

Exposure Control Plan for Bloodborne Pathogens

I. Definitions

- A. **Contaminated Sharps:** any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.
- B. **Engineering Controls:** controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices such as sharps with engineered sharps injury protections, and needless systems) that isolate or remove the bloodborne pathogens hazard from the workplace.
- C. **Work Practice Controls:** controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

II. Exposure Determination

- A. Category I: Personnel who come in direct contact with blood and body fluids for which precautions must be taken. The jobs in this category include, but are not limited to, school nurses, substitute school nurses, school nurse assistants, physical education teachers, custodial staff, classroom teachers, aides, school administrators, and intramural athletic coaches.
- B. Category II: Personnel who participate in activities without blood exposure but exposure may occur in an emergency. The jobs in this category include but are not limited to: paraprofessionals, special education teachers, school administration, and first aid certified staff members.
- C. Category III: Personnel performing tasks that do not entail predictable or unpredictable exposure to blood. The jobs in this category include but are not limited to all other positions not indicated in Category I or II.

III. Methods of Compliance

- A. Avoid direct contact with blood, bodily fluids, or other potentially infectious materials - use gloves.
- B. Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed. Shearing or breaking of contaminated needles is prohibited.
- C. Contaminated reusable sharps shall be placed in containers that are puncture-resistant; leakproof, color-coded, or labeled in accordance with Section X of this plan and shall not require employees to reach by hand into the container.
- D. Protective gloves will be worn if you have any open wounds on your hands. If there is any doubt in your mind regarding some contact with blood or bodily fluids - use gloves.
- E. Wash hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
- F. If you become contaminated, wash that area immediately with a strong antiseptic soap or solution.

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- G. If clothing becomes contaminated with blood or body fluids, it should be placed in a bag labeled in accordance with Section X of this plan and placed in a contaminated clothing container for proper cleaning and/or discarding.
- H. Any areas of the school that may become contaminated will be washed with a strong solution of bleach and water or another appropriate disinfectant; rubber gloves, sanitary suit, face protection, eye protection, and long-handled scrub utensils should be used.
- I. All restrooms and the nurse's office will be cleaned daily using a disinfectant. Custodial staff members are required to wear rubber gloves and use long-handled scrubbing utensils during these cleaning procedures at these locations.
- J. When a spill occurs, the building administrator or his/her designee will limit access to areas of potential exposure and notify the staff and students. The janitorial staff will be notified to immediately clean the area.
- K. All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.
- L. Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- M. Specimens of blood or other potentially infectious materials shall be placed in a container labeled in accordance with Section X of this plan, which prevents leakage during collection, handling, processing, storage, transport, or shipping.

IV. Preventative Measures

The Superintendent or his/her designee shall use engineering and work practice controls to eliminate or minimize employee exposure and shall regularly examine and update controls to ensure their effectiveness.

V. Hepatitis B Vaccination

- A. The Hepatitis B vaccination series shall be made available at no cost to employees. The Hepatitis B vaccination shall be made available within ten (10) working days of initial assignment unless the employee has previously received the complete Hepatitis B vaccination series or antibody testing has revealed that the employee is immune or vaccination is contraindicated for medical reasons.
- B. Employees who decline to accept the vaccination shall sign the Hepatitis B Vaccination Declination Statement. Employees who initially decline the vaccination but who later wish to have it may have the vaccine provided at no cost.

VI. Training for Exposure Control

- A. Bethany Public School District (District) employees will be supplied with a training program at the time of initial employment and annually thereafter. A record of each employee's completed training will be filed in their personnel file. The training will include:
 - 1. The modes of transmission of Acquired Immunodeficiency Syndrome (AIDS), Human Immunodeficiency Virus (HIV), and Hepatitis B Virus (HBV).
 - 2. Instructions on types of protective clothing and equipment generally appropriate for employees as well as instructions on the basis for selecting the clothing and equipment.

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Regulation 4147.1(c)
Regulation 4247.1(c)

3. Instructions on the actions to take and persons to contact if exposure has occurred.
4. Instructions on the requirements for work practices and protective equipment for each task they may perform.
5. Instructions on where protective clothing and equipment is kept, how to use it, and how to remove, handle, decontaminate, and dispose of contaminated clothing or equipment.
6. Instructions on the limitation of protective clothing and equipment.

