

## **BOARD AGENDA ITEM**

**January 24, 2023**

### ***SUBJECT:***

Update Bloodborne Pathogens Exposure Control Plan

### ***BACKGROUND INFORMATION:***

The purpose of the Bloodborne Pathogens Exposure Control Plan is to eliminate or minimize employee occupational exposure to blood or certain other body fluids, and to comply with the OSHA Blood borne Pathogens Standard, 1910.1030. The school district is required to determine which employees may be at greatest risk to incur occupational exposure to blood or other body fluids and to make available the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post exposure follow-up when an exposure incident occurs.

### ***ADMINISTRATIVE CONSIDERATION:***

The proposed change updates which employees are identified as at risk from those in select, limited positions to all employees. In addition, the responsibility for employee notification would be updated from school nurses to human resources during the onboarding process, and responsibility for administration of the vaccine would be updated from school nurses to a contracted occupational health facility. These proposed changes are in line with commonly accepted best practices across the state.

### ***RECOMMENDATION:***

Approve updates to Bloodborne Pathogens Exposure Control Plan

### ***ATTACHMENTS:***

Bloodborne Pathogens Exposure Control Plan

### ***PREPARED BY:***

Jennifer Hart  
Dr. Corey Murphy  
Monica Mazzell

# BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN AIKEN COUNTY PUBLIC SCHOOL DISTRICT

## A. PURPOSE

The purpose of this exposure control plan is to:

- Eliminate or minimize employee occupational exposure to blood or certain other body fluids.
- Comply with the OSHA Blood borne Pathogens Standard, 1910.1030.

## B. EXPOSURE CLASSIFICATION DETERMINATION

The school district is required to perform an exposure determination concerning which employees may be at greatest risk to incur occupational exposure to blood or other body fluids. 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). Aiken County Public Schools has determined that all employees working in schools or the transportation department may be expected to incur occupational exposure. ~~the following job classifications may be expected to incur such occupational exposure, regardless of frequency:~~

~~Designated CPR and/or First Aid Responders  
Nurses/Designated Health Room Assistants  
Physical Education Teachers/Assistants  
Special Education Teachers/Assistants  
Coaches  
Custodians/Student Custodians/ Plumbers  
Bus Drivers/Monitors for students with mandated transportation requirements in the IEP or 504 Accommodation.~~

~~—Additionally, some employees in the following job classifications may have occupational exposure to blood or other body fluids.~~

<del>JOB CLASSIFICATION</del>	<del>TASK/PROCEDURE</del>
<del>Clerical Staff</del>	<del>CPR/First Aid Provider</del>
<del>Principal/Assistant Principal</del>	<del>CPR/First Aid Provider/Crisis Intervention</del>
<del>School Resource Officer</del>	<del>School Safety</del>

## C. IMPLEMENTATION SCHEDULE AND METHODOLOGY

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

## 1. COMPLIANCE METHODS

**Universal precautions**, a method of infection control in which human blood and other potentially infectious body fluids are treated as if known to be infectious regardless of the perceived status of the source individual, will be observed by all school employees.

**Engineering and work practice controls** will be utilized to eliminate or minimize exposure to employees. Where occupational exposure remains after institution of these controls, personal protective equipment will also be utilized such as: gloves, sharps containers, medical safety devices on needles, EPA approved disinfectant, and small waste generator license. The following responsibility for maintaining the above controls are as follows:

Gloves	Principal/Designee
Sharps Containers	School Nurse
Medical Safety Devices	School Nurse
EPA approved Disinfectant	Principal/Designee
Small Waste Generator License	Principal/Designee

**Hand Washing** facilities with tepid water will be made 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. If hand washing facilities are not feasible, the building administrator is required to provide either an antiseptic cleanser in conjunction with paper towels or antiseptic towelettes. If these alternatives are used then the hands are to be washed with soap and running water as soon as feasible.

## 2. NEEDLES

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared, or purposely broken. Only the needle/syringe with the medical safety device will be purchased by the school district to be used by the school nurse. When the school nurse is required to administer injections with syringes sent from home, document on the medication administration form that the needles are sent from home.

## 3. SHARPS/BIOHAZARD CONTAINERS

All sharps containers are puncture resistant labeled with a biohazard label and are leak proof. All instruments or materials which have points or sharp edges capable of puncturing or cutting the skin, are to be placed immediately or as soon as feasible in the sharps container.

