Keller Independent School District

Bloodborne Pathogens

Exposure Control Plan

For Employees

KELLER INDEPENDENT SCHOOL DISTRICT
BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

The purpose of the Bloodborne Pathogens Exposure Control Plan is intended to protect affected employees from potential workplace hazards. Specifically, it is to reduce occupational exposure to the Hepatitis B Virus (HPV), Human Immunodeficiency Virus (HIV) and other bloodborne pathogens. This plan is consistent with the guidelines set forth by the US Department of Labor Occupational and Health Administration (OSHA). The intent of this plan is to proactively address the issue of bloodborne pathogens and demonstrate an effort to effectively respond to health concerns while respecting the rights of all students and employees.

The OSHA standard defines bloodborne pathogens as pathogenic microorganisms that are present in human blood and can infect and cause disease in persons who are exposed to blood containing the pathogens. The pathogens include, but are not limited to, the Hepatitis B Virus (HBV) and the Human Immunodeficiency Virus (HIV), which causes Acquired Immune Deficiency Syndrome (AIDS).

This plan is consistent with the Universal Precautions guidelines issued by the Centers for Disease Control (CDC) which are mandated by the Texas Health and Safety Code, Chapter 85, Subchapter 1, §85.203(a) (which specifically applies to healthcare workers only). That is, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Keller Independent School District is committed to providing a safe work environment for our entire staff. In pursuit of this endeavor, the following exposure control plan is provided as the minimum standard to implement the Bloodborne Pathogens Exposure Control Plan required in Health and Safety Code, 81.304.

There will be an annual review of this plan.

BASIC INFECTION CONTROL PRINCIPLES

All KISD employees should minimize direct contact with blood or body fluids through:

- Handwashing

- Adhering to universal precautions to prevent occupational exposure to bloodborne pathogens; and
- Utilizing appropriate barrier precautions (personal protective equipment -PPE).

EXPOSURE DETERMINATION CATEGORIES

All KISD employees who are exposed to blood, body fluids and/or other potentially infectious materials are considered to be at risk for exposure to bloodborne pathogens. The following job classifications contain personnel in whom employees may experience a reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious material that may result from the performance of an employee's duties. Exposure risk determination is tracked in Human Resources in position control. Employees who are considered to be at risk are notified of their risk level by Human Resources and given the opportunity to accept or decline the Hepatitis B vaccine. These employees are to be considered at risk:

1. Nurses;
2. Athletic Trainers;
3. Special Ed teachers/assistants when routinely working with severe, profound and/or medically fragile students, including students who may be served in STACC, CORE and LIFE;
4. KEEP employees;
5. Employees assigned to care for medically fragile students routinely requiring the use of sharps (needles);
6. Plumbers;
7. Building Operator on High School Campuses; and
8. Day shift Custodians.

IMPLEMENTATION

Occupational exposure to bloodborne pathogens may occur through performance of these tasks:

1) Cleaning up blood
2) Cleaning up body fluids
3) Rendering first aid
4) Controlling bleeding
5) Applying bandages
6) Diapering/assisting with toileting

7) Administering injectable medications

Universal Precautions

According to the Centers for Disease Control and Prevention (CDC), the concept of Universal Precautions requires employer and employee to treat all human blood and certain body fluids as infectious for the Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV) and other bloodborne pathogens. When it is difficult or impossible to determine the type of body fluid encountered, it should **always** be considered to be potentially infectious.

CDC Universal Precautions apply to:

Blood
Amniotic fluid (childbirth)
Cerebrospinal fluid (spine)
Pericardial fluid (heart)
Peritoneal fluid (abdomen)
Any body fluid visibly contaminated with blood Pleural fluid (lung)
Semen
Synovial fluid
Tissues
Vaginal secretions

Unless visible blood is present, CDC Universal Precautions **do not apply** to:

Feces
Nasal secretions
Saliva
Sputum
Sweat
Tears
Urine
Vomitus

The above substances to which Universal Precautions do not apply are not normally considered to be capable of transmitting bloodborne infections unless visible blood is present, because the infectious

microorganisms are either not present at all or are present, but not in significant enough numbers to cause infections.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Personal protective equipment is special clothing or equipment worn by the employee for protection against bloodborne pathogens and other hazards. This may include protective latex or non-latex gloves, eye protections, gowns, laboratory coats, aprons, CPR micro shields, face shields, resuscitation bags or masks.

If you wear a facemask you must also wear eye protection. Protective eyewear can be worn over eyeglasses or alone.

Keller ISD is responsible for providing and cleaning personal protective equipment at no charge to you.

The following guidelines should be used to determine if personal protective equipment should be available/worn:

Task/Activity	**Disposable Gloves**	**Gown**	**Mask**	**Protective Eye Wear**
Bleeding control w/ spurting blood	Yes	Yes	Yes	Yes
Bleeding control w/minimal blood	Yes	No	No	No
Emergency Childbirth	Yes	Yes	Yes	Yes
Blood drawing	Yes	No	No	Yes
Handling & cleaning instruments with microbial contamination	Yes	No, unless soiling likely	No	No

Measuring blood pressure	No	No	No	No
Measuring temperature	No	No	No	No
Giving an injection	Optional	No	No	No

WORK PRACTICE CONTROLS

The following work practices are to be implemented to eliminate or minimize employee exposure and must be examined and maintained on a regular schedule:

General Hygiene

- Hand washing facilities will be readily available;
- Employees will wash their hands with soap and water immediately or as soon as feasible after removal of gloves or other personal protective equipment following an exposure incident;
- Employees will wash their hands or other skin with soap and water or flush mucous membranes with water immediately or as soon as feasible following an exposure incident;
- If hand washing is not feasible, an appropriate antiseptic hand cleaner in conjunction with clean towel or paper towel shall be used;
- Employees are prohibited from eating, drinking, applying cosmetics, lip balm, or handling contact lenses where there is a reasonable likelihood of exposure to blood or other potentially infectious materials;
- Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter/bench tops where blood or other potentially infectious materials are present; and
- Employees will perform all procedures involving blood or other potentially infectious materials in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

Handling of Sharps (needles)

To minimize potential occupational exposure, the following will be implemented:

- Do not recap used needles by hand;
- Do not remove used needles from disposable syringes by hand;
- Do not bend, break, or otherwise manipulate used needles by hand;
- Use extreme caution when handling "sharps";
- Use a sharps incinerator device, if available, otherwise;
- Put used disposable sharps in puncture-resistant or approved biohazard containers located as close as practical to the use area;
- Never reach into a container full of contaminated sharp objects; and
- Full sharps containers can be filled with plaster of Paris mixture. The entire hardened container may then be put into the regular trash container for disposal.

Waste Management

- The school employee should wear disposable gloves when cleaning up vomitus, urine, feces or other body fluid spills. An approved dry absorbent material can be applied to the area, left for a few minutes to absorb the fluid and then swept up. The seepings should be disposed of in a double plastic trash bag. The broom and dustpan should be rinsed in a disinfectant.
- Disposable gloves are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised.
- The trash generated in the normal clinic (band-aids, cotton balls and gloves) may be disposed of in the lined trash can after being double bagged.
- Blood or body fluid spills are treated differently depending on the size and amount of fluid. A small spill is less than 100 cc and can be cleaned up with absorbent materials such as paper towels or pads, without dripping of the absorbent material. It must be contained in such a way so as not to cause pooling, puddling or dripping. The person doing the cleaning will wear gloves and other appropriate personal protective equipment, as necessary for the procedure.
- Used paper towels or other absorbent material can be placed in a regular trash bag or enclosed in discarded gloves without contaminating the environment. The area will be immediately wiped of all traces of blood or body fluid by an approved disinfectant. If these conditions cannot be met, the spill will be considered a large spill and treated as follows:
    - ❖ A large spill consists of 100 cc or more, cannot be easily cleaned up with paper towels or other absorbent pads, and causes pooling, puddling or dripping. A custodian will be

called to the scene to perform the clean-up procedure. The area will be kept clear of personnel/students and steps will be taken to prevent further contamination of the environment. Personal protective equipment will be needed to protect the individual during the clean-up process. Any used mops or similar cleaning devices will be disinfected. Regulated waste other than sharps is placed in appropriate containers that are closeable, leak resistant, labeled with a biohazard label or color-coded, and closed prior to removal.

