

BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

This plan delineates specific rules and procedures relating to protecting employees of the technology center from occupational exposure to bloodborne pathogens (e.g., Hepatitis B Virus ("HBV"), Human Immunodeficiency Virus ("HIV"), etc.) as required by law.

Employees who are occupationally exposed to bloodborne pathogens include those who are reasonably anticipated to have skin, eye, mucous membrane or parenteral contact with blood or other potentially infectious materials during the performance of their duties. Other infectious materials include: (1) the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid and any body fluid that is visibly contaminated with blood or where it is difficult or impossible to differentiate between body fluids; (2) any unfixed tissue or organ from a human, living or dead; (3) HIV-containing cell or tissue culture, organ culture and HIV-or HBV-containing culture medium or other solutions; and blood, organs or tissues from experimental animals infected with HIV or HBV. Any exposure to feces, nasal secretions, breast milk, sputum, sweat, tears, urine, vomitus or saliva, which is not visibly contaminated with blood, does not routinely constitute a risk of transmission of HBV or HIV. Saliva, if injected through a human bite, may pose a risk of HBV transmission.

This Exposure Control Plan delineates rules and procedures to be followed by employees to comply with the OSHA Bloodborne Pathogens Regulation previously cited. Appendix A defines the terms used throughout this Plan.

Employee Exposure Determination

The likelihood of exposure to bloodborne pathogens among employees of the technology center varies among divisions and job classifications. Most job classifications within the technology center have no increased potential for occupational exposure to blood or potentially infectious materials as defined by the OSHA Bloodborne Pathogens Regulation.

Appendix B lists all technology center employee exposures to bloodborne pathogens by job classification and specific groups of occupational tasks. All potential exposures to blood and potentially infectious materials listed in the tasks shown in Appendix B are based upon risks incurred without the use of personal protective equipment. Based upon this analysis, the technology center has determined that the following groups of employees are likely to have occupational exposure to bloodborne pathogens: custodians and instructors of health care related clinic. These employees will receive the training and will be offered the Hepatitis B vaccinations as required by the OSHA Bloodborne Pathogens Regulation. The technology center will review this Exposure Control Plan and the exposure potential for specific jobs and occupational tasks shown in Appendix B annually or when new or modified tasks or procedures for job positions within the technology center alter potential occupational exposures.

Methods of Compliance with Regulation

Because some tasks present the potential for employee exposure to blood and other potentially infectious materials, a number of engineering and work-practice controls have been adopted to minimize such exposures. Universal precautions are observed throughout the technology center to prevent contact with potentially infectious materials. Employees should consider all body fluids as potentially infectious because it is often difficult to differentiate between body fluid types. Where occupational exposure exists despite compliance with engineering and work practice controls, the use of appropriate personal protective equipment is required, which varies with the specific work tasks involved.

Engineering controls, including handwashing facilities, are maintained and replaced appropriately to insure their effectiveness. Any employee who observes an ineffective or malfunctioning control item or equipment should take immediate appropriate action to replace, discontinue use of and/or seek repair of the item or equipment.

Handwashing

Handwashing by all exposed employees is required. The importance of handwashing as the primary prevention of contamination cannot be overemphasized. It is the single most important means of preventing the spread of infection. Handwashing facilities are interspersed throughout each technology center building.

All employees of the technology center who have routine occupational exposure are provided with antiseptic handcleaner for disinfection purposes when handwashing is not immediately feasible. However, handcleaners are not provided with the intent of substituting for handwashing. Employees should wash hands with soap and water as soon as possible following use of such antiseptic handcleaners. Employees are also required to wash their hands immediately after removing gloves or other personal protective equipment. Employees must insure that hands and any other skin which becomes contaminated with blood or other potentially infectious material are immediately washed with soap and water and that any mucous membrane exposed to blood or other potentially infectious material is flushed with water as soon as possible.

Protection of Food, Drink, Etc.

Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses is prohibited in work areas of the technology center where any risk of occupational exposure exists. The storage of food and drink in refrigerators, freezers or cabinets or on shelves, countertops or benchtops where blood or other potentially infectious materials are present is also prohibited.

Personal Protective Equipment

The technology center provides appropriate personal protective equipment, including gloves, gowns and other appropriate devices, at no cost to any employee with occupational exposure. Appropriate personal protective equipment is that equipment which does not permit blood or other potentially infectious materials to pass through to the employee's work clothes, street clothes, skin, eyes, mouth or other mucous membranes under normal use and for the duration of time the protective equipment is in use.

All occupationally exposed employees of the technology center are required to use appropriate personal protective equipment. The only exception to this requirement allowed by the OSHA Bloodborne Pathogens Regulation might occur when the employee temporarily and briefly declines use of the equipment when "under rare and extraordinary circumstances, it [is] the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety service or would have posed an increased risk to the safety of the worker or co-worker." When such a judgment is made, the circumstances will be investigated and documented to determine whether changes should be instituted to prevent future recurrence.

