as well as blood, organs or other tissues from experimental animals infected with HIV or HBV.

III. EXPOSURE CONTROL PLAN

- A. Identify job classifications for M.S.A.D. #42 faculty, staff and administration where occupational exposure to blood occurs without regard to personal protective clothing or equipment.
- B. Identify tasks associated with the above classifications. Task defined: Any activity which involves the handling of or possibility of handling of blood or other potentially infectious materials as described above.

IV. EXPOSURE DETERMINATION

OSHA requires employers to perform an exposure determination identifying which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e., employees are considered to be exposed even if they wear personal protective equipment). This exposure determination is

required to list all job classifications in which all employees may be expected to incur such occupational exposure, regardless of frequency. Within this school unit, the following job classifications are in this category.

A. Classification I/Tasks and Procedures

1. **School Nurses**/First Aid, Care of the sick, Decontamination of the environment, Activities for Daily Living.

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur exposure to blood or other potentially infectious materials, tasks or procedures that would cause these employees to have occupational exposure are also required to be listed.

B. Classification II/Tasks and Procedures

1. **Principals**/First Aid, Care of the sick;
2. **Assistant Principals**/First Aid, Care of the sick;
3. **Bus Drivers**/First Aid, Care of the sick, Decontamination of the environment;
4. **Secretaries**/First Aid, Care of the sick;
5. **Self-contained Special Education Techs**/First Aid, Care of the sick, ADLs;
6. **Self-contained Special Ed Teachers**/First Aid, Care of the Sick, ADLs;
7. **Family and Consumer Science Teachers**/First Aid;
8. **Technology Ed Teachers**/First Aid;
9. **Physical Ed Teachers**/First Aid; and
10. **Custodians**/First Aid, Care of the sick, Decontamination of the environment.

V. EMPLOYEE AWARENESS

This plan will be accessible to M.S.A.D. #42 employees through the following means:

- A. Copies of the plan are to be posted in all school facilities where there are employees in the identified classifications.
- B. Copies of the plan will be sent to all administrative personnel for insertion into the policy book.

C. Training of employees will be done on a yearly basis.

VI. ANNUAL REVIEW AND UPDATE

At the end of each school year, the policy/plan is to be analyzed and updated. The review will be conducted by M.S.A.D. #42 health personnel, a representative from personnel, the Superintendent and the Occupational Safety and Health Team. The updated plan will be distributed to those indicated in the previous section.

VII. IMPLEMENTATION SCHEDULE AND METHODOLOGY

OSHA requires that this plan also include a schedule and method of implementation for the various requirements of the standard. The following complies with this requirement.

A. Compliance Methods

Universal precautions will be observed in this school unit to prevent contact with blood or other potentially infectious materials. “Universal Precautions” is an approach of infection control. The concept of universal precautions is that all human blood and body fluids are treated as if known to contain disease-causing germs (pathogens). It is not always possible to know when blood or body fluids are infectious; therefore, all body fluids shall be handled as if infectious. All employees shall routinely observe the following universal precautions to prevent and reduce spread of infectious disease.

B. Personal Protective Equipment

All personal protective equipment used in the school unit will be provided without cost to employees. Personal protective equipment will be considered appropriate only if it does not permit blood and other potentially infectious materials to pass through or reach the employee’s clothing, skin, eyes, mouth or other mucous membranes.

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious material, non-intact skin and mucous membranes. Gloves will be used for the following procedures: administering first aid, housekeeping tasks, nursing procedures (e.g., catheterization, suctioning, assisting an incontinent student, etc.). Gloves will be available from health/nurse’s offices and custodial areas.

Wear disposable waterproof gloves whenever you expect to come into direct contact with blood, other body fluids containing blood, or contaminated items and surfaces. This applies to incidents including, but not limited to, caring for nose bleeds or cuts, cleaning up spills, or handling clothing soiled by blood or body fluids containing blood. Do not reuse gloves. After each use, remove gloves without touching the outside and dispose of them in a lined waste container.

C. Engineering Controls

1. **Sharps containers**—located in appropriate health/nurse’s offices. These containers will be examined and maintained on a regular schedule. When sharps containers are full, the school nurse will be responsible for making arrangements to having them transported to a licensed biomedical waste facility. School nurses will inspect sharps containers with each use. Contaminated needles and other contaminated sharps will not be bent, recapped or removed.
2. **Hand washing facilities** are available to employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure. Within this school unit hand washing facilities are located in most bathrooms, in most custodial areas, in kitchen areas, in some classrooms and in the nurse’s triage room.

After removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area with soap and water immediately or as soon as feasible. All staff should routinely observe the following universal precautions to prevent and reduce spread of infectious disease:

- a. Wash hands and any other contacted skin surfaces thoroughly for 15 to 30 seconds with dispensable soap and warm running water, rinse under running water and dry thoroughly with disposable paper towel.
 - 1) Immediately after any accidental contact with blood, body fluids or drainage from wounds with soiled garments, objects or surfaces;

- 2) Immediately after removing gloves or other protective equipment or clothing;
- 3) Before assisting others with eating and drinking as well as eating or drinking yourself;
- 4) Before handling food, cleaning utensils or kitchen equipment; and
- 5) Before and after diapering and assisting with toileting, as well as toileting yourself.

When running water is not available, use antiseptic hand cleanser and clean towels or antiseptic towelettes and use soap and running water as soon as feasible.

- b. Clean surfaces and equipment contaminated with blood with soap and water and disinfect them promptly with a fresh germicide (ten parts water to one part bleach) or other disinfectant. While cleaning, wear disposable gloves and use disposable towels whenever possible. Rinse mops or other reusable items in the disinfectant and dry thoroughly.
- c. Properly dispose of contaminated material and label them as biohazards.
 - 1) Place blood, body fluids, gloves, bloody dressings and other materials soaked with blood into appropriately labeled plastic bags or lined waste container. Sharp disposable objects shall be disposed of in leak-proof, puncture-proof containers.
 - 2) Bag soiled towels and other laundry and send home.
 - 3) Dispose of urine, vomit, or feces in the sewer system.
- d. Do not care for others' injuries if you have any bleeding or oozing wounds or skin conditions yourself.
- e. Use a mouthpiece, resuscitation bag or other ventilation device when readily available when it is necessary to provide mouth-to-mouth resuscitation.

- f. Immediately report any incident of accidental exposure to blood or first-aid incident that involved direct contact with blood to the school nurse or administrative personnel on duty. If personnel is not available, seek immediate attention at the nearest Emergency Room and report as soon as possible.

D. Housekeeping/Decontamination of Environment

The following school facilities will be cleaned daily and after each body fluid spill: all bathrooms, all health/nurse's offices, all administrative areas, all daily use sink areas, and all water fountains.

Decontamination will be accomplished by utilizing the following materials:

A bleach solution of 1 part bleach to 10 parts water (1:10 mixed when needed and not allowed to stand longer than 24 hours) or a germicide.

All contaminated work surfaces will be decontaminated after completion of procedures, immediately after any spill of blood or other potentially infectious materials, and at the end of the work shift. All equipment (e.g., mops, brushes, dust pans) used in cleaning up potentially contaminated materials will be decontaminated immediately. All mops, brushes, bins, pails, cans and similar receptacles shall be inspected regularly and by custodians on a daily basis. Plastic bags in waste receptacles located in health/nurse's offices and all bathrooms will be changed daily.

Any broken glassware which may be contaminated will not be picked up directly with the hands. The following procedures will be used: brush and dustpan will be used to assist picking up contaminated glass. Potentially contaminated glass will be placed in a puncture-proof biohazard container.

Handle contaminated laundry in areas of use. Always use appropriate personal protective equipment when handling contaminated laundry. Before transporting, place contaminated laundry in leak-proof plastic bag and send home.

E. Hepatitis B Vaccine

All employees who have been identified as having occupational exposure to blood or other potentially infectious material (Classification I and II) will

be offered the Hepatitis B vaccine, at no cost to the employee, within 10 working days of their initial assignment. Employees must sign the Bloodborne Pathogen Mandatory Declination Statement indicating their consent, declination, or provide previous proof of vaccination. Employees who initially decline the vaccine but who later wish to have it may have the vaccine provided at no cost. The vaccine will be offered yearly if refused. Employees who consent to the vaccine will be given the Hepatitis B instruction sheet. It is the employee's responsibility to complete the series and notify the Personnel Department of vaccination dates. All vaccines will be provided under the supervision of a licensed physician.

Adopted: October 25, 2007

Revised: February, 28, 2018

Reviewed: