

## C. Control of Blood-Borne Pathogens

### Bloodborne Pathogens Compliance Protocol

(Meets the requirements of Occupational Safety and Health Act 29 CFR 1910.1030)

In compliance with OSHA 29 CFR 1910.1030, Flushing Community Schools has established the following written guidelines to insure a standard of practice which will minimize or eliminate potential exposures to blood and other potentially infectious materials.

#### I. EXPOSURE CONTROL PLAN

- A. Bloodborne Exposure Incident is defined as follows: First aid provider (school employee) experiences splash of blood or bloody fluid into the eye, mouth, or nose, or exposure to blood or other potentially infectious material through broken skin, i.e. cut, puncture or human bite.

Provisions for post-exposure evaluation and follow-up are found in Article IV of this document.

#### B. Exposure Categories

1. Category A - Employees whose designated job assignment includes the rendering of first aid or who have occupational exposure to blood or other potentially infectious material on a regular basis. The following job categories in Flushing will be included in Category A:

Building Administrators  
 Elementary Building Secretaries  
 Elementary Teachers  
 Secondary Secretaries  
 School Nurses  
 Secondary Teachers of Industrial Arts, Physical Education,  
 & Science Lab  
 Coaches  
 Noon Hour Supervisors  
 Latch Key Workers  
 Pre-school Coordinator, Teachers, Teacher Assistants  
 Bus Drivers  
 Custodians  
 Computer Technicians  
 Psychologist  
 Social Workers  
 Speech/Language Therapists  
 School-Home Coordinators  
 Paraprofessional  
 Special Education, Kindergarten & Title I  
 Medical Emergency Response Team Members

2. Category B - Employees whose primary job assignment is not the rendering of first aid. Any first aid rendered by such person is rendered only as a collateral duty responding to injuries resulting from workplace I incidents. The following job categories in Flushing will be included in Category B:

Central Office Administrators  
 Central Office Administrative Secretaries  
 All Substitutes  
 Secondary Teachers, except those listed in Category A  
 Transportation Supervisor, Secretaries, Mechanics  
 Media Secretaries  
 Food Service Staff

C. Protocols for Categories A and B

Category A

1. The district shall make the hepatitis B vaccination series available to all employees who have occupational exposure after the employee(s) have been given information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated. The vaccine and vaccinations shall be offered free of charge.
2. The district shall make the hepatitis B vaccination series available after the informational meeting 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 vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.
3. The hepatitis B vaccination series shall be made available to the employee at a reasonable time and place, and performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional according to the most current recommendations of the U.S. Public Health Service. This district assures that the laboratory tests are then conducted by an accredited laboratory.
4. If an employee initially declines the hepatitis B vaccination series, but at a later date while still covered under the standard, decides to accept the vaccination, this district shall make available the hepatitis B vaccine at that time.
5. This district shall assure that employees who decline to accept the hepatitis B vaccine offered by this district sign a declination statement.
6. If routine booster dose(s) of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) shall be made available at no charge to the employee.
7. If hepatitis B vaccination does not produce antibodies, the district does not have to offer series of hepatitis B vaccination again.

8. Records regarding HBV vaccinations or declinations are to be kept by the personnel office.

#### Category B

1. The district shall provide the hepatitis B vaccine or vaccination series to those unvaccinated employees whose primary job assignment is not the rendering of first aid ONLY in the case that they render assistance in any situation involving the presence of blood or OPIM.
2. ALL first aid incidents involving the presence of blood or OPIM shall be reported to your school principal or supervisor.
3. The district's exposure incident investigation form must be used to report first aid incidents involving blood or OPIM. The incident description must include a determination of whether or not, in addition to the presence of blood or other potentially infected materials, an "exposure incident," as defined by the standard, occurred.
4. This determination is necessary in order to ensure that the proper post-exposure evaluation, prophylaxis and follow-up procedures are made available immediately if there has been an exposure incident as defined by the standard.
5. The full hepatitis B vaccination series shall be made available as soon as possible, but in no event later than 24 hours, to all unvaccinated first aid providers who have rendered assistance in any situation involving the presence of blood or other potentially infectious materials regardless of whether or not a specific "exposure incident", as defined by standard, has occurred.
6. The hepatitis B vaccination record or declination statement shall be completed. All other pertinent conditions shall be followed as written for those persons who receive the pre-exposure hepatitis B vaccine.

## II. EXPOSURE CONTROL METHODS (Risk Reduction)

- A. Universal Precautions: Recognizing that it is impossible to know whether or not a person is infected with a bloodborne pathogen, all employees will assume that blood or other potentially infectious materials from any person are infectious. Adherence to Universal Precautions is required of EVERY EMPLOYEE.

Universal Precautions in the Flushing School District include the following major elements:

1. Hand washing
  - a) The district shall provide hand-washing facilities which are readily accessible to employees, or when provision for hand washing facilities is not feasible, the district shall provide antiseptic towelettes.

- b) Employees shall wash hands or any other skin with soap and water, or flush mucous membranes with water immediately, or as soon as feasible, following contact of such body areas with blood or other potentially infectious materials.
- c) Employees shall wash their hands immediately or as soon as feasible after removal of gloves. When antiseptic hand cleaners or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

## 2. Engineering Controls

Sharps Management (Regulated Waste) i.e. X-acto blades, utility blades, blood-sampling device, etc.) - After use, all sharps are placed in designated containers (puncture resistant, biohazard-labeled, leak-proof) located in each building as designated by building principal. Contaminated needles shall not be bent, recapped, or purposely broken. The custodian shall be notified when sharps container is  $\frac{3}{4}$  full for disposal. Disposal will be in compliance with Michigan Medical Waste Rules.

