

# **Dare County Schools**

## **Bloodborne Pathogens Exposure Control Plan**

**2017**

# Dare County Schools

## Bloodborne Pathogen Program

### Purpose

An infection control plan must be prepared for all employees who handle, store, use, process, or dispose of potentially infectious waste materials. This infection control plan complies with OSHA requirement, 29 CFR 1910.1030, Bloodborne Pathogens and the Dare County Board of Education Policy # 7260. The plan includes requirements for personal protective equipment, housekeeping, training, and a procedure for reporting exposures.

### Responsibilities

- Dare County Schools in cooperation with the Dare County Health Department and the North Carolina Industrial Commission will conduct the Bloodborne Pathogen Program and maintain records of training and inspections for this program with a copy of the training and inspections records maintained in the Industrial Health & Safety Managers Office.
- Management will ensure proper conduct of the program through inspections, record keeping and a periodic audit performed by the District Wide Safety/Health Committee.

### Definitions

**Biological Hazard.** The term biological hazard or biohazard is taken to mean any viable infectious agent that presents a risk, or a potential risk, to the well being of humans.

**Medical Wastes/Infectious Wastes.** All waste emanating from human or animal tissues, blood or blood products or fluids. This includes used first aid bandages, syringes, needles, sharps, material used in spill cleanup and contaminated PPE or clothing..

**Universal Precautions.** Refers to a system of infectious disease control that assumes that every direct contact with body fluids is infectious and requires every employee exposed to be protected as though such body fluids were infected with bloodborne pathogens. All infectious/medical material must be handled according to Universal Precautions (OSHA Instruction CPL 2-2.44A)

### Hazards

Unprotected exposure to body fluids presents the possible risk of infection from a number of Bloodborne pathogens notably Hepatitis and HIV.

### Hazard Control

**Engineering Controls** - prevention of exposure to Bloodborne pathogens engineering controls include proper storage facilities and containers, syringes designed to prevent accidental needle sticks, autoclaves and disinfectant equipment.

**Administrative Controls** - prevention of exposure to Bloodborne pathogen administrative controls include universal precautions, assignment of PPE, employee training, use of spill kits specifically designed for blood and body fluids, restricted access to waste collection points and waste disposal procedures.

## **Reporting and Record Keeping**

Any reports required by OSHA will be maintained by the Benefits Coordinator. All reports (Training Certificates, Notice of HBV Vaccinations, exposure reports) will be maintained for 30 years. Occupationally contracted HBV or HIV will be recorded on the OSHA 200 Log of Occupational Injuries and Illnesses as an illness. Exposures to blood-borne pathogens from contact with sharps will be recorded on the OSHA Log of Occupational Injuries and Illnesses if treatment such as gamma globulin, hepatitis B immune globulin or hepatitis B vaccine is prescribed by a Physician.

## **Training**

All personnel assigned duties that may involve exposure to Bloodborne pathogens (such as Dare County Schools custodial employees that clean rest rooms, etc.) will receive initial and annual training by the North Carolina Industrial Commission, the Dare County Health Department, or other certified trainer on the Bloodborne Pathogen Program. Additionally, personnel trained in First Aid shall be offered this annual training.

All new and current affected employees will be trained initially and annually thereafter. The content of the training program will include:

1. Dare County Schools Policy
2. Types and transmission of Blood-Borne Pathogens
3. General Safety Rules
4. Universal Precautions
5. Use of Personal Protective Equipment
6. Medical Waste Disposal Procedures
7. Post Exposure Treatment and Procedures
8. HBV Vaccinations

Documentation of training will be by the:

*Dare County Schools Control of Blood-Borne Pathogens Training Certificate*

All Employees not affected by this Program will receive an overview of the program requirements during one of the scheduled Dare County Schools Safety/ Health monthly safety training with the appropriate documentation of participation.

## **Hepatitis-B Virus (HBV) Vaccinations**

Occupational Health Professionals and those required to provide first aid or emergency response duties or medical care on a routine basis will be offered Hepatitis-B Virus

(HBV) Vaccinations at Dare County Schools expense. Employees that transfer to a job or their job is reclassified to include exposure to blood-borne pathogens will be offered HBV Vaccinations within 10 working days of the transfer or reclassification.

The choice for HBV vaccination is not mandatory. If an affected Employee chooses not to have the vaccination at the initial offering, they will have the opportunity to be vaccinated when they are ready. Dare County Schools will document the offer, acceptance or declination, and vaccination dates with the *Notice of HBV Vaccinations Form*.