VII. Reporting Incidents

- A. All exposure incidents shall be reported as soon as possible to building administration and/or the school nurse.
- B. All at-risk personnel who come in contact with blood and body fluids in the performance of their duties will take steps to safeguard their health.

VIII. Post-Exposure Evaluation and Follow-up

Employees will immediately report a possible exposure incident to the school nurse or school principal and will make out an incident report. The nurse or administrator will contact the school medical advisor or the Connecticut Department of Health Services to determine if an incident has occurred.

When an incident is confirmed, the school medical advisor or his/her designee will arrange for a confidential medical evaluation and follow-up including:

- A. Documentation of the route(s) of exposure and the circumstances related to the incident.
- B. Identification and documentation of the source individual, unless the school medical advisor can establish that identification is infeasible or prohibited by law.
 - a. Source individual's blood will be tested as soon as feasible after consent is obtained, for HIV/HBV infectivity, unless source is a known carrier. If consent is not obtained, the school medical advisor shall establish that legally obtained consent cannot be obtained.
 - b. Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious state of the source individual.

Minor students/parents/guardians must be contacted and advised of the incident and their options. They should be encouraged to contact their own primary health care provider prior to giving consent for testing or disclosure.

- C. Blood Collection
 - a. The exposed employee's blood shall be collected as soon as feasible by an accredited laboratory and tested after consent is obtained.
 - b. If the employee consents to collection but does not give consent for HIV serological testing, the sample shall be preserved for at least ninety (90) days by the laboratory. If within the ninety (90) days, the employee elects to have the baseline sample tested, such testing will be done as soon as feasible.

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- c. Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service.
- d. Appropriate counseling concerning precautions to take place during the period after the exposure incident.
- e. Information for the employee on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.

IX. Records

- A. Upon an employee's initial employment and at least annually thereafter, the Superintendent or his/her designee shall inform employees with occupational exposure of the existence, location, and availability of related records; the person responsible for maintaining and providing access to records; and the employee's right of access to these records.
- B. Medical records for each employee with occupational exposure shall be kept confidential and not disclosed or reported without the employee's written consent to any person within or outside the workplace except as required by law.
- C. Upon request by an employee or a designated representative with the employee's written consent, the Superintendent or his/her designee shall provide access to a record in a reasonable time, place, and manner, no later than fifteen (15) days after the request is made.
- D. Records shall be maintained as follows:
 - 1. Medical records shall be maintained for the duration of employment plus thirty (30) years.
 - 2. Training records shall be maintained for three (3) years from the date of training.
 - 3. The sharps injury log shall be maintained five (5) years from the date the exposure incident occurred.
 - 4. Exposure records shall be maintained for thirty (30) years.
 - 5. Each analysis using medical or exposure records shall be maintained for at least thirty (30) years.

X. Labels

- A. Warning labels shall be affixed to containers used to store, transport, or ship blood or other potentially infectious material.
- B. Labels shall include the following:



BIOHAZARD

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**Regulation 4147.1(e)
Regulation 4247.1(e)**

- C. The labels shall be fluorescent orange or orange-red or predominantly so with lettering and symbols in a contrasting color.
- D. Labels shall be affixed as close as feasible to the container by string, wire, adhesive, or another method that prevents their loss or unintentional removal.
- E. Labels required for contaminated equipment shall be in accordance with this paragraph and shall also state which portions of the equipment remain contaminated.

Legal References: 29 C.F.R. § 1910.1030 OSHA Bloodborne pathogens standards.
Connecticut State Agencies Regulation § 31-372-101-1910 to 1030
Connecticut General Statutes § 31-372

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HEPATITIS B VACCINATION DECLINATION STATEMENT (MANDATORY)

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the Hepatitis B Virus (HBV). I have been given the opportunity to be vaccinated with the Hepatitis B vaccine, at no charge to myself. However, I decline the 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 the Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Printed Name: _____

Employee Signature: _____

Social Security Number: _____

Date: _____

Form Regulation 4147.1/4247.1 – Approved April 8, 2015, Revised November 15, 2019