Location of Container	Person Who Removes Sharps	Frequency of Container Removal
Health Room	School Nurse	When Full Line is Reached

Minimally contaminated items used for minor first aid will be handled with universal precautions as if they are infectious waste. Contaminated items will be contained in plastic lined containers, closed, and disposed of with daily trash in a larger, heavy-duty plastic bag of sufficient strength to preclude bursting and tearing during handling, storage, or transport. Items that are saturated to the point that liquid can be squeezed out should be first placed in a red biohazard labeled bag that is closed and then placed in a plastic lined container that will be disposed of with the daily trash in a larger, heavy-duty plastic bag.

#### **4. WORK AREA RESTRICTIONS**

In work areas where there is reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages may not be kept in the area where blood or other body fluids may be present. This applies to all health rooms.

All procedures involving the potential exposure to blood or other body fluids will be minimized by the techniques used and by performing all health care procedures in a way that minimizes splashing, spraying, and splattering.

#### **5. CONTAMINATED EQUIPMENT**

The building administrator or the designee is responsible for ensuring that equipment which has become contaminated with blood or other potentially infectious materials shall be examined and decontaminated as necessary unless the decontamination is not feasible. Equipment not decontaminated will be tagged with biohazard label.

#### **6. PERSONAL PROTECTIVE EQUIPMENT (PPE)**

##### **Provision**

The building administrator will ensure that personal protective equipment is provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. Only equipment that does not permit blood or other potentially infectious materials to pass through or reach the clothing, eyes, mouth, skin, or mucous membranes of the employee under normal conditions of use and for the duration of time which the protective equipment will be used.

Protective equipment includes access to latex-free gloves for all employees exposed to blood or body fluids and disposable pocket mask with one-way valve for use by all personnel CPR responders.

**Latex-Free** gloves will be worn when it is reasonably anticipated that the employee will have contact with blood, other potentially infectious body fluids, non-intact skin, and mucous membranes; and when handling or touching contaminated items or surfaces. Disposable gloves will 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 may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibits other signs of deterioration or when their ability to function as a barrier is compromised.

### **Additional Protection**

#### **Eye protection devices**

School nurses will wear eye goggles whenever splashes, splatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be expected. Other personal protective equipment is generally not required in the school setting but will be made available for individual cases as determined necessary by the school nurse or designee

#### **Accessibility**

The principal will ensure that the appropriate PPE in the appropriate sizes is readily accessible at the school or is issued without cost to employees. Hypoallergenic gloves, glove liners, powder less gloves, or other similar alternatives will be readily accessible to those employees who are allergic to the gloves normally provided.

#### **Cleaning, Laundering and Disposal**

All personal PPE will be made available at no cost to the employee, including the repair, replacement and disposal of PPE. All clothing which is contaminated with blood or other potentially infectious body fluids will be removed immediately or as soon as feasible.

## **7. HOUSEKEEPING**

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

<b>Area</b>	<b>Schedule</b>	<b>Solution</b>
Health Rooms	Daily	EPA Approved Disinfectant
Bathrooms	Daily	EPA Approved 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 body fluid; as well as at the end of the school day if the surface becomes contaminated since the last cleaning. Material used for decontamination is an EPA approved tuberculocidal, viricidal cleaner.

All housekeeping bins, pails, cans, waste containers, and cleaning equipment will be inspected and decontaminated on a regular basis as necessary by the user. The building custodial supervisor or designee is responsible for weekly monitoring of this equipment to ensure compliance.

Broken glass which may be contaminated with blood or body fluids will be picked up using dustpans and hand brooms to avoid personal contact.

## **8. REGULATED WASTE DISPOSAL**

Aiken County Public Schools are individually registered as a small waste generator. A waste generator number is provided through SC DHEC. This registration must be renewed every three (3) years. Infectious waste will be disposed in accordance with the SCDHEC Infectious Waste Management Regulations R-61-105.

### **Sharps**

Contaminated sharps will be discarded immediately or as soon as feasible in containers that are OSHA approved and are rigid, puncture-resistant, leak proof on sides and bottom, and labeled or color-coded. Reusable containers are not to be used.

During use, containers for contaminated sharps are easily accessible to personnel and located close to the immediate use area(s). The containers are maintained upright and replaced as necessary to avoid overfilling.

