

BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

The Davenport Community School District is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this endeavor, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29CFR 1910.1030 "Occupational Exposure to Bloodborne Pathogens."

The Exposure Control Plan (ECP) is a key document to assist our district in implementing and ensuring compliance with the standard, thereby protecting our employees. The ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
 - Universal precautions
 - Engineering and work practice controls
 - Personal Protective equipment
 - Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding an exposure incident

PROGRAM ADMINISTRATION

All District Administrators are responsible for the implementation of the Exposure Control Plan (ECP). The District will maintain, review and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. District staff responsible for this review include; Health Services representative(s), Associate Director of Human Resources, Director of Exceptional Education, Director of Human Resources, Operations Supervisor and District Medical Director.

Those employees who are determined to have occupational exposure to blood or Other Potentially Infectious Materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

The district will maintain and provide all necessary personal protective equipment. Disposable lab coats, goggles, vinyl or latex gloves and CPR mouthpieces are to be ordered through the District Warehouse. Each building/program is responsible for insuring the availability of this equipment. Nurse stations will clearly label storage locations for Personal Protective Equipment (PPE).

Health Services is responsible for providing sharps containers, labels, red bags and proper disposal of the above. To dispose of red bags or sharps containers contact the District’s Health Services building representative or the Associate Director of Human Resources.

Human Resources will be responsible for initial training and documentation of training. Building/Program Administrators are responsible for annual refresher training of staff. Documentation of this training is to be sent to the district Operations Supervisor, Operations Center by March 1 of each year. Copies of the written ECP will be available by accessing the District Website; www.davenportschools.org Operations: Health, Safety, Environment link.

Human Resources and Operations Supervisor will be responsible for ensuring that all employees with occupational exposure to blood or OPIM are offered HBV. Records for all personnel offered the Hepatitis B Vaccine (HBV) shall be maintained in their personnel file @ Human Resources as well as in a current database at the Operations Center.

EMPLOYEE EXPOSURE DETERMINATION

The following is a list of all job classifications in which all employees have occupational exposure:

<u>Job Title</u>	<u>Location</u>
Nurse	All
Health Para Educator	All
Secretary	Elementary/Intermediate Schools
Athletic Trainers	High School
Custodians	All
Student Security Assistants	All
Early Childhood Teachers	Children’s Village West, Hayes, Hoover, Monroe
Early Childhood Para	Same as above

The following is a list of job classifications with building assignment in which some employees have occupational exposure.

<u>Job Title</u>	<u>Location/Task/Procedure</u>
Spec. Ed. Para Educator	Severe & Mentally Disabled Class Rooms and Autistic Programs
Spec Ed Teachers	Same as above
Teachers	Kimberly Center West, Focus Program @ Lincoln & JB Young
Program Administrators	Kimberly Center West, Focus Program @ Lincoln & JB Young

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions:

All employees will utilize universal precautions.

Exposure Control Plan

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training provided by their Building/Program Administrator and Health Services. The ECP is available for review by all employees on the District website.

A district team (Health Services representative(s), Associate Director of Human Resources, Director of Exceptional Education, Director of Human Resources, Operations Supervisor and District Medical Director.) is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Engineering Controls and Work Practice:

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens.

- Puncture resistant containers – All needles, sharps, broken glass that may be contaminated will be placed in these containers. Sharps disposal containers are inspected and replaced by the building nurse whenever necessary to prevent overfilling.
- The District identifies the need for changes in engineering control and work practices through review of OSHA and Worker Comp records, employee suggestions, and team meetings. Representatives from all employee groups, Human Resources, Health Services and Operations are participants in this process. All Building/Program Administrators are responsible for implementation of any changes.

Personal Protective Clothing and Equipment (PPE)

- The District shall provide PPE for eyes, face, protective barriers and shields. This PPE will be used and maintained by each department in a sanitary and reliable condition wherever and whenever it is necessary by reasons of hazards or process or environment.
- Each department will make readily available any PPE, which is required to perform the tasks of that department. Each department is responsible for appropriate training in the use and care of PPE. Nurse stations will clearly label storage locations for PPE.

- PPE will be in proper repair at all times. Disposable gloves and lab coats, which are torn or contaminated, are to be disposed of properly. Each department will be responsible for replacing any PPE. PPE is available through the district warehouse.
- Vinyl or latex disposable gloves and Tyvek disposable lab coats are mandatory when contact with blood and/or OPIM is anticipated. Goggles and CPR mouthpieces also must be readily available.
- All personal protective equipment shall be removed prior to leaving the work area.

All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removal of gloves or other PPE
- Remove PPE after it becomes contaminated, and before leaving the work area.
- Used PPE may be disposed of in regular trash liners except when saturated with blood or liquid OPIM, and then Red Bags must be used.
- Wear appropriate gloves when it can be reasonably anticipated that there may be hand contact with blood or OPIM and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, and contaminated or if their ability to function as a barrier is compromised.
- Never wash or decontaminate disposable gloves or lab coats for reuse
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface
- Wear appropriate face and eye protections when splashes, sprays, spatters or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.

Housekeeping

- **Cleaning and Disinfecting**
All equipment and work surfaces shall be properly cleaned and disinfected on a routine basis after contact with blood or OPIM. Universal precautions should be practiced in the clean up with special emphasis on gloves, eye protection, and use of germicidal cleaners.
- **Infectious Waste Disposal**
The vast majority of wastes is contained within the materials used to clean them and should be disposed of in a sealed plastic bag, which is then placed into the building's trash container. Only regulated waste (material so saturated that bodily fluids are dripping from the material) need to be