Personal protective equipment appropriate for the work tasks in each division are readily accessible at the work site for all employees. Cleaning and laundering of reusable personal protective equipment is provided by the technology center through an outside vendor. Contaminated laundry is disposed of in the appropriate biohazard laundry containers provided by that vendor. Disposable personal protective equipment (e.g., disposable gloves) are discarded in sealed plastic bags.

If a garment becomes penetrated by blood or other potentially infectious materials during the course of its use, it should be removed immediately, or as soon as feasible, and disposed of appropriately. All personal protective equipment must be removed prior to leaving the work area.

Gloves

Latex or vinyl gloves will be worn when it is reasonably anticipated that the employee will have hand contact with blood or other potentially infectious materials, mucous membranes or non-intact skin and when touching contaminated items or surfaces. Disposable (single use) gloves must be replaced as soon as practical when contaminated or when they are torn, punctured or their ability to function as a barrier is compromised. Disposable gloves are not to be washed or decontaminated for reuse.

Utility gloves, such as those used in housekeeping, sterilization and clean-up activities, may be decontaminated for reuse if the integrity of the glove is not compromised, but they must be discarded if they are cracked, torn, punctured or exhibit signs of deterioration. Hypoallergenic gloves or glove liners or powderless gloves are provided to employees who are allergic to the gloves normally provided. Employees with contact dermatitis caused by gloves may find protective skin creams helpful in preventing further irritation.

Protective Body Clothing

Appropriate body clothing must be worn in occupational exposure situations. The types and characteristics of the protective clothing depend upon the task and degree of exposure anticipated. The need for protective body clothing will be rare in the school environment.

Masks, Eye Protection and Face Shields

Because no employees engage in occupational activities in which splashes, spray, splatter or droplets of blood or other potentially infectious materials are likely to be generated and eye, nose or mouth contamination can be reasonably anticipated, masks, eye protection and face shields are not provided.

Housekeeping

Worksites which are subject to contamination by blood and other potentially infectious materials are maintained in clean and sanitary condition by the designated custodial staff who have cleanup responsibility. Appendix C presents the written cleaning and decontamination schedules for the Director of Facility Operations' office.

All equipment, environmental and working surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials upon completion of procedures and immediately, or as soon as feasible, when surfaces are overtly contaminated or following any spill of blood or other potentially infectious materials. All work surfaces are cleaned and decontaminated at the end of each workshift if the surfaces have become contaminated since the last cleaning. One or more of the following solutions are to be used in disinfection of work surfaces, countertops and equipment: commercially-prepared germicidal disinfectants; commercially prepared disinfectants with an isopropyl alcohol content of 40% to 70%; commercially-prepared disinfectants with a hydrogen peroxide content of 3%; or an individually-prepared solution of one part chlorine bleach to ten parts water. Cleaning and disinfection of floors and walls may be accomplished using commercial cleaning formulations containing quaternary ammonia.

Bins, pails, cans and other similar receptacles intended for re-use that have a potential for becoming contaminated with blood or other potentially infectious materials are inspected and decontaminated on a regular basis and immediately, or as soon as feasible, upon visible contamination.

Spill Cleanup

Spill cleanup requires the use of appropriate protective equipment including gloves, as appropriate. Spills are cleaned up by the individual responsible for the spill in most cases. Appendix D details specific procedures for biological spills cleaning and decontamination.

Broken glassware which may be contaminated is not picked up directly with the hands. Cleanup is effected using mechanical means such as a brush and dust pan. Contaminated broken glassware is discarded in sealed plastic bags.

Waste Disposal

Disposal of waste contaminated with blood or other potentially infectious materials is in sealed plastic bags with the technology center's other non-regulated waste.

Laundry

All contaminated laundry generated by exposed employees of the technology center is bagged or containerized at the location where it is used in appropriately labeled containers. Heavily soiled laundry is bagged in leak-proof plastic bags before being placed in laundry containers, if appropriate. The technology center contracts with an off-site commercial laundry company for laundry services. Laundry is not sorted, rinsed or processed in any other manner on site. Employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment.

Hepatitis B Vaccination

Each technology center employee who has occupational exposure is offered the Hepatitis B vaccine series within ten (10) days of initial work assignment and after he or she has received the required training unless the employee has previously received the vaccination series, antibody testing has revealed immunity or the vaccination is contraindicated for medical reasons. The technology center will provide the health care professional responsible for the employee's Hepatitis B vaccination with a copy of the OSHA Bloodborne Pathogens Regulation. Vaccinations are performed by or under the supervision of a licensed physician or by or under the supervision of another licensed health care professional in accordance with U.S. Public Health Service recommendations during normal working hours, at a reasonable location and at no cost to the employee. Participation in a prescreening program is not a prerequisite for receiving the Hepatitis B vaccination. Employees who decline to accept the Hepatitis B vaccination are required to sign the declination statement included as Appendix E to this Plan.