When the container is ready for disposal, the school nurse will disinfect the contents using an EPA registered chemical disinfectant that is effective against Blood-borne Pathogens (Human Immunodeficiency Virus (HIV), Hepatitis B, and Hepatitis C), poured into the sharps container. The sharps in the container should be immersed in the solution for the time period recommended by the manufacturer. The container should then be carefully drained, sealed, indelibly labeled with the word "Treated" and the date treated. Upon completion of the treatment the sharps container may be disposed of as any other waste not subject to other state or federal regulation. The nurse will record on the Infectious Waste Disposal Log the method used to disinfect

the contents, the date disinfected, and the weight of the container prior to adding the disinfectant solution.

### **Other Waste**

Items contaminated with blood (but not saturated) or other potentially infectious body fluids will be double bagged and disposed of as other solid waste.

### **Laundry Procedures**

Laundry contaminated with blood and other potentially infectious body fluids will be handled as little as possible, using standard precautions and protective gloves.

Soiled laundry will be washed on-site in hot water, with detergent and disinfectant solution, and dried in a dryer on the "hot" setting.

In the case of clothing with recommendations for care prohibiting the use of hot water or a hot dryer, using a laundry chemical suitable for low-temperature washing at the proper concentration will provide decontamination of the laundry items.

If a school sends contaminated laundry off-site to a second facility which does not utilize Universal Precautions in the handling of laundry, contaminated laundry must be placed in red bags or containers which are labeled or color-coded.

Students' personal clothing items replaced because they are soiled with urine, feces, vomit, etc., will be handled with standard precautions, individually bagged, and sent home with the student for home care. Soiled items that are visibly contaminated with blood or other potentially infectious body fluids will be handled with precaution and sealed in a heavy-duty plastic bag with biohazard label before being sent with the student for home care.

## **9. HEPATITIS B VACCINE/ POST EXPOSURE EVALUTION/ FOLLOW-UP**

The school district will make available the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post exposure follow-up when an exposure incident occurs.

The ~~health services department~~ school district will ensure that all medical evaluations and procedures including Hepatitis B vaccine and vaccination series and post exposure follow-up, including prophylaxis are:

- Made available at no cost to the employee;
- Made available to the employee at a reasonable time and place;
- Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and
- Provided according to the recommendations of the U.S. Public Health Service.

All laboratory tests shall be conducted by an accredited laboratory at no cost to the employee. The cost for the post exposure evaluation and follow-up is the responsibility of the school district and is not covered by Workers' Compensation.

### **Hepatitis B Vaccine**

As authorized by the superintendent and approved by the School Board, ~~the Aiken County Public School District will be in charge of~~ the Hepatitis B vaccination program will be provided through UHS Occupational Health.

The Hepatitis B vaccination will be made available after the employee has received the training in occupational exposure and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete Hepatitis B series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

Employees will be required to accept or decline Hepatitis B vaccination within 10 working days of employment. If the employee refuses the Hepatitis B vaccination they must sign a waiver documenting their refusal and that they understand the significance of the action.

If the employee initially declines Hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, the vaccination will be made available.

The Hepatitis B series will also be offered to employees in conjunction with post-exposure evaluation follow-up due to an occupational incident involving blood or other potentially infectious body fluids. Post-vaccination testing (blood titer) is not offered.

### **Post Exposure Evaluation and Follow-Up**

The OSHA Standard defines "exposure incident" as "specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious body fluid that results from the performance of an employee's duties."

All exposure incidents will be reported, investigated, and documented. When the employee incurs an exposure incident, it will be reported to the school nurse supervisor immediately or as soon as feasible.

Following a report of an exposure incident, the exposed employee shall immediately receive a confidential medical evaluation and follow-up, including at least the following elements:

- Documentation of the route of exposure, and the circumstances under which the exposure incident occurred;



- Identification and documentation of the source individual, unless it can be established that identification is infeasible or prohibited by state or local law.
- The source individual's blood will be tested as soon as feasible and after consent is obtained in order to determine HBV or HIV infectivity. If consent is not obtained, the school nurse supervisor will establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source's blood, if available, will be tested and the results documented.
- When the source is already known to be infected with HBV or HIV, testing the source for HBV or HIV will not be repeated.
- Results of the source's blood test will be made available to the exposed employee, and the employee will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

Collection and testing of blood for HBV and HIV serological status will comply with the following:

- The exposed employee's blood will be collected as soon as feasible and tested after consent is obtained;
- The employee will be offered the option of having their blood collected for testing for HBV/HIV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological status.