- Sharps containers have to be managed properly because of their potential for disease production of their inherent ability to provide a portal of entry. The sharps containers must be puncture resistant, closeable, leak proof, and colored red. If a sharps incinerator device is not available, sharps must be disposed of as described above in **Handling of Sharps**.
- Garments that become penetrated by blood or other potentially infectious materials will be removed immediately, or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. All personal protective equipment will be removed prior to leaving the work area and placed in an appropriate designated area.
- Decontamination means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface of an item to the point when they are no longer capable of transmitting infectious particles and the surface of the item is rendered safe for handling, use, or disposal.
- All surfaces contaminated with body fluids should be cleaned with a disinfectant or one-part household bleach to nine parts water (1:9 solution). Other approved disinfectants may be utilized; however, they must be effective against HIV and HBV. In addition, the disinfectant must be tuberculocidal. The type of surface will dictate the cleaning method. All equipment and working surfaces must be cleaned and disinfected after contact with blood or other potentially infectious materials. All bins, pails and trash receptacles intended for reuse must be inspected and decontaminated immediately if there is visible contamination.

Restrooms and clinics also will be cleaned and decontaminated on a regularly scheduled basis.

HOUSEKEEPING

KISD employees will ensure that their worksite is maintained in a clean and sanitary condition. Guidelines and schedule for cleaning and method of decontamination is based upon the location within the facility, the type of surface to be cleaned, type of soil present and tasks or procedure being performed in an area.

INFORMATION ABOUT HEPATITIS B

The Disease

Hepatitis B is a viral infection caused by the Hepatitis B Virus (HBV) which causes death in 1-2% of patients. Most people with Hepatitis B recover completely, but approximately 5-10% become a chronic carrier of the virus. Most of these people have no symptoms but can continue to transmit the disease to others. Some may develop chronic active Hepatitis and Cirrhosis. HBV also appears to be a causative factor in the development of liver cancer. Thus, immunization against Hepatitis B can prevent acute Hepatitis and also reduce sickness and death from chronic active Hepatitis, Cirrhosis, and liver cancer.

All employees who have been identified as having occupational exposure to blood or other potentially infectious materials must be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine must be offered within ten (10) days of the beginning of the school year or within 10 working days of their initial assignment to work involving the potential for occupational exposure, unless:

1) The employee has previously had the vaccine;
2) Antibody testing reveals that the employee is immune; or
3) Medical reasons prevent the employee from being vaccinated.

The first injection (in the arm) is made within 10 working days of the beginning of the school year or 10 working days of an employee's initial assignment. The second injection should be given one month after the first. The third injection should be given six months after the initial dose.

Approximately 90% of those vaccinated will develop protection against the Hepatitis B virus. Employees who decline the Hepatitis B vaccine must sign a declination form. The employee may request and obtain the vaccination at a later date (at no cost) if he/she continues to be exposed.

Possible Vaccine Side Effects

The incidence of side effects is very low. No serious side effects have been reported with the vaccine. A few persons experience tenderness and redness at the site of the injection. Low-grade fever may occur. Rash, nausea, joint pain and mild fatigue have also been reported. The possibility exists that more serious side effects may be identified with more extensive use.

TRAINING

All employees with occupational exposure will participate in a training program at the initial assignment to a task where occupational exposure may take place. The training shall be provided within 10 working days of the beginning of the school year or 10 working days of an employee's initial assignment. Refresher training for employees will be offered yearly.

The training program will contain at a minimum the following elements:

1) A general explanation of the epidemiology and symptoms of bloodborne diseases;
2) An explanation of the modes of transmission of bloodborne pathogens;
3) An explanation of the KISD exposure control plan and the means by which the employee can obtain a copy of the written plan;
4) An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
5) An explanation of the use and control methods that will prevent or reduce exposure, including appropriate work practices and personal protective equipment;
6) Information on the types, proper uses, removal, handling, decontamination and disposal of personal protective equipment;
7) An explanation of the Hepatitis B vaccine program for KISD;
8) Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;
9) An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available;
10) Information on the post-exposure evaluation and follow-up that KISD is required to provide for the employee following an exposure incident; and
11) A contact person to assist the employee with questions and answers.

RECORD KEEPING

The District will establish and maintain a method of notifying eligible employees of the BBP plan as it relates to their occupational exposure. Records of this notification will be maintained by the Human Resources Department. It is the responsibility of the employee to maintain record of their immunizations in collaboration with their primary medical provider or facility where the immunizations were received. The District will establish and maintain training records which will be maintained by the Professional Development Department. A copy of immunization records and training records should be provided to

the Health Services Department if requested. All medical and training records will be made available to the employee and to anyone having written consent from the employee.

EXPOSURE REPORTING

Exposure means a specific eye, mouth, non-intact skin, mucous membrane, or parental (piercing of the skin barrier by human bites, cuts, abrasions, needle sticks) contact with blood or other potentially infectious materials that result from the performance of the employees duties.

