

NORTH PROVIDENCE SCHOOL DEPARTMENT BLOODBORNE PATHOGENS PROTOCOL

EXPOSURE CONTROL PLAN

The North Providence School Department is committed to providing a safe work environment for our entire staff. In pursuit of this goal, the following exposure control plan (“ECP”) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030.

This ECP includes:

- ***Determination of employee exposure***
- ***Implementation of various methods of exposure control, including***
 - ***Universal precautions***
 - ***Engineering and work practice controls***
 - ***Personal protective equipment***
 - ***Housekeeping***
- ***Hepatitis B vaccination***
- ***Post-exposure evaluation and follow-up***
- ***Communication of hazards to employees and training***
- ***Recordkeeping***
- ***Procedures for evaluating circumstances surrounding exposure incidents.***

Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

EMPLOYEE EXPOSURE DETERMINATION

This section of the policy is designed to place all employees of the NPSD in a category describing their level of expected risk of exposure to bloodborne pathogens. Job classification lists will be maintained by administration.

Category I: Staff who are likely to have contact with blood or body fluids, based on the nature of their position.

1. SCHOOL NURSE TEACHERS (whose job is to assist and treat injured students)
2. CUSTODIAL STAFF (whose job is to clean up after injured or sick students)
3. SELF-CONTAINED SPECIAL EDUCATION TEACHERS (whose job involves supporting daily living activities such as, feeding and toileting)

Revised:

4. PARAPROFESSIONALS (whose job is to support all daily living activities, which includes feeding, toileting and hygiene)

Category II: Staff who may or may not have contact with blood or body fluids, given their position. While exposure could occur, "Good Samaritan" acts such as assisting a student with a nosebleed would not be considered occupational exposure.

1. ALL TEACHING STAFF
2. ALL SUPPORT STAFF
3. ALL CLERICAL STAFF
4. ALL ADMINISTRATIVE STAFF

METHODS OF IMPLEMENTATION AND CONTROL

IN GENERAL

UNIVERSAL PRECAUTIONS – Universal precautions can be defined as a method of infection control. It makes use of appropriate protective devices for contact with the blood or body fluids from all persons at all times. It considers every individual's blood and body fluids as potentially infectious. Body fluids include blood, drainage from scrapes and cuts, feces, urine, vomitus, semen, respiratory secretions, and saliva.

ENGINEERING CONTROLS – Engineering controls are those that remove the hazard of exposure or isolate the worker from the hazard of exposure.

SAFE WORK PRACTICE CONTROLS – These are methods which reduce the risk of occupational exposure during tasks that involve contact with blood and/or potentially infectious materials.

EXPOSURE CONTROL PRECAUTIONS INVOLVING ENGINEERING CONTROLS, UNIVERSAL PRECAUTIONS, AND SAFE WORK PRACTICES

1. ***All personnel will avoid all direct contact with blood and body fluids (drainage from cuts and wounds, semen, feces, urine, vomitus, respiratory secretions and saliva).***
2. All personnel must use one way valve emergency respiratory devices in resuscitation.
3. All personnel will wear protective gloves when coming in contact with blood and body fluids (including toileting and diapering).
4. All personnel will wash hands thoroughly with soap and water after removing gloves and flush with copious amounts of water and soap immediately after contact with blood and body fluids.
5. If exposure occurs outside the building or in an area where employee is unable to readily wash his/her hands (at a sporting event or field trip), a skin disinfectant should be used and can be found in first aid kits.
6. Disposable gloves and materials with blood or body fluids must be discarded in red biohazard bags located in closed containers located in the custodian's and nurse's office.

7. Place contaminated sharps and other potentially infectious waste in labeled or color-coded leak-proof puncture-resistant containers that are closable and easily accessible to nurses and custodians. These containers should not be allowed to overfill.
8. If clothing becomes contaminated, it should be placed in a red biohazard bag for proper cleaning.
9. When a spill occurs, the building administrator or custodian will limit access to areas of potential exposure with markers. The janitorial staff will be notified to immediately clean the area.
10. Any contaminated areas of the school will be washed immediately with a strong solution of bleach and water mixed on site (1 part bleach to 10 parts water) or the district approved antimicrobial/antiviral solution.
11. In cleaning up blood or body fluids appropriate protective personal equipment must be worn. For routine spills, rubber gloves and long handled scrub utensils must be used. For large and unusual spills it is advised to use face and eye protection and wear a sanitary suit.
12. All locker rooms, lavatories and nurses offices will be cleaned daily using disinfectant. Custodial staff are required to wear rubber gloves and use long handled scrubbing utensils.
13. All mops and cleaning tools are to be disinfected after the job is done.
14. Discard all biohazard red bag waste according to federal, state and local regulations. Such waste is only to be transported off school property by a licensed vendor.

PERSONAL PROTECTIVE EQUIPMENT

The North Providence School Department will provide, at no cost to the employee, appropriate barriers such as listed below, i.e., gloves, masks, containers. These protective barriers will be accessible to employees and be cleaned, repaired, and replaced as needed. Appropriate barriers shall be those which are impervious to blood and other potentially infectious substances (as per OSHA standards).

