GBGAA-E - Bloodborne Pathogen Exposure Control Plan

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

Exposure Determination

OSHA requires employers to perform an exposure determination concerning 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. As a result, MSAD #35 has determined that all employees of the district may have the potential for exposure to blood or other potentially infectious materials.

Compliance Measures

Universal precautions (Appendix B) will be practiced in MSAD #35 in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at these facilities. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized. At these facilities the following engineering controls will be utilized:

1. All trash liners will be plastic;

2. Sharps containers will be kept in all nurse’s offices;

3. Contaminated surfaces or areas shall be decontaminated with an appropriate disinfectant immediately after contamination.

Handwashing facilities are also available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure. In this district handwashing facilities are located:

Restrooms, janitors' stations, locker rooms, kitchens, science labs, consumer science rooms, nurse's offices, teacher's rooms.

After removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.

If employees incur exposure to their skin or mucous membranes, then those areas shall be washed or flushed with water as appropriate as soon as feasible following contact.

Needles

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared, or purposely broken. Contaminated sharps are to be placed immediately, or as soon as possible after use into appropriate sharps containers. In this district, the sharps containers are puncture resistant and labeled with a biohazard label.

Personal Protective Equipment

All personal protective equipment used at these facilities will be provided without cost to the employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

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:

- First aid
- Cleaning of bodily fluid spills
- General cleaning

Disposal gloves at these facilities are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, spray, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated. Situations at the school which would require such protection are as

follows:

- N/A

This district will be cleaned and decontaminated according to the following schedule:

- Daily

Decontamination will be accomplished by utilizing the following materials:

- Rx 75 or other OSHA compliant disinfectant

All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or other potentially infectious materials, as well as the end of the work shift if the surface may have been contaminated since the last cleaning.

All bins, pails, cans, and similar receptacles shall be inspected and decontaminated on a regularly scheduled basis.

- Inspected daily and decontaminated as needed by custodians

Any broken glassware which may be contaminated will not be picked up directly with the hands. The following procedure will be used:

- Gloves, brush and dustpan and then decontamination

Regulated Waste Disposal

If a student's health need requires a sharps disposal unit, it will be located in the nurse's office. Regulated waste containers are located in: N/A

Hepatitis B Vaccine

All employees will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine will be offered within 10 working days of their initial assignment to work involving the potential for occupational exposure to blood or other potentially infectious materials unless the employee has previously had the vaccine or who wishes to submit to antibody testing which shows the employee to have sufficient immunity.

Employees who are offered the Hepatitis B vaccine will sign a Consent/Decline statement after reading information regarding Hepatitis B and Hepatitis B vaccine.

Employees who initially decline the vaccine but who later wish to receive it may then have the vaccine provided at no cost.

Post Exposure Evaluation and Follow-Up

Exposure incident includes a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

When the employee incurs an exposure incident, it should be reported to the school nurse.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard.

This follow-up will include the following:

Documentation of the route of exposure and the circumstances related to the incident

If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity.

The employee will be offered the option of having their blood collected for testing of the employee's HIV/HBV serologic status.

The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service.

The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.

The following persons have been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to this policy: School Nurses and Superintendent's Office

Interaction With Healthcare Professionals

A written opinion shall be obtained from the healthcare professional who evaluates employees at this school. Written opinions will be obtained in the following instances:

1. When an employee is sent to receive the Hepatitis B vaccine;

2. Whenever an employee is sent to a health care professional following an exposure incident

Health care professionals shall be instructed to limit their opinions to:

1. Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident

2. That the employee has been informed of the results of the evaluation

3. That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials

Training

Training for all employees will be conducted prior to initial assignment to tasks where occupational exposure may occur.

Training for employees will include the following:

- The OSHA standard for Bloodborne Pathogens
- Epidemiology and symptomatology of bloodborne diseases
- Modes of transmission of bloodborne diseases
- Procedures which might cause exposure to blood or other potentially infectious materials in this district
- Control methods which will be used at the schools to control exposure to blood or other potentially infectious materials
- Personal protective equipment available at the schools
- Post exposure evaluation and follow-up
- Hepatitis B vaccine program in the District

Record Keeping

All records required by the OSHA standard will be maintained at the Superintendent’s office.

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