

MAINE SCHOOL ADMINISTRATIVE DISTRICT #33

Bloodborne Pathogens Exposure Control Plan

In accordance with the OSHA Bloodborne Pathogens standard, 29 CFR 1910.1030, the following exposure control plan has been developed:

I. Exposure Determination

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. 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). 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. In MSAD #33, the following job classifications are in this category:

School Nurse	Custodians
Athletic Director	School Secretaries

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

Job Classification	Tasks/Procedures
Bus Driver	Cleaning blood spills Cleaning buses
Principal	First responder/First aid

Part-time, temporary, contract and per diem employees are covered by the bloodborne pathogens standard. The standard will be met in the same manner as it is with full-time employees.

II. Implementation Schedule and Methodology

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

Compliance Methods

Universal precautions will be observed in this school 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 employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized. At this facility the following engineering controls will be utilized:

1. Gloves will be provided to all staff members.
2. Sharps containers will be located in the nurse's office and disposed of at NMMC.
3. Red-bagged trash will be disposed of at NMMC.

The above controls will be examined and maintained on a regular schedule. The schedule for reviewing the effectiveness of the controls is as follows:

1. The school nurse will provide annual updates to all first responders on universal precautions.
2. All new employees will be provided with appropriate training.
3. Sharps Containers: Observe daily and replace when full by school nurse.

Hand washing facilities are also 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. In MSAD #33, hand-washing facilities are located:

1. School Nurse Offices
2. Bathroom and Shower Areas
3. Kitchens
4. Custodial Offices
5. Lab Areas

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.

Needles

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken. Contaminated sharps that are reusable are to be placed immediately, or as soon as possible after use, into appropriate sharps containers.

Personal Protective Equipment

All personal protective equipment used at this facility 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 employee's 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.

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. Disposable personal protective equipment which is significantly contaminated shall be placed in red biomedical trash bags in the immediate work area and removed by the school nurse.

Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, spray, splatter, or droplets of blood or other potentially infectious materials may be generated.

Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Gloves will be available in all clinics, kitchens, and athletic first aid boxes. Gloves are available at all times through the nurse's office. Glove supplies will be restocked on request by the school nurse.

Gloves will be used for the following procedures:

1. Handling any materials that are clearly or potentially soiled with blood or other body fluids.
2. Handling soiled instruments and equipment.
3. Handling and/or sorting soiled linen.
4. Direct contact that may result in exposure to blood or other body fluids.

Disposable gloves used at this facility are 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.

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 materials.

District schools will be cleaned and decontaminated according to the following schedule:

1. Lab areas will immediately be cleaned after lab exercises involving blood.
2. Decontamination will be accomplished by utilizing the following materials:
 - a.) Bleach solution made up of one part bleach to ten parts water.
3. 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 materials. All bins, pails, cans, and similar receptacles shall be inspected and decontaminated on a regularly scheduled basis by the janitor as the need arises.
4. Any broken glassware, which may be contaminated, will not be picked up directly with the hands. A plastic or metal dustpan to scoop up the broken glass will be used.

Once all glass has been removed, the area should be thoroughly mopped or wiped up using a mop or cleaning cloth saturated with disinfectant solution. Launder mop head or rag prior to reusing. Dispose of all glass fragments in a puncture resistant, leak resistant container such as a plastic sharps container. These are available through the school nurse.

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.

Hepatitis B Vaccine

All employees who have been identified as having exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine, at no cost to them. The vaccine will be offered within 10 working days of the annual opening of school and 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 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 form [GBGAA-E](#).

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

Records of vaccination or declination will be kept in the school nurse's office.

Post-Exposure Evaluation and Follow-Up

Exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

When the employee incurs an exposure incident, it should be reported to the school nurse.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the OSHA standard. This follow-up will be conducted by a licensed health care professional at Northern Maine Medical Center. It will include the following:

1. If the employee has not been immunized, he/she will receive the option of immunization.

2. The documentation of route of exposure and the circumstances related to the incident.
3. 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 (if consent is obtained) for HIV/HBV infectivity.
4. The employee will be offered the option of having their 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 decides prior to that time that testing will or will not be conducted, then the appropriate action can be taken and the blood sample discarded.
5. The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U. S. Public Health Service.
6. The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.
7. The school nurse has been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to this policy.

Interaction with Health Care Professionals

A written opinion shall be obtained from the health care professional that evaluates employees of this school. Written opinions will be obtained in the following instances:

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

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

1. Whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident.
2. That the employee has been informed of the results of the evaluation.
3. That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. (Note that the written opinion to the employer is not to reference any personal medical information.)

Training

All new employees will receive training in bloodborne pathogen safety. A bloodborne pathogens test will be administered to check the employee's understanding. Annually, all first responders will receive updated instruction on bloodborne pathogens. This will be conducted by the school nurse.

Training for employees will include the following:

1. The OSHA standard of Bloodborne Pathogens.
2. Epidemiology and symptomatology of bloodborne diseases.
3. Modes of transmission of bloodborne pathogens.
4. This Exposure Control Plan (i.e., points of the plan, lines of responsibility, how the plan will be implemented, etc.).
5. Procedures which might cause exposure to blood of other potentially infectious materials at this school.
6. Control methods which will be used in the district to control exposure to blood or other potentially infectious materials.
7. Personal protective equipment available in the district (e.g., gloves, red bags, and sharps containers).
8. Who should be contacted concerning post exposure evaluation and follow-up.
9. Signs and labels used at the school.
10. Hepatitis B vaccine program available in the district.

The superintendent's office will be responsible for notifying the nurse's office of new hires.

Record Keeping

A. Medical Records

1. MSAD #33 shall establish and maintain an accurate medical record for each employee with occupational exposure. This record shall include the following:
 - a. Each employee's name and social security number;
 - b. A copy of each employee's Hepatitis B vaccination record or declination form and any additional medical records relative to Hepatitis B;
 - c. If an exposure incident(s) has occurred, a copy of all results of examinations, medical testing, and follow-up procedures;
 - d. If an exposure incident(s) has occurred, the district's copy of the health-care professional's written opinion; and
 - e. If an exposure incident(s) has occurred, the district's copy of information provided to the health-care professional: exposure incident investigation form; the results of the source individual's blood testing, if available; and the consent obtained for release.
2. MSAD #33 shall ensure that each employee's medical records are kept confidential and are not disclosed or reported without the employee's expressed written consent to any person within or outside of this district, except as required by law. These medical records shall be kept separate from other personnel records.
3. These medical records shall be maintained for the duration of employment plus 30 years.

4. Records do not have to be maintained if the employee was employed for less than one year and is provided with the record at the time of termination.

B. Training Records

1. Training records shall include the following:
 - a. Training session date(s);
 - b. Contents or summaries of training sessions;
 - c. Names and qualifications of persons conducting training sessions; and
 - d. Names and job titles of all persons attending training sessions.
2. Training records shall be maintained for three years from the date the training occurred.

C. Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidences must include at least:

- date of the injury
- type and brand of the device involved (syringe, suture needle)
- department or work area where the incident occurred
- explanation of how the incident occurred.

This log is reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

History:	Adopted	Meeting #638	July 5, 1993 (as policy GBEA)
	Revised	Meeting #929	June 12, 2013
	Revised	Meeting #939	May 5, 2014