1. Gloves – Disposable non-latex rubber gloves will be located in the nurse's office, custodial areas and self-contained classrooms. Heavy duty rubber gloves will be located in the custodial areas.
2. One-way valves for respiratory resuscitation (CPR) will be located in the nurse's office.
3. All needle like contaminated objects ("sharps") will be deposited in red sharps disposal containers located in the nurse's office.
4. Plastic red biohazard bags, labels and closed biohazard containers for disposal of wastes containing blood and other body fluids will be located in the nurse's' office and custodial areas.
5. Eyewear and face shield dust mask will be located in the custodial areas.
6. Sanitary coveralls are available in the custodial areas and are to be worn in the presence of any blood or body fluids of significant quantity.

Revised:

7. Signs (cones with appropriate labels) to identify restricted areas will be available in custodial areas and building administrator's offices.
8. Approved skin disinfectant will be included in all First Aid kits located throughout the buildings.

HEPATITIS B VACCINE

All employees in Category I because they are "at risk" of occupational exposure to blood or potentially infected body fluids, will be offered free of charge the Hepatitis B vaccine at the time of employment. Additionally, all first aid providers who render assistance in any situation involving the presence of blood or other potentially infectious materials, regardless of whether or not a specific exposure incident occurs, must be offered the full immunization series as soon as possible, but in no event later than 24 hours. If an exposure incident has taken place, other post-exposure follow-up procedures must be initiated immediately.

1. All Category I employees are strongly urged to participate in this program.
2. A consent form will be signed if the employee decides to accept the vaccine. (see attached Appendix 1)
3. A statement of Declination per OSHA guidelines will be signed if the employee refuses the vaccine. (see Appendix 1 attached). If an employee declines and later opts to receive the vaccine this can be done at anytime and at no cost to the employee.
4. The vaccine will be available to employees who have occupational exposure to blood or potentially infected body fluids at anytime during their employment at no cost.
5. The vaccine requires that three doses of Recombivax will be given over a six month period and as outlined in the consent form. If a routine booster dose(s) of Hepatitis B vaccine is recommended by the USPHS at a future date, such dose(s) will be made available at no cost to the employee. Information about the vaccine is available in the school nurse's office.
6. A history of vaccination will be maintained on the "Hepatitis B Vaccination Documentation Form" (Appendix 2) by Human Resources.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, you must report the exposure. An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material. Exposed employees should follow the following confidential procedure:

1. Exposed individual will immediately obtain an incident report form from the building administrator/nurse.
2. Exposed individual will complete an incident report and submit it to the building administrator immediately.

The incident report shall include:

- A description of the employee's job duties as they relate to the exposure.
 - Documentation of the manner and circumstances of the exposure, and the immediate post-exposure treatment
 - Identification of the source individual
 - Identify use of personal protective equipment
3. The building administrator will request that the source individual report to the designated medical facility for HBV and HIV testing, if possible.
 4. The exposed individual should report, at no cost, to the designated facility for:
 - Consultation
 - Collection and testing of the employee's blood for baseline HBV and HIV (employee consent required)
 - Post-exposure prophylaxis as recommended by the U.S. Public Health Service, when medically needed
 - Counseling, if needed
 - Evaluation of reported illnesses

The building administrator should use the incident form to identify and remedy issues, to prevent recurrence of similar incidents.

A copy of vaccination status and dates of HBV vaccination or declination will be kept by personnel at central office.

MEDICAL RECORDS FOR EXPOSURE: Medical records are maintained for each employee who reports exposure. They are kept confidential, and retained for the duration of employment, plus 30 years.

Each record includes:

- ***Name and social security number of employee***
- ***Copy of vaccination status and dates of vaccinations or declination statement***
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If employee has an exposure, the record will also include:

- ***Incident report completed at time of exposure***
- ***Copy of health care professional's written opinion that the person can continue employment***

To maintain confidentiality, the tests and examination results from the exposure will be kept by the health care professional who evaluated the exposure.

EMPLOYEE TRAINING

IN-SERVICE EDUCATION - Training will be given to all employees, at no cost to the employee, by a knowledgeable individual. Training is mandated to occur within 90 days of the effective date of the policy and protocol, initially upon hiring new or substitute "at risk" personnel and annually for all "at risk" personnel. Bloodborne Pathogen Education will be done on an annual basis by the school nurse teacher.

Revised:

Training will include:

- ***A copy of the OSHA standard and this policy.***
- ***An overview of epidemiology of bloodborne diseases including modes of transmission and prevention. (Overview of Universal Precautions).***
- ***An explanation of our exposure control plan.***
- ***Explanation of activities that may involve exposure to blood and body fluid exposures, including what constitutes an exposure incident.***
- ***Descriptions of engineering and housekeeping practices, and demonstration on how to use personal protective equipment.***
- ***Information on Hepatitis B Vaccine.***
- ***Explanation of procedure to follow if an exposure incident to include reporting and medical follow-up that will be made available.***

Training records are completed for each employee upon completion of training. The training records include: the employee's name and job title, dates of the training session, summary of the training session, name and qualifications of the person conducting the training, and these records must be kept for three years by the personnel office at central office. Annual in-service records will be kept by the school nurse teacher. Trainings must be presented at an educational level and in a language that workers understand.

Revised: