

M.S.A.D. #12 POLICY

BLOOD-BORNE PATHOGENS EXPOSURE CONTROL PLAN

In accordance with the OSHA Blood-borne Pathogens 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. This exposure determination is made without regard to the use of personal 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. At M.S.A.D. #12 facilities the following job classifications are in this category:

JOB CLASSIFICATIONS

Principal
Teacher
Teacher Aides
Tutors
Bus Drivers
Cooks
School Secretary
Custodians
Athletic Coaches
Nurse

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all 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 in order to clearly understand which employees in these categories and associated tasks for these categories are as follows:

JOB CLASSIFICATION TASKS/PROCEDURES

Principal-Treatment of Injuries
Teacher-Treatment of Injuries
Teacher Aides-Treatment of Injuries
Tutors-Treatment of Injuries
Bus Drivers-Treatment of Injuries
Cooks-Treatment of Injuries
School Secretary-Treatment of Injuries
Custodians-Cleaning Body Spills
Athletic Coaches-Treatment of Injuries

Nurse-Treatment of Injuries

Any employee not included on this list who feels they are at risk may receive the HB vaccine with a document concern.

2. IMPLEMENTATION SCHEDULE AND METHODS

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 approved tuberculoidal agent.
3. All employees will wash hands after contact with blood or OPIM even if they were wearing gloves.
4. Students who bloody their clothing will change into clean clothes. The bloody clothing will be bagged and sent home.
5. Contaminated broken glass or other materials will not be picked up with the hands. It will be swept up or picked up by mechanical means.
6. Students will not be permitted to do blood testing in class.
7. All blood soaked materials will be bagged and appropriately disposed of.
8. Teachers and technicians will notify the Principal when a body fluid spill occurs, even when the teacher or technician feel they have the necessary training and materials to deal with the spill.

C. Work area restrictions

Employees will not, except as they desire in extreme emergencies, knowingly expose themselves to possible blood-borne pathogens without personal protective equipment.

D. Contaminated equipment

Contaminated equipment will be decontaminated, if feasible. If not, it will be sent out for decontamination or disposal.

E. Personal Protective Equipment

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

1. Each covered employee will be given two pairs of latex gloves. He/she will always have one pair readily available while at work. Gloves which have been contaminated will be removed and appropriately disposed of.
2. Utility gloves can be washed and reused if they are intact.
3. Replacement gloves can be obtained at the Principal's Office.

F. The following materials will be used for decontamination:

1. Bleach solution-1 part bleach to 10 parts water (NOT TO BE USED ON CARPETS)
2. Approved germicide.
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 waiver. Employees who decline the vaccine can change their minds and have the vaccine provided at no cost.

4. POST EXPOSURE EVALUATION AND FOLLOW-UP

A. When an employee has an exposure, it should be reported to the Principal and the Superintendent.

B. All employees who have an exposure will be offered post exposure evaluation and follow-up. The follow-up will include:

1. Documentation of the route of exposure and the circumstances of the incident.
2. Documentation of the source individual and his/her HIV/HBV status, if known. The employer will try to get permission to test the source individual's blood for HIV/HBV.
3. If the source individual is tested, the employer will make the results available to the exposed employee. The employee must obey all confidentiality requirements.
4. The exposed employee will be offered testing for HIB/HBV. The blood sample will be saved for 90 days to allow the employee if he/she wants to be tested for HIV. If the employee decides during that period, the blood sample can be dealt with appropriately.
5. The exposed employee will be offered post exposure treatment by the latest US Public Health Service recommendations.
6. The exposed employee will be given counseling regarding precautions to take during the period after the exposure incident and potential illnesses to be alert for. The employee will be asked to report related experiences to appropriate personnel.
7. The Principal will see to it that this policy will be effectively carried out.

5. INTERACTION WITH HEALTH CARE PROFESSIONALS

A. A health care professional will evaluate employees for the employer. The employer will get written evaluation when:

1. An employee is sent for Hepatitis B Shots; or,
2. An employee is sent to a health care professional after an exposure.

B. Health care professionals will limit their reports to the employer to:

1. Whether the Hepatitis vaccine should be given and if the employee has received the vaccine;
2. If after an exposure, that the employee has been informed of the results of the evaluations; and,
3. The employee has been told about medical conditions resulting from exposure. (The report to the employer will not contain personal medical information.)

C. Training

Employees will be trained before assignment to tasks where occupational exposure may occur.

The training must include:

1. An explanation of the standard for blood-borne pathogens;
2. The epidemiology and symptoms of blood-borne disease;
3. How blood-borne 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. Personal protective equipment available and who to contact about:
 - a. post exposure evaluations and follow-up;
 - b. signs and labels used in the school; and,
 - c. the Hepatitis B vaccine program at the school.

D. Record Keeping

1. The Superintendent will keep all records required by the standard.
2. The Superintendent will coordinate the training of staff.
3. Staff will receive an annual refresher training.

Adopted: November 12, 2002

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