If you come into contact with blood or other body fluids that may be contaminated with bloodborne pathogens, immediately wash the exposed area with warm water and soap and proceed with the following steps:

1) Report the incident to your supervisor, campus school nurse (who will report to Director of Health Services) and Workers' Compensation office;
2) Report must include how, when and where the incident occurred as well as the identity of the individual from whose blood or other body fluids you came into contact; and
3) If you are with a school sponsored activity after school hours or on the weekend, go to the nearest medical treatment facility.

Your blood will be tested for HIV, Hepatitis B or Hepatitis C, only with your consent.

The employee is informed about what potential illnesses can develop and to seek early medical evaluation and subsequent treatment.

Following a report of an exposure incident, KISD shall make immediately available to the exposed employee, a confidential medical evaluation and follow-up, performed by or under the supervision of a licensed physician, or by or under the supervision of a licensed healthcare professional. All medical evaluations and procedures including the Hepatitis B vaccine series and post-exposure evaluation and follow-up, including prophylaxis will be made available at no cost to the employee. All findings or diagnosis shall remain confidential. All exposure incidents (e.g. "sticks" by needles or other "sharps") are to be recorded and reported on the Texas Department of Health "Contaminated Sharps Injury Reporting Form" - Form E59-10666.

A record of the exposure incident shall be maintained by the Workers' Compensation office.

Interaction with Healthcare Professionals

A written opinion is obtained from the healthcare professional who evaluates employees of this facility or organization after an exposure incident. In order for the healthcare professional to adequately evaluate the employee, the healthcare professional is provided with:

1) A copy of the KISD exposure control plan;
2) A description of the exposed employee's duties as they relate to the exposure incident;
3) Documentation of the route(s) of exposure and circumstances under which the exposure occurred;
4) Results of the source individual's blood tests (if available; and
5) Medical records relevant to the appropriate treatment of the employee.

Written opinions are obtained from the healthcare professional in the following instances;

1) When the employee is sent to obtain the Hepatitis B vaccine, or
2) Whenever the employee is sent to the healthcare professional following an exposure incident.

Healthcare professionals are instructed to limit their written opinions to:

1) Whether the Hepatitis B vaccine is indicated;
2) Whether the employee has received the vaccine;
3) The evaluation following an exposure incident;
4) Whether the employee has been informed of the results of the evaluation;
5) Whether 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 diagnosis shall remain confidential and shall not be included in the written report); and
6) Whether the healthcare professional's written opinion is provided to the employee within 15 days of completion of the evaluation.

SAFETY RULES CHECKLIST FOR EMPLOYEES

All employees must obey the following rules for their safety. You must do the following:

- Know your job classification concerning exposure to biohazards;
- Treat **ALL** blood, body fluids and other infectious agents as potentially infectious;
- Know where the copy of the KISD Bloodborne Pathogens Exposure Control Plan is located and take time to read;
- Handle blood and other body fluids in a way that avoids splashing, spraying or causing droplets;

- Wear gloves and personal protective equipment when coming in hand contact with blood, other potentially infectious material, mucous membranes or non-intact skin; Remove gloves, lab coats and any other protective equipment before leaving the work area;
- Wash hands with soap and water after removing gloves;
- Keep all work areas clean;
- Clean contaminated work surfaces with an approved disinfectant after any spill and at the end of each work shift;
- Place regular waste in appropriate containers;
- Dispose of regulated waste according to regulations;
- Place blood specimens and other potentially infectious materials in a container that prevents leakage during collection, handling, processing, storage, transport or shipping;
- Employers must offer Hepatitis B vaccinations for at risk employees unless antibody testing shows that the employee has immunity. Vaccination is provided at no cost to the employee. (If the employee declines the vaccination, a statement must be signed indicating that the employee declines);
- If exposure to potentially infectious materials occurs (such as a needlestick or cut), you must complete an accident report and notify your supervisor, campus nurse (who will notify Director of Health Services) and Workers' Compensation Office immediately;
- Employers must keep training records showing annual training; and
- Place all contaminated needles and other sharps in containers that are puncture resistant, leak proof and appropriately labeled or color- coded.

