BUUSD Mandatory Training

As a new employee, you will need to complete the district's annual mandatory training before you begin employment. The training covers several items, including Ferpa (student records), Bloodborne Pathogens, Alice Training, and VOSHA training information. You will be receiving more information regarding this at your new hire onboarding session.

You will be receiving an email from our SafeSchool and Alice programs with these mandatory Training at the start of the new school year. You will need to be signed in to your school email account to complete the training.

If you do not have a system to complete your training, please let us know. We do have equipment that you can use at the central office if needed.

OSHA® FactSheet

Hepatitis B Vaccination Protection

Hepatitis B virus (HBV) is a pathogenic microorganism that can cause potentially life-threatening disease in humans. HBV infection is transmitted through exposure to blood and other potentially infectious materials (OPIM), as defined in the OSHA Bloodborne Pathogens standard, 29 CFR 1910.1030.

Any workers who have reasonably anticipated contact with blood or OPIM during performance of their jobs are considered to have occupational exposure and to be at risk of being infected. Workers infected with HBV face a risk for liver ailments which can be fatal, including cirrhosis of the liver and primary liver cancer. A small percentage of adults who get hepatitis B never fully recover and remain chronically infected. In addition, infected individuals can spread the virus to others through contact with their blood and other body fluids.

An employer must develop an exposure control plan and implement use of universal precautions and control measures, such as engineering controls, work practice controls, and personal protective equipment to protect all workers with occupational exposure. In addition, employers must make hepatitis B vaccination available to these workers. Hepatitis B vaccination is recognized as an effective defense against HBV infection.

HBV Vaccination

The standard requires employers to offer the vaccination series to all workers who have occupational exposure. Examples of workers who may have occupational exposure include, but are not limited to, healthcare workers, emergency responders, morticians, first-aid personnel, correctional officers and laundry workers in hospitals and commercial laundries that service healthcare or public safety institutions. The vaccine and vaccination must be offered at no cost to the worker and at a reasonable time and place.

The hepatitis B vaccination is a non-infectious, vaccine prepared from recombinant yeast cultures, rather than human blood or plasma. There is no risk of contamination from other bloodborne pathogens nor is there any chance of developing HBV from the vaccine.

The vaccine must be administered according to the recommendations of the U.S. Public Health Service (USPHS) current at the time the procedure takes place. To ensure immunity, it is important for individuals to complete the entire course of vaccination contained in the USPHS recommendations.

The great majority of those vaccinated will develop immunity to the hepatitis B virus. The vaccine causes no harm to those who are already immune or to those who may be HBV carriers. Although workers may desire to have their blood tested for antibodies to see if vaccination is needed, employers cannot make such screening a condition of receiving vaccination and employers are not required to provide prescreening.

Employers must ensure that all occupationally exposed workers are trained about the vaccine and vaccination, including efficacy, safety, method of administration, and the benefits of vaccination. They also must be informed that the vaccine and vaccination are offered at no cost to the worker. The vaccination must be offered after the worker is trained and within 10 days of initial assignment to a job where there is occupational exposure, unless the worker has previously received the vaccine series, antibody testing has revealed that the worker is immune, or the vaccine is contraindicated for medical reasons. The employer must obtain a written opinion from the licensed healthcare professional within 15 days of the completion of the evaluation for vaccination. This written opinion is limited to whether hepatitis B vaccination is indicated for the worker and if the worker has received the vaccination.

Declining the Vaccination

Employers must ensure that workers who decline vaccination sign a declination form. The purpose of this is to encourage greater participation in the vaccination program by stating that a worker declining the vaccination remains at risk of acquiring hepatitis B. The form also states that if a worker initially declines to receive the vaccine, but at a later date decides to accept it, the employer is required to make it available, at no cost, provided the worker is still occupationally exposed.

Additional Information

For more information, go to OSHA's Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics web page at: https://www.osha.gov/SLTC/bloodbornepathogens/index.html.

To file a complaint by phone, report an emergency, or get OSHA advice, assistance, or products, contact your nearest OSHA office under the "U.S. Department of Labor" listing in your phone book, or call us toll-free at (800) 321-OSHA (6742).

This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory-impaired individuals upon request. The voice phone is (202) 693-1999; teletypewriter (TTY) number: (877) 889-5627.

For assistance, contact us. We can help. It's confidential.

DSG 1/2011

STATEMENT OF PURPOSE:

All schools are required to have a bloodborne pathogens exposure control plan. Universal precautions are to be utilized with all students and with any exposure to blood or bodily fluids.

