

**4147.1/Exposure Control Plan**

TRUMBULL PUBLIC SCHOOLS  
BOARD OF EDUCATION  
POLICY MANUAL

SECTION: **4000**  
CATEGORY: **Personnel – Certified and  
Non-Certified**  
POLICY CODE: **4147.1/Exposure Control Plan**

**EXPOSURE CONTROL PLAN**

**Policy Statement**

It is the policy of the Trumbull Board of Education to limit or eliminate occupational exposure to communicable and infectious diseases caused by bloodborne pathogens or other potentially infectious materials. Employees of the Trumbull Public Schools working in jobs where it can be reasonably anticipated that skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials may result from the performance of an employee's duties will be protected by the District's provision of: safe and hygienic workplaces to minimize the spread of pathogens; engineering and work practice controls; vaccinations and post-exposure evaluation and follow-up; and training in accordance with the bloodborne pathogen standards of the Occupational Safety and Health Administration (OSHA).

Adopted: 11/17/1992

Revised: 4/29/2003, 6/12/2018

**References**

- 29 C.F.R. § 1910.1030, "Bloodborne Pathogens"
- Trumbull Board of Education Policy Code 5141.8: Prevention of Communicable and Infectious Diseases

**Regulations**

**I. Occupational Exposure Determination**

“Occupational Exposure” is defined as 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. Related to occupational exposure, the following job classifications obtain in the Trumbull Public Schools:

- A. Class I: Jobs in which all employees have occupational exposure because first aid is a job requirement
  - Coach for interscholastic or intramural sports team
  - School health aide
  - School nurse
  - Substitute school nurse
  
- B. Class II: Jobs in which some employees have occupational exposure because there is a job-specific possibility of exposure (e.g., because some employees in these jobs are involved in diapering/toileting students capable of having their menses or who are sperm-producing)
  - Identified paraprofessional
  - Identified recess aide
  - Identified special education teacher
  
- C. Class III: Jobs in which no employees have occupational exposure because first aid is not a job requirement and because there is no job-specific specialized possibility of exposure
  - Administrator
  - Bus driver
  - Cafeteria worker
  - Custodian
  - School counselor
  - School psychologist
  - School social worker
  - Secretary
  - Security officer
  - Speech/language pathologist
  - Teacher (other than identified special education teacher)
  - Non-identified paraprofessional
  - Non-identified recess aide
  - Non-identified special education teacher

**II. Methods of Compliance to Minimize the Spread of Pathogens**

The District shall observe universal precautions to prevent contact with blood or other potentially infectious materials. All body fluids shall be considered potentially infectious materials.

In the school setting, transmission concerns include:

- blood

- feces
- respiratory secretions
- semen
- urine
- vaginal secretions
- vomitus

### III. Engineering and Work Practice Controls

The District shall use engineering and work practice controls to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used. Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure their effectiveness.

#### A. Handwashing Facilities

Handwashing facilities shall be readily accessible to employees in each school nurse's office. When provision of handwashing facilities is not feasible, antiseptic towelettes will be provided. When antiseptic towelettes are used, hands shall be washed with soap and running water as soon as feasible. Hands shall be washed immediately or as soon as feasible after removal of gloves or other personal protective equipment. Employees shall wash hands and any other skin with soap and water, or flush mucous membranes with water, immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

#### B. Sharps Containers

Contaminated needles and any other contaminated sharps shall not be bent, recapped, or removed. Immediately or as soon as possible after use, they shall be placed in a puncture-resistant container that is leakproof on the sides and bottom. The disposal of sharps shall be in a container properly labeled with the Biohazard symbol. This container is sealed when close to full and disposed of by a licensed medical waste disposal company. Storage or processing of sharps shall not occur in a manner that requires employees to reach by hand into any container where sharps have been placed.

#### C. Personal Protective Equipment

Where there is occupational exposure as defined in this policy and its Regulations, the District shall provide, at no cost to the employee, appropriate personal protective equipment.

##### 1. Disposable Gloves

Disposable gloves are available in the school nurse's office for all employees at risk for exposure. Contaminated gloves shall be removed in a manner that prevents the spread of pathogens from gloves to the employee's skin surface.

##### 2. Utility Gloves

Utility gloves are available for all housekeeping and other staff from the school custodian. They are to be checked for cracks before each use and decontaminated after each use. They must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised. Utility gloves

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are to be worn only in situations (e.g., disposing of broken glassware) where disposable gloves will provide inadequate protection to the employee. Contaminated gloves shall be removed in a manner that prevents the spread of pathogens from gloves to the employee's skin surface.

#### 3. Face Protection

Face protection is available in the school nurse's office in the form of goggles and masks. These are to be used whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated. Contaminated masks shall be removed in a manner that prevents the spread of pathogens from gloves to the employee's skin surface.

#### 4. Gowns and Aprons

Gowns and aprons are also available in the school nurse's office for such potential hazards as listed above. Contaminated gowns and aprons shall be removed in a manner that prevents the spread of pathogens from gloves to the employee's skin surface.