SAMPLE NOTIFICATION LETTER:

Dear Keller ISD Employee,

The following job classifications/tasks routinely involve exposure to blood, body fluids, tissues, or other contaminated materials. The following employees are at risk for acquiring bloodborne pathogens, including Hepatitis B disease:

1. Nurses;
2. Athletic Trainers;
3. Special Ed teachers/assistants as defined when working with severe and profound medically fragile students and/or LIFE, STACC, and ECSE;
4. Plumbers;
5. Building Operators on HS campuses and Day Custodians on all other campuses;
6. Employees routinely assigned to care for medically fragile students requiring the use of "sharps" (needles).

Hepatitis B is a viral infection caused by hepatitis B virus (HBV) which causes death in 1-2% of patients. Most people with hepatitis B recover completely, but approximately 5-10% become chronic carriers of the virus. Most of these people have no symptoms but can continue to transmit the disease to others. Some may develop chronic active hepatitis and cirrhosis. HBV also appears to be a causative factor in the development of liver cancer. Thus, immunization against hepatitis B can prevent acute HBV and reduce sickness or death from chronic active hepatitis, cirrhosis and liver cancer.

Hepatitis B vaccine is prepared from yeast cultures, rather than human blood or plasma. Therefore, there is no risk of contamination from other bloodborne pathogens, nor is there any chance of developing HBV from the vaccine. The vaccine is administered in a series of three doses. The second injection should be given one month after the first and the third injection should be given six months after the initial dose. If you attended a public school during or after 2006-2007, you should have already received the series of three doses for the Hepatitis B vaccine.

To receive your NO COST Hepatitis B vaccine series you MUST:

1) Fill out the Hepatitis B Vaccine Offer Form.
2) Call Human Resources at 817-744-1080 or Health Services at 817-744-1055, if you have any questions.
3) Present this letter and your Keller ISD badge at the time you are receiving your first shot in the series.

If you choose to participate in the Hepatitis B vaccine offer, you will be notified by Human Resources when Tarrant County will be hosting the shot clinic. All clinics will be held at the Keller ISD Education Center (350 Keller Parkway, Keller, TX).

Sincerely,

Sheri Rich

Sheri Rich
Director of Human Resources

SAMPLE HEPATITIS B VACCINE OFFER FORM:

OFFICE OF THE HUMAN RESOURCES DEPARTMENT

KELLER INDEPENDENT SCHOOL DISTRICT
350 Keller Parkway
Keller, TX 76248

Hepatitis B Vaccine Offer Form

I understand that because of my current position in the District, I may be at risk of acquiring the Hepatitis B Virus (HBV), due to my possibly occupational exposure to blood or other potentially infectious material, I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If I continue to be employed in a job category identified to be at- risk for occupational exposure to blood or other potentially infectious materials and want to be vaccinated with Hepatitis B vaccine, I can receive the vaccine series at no charge to myself. Please contact Benefits in the Human Resources Department if you choose to take advantage of this benefit in the future at 817-744-1080.

Reason for accepting/declining the Hepatitis B vaccine series:

_____ I choose to complete the series of Hepatitis B Vaccination (3 doses)
_____ I have already received the complete Hepatitis B vaccination series (3 doses)
_____ I have demonstrated immunity for Hepatitis B through antibody testing
_____ The vaccine is medically contraindicated for me to receive at this time.
_____ I choose not to receive the vaccine at this time

Date: _____

Employee EIN: _____

Campus: _____

Job Title: _____

Employee Name (printed): _____

Employee Signature: _____

BBP PLAN ASSESSMENT TOOL

Question	Yes	No
1. The exposure plan is located at each site.		
2. Employees at occupational risk for bloodborne pathogens exposure are identified.		
3. Employees comply with universal precautions when performing duties.		
4. Employees employ safe work practices when performing duties.		
5. Handwashing facilities are readily available for employees		
6. Employees regularly wash their hands, especially after glove removal.		
7. Employees deposit contaminated sharps in biohazard containers.		
8. Employees replace filled biohazard containers when full.		
9. Employees do not eat, drink, apply cosmetics or lip balm, smoke or handle contact lenses in the work area.		
10. Food and beverages are not kept in close proximity to blood or bodily fluids.		
11. Employees wear personal protective equipment as appropriate.		
12. Employees dispose of personal protective equipment properly.		
13. Employees maintain a clean work area at all times.		
14. Employees use an approved germicide properly to		

decontaminate and clean facilities and equipment.		
15. Each employee knows his documented Hepatitis B status.		
16. Employees know where and to whom to report exposure incidents.		
17. Employees receive training and annual refresher training to the exposure control plan.		