AUTHORIZATION/LEGAL REFERENCE:

21 V.S.A. § 201 – Occupational policy
http://legislature.vermont.gov/statutes/section/21/003/00201

21 V.S.A. § 224 – Rules and standards
http://legislature.vermont.gov/statutes/section/21/003/00224

29 CFR 1910.1030 – Bloodborne Pathogens - U.S. Department of Labor: Occupational Safety and Health Administration
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10051

Vermont Agency of Education – VT Standards Board for Professional Educators 5440-65/65A School Nurse/ Associate School Nurse (April 12, 2017) http://education.vermont.gov/documents/educator-quality-licensing-rules#page34 pg. 132- 137

DEFINITION:

Bloodborne Pathogens Exposure Control Plan - Each employer having an employee(s) with anticipated occupational exposure to bloodborne pathogens shall establish a written Exposure Control Plan designed to eliminate or minimize employee exposure. The Plan will be developed in accordance to OSHA Standards for Bloodborne Pathogens as listed in the above reference.

REQUIRED SCHOOL NURSE/ASSOCIATE SCHOOL NURSE ROLES:

- Review school's bloodborne pathogens exposure control plan, annually; alert administration of new guidelines as necessary.
- Develop safe practices for disposal of needles, other sharps and contaminated waste and work with school administrators to implement them.
- Establish procedures for use of personal protective equipment for cleaning blood and body fluid spills and proper disposal; inform appropriate staff in procedure as needed. Work with school administrators to implement procedures and protocols
- It is best if the sink used for cleaning of blood injuries is located away from refrigerator, medicine cabinet and any eating surfaces.
- Provide information to students and staff about safe practices when injuries occur on school grounds or school bus. Implement post exposure control plan in the event of blood or bodily fluid exposure.

SUGGESTED SCHOOL NURSE/ASSOCIATE SCHOOL NURSE ROLES:

- Act as a resource for bloodborne pathogen annual staff training
- Provide first aid kits to classroom teachers, recess duty staff, bus drivers and staff on field trips which include gloves/protective barriers and bandaging supplies.

RESOURCES:

Caring for Our Children: National Health and Safety Performance Standards 3.2.3.4: Prevention of Exposure to Blood and Body Fluids http://nrckids.org/index.cfm/products/stepping-stones-to-caring-for-our-children-3rd-edition-ss3/stepping-stones-to-caring-for-our-children-3rd-edition-ss3/ pg. 39. See also cleaning, sanitizing and disinfecting

Centers for Disease Control and Prevention: Bloodborne Pathogens (National Institute for Occupational Safety and Health Education and Information Division)

- Healthcare-associated Infections (HAIs) http://www.cdc.gov/HAI/settings/outpatient/basic-infection-control-prevention-plan-2011/transmission-based-precautions.html
- Guide to Infection Prevention for Outpatient Settings: Minimum Expectations for Safe Care http://www.cdc.gov/HAI/settings/outpatient/outpatient-care-guidelines.html
- Self-Inspection Checklist http://www.cdc.gov/niosh/docs/2004-101/chklists/n77blo~1.htm
- Healthcare Infection Control Practices Advisory Committee (HICPAC) http://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html

Food and Drug Administration of the U.S. (2016) *Safely Using Sharps (Needles and Syringes) at Home, at Work and on Travel* http://www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/HomeHealthandConsumer/ConsumerProducts/Sharps/default.htm

Managing Infectious Diseases in Child Care and Schools, 4th Ed: A Quick Reference Guide
Edited by Susan S. Aronson, MD, FAAP and Timothy R. Shope, MD, MPH, FAAP
... 978-1-61002-050-3 9781610020510 978-1-61002-051-0 aapbk;9781610020510/1 9781610020503 Managing Infectious Diseases in Child Care and Schools, 4th Ed Managing Infectious Diseases in Child Care and Schools, 4th Ed | A Quick Reference Guide, Book | Published in 2016 ISBN (electronic): 978-1-61002-051-0

Vermont Department of Health HIV program
http://www.healthvermont.gov/prevent/aids/aids_index.aspx

U.S. Department of Labor: Occupational Safety and Health Administration
https://www.osha.gov/SLTC/bloodbornepathogens/bloodborne_quickref.html
OSHA Fact Sheet: https://www.osha.gov/OshDoc/data_BloodborneFacts/bbfact01.html

OSHA Interpretation:
https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=INTERPRETATIONS&p_id=24779

OSHA BBP webpage @ https://www.osha.gov/SLTC/bloodbornepathogens/index.html

SAMPLE POLICIES, PROCEDURES AND FORMS:

Bloodborne Pathogens: Self-Inspection Checklist

http://www.cdc.gov/niosh/docs/2004-101/chklists/n77blo~1.htm

Definition

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. That definition goes farther that actual exposure and includes the concept of "reasonably anticipated." This requires the employer to evaluate employees jobs and determine if they could be reasonably exposed during the course of their employment activities. I do have a link to the NIOSH checklist for schools to assist you. http://www.cdc.gov/niosh/docs/2004-101/chklists/n77blo~1.htm (12/1/16, personal communication, Daniel Whipple, OHST, VOSHA Program Manager, Montpelier, VT)

Sample Compliance Assistance from the Vermont Department of Labor

http://labor.vermont.gov/vosha/compliance-assistance/

What is VOSHA Compliance Assistance?