#### 5. CPR Microshields

CPR microshields are available in the school nurse's office and all emergency first-aid boxes. CPR shields will be used when artificial respiration is required. Contaminated CPR microshields shall be removed in a manner that prevents the spread of pathogens from gloves to the employee's skin surface.

### D. Housekeeping

All equipment, environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials. Such cleaning and decontamination shall occur immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials.

#### 1. Disinfectants

Hospital-grade disinfectants shall be used in accordance with the instructions of the manufacturers.

#### 2. Dry Absorbents

Any dry absorbent shall be used in accordance with the instructions of the manufacturer. The vacuum bag or sweepings should be disposed of in a plastic bag. The broom and dustpan should then be washed in a disinfectant. Disposable gloves should be worn.

#### 3. Broken Glassware

Broken glassware that may be contaminated shall not be picked up directly with the hands. Instead, it must be swept up with a dustpan and brush. The broken glass should then be placed (not dropped) into a disposal container. The brush and dustpan should then be washed in a disinfectant. Utility gloves should be worn.

4. Disinfection of Rugs

Disinfection of rugs shall occur in accordance with the instructions of the manufacturer of the appropriate sanitary agent. Disposable gloves should be worn.

5. Laundry

Laundry contaminated with blood and other potentially infectious materials shall be handled as little as possible, with a minimum of agitation, and with the use of disposable gloves and gowns if necessary. Contaminated laundry belonging to students or other personnel shall be placed in a red plastic bag and sent home for laundering with the suggestion to wash contaminated clothing separately from other items, pre-soaking heavily-soiled items as necessary.

IV. Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-Up

A. Hepatitis B Vaccination

Each employee determined by this policy and its Regulations to be in Class I or Class II of occupational exposure shall be offered the Hepatitis B vaccination, at no cost to the employee, within ten (10) working days of his/her initial assignment to work involving the potential for occupational exposure. These personnel shall either receive the vaccination series unless the employee has previously received the complete HBV series or signs a waiver declining the HBV series. The employee can at a later date accept the HBV series if still working in a Class I or Class II job.

B. Post-Exposure Evaluation and Follow-Up

1. Any employee who experiences an exposure incident with blood or other potentially infectious materials should first wash with soap and water.
2. The employee should then immediately report the contact to the school nurse and document the incident in writing, including the route(s) of exposure, the circumstances under which the exposure incident occurred, and the source individual.
3. The District will contact the source individual (or, for a student, the source individual's parent/guardian) to encourage blood testing as soon as possible in order to obtain HBV and HIV infectivity. If consent from the source individual (or, for a student, the source individual's parent/guardian) is received, the District will assume the cost of blood testing provided the District pre-approves the healthcare professional, and with the purpose of sharing the results of the source individual's testing with the exposed employee and his/her healthcare professional, along with applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual. If consent from the source individual (or, for a student, the source individual's parent/guardian) is not received, the District will inform the exposed employee that legally required consent cannot be obtained.
4. The District will provide the employee a confidential medical evaluation and follow-up at no cost to the employee provided the District pre-approves the healthcare professional. The District will provide the healthcare professional: a copy of this policy and its Regulations; a description of the exposed employee's duties as they relate to the exposure incident;

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documentation of the route(s) of exposure and the 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, which are the employer's responsibility to maintain. The exposed employee's blood should also be tested as soon as possible after consent from the exposed employee is obtained. The District shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation; the healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination. The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to: (a) that the employee has been informed of the results of the evaluation; and (b) that the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment. All other findings or diagnoses shall remain confidential and shall not be included in the written report.

### V. Recordkeeping

#### A. Medical Records

The District shall establish and maintain an accurate medical record for each employee with an occupational exposure as defined by this policy and its Regulations. Each medical record shall include:

- employee's name and Social Security number, as permitted by law;
- employee's Hepatitis B vaccination status including the dates of vaccination and any medical records relative to the employee's ability to receive vaccination; and
- a copy of the results of all results of examinations, medical testing, and follow-up procedures conducted in accordance with Regulation IV.B of this policy.

Medical records shall be confidential and not disclosed or reported without the employee's express written consent to any person within or outside of the District except as may be required by law.

Medical records shall be maintained by the District for at least the duration of employment plus thirty (30) years.

#### B. Training Records

Training consistent with this policy, its Regulations, standards of the Occupational Safety and Health Administration (OSHA), and best practices shall be conducted annually for all District employees in a manner consistent across all job sites, with differentiated training as appropriate for those with specialized job descriptions.

Training shall include specific procedures for: handling spilled blood or other potentially infectious materials; handwashing; removing contaminated gloves; and removing contaminated gowns, aprons, and masks. Copies of written procedures shall be maintained on District and/or school websites.

The District shall maintain training records including:

- the dates of the training sessions;
- the contents or a summary of the training sessions;
- the names and qualifications of persons conducting the training; and

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- the names and job titles of all persons attending the training sessions.

Medical records shall be maintained by the District for three (3) years from the date on which the training occurred.