All employees who may have had an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard. All post exposure follow-up will be performed by a physician contracted by the school district.

### **Information Provided to the Healthcare Professional**

The school nurse supervisor will ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided with the following:

- A copy of OSHA standard 1910.1030.
- A written description of the exposed employee's duties as they relate to the exposure incident.
- Written documentation of the route of exposure and circumstances under which the exposure occurred;
- Results of the source individual's blood testing, if applicable.
- All medical records relevant to the appropriate treatment of the employee including vaccination status.

### **Healthcare Professionals Written Opinion**

The school nurse supervisor will obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation. The written opinion for HBV vaccination and post exposure follow up must be limited to:

- Whether HBV vaccination is indicated for an employee, and if the employee has received such vaccination.
- A statement that the employee has been informed of the results of the evaluation of the post exposure follow up; and
- A statement that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
- **Note:** All other findings or diagnosis shall remain confidential and shall not be included in the written report.

### **Labels and Signs**

The school nurse or principal designee will ensure that biohazard labels shall be affixed to containers of regulated waste.

The universal biohazard symbol will be used. The label will be fluorescent orange or orange-red.

### **Information and Training**

The principal and/or designee will make sure that training is provided at the time of initial assignment to tasks where occupational exposure may occur, and that it will be repeated with 12 months of the previous training. The training will be tailored to the educational and language level of the employee and offered during the normal workday. The training will address the components listed in the Federal Requirements. The trainer will allow time for interactive participation with questions and answers. The training will cover the following:

- A copy of the standard and an explanation of the contents;
- A discussion of the epidemiology and symptoms of bloodborne diseases;
- An explanation of the modes of transmission of bloodborne pathogens;
- An explanation of the Aiken County School District Bloodborne Pathogen Exposure Control Plan, and how to obtain a copy.
- The recognition of tasks that may involve exposure.
- An explanation of the use and limitations of methods to reduce exposure, for example engineering controls, work practices and personal protective equipment (PPE).
- Information on the types, use, location, removal, handling, decontamination, and disposal of PPEs.
- Information on the Hepatitis B vaccination, including efficacy, safety, method of administration, benefits, and that it will be offered free of charge.
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow-up.
- Information on the evaluation and follow-up required after an employee exposure incident.

- An explanation of the signs, labels, and color coding systems.
- The person conducting the training will be knowledgeable in the subject matter.

~~All employees working in a job classification identified by the Board that may affect the employees' occupational exposure regardless of frequency will receive an annual review.~~

~~Additional training shall be provided to employees when there are any changes of tasks or procedures affecting the employee's occupational exposure.~~

## **RECORDKEEPING**

### **Medical Records**

The school nurse supervisor is responsible for maintaining medical records exposure incidents. These records will be kept at the district office. Medical records will be maintained in accordance with OSHA Standard 1910.1020. These records will be kept confidential and must be maintained at least the duration of employment plus 30 years. The records will include the following:

- The name and social security number of the employee
- A copy of the employee's HBV vaccination status, including the dates of vaccination.
- A copy of all results of examinations, medical testing, and follow-up procedures.
- A copy of the information provided to the healthcare professional, including a description of the employee's duties as they relate to the exposure incident, and documentation of the routes of exposure and circumstances of the exposure.

### **Log of Needle Sticks**

School Nurse Supervisor is responsible for establishing a log and tracking needle sticks. This log will be kept at the District's Administrative Offices.

## **TRAINING RECORDS**

~~School Nurse Supervisor~~ Human Resources is responsible for maintaining the following training records. These records will be kept at the District's Administrative Offices. Training records will be maintained for three years from the date of training. The following information shall be documented:

- The dates of the training sessions
- An outline describing the material presented
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions.

**Availability**

All employee records shall be made available to the employee in accordance with CFR 1910.1020.

All employee records shall be made available to the Assistant Secretary of Labor for the Occupational Safety and Health Administration and the Director of the National Institute for Occupational Safety and Health (NIOSH) upon request.

**EVALUATION AND REVIEW**

The OSHA-BBP Exposure Control Plan will be reviewed at least on an annual basis and updated when necessary by the Superintendent or his/her designee. The Exposure Control Plan was first implemented in September 1992 and will be revised as mandated by changes. All provisions required by CFR 1910.1020 will be implemented immediately when revised.