VOSHA Compliance Assistance is the outreach arm of the Vermont Occupational Safety and Health Agency. Compliance Assistance Specialists can provide general information about VOSHA standards and compliance assistance resources. They respond to requests for help from a variety of groups, including small businesses, trade associations, union locals, and community and faith-based groups. There is one Compliance Assistance Specialist in each OSHA Area Office in states under federal jurisdiction. They are available for seminars, workshops, and speaking events. They promote cooperative programs, such as Consultation Programs, the Voluntary Protection Programs, the Strategic Partnerships Program, and the Alliance Program. They also promote OSHA's training resources and the tools available on the OSHA web site. The Compliance Assistance Specialist for Vermont is Daniel Whipple and he can be reached at (802) 334-4367 or email at dan.whipple@vermont.gov

Sample HIV Policy

http://education.vermont.gov/sites/aoe/files/documents/edu-healthy-safe-schools-hiv-model-policy.pdf (Revised: 8/19/16)

Sample Blood Borne Pathogen Exposure Control Plan (Madison Public School District)

http://www.madisonpublicschools.org/cms/lib7/NJ01000205/Centricity/Domain/47/Blood_Borne_Pathogen_Exposure_Control_Plan_Madison_Public_Schools-REVISED.pdf

Sample OSHA Bloodborne Pathogens and Hazard Communication Standards

https://www.osha.gov/Publications/osha3186.html

Sharps Containers in School c/o Debra Pierce, Environmental Engineer IV, Agency of Natural Resources**,** personal communications June 9, 2017

The used sharps are not considered Hazardous Waste, they fall under Regulated Medical Waste. While there are new Hazardous Waste Rules in place, there has not been a change in the Solid Waste Management Rules where the Regulated Medical Waste applies. The schools should continue as they have been until there are changes in the Rules.

Procedure Addressing Regulated Medical Waste (RMW) Definitions and the Handling and Treatment of RMW (referenced as the **RMW Procedures below**) can be found at:
http://www.anr.state.vt.us/dec/wastediv/solid/pubs/MedWaste.pdf

1) To address how to dispose of minor spills including vomit:

- By definition, these spills are not considered RMW **unless they contain visible blood** so RMW Procedures do not govern, see page 3 under the definition of RMW (a)(2)(B):

  "Other potentially infectious liquid body fluids, including cerebrospinal fluid, synovial, pleural, peritoneal and amniotic fluid; not including nasal secretions, sputum, tears, sweat, urine, and vomitus unless they contain visible blood"

2) To address how to dispose of bags after a blood spill:

- By definition, these spills are considered RMW, see page 3 under the definition of RMW (a)(2)(C):

  "Items saturated or dripping with blood or with potentially infectious body fluids and those caked with dried blood or with potentially infectious dried body fluids."

- It has been the practice in the past that, **when the amount of blood is minimal**, absorbent materials are added to the bag and then the bags are sealed and safely disposed of in the dumpster.

3) To address where is the language specifying the use of red bags:

- The color of the bags is **not specified**, only that they need to prevent leaking, see page 6 under Section 3 (II)(b) and (c):

  Section (II)(b)(2) Refers to Packaging:

  "(2) Containers shall not be leaking when shipped."

4) To address the disposal of sharps containers:

Open the top of the container that is filled with used sharps (if it is a "red box" or a detergent bottle)

- Fill the container with a type of plaster like Plaster of Paris
- Place top back on container and ensure it is closed securely by duct taping the edges
- Cover any existing labels with a label that says "USED SHARPS" to ensure the receiving facility understands what it contains (if it is a "red box") or with a label that says "DO NOT RECYCLE" (if it is a detergent bottle)

Sharps Containers for Home Use c/o Debra Pierce, Environmental Engineer IV, Agency of Natural Resources, personal communications June 9, 2017
http://www.healthvermont.gov/sites/default/files/documents/2016/12/ID_hepC_prevention_sharps_disposal_flyer.pdf

Standard Precautions Compliance Assessment Tool
https://www.google.com/url?q=http://apic.org/Resource_/TinyMceFileManager/Academy/ASC_101_resources/Assessment_Checklist/Standard_Precautions_Compliance_Assessment_Tool.doc&sa=U&ved=0ahUKEwiW47232cbPAhXFTSYKHd70A6cQFggMMAM&client=internal-uds-

cse&usg=AFQjCNFPKWDx6X4u58Wnef51Et5xeHmAKg

Sample Training Materials

(Wisconsin Improving School Health Services Project [WISHeS]) Infection Control
http://c.ymcdn.com/sites/www.wpha.org/resource/resmgr/WiSHES_Project/Injury_and_Illness_Protocols.pdf (pg.6)

Bloodborne Pathogens School Training Program: Wisconsin Department of Public Instruction
http://dpi.wi.gov/sspw/pupil-services/school-nurse/training