

PROCEDURE WSD412

WINOOSKI SCHOOL DISTRICT

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

1. The following job classifications include those where all employees may incur regular occupational exposure to blood or other potentially infectious materials.
 - Custodians
 - Nurses
 - Personnel who regularly work with students requiring personal care assistance or who are self-abusive or violent.
 - Personnel identified through training as back-up support for first aid purposes.

2. The following job classifications include those where some employees may incur occupational exposure to blood or other potentially infectious material:
 - Administrators
 - Teachers
 - Instructional Assistants
 - All other school district employees

3. **Compliance Method** - Universal precautions will be observed within this District 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 all employees. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized.

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.

4. **Needles** - Contaminated needles and other contaminate sharps will not be bent, recapped, removed, shared or purposely broken. VOSHA allows an exception to this if the procedure would require that the contaminated needle be recapped or removed and no alternative is feasible and the action is required by the medical procedure.
5. **Containers for Reusable Sharps** - Contaminated sharps that are reusable are to be placed immediately, or as soon as possible, after use into appropriate sharps containers. The sharps containers shall be puncture resistant, labeled with a biohazard label, and leak proof.
6. **Work Area Restrictions** - In work areas where there is a 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 are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter tops where blood or other potentially infectious materials are present.

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Mouth Pipetting/suctioning of blood or other potentially infectious materials is prohibited.

All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials. Methods that will be employed within this District to accomplish this goal are to confine nursing procedures to appropriate locations.

7. **Specimens** - Specimens of blood or other potentially infectious materials will be placed in a container that prevents leakage during the collection, handling, processing, storage, and transport of the specimens.

If outside contamination of the primary container occurs, the primary container that prevents leakage during the handling, processing, storage, transport, or shipping of the specimen.

8. **Contaminated Equipment** - Equipment that has been contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible.

9. **Personal Protection Equipment** - All personal protective equipment used in this District will be provided without cost to 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. Protective clothing will be provided to employees through requisition to department, director, or administrative unit leader.

All personal protective equipment will be cleaned, laundered, and disposed of by the employer at no cost to employees. All repairs and replacements will be made by the employer at no costs to employees.

All garments that are penetrated by blood shall be removed immediately or as soon as feasible. All personal protective equipment will be removed prior to leaving the work area.

The following protocol has been developed to facilitate leaving the equipment at the work area; appropriate storage and disposal facilitate will exist at each site.

10. **Regulated Waste Disposal** - All contaminated sharps shall be discharged as soon as feasible in sharps containers which are located in the facility. Sharps containers are located in the nurse's office.

Regulated waste other than sharps shall be placed in appropriate containers. Such containers are located in custodial storerooms.

11. **Laundry Procedures** - Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible.

Such laundry will be placed in appropriately marked bags at the location where it was used. Such laundry will not be sorted or rinsed in the area of use.

All employees who handle contaminated laundry will utilize personal protective equipment to prevent contact with blood or other potentially infectious materials. Laundry will be cleaned on the employer's premises and not sent home with employees for cleaning.

12. **Hepatitis Vaccine** - All employees who have been identified as having exposure to blood or other potentially infectious material 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 decline the Hepatitis B vaccine will sign a waiver consistent with the VOSHA Standard.

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

- 13. Post-Exposure Evaluation and Follow-Up** - When the employee incurs an exposure incident, it must be reported to the building administrator or supervisor prior to the end of the work shift.

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

This follow-up will include the following:

- a) Documentation of the route of exposure and the circumstances related to the incident.
 - b) 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.
 - c) Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
 - d) The employee will be offered the option of having his/her blood collected for testing of the employee's HIV/HBV 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. However, if the employee decided prior to that time that testing will or will not be conducted then the appropriate action can be taken and the blood sample discarded.
 - e) The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service. These recommendations are currently as follows:
Accidental percutaneous or permucosal exposure to HBsAG-positive will warrant prophylactic treatment to prevent Hepatitis B infection after exposure to HBV. Regimens including HB1G (two doses) will be offered; one after exposure and the other approximately one-month later.
 - f) The following person(s) has been designated to assure that the policy outline here is effectively carried out as well as to maintain records related to this policy: Superintendent of Schools and School Nurse
- 14. Interaction with Health Care Professionals** - A written opinion shall be obtained from the health care professionals who evaluate employees. Written opinions will be obtained in the following instances:

- a) When the employee is sent to obtain the Hepatitis B vaccine.
- b) Whenever the employee is sent to a health care professional following an exposure incident.

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

- a) Whether the Hepatitis B Vaccine is indicated or if the employee has received the vaccine,

- b) That the employee has been informed of the results of the evaluation, and, has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials.

15. **Training** - Training for all employees will be conducted prior to initial assignment to tasks where occupational exposure may occur. Training will be conducted in the following manner.

The Central Office will provide a videotape training session for new employees. School nurses will provide an annual refresher training to all other employees.

Training for employees will include an explanation of:

- a) The VOSHA Standard for Bloodborne Pathogens.
- b) Epidemiology and symptomatology of bloodborne diseases.
- c) Modes of transmission of bloodborne pathogens.
- d) This exposure Control Plan, i.e., points of the plan, lines of responsibility, how the plan will be implemented, etc.).
- e) Procedures that might cause exposure to blood or other potentially infectious materials in the District.
- f) Control methods that will be used in the District to control exposure to blood or other potentially infectious materials.
- g) Personal protective equipment available in this District and who should be contacted concerning.
- h) Post exposure evaluation and follow-up.
- i) Signs and labels used in the District.
- j) Hepatitis B vaccine program in the District.

16. **Record Keeping** - All records required by the VOSHA Standard will be maintained by the Superintendent's office.

17. **Dates** - All provisions required by the Standard will be implemented by May 1, 1993.

All employees will receive annual refresher training conducted by the District's nursing staff.

The outline for the training material is located at the Superintendent's office.