

EXPOSURE CONTROL PLAN FOR BLOODBORNE PATHOGENS

A. Purpose and Scope

To provide guidance and direction to all District personnel regarding exposure to bloodborne pathogens and other potentially infectious materials in the work place.

B. General

1. The Superintendent or designee shall establish a written Exposure Control Plan designed to protect employees from possible infection due to contact with bloodborne viruses, including human immunodeficiency virus (HIV) and hepatitis virus (HBV).
2. The Superintendent or designee shall determine which employees have occupational exposure to bloodborne pathogens and other potentially infectious materials.
3. In accordance with the District’s Exposure Control Plan, employees having occupational exposure shall be offered the hepatitis B vaccination.
4. The Superintendent or designee may exempt designated first-aid providers from pre-exposure hepatitis B vaccination under the conditions specified by state regulations.

C. Forms Used and Additional References

Hepatitis B vaccination declination form

D. Procedure

Definitions

Occupational Exposure means “reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties. [Title 8, Section 5193(b)]

EXPOSURE CONTROL PLAN FOR BLOODBORNE PATHOGENS (continued)

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”. Parenteral contact means “piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts and abrasions.” [Title 8, Section 5193(b)]

Exposure Control Plan

The District’s Exposure Control Plan shall contain at least the following components: [Title 8, Section 5193(c)]

1. A determination of which employees have occupational exposure to blood or other potentially infectious materials.
2. A description of the schedule and method for implementing exposure control requirements, including but not limited to:
 - a. Universal precautions (cf. 4119.43 - Universal Precautions)
 - b. Engineering and work practice controls
 - c. Personal protective equipment
 - d. Housekeeping schedules
 - e. Hepatitis B vaccination
 - f. Post-exposure evaluation and follow-up
 - g. Informing employees about biohazards, including:
 - 1) Labels and signs, and
 - 2) Training
 - h. Maintenance of training and medical records
3. The District’s procedure for evaluating circumstances surrounding exposure incidents.

EXPOSURE CONTROL PLAN FOR BLOODBORNE PATHOGENS (continued)

The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary to:

1. Reflect new or modified tasks and procedures affecting occupational exposure.
2. Reflect new or revised employee positions with occupational exposure.
3. Review the exposure incidents which occurred since the previous update. [Title 8, Section 5193(c)]

The District's Exposure Control Plan shall be accessible to employees in accordance with the law. It also shall be made available to the Chief or Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Resources, or his/her designee, upon request for examination and copying. [Title 8, Section 5193(c)].

Exposure Determination

The District's exposure determination shall be made without regard to the use of personal protective equipment and shall include:

1. All job classifications in which all employees have occupational exposure to bloodborne pathogens.
2. Job classifications in which some employees have occupational exposure.
3. All tasks and procedures or groups of closely related tasks and procedures in which occupational exposure occurs and which are performed by employees listed in item #2 above. [Title 8, Section 5193(c)]

Hepatitis B Vaccination

Hepatitis B vaccinations shall be provided at no cost to those employees determined to have occupational exposure to blood and other potentially infectious materials. Employees who decline to accept the vaccination shall sign the hepatitis B declination statements as required by law. (E 4119.42) [Title 8, Section 5193(f)].

Human Resources - Classified

AR 4219.42 (c)

EXPOSURE CONTROL PLAN FOR BLOODBORNE PATHOGENS (continued)

The District may exempt “designated first-aid providers” from the pre-exposure hepatitis B vaccine if:

1. Rendering first aid is not the primary job responsibility of the employee and is not performed on a regular basis.
2. The District’s Exposure Control Plan provides that:
 - a. Employees report all first-aid incidents involving the presence of blood or other potentially infectious materials before the end of the work shift during which the incident occurred.
 - b. Designated first-aid providers participate in the bloodborne pathogens training program.
 - c. Unvaccinated first-aid providers receive the full hepatitis B vaccination series no later than 24 hours after rendering assistance in any situation involving the presence of blood or other potentially infectious material regardless of whether an exposure incident occurred.
3. The District implements a procedure to ensure the above requirements are met. [Title 8, Section 5193(f)].

Protective Equipment

The District shall provide appropriate personal protective equipment at no cost to the employee. The District shall maintain, repair, make accessible and require employees to use and properly handle protective equipment. [Title 8, Section 5193(d)].

Information and Training

The District shall provide a training program as specified by law to all employees in job classifications which have been determined to have some degree of occupational exposure. This program shall be offered at the time of initial assignment, annually thereafter, and whenever a change of tasks or procedures affect the employee’s exposure.

Employees who fall within the definition of designated first-aid providers shall also receive training. Such training shall include the specifics of reporting first-aid incidents which involve blood or body fluids which are potentially infectious. [Title 8, Section 5195(g)].

First-Aid Incidents

Unvaccinated designated first-aid providers must report any first-aid incident involving the presence of blood or other potentially infectious material, regardless of whether an exposure incident occurred, by the end of the work shift. The full hepatitis B vaccination series shall be made available to such employees no later than 24 hours after the first-aid incident. [Title 8, Section 5193(f)].

Exposure Incidents: Post-Evaluation and Follow-up

All exposure incidents must be reported as soon as possible to the Superintendent or designee. Following a report of an exposure incident, the District shall provide the exposed employee with a confidential medical evaluation and follow-up, as required by exposure source during all phases of the post-exposure evaluation. [Title 8, Section 5193(f)].

E. Reports Required

Bloodborne Pathogens Report

F. Record Retention

Medical and training records shall be kept in accordance with law. Medical records shall be maintained for the duration of employment plus thirty years. Training records shall be maintained for three (3) years from the date of training. [Title 8, Section 5193(h)].

Medical records for each employee with occupational exposure will be kept confidential as appropriate and transferred or made available in accordance with law. [Title 8, Section 5193(h)].

Records shall be made available to employees and the National Institute for Occupational Safety and Health in accordance with law. [Title 8, Section 5193(h)].

G. Responsible Administrative Unit

Human Resources
Health Services

H. Approved By

Associate Superintendent for Human Resources

Regulation Adopted:

HS BD: 7/27/93

EL BD: 8/10/93

TUSD: 10/28/97

Human Resources - Classified

EXHIBIT 4219.42

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 (HBD) 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 vaccination series at no charge to me.

Signature

Employee Name (please print)

Date