Any employee who initially declines the Hepatitis B vaccination, but at a later date decides to accept the vaccination, is provided the vaccination at that time without cost. Any future recommended routine booster, dose or doses of Hepatitis vaccine recommended by the U.S. Public Health Service will also be provided to exposed employees without cost.

The Hepatitis B vaccination record or signed declination statement is maintained in each employee's confidential medical record in the office of the superintendent (see Recordkeeping-Medical Records).

Post-Exposure Evaluation and Follow-Up

All technology center employees who experience an occupational exposure incident will complete the Incident Report attached as Appendix F immediately after the exposure, or as soon thereafter as feasible.

Each exposed employee is provided a confidential medical evaluation and follow-up, including prophylaxis, at no cost to the employee, by a licensed health care professional of the technology center's choice. As part of the post-exposure evaluation and follow-up, the routes of exposure and the circumstances under which the incident occurred is documented, including identification and documentation of the source individual, unless infeasible or prohibited by law, and testing of the source individual's blood and the exposed employee's blood is completed, as soon as feasible and after consent is obtained. Completion of the Record of Occupational Exposure to Blood or Potentially Infectious Body Fluids included as Appendix G to this Plan satisfies the Regulation's documentation requirements.

The technology center will provide the licensed health care professional who evaluates the exposed employee with the following information: a copy of the OSHA Bloodborne Pathogens Regulation; a description of the exposed employee's duties as they relate to the exposure incident; documentation of the route(s) of exposure and circumstances under which exposure occurred; results of the source individual's blood testing, if available; and all medical records relevant to the appropriate treatment of the employee, including vaccination status, that are the technology center's responsibility to maintain.

The licensed health care professional's written opinion of the post-exposure evaluation is to be provided to the employee within fifteen (15) days of completion of the evaluation and is to be limited to the following: whether Hepatitis B vaccination is indicated for the employee and if the employee has received such vaccination, that the employee has been informed of the results of the evaluation and that the employee has been told about any medical condition resulting from exposure to blood or other potentially infectious materials that require further evaluation or treatment. All other findings or diagnoses are to remain confidential and are not to be included in the written report.

Confidential medical records relating to post-exposure evaluation and follow-up are maintained in the office of the superintendent (see Recordkeeping -Medical Records).

Labels and Signs

To the extent required, the technology center uses red color coding and/or fluorescent orange or orange-red biohazard labels to mark all hazardous items. The standard biohazard label and symbol is used for this purpose. Items contaminated with blood or other potentially infectious body fluids which are color coded or posted with biohazard labels include the following: contaminated laundry.

Recordkeeping

1. **Medical Records.** Confidential medical records are kept on all technology center employees with occupational exposure to blood or other potentially infectious materials in the office of the superintendent. Each record includes the employee's name, Social Security number, Hepatitis B vaccination record (or declination form), copies of all results of examinations, medical testing and follow-up procedures relating to any exposure incidents and a copy of the health care professional's consultation and written opinion relating to any exposures.

All employee medical records are kept for the duration of employment, plus thirty (30) years in accordance with the OSHA Bloodborne Pathogens Regulation.

2. **Training Records.** Records documenting the provision of information and training relating to occupational exposure to bloodborne pathogens are maintained for three (3) years from the date of training by the technology center's training coordinator. These records include the dates of training sessions, a summary of the training session, names and qualifications of the persons conducting the training sessions and the names and job titles of all persons attending the training sessions. An outline of the technology center's Bloodborne Pathogens Training Program is included as Appendix H to this Plan. A Training Record form is attached as Appendix I.

Information and Training

Information and training pertaining to bloodborne pathogens is provided to all technology center employees with occupational exposure without cost and during normal working hours. This training is provided within ten (10) days of initial assignment to tasks where occupational exposures occur and annually thereafter or whenever modifications of tasks or procedures or the institution of new tasks or procedures affect an employee's occupational exposure to the extent that additional training is indicated and appropriate. Routine training

of new employees is arranged on an as-needed basis through the technology center's training coordinator. Training is presented by qualified staff members.

Training material is appropriate in content and vocabulary to the educational level, literacy and language of employees. The training program is designed to fulfill the requirements for bloodborne pathogen training outlined in the OSHA Bloodborne Pathogens Regulation. A detailed outline of the training program is kept on file with the technology center's training coordinator.