## 3. Work Practices

- a) Personal Protective Equipment provided by the Flushing Community School District as follows:
  - 1) disposable gloves are to be used when blood contact is anticipated. Such gloves may not be washed or re-used.
  - 2) utility gloves to be used when blood contact is possible (e.g. "snaking" toilet). Such gloves may be washed and reused.
  - 3) Protective eye cover (goggles) and disposable gowns should be used when blood or OPIM contact is anticipated.
- b) Trash Handling - All trash is placed in plastic bags, tied at collection point and transported to disposal. Receptacles intended for reuse with a reasonable likelihood for becoming contaminated with blood or OPIM, shall be inspected and decontaminated on a regularly scheduled basis and as soon as feasible upon visible contamination.

## B. Housekeeping

- 1. The Flushing Community School District will assure that the facility is maintained in a clean and satisfactory condition.
- 2. "Blood Spill" Management
  - a) Put on gloves.
  - b) Remove organic material with multiple towels.
  - c) Spray with approved tuberculocidal disinfectant.
  - d) Wipe surface with paper towels.

- e) Discard paper towels and used gloves.
- f) Place in red Biohazard labeled bag and dispose of materials keeping in compliance with Michigan Medical Waste Rules.
- g) Wash hands with soap or towelettes.

### III. POST EXPOSURE EVALUATION AND FOLLOW-UP

If a Flushing School employee is involved in an exposure incident (as defined in Article I-A), in the performance of his/her duties, they shall have a post exposure evaluation and follow-up.

#### A. Immediate Steps

- 1. Administer first aid.
- 2. Complete and return "Incident Report" - Form II to the office of your immediate supervisor before the end of the workday. (Form II is available in each building.) Additionally, the employee is to call the office of Assistant Superintendent, Personnel, Labor Relations, and Operations (591-1184) within two (2) hours of the incident.

#### B. Medical Evaluation - The responsibility for evaluating the employee after an exposure incident is assigned to Genesys Occupational Health Network, 3021 S. Dort Hwy, (742-7700).

- 1. The employee will provide the "Incident Report" to the medical doctor.
- 2. Healthcare professional written opinion will be provided to the Personnel Office of Flushing School District within fifteen (15) days of the completion of the evaluation. This opinion will include:
  - a) Hepatitis B vaccine - demonstrated employee immunity, indication vaccine was offered and if vaccine was received/refused.
  - b) Employee has been informed of results of the evaluations.
  - c) Employee has been told about any medical condition resulting from exposure to blood or other potentially infectious materials, which require further evaluation or treatment.

### IV. MEDICAL RECORDKEEPING

All of the following records required by the OSHA Standard will be maintained in the Personnel Office of Flushing Schools in a separate medical record file in a confidential manner.

- A. Employee's "Incident Report Form".
- B. Post-exposure evaluations and document of written opinion to employee by healthcare professional.

- C. Hepatitis B inoculation records or waiver form.
- D. Training records.

V. COMMUNICATION PROCESSES TO EMPLOYEES

- A. Labels and Signs - Biohazard labels are affixed to "sharps" containers.
- B. Training
  - 1. Each employee of the Flushing Community School District will participate in a training program provided at no cost to the employee.
    - a) Must attend the Bloodborne Pathogen training session scheduled after initial employment.
    - b) Within 90 days of compliance protocol completion.
    - c) Annually thereafter.
  - 2. Training Contents
    - a) OSHA Standard (29 CFR 1910.1030) and the Flushing Community School District Compliance Regulations.
    - b) Presentation of bloodborne pathogen epidemiology, symptoms, modes of transmission and universal precautions by the following methods:
      - 1) Video entitled "Bloodborne Pathogens for School Employees."
      - 2) Pamphlet entitled, "Infectious Diseases in the School Setting".
    - c) Post-exposure evaluation and follow-up (Hepatitis B vaccine).
  - 3. Training records will be kept for three (3) years from the date when training occurred. Access to training records is allowed to the employee, employee representative, to the OSHA Director and Assistant Secretary. Information will include:
    - a) Date of training.
    - b) Names of employees attending (with signatures).
    - c) Names and qualifications of persons conducting the training.

## **BLOOD-BORNE PATHOGENS EXPOSURE CHECK LIST**

1. After administering first aid according to your training: using necessary protective equipment, (i.e. gloves, gown, goggles, mask), remove equipment and place contaminated items in red biohazard bag obtained from the clinic or from the custodian.
2. Wash hands and any area exposed to body fluids for at least 15 seconds with antibacterial soap and large amount of water. (Antibacterial soap is located in the clinics.) If eyes have been exposed to body fluids, do not put soap in eyes. However, flush eyes with large amounts of running water. If no water is available, use an antimicrobial hand wipe until you can reach soap and water.
3. Contact your building principal, or if unavailable, the Assistant Superintendent of Instructional Services immediately.
4. Any clothing contaminated with blood or other potentially infected material must be removed and placed in red biohazard bags. Wash any body parts exposed to potentially hazardous materials using antibacterial soap. Put on clean clothing, leaving the contaminated items in bags at the building site. Check with your building supervisor for procedure to follow with the bagged contaminated items.
5. Fill out exposure incident form located in the office.
6. Follow directions given by administration, building principal, or school nurse for follow-up care.