## **Post Exposure Treatment and Notification Procedures**

Should an affected Employee or an Employee acting as a "Good Samaritan" be occupationally exposed to HIV/HAV/HBV the affected Employee will report the exposure to their supervisor and the Dare County Schools Benefits Coordinator. Dare County Schools will provide for the Employee to be tested for HIV/HAV/HBV at Dare County Schools expense. Following the initial blood test at time of exposure, employees will be retested at 6 weeks, 12 weeks and 6 months to determine if transmission has occurred. During this period, the Employee will follow the recommendations provided by the Physician or the U. S. Public Health Service.

An "occupational exposure" is defined as blood or body fluid contact from an injured or ill Employee/Student to the affected Employee or injury by a contaminated sharp object. Following the report of exposure, Benefits Coordinator will contact the exposure source and request that person be tested for HIV/HAV/HBV at Dare County Schools expense. The request is not mandatory and if refused will not affect that Employee's future employment.

The source individual's blood is tested as soon as possible and after consent is obtained to determine HBV and HIV infectivity. (Hepatitis B surface Antigen, Hepatitis C Antibody and HIV Screen).

The exposed employee's blood shall be collected as soon as feasible and tested for HBV (Hepatitis Bs Antibody, Hepatitis C Antibody) and HIV serological status after consent is obtained (Employee Consent for HIV Antibody Testing).

During all phases of Post Exposure, the confidentiality of the affected Employee and exposure source will be maintained on a "need to know basis". The *Blood-Borne Pathogens Exposure and Treatment* form is used to document the exposure and offer of medical assistance to the affected Employee and use the *Medical Consent for Blood-Borne Pathogens Testing* form for the exposure source. The results of any HIV/HAV/HBV tests conducted will be provided to the exposed and source Employees within 5 business days of receipt.

**Universal precautions:** Refers to a system of infectious disease control which assumes that every direct contact with body fluids is infectious and requires every employee exposed to be protected as though such body fluids were infected with blood-borne

pathogens. All infectious/medical material must be handled according to Universal Precautions (OSHA Instruction CPL 2-2.44A).

The following universal precautions must be taken.

1. Gloves must be made of appropriate disposable material, usually intact latex or vinyl. They must be used:
  - a. when the employee has cuts, abraded skin, chapped hands, dermatitis, or the like.
  - b. when examining abraded or non-intact skin of a patient with active bleeding.
  - c. while handling blood or blood products or other body secretions during routine procedures.
2. Gowns, aprons, or lab coats must be worn when splashes of body fluid on skin or clothing are possible.
3. Mask and eye protection are required when contact of mucosal membranes (eyes, mouth or nose) with body fluids is likely to occur (e.g. splashes or aerosolization).
4. Resuscitation equipment, pocket masks, resuscitation bags, or other ventilation equipment must be provided to eliminate the need for direct mouth to mouth contact.

### ***Waste Disposal Plan***

1. Infectious waste must be placed in reusable or disposable leak-proof bags or bins which must be conspicuously labeled with the words, "INFECTIOUS WASTE -- BIOHAZARD." These bags or bins will be located in the School Nurse Office and are to be picked up regularly by the School Nurse and disposed of at the Dare County Health Department.
2. Spills/Disinfectants: a solution of sodium hypo chlorite (household bleach) diluted 1:9 with water must be used to disinfect, following initial cleanup of a spill with a chemical germicide approved as a hospital disinfectant. Spills must be cleaned up immediately.
3. After removing gloves, and/or after contact with body fluids, hands and other skin surfaces must be washed thoroughly and immediately with soap or other disinfectant in hot water.
4. Liquid biohazard waste may be disposed of in the sewage system following chemical decontamination.

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***Personal Protective Equipment for Worker Protection  
Against HIV and HBV Transmission***

<b>TASK</b>	<b>GLOVES</b>	<b>APRON</b>	<b>MASK</b>	<b>EYEWEAR</b>
Control of Bleeding w/ spurting blood	X	X	X	X
Bleeding control with minimal bleeding	X			
Emergency Child Birth	X	X	X	X
Blood Drawing	X			
Handling & Cleaning Instruments	X			
Cleaning Bio Spills	X			
Taking Temperature				
Giving Injection	X			
Measuring Blood Pressure				

**The examples provided in this table are based on application of universal precautions. Universal precautions are intended to supplement rather than replace recommendation for routine infection control, such as hand washing and using gloves to prevent gross microbial contamination of hands (e.g., contact with urine or feces).**

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# ***Blood-Borne Pathogen Control***

## ***Universal Precautions and General Safety Rules***

### **For Posting**

**Exposure Determination:** Dare County Schools will not perform invasive medical treatment or provide intravenous medication. Therefore, the exposure to Blood-Borne Pathogens, as defined in item # 3 below, is determined to be from routine and emergency first aid treatment of common workplace injuries. The following Universal Precautions and General Safety Rules have been established to prevent the spread of viral and bacterial organisms (namely HIV/HAV/HBV). In all cases, the Universal Precautions and General Safety Rules should be followed.

1. Before and immediately after providing patient care, wash exposed areas (hands, arms, etc.) with antibacterial soap.
  2. Don and use the required personal protective equipment for the medical care given as outlined in the Personal Protective Equipment for Worker Protection Poster.
  3. Treat all human body fluids and items soiled with human body fluids (blood, blood products, seamen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid, concentrated HIV/HAV/HBV, and saliva (in dental settings) as if contaminated with HIV/HAV/HBV. (**Note:** Feces, urine, nasal secretions, sputum, sweat, tears, or vomitus need not be treated as contaminated unless they contain visible blood)
  4. No smoking, eating, drinking or storage of food products are permitted in patient treatment areas. Non-medical items, such as clothing and personal effects, should not be stored in the treatment facility.
  5. Patient treatment areas will be maintained in a near sanitary condition at all times. Daily and at least once per shift, the Occupational Health Facility will be disinfected with antibacterial/viral solution (at least 10% Chlorine Bleach or equivalent). All medical and personal protective equipment contaminated with human body fluids will be disinfected before being returned for use again.
  6. To avoid special handling, all clothing contaminated with human body fluid will be presoaked (sprayed on the affected areas) with the antibacterial/viral solution before being sent to the laundry. (**Note:** Gloves and eye protection should be worn when handling contaminated clothing until presoaked for 10 minutes)
  7. Any spills of body fluid will be presoaked (sprayed on the affected area) with antibacterial/viral solution for 10 minutes before being removed. (**Note:** Gloves and eye protection should be worn when handling spills of body fluids)
  8. Medical Wastes (those soiled with covered human body fluids) will be treated following the Medical Wastes Treatment and Disposal Procedures before being discarded as ordinary wastes.
  9. Any suspected exposure to HIV/HAV/HBV by human body fluid contact (via broken skin, human bites, needle sticks, etc.) should be reported to your Supervisor immediately.
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# ***Control of Blood-Borne Pathogens Program***

## ***Medical Waste Treatment and Disposal Procedures***

### **For Posting**

1. All Medical Wastes (those soiled with covered human body fluids) will be placed in a red leak-proof container marked either *Biohazard* or *Medical Waste*. All other wastes will be discarded following customary procedures. (**Note:** Soiled feminine hygiene/sanitary napkins, soiled facial tissues, etc. are not considered a biohazard or medical waste. Pretreatment is not necessary; however, Employees should wear personal protective equipment and wash hands with antibacterial soap afterwards)
  2. Don and use the required personal protective equipment when handling medical wastes as outlined in the *Personal Protective Equipment for Worker Protection* Poster.
  3. At the end of each shift, all accumulated medical wastes will be treated to remove biohazards using the following procedure:
    - Prepare a solution of 10 percent chlorine bleach to water (approximately 2 cups chlorine bleach to 1 gallon of water)
    - Pour solution over the medical wastes and thoroughly saturate
    - Let stand for 10 minutes and then drain into sink
    - Discard as ordinary wastes
- Caution:** Sharp objects (broken glass, hypodermic needles, etc.) should not be handled by hand to prevent accidental punctures and lacerations
4. Rinse medical wastes container and return for use again.
  5. Wash hands and exposed areas with antibacterial soap.



## **Hepatitis B Vaccine Declination**

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccine series at no charge to me.

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Employee's name (print)

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Employee's signature

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Dare County Schools Benefits Coordinator

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Date

School / Work Site Name: \_\_\_\_\_

Year 2 \_\_\_\_\_

### Sharps Injury Log

Date / Time	Report No.	Type of Device (syringe, needle, etc.)	Brand Name of Device	Work Area where injury occurred (Lab, etc.)	Brief description of how injury occurred and what part of body was injured

Retain until: \_\_\_/\_\_\_/\_\_\_ (which is five years after the end of the current calendar year).

You are required to maintain this Sharps Log if the requirement to maintain an OSHA 300 log form applies to your company. See 29 CFR 1904 for details. The purpose of this Sharps Log is to aid in the evaluation of devices being used in healthcare and other facilities and to identify problem devices or procedures requiring additional attention and/or review. This Sharps Log must be kept in a manner which preserves the confidentiality of the affected employee(s).

**Re: 29 CFR 1910.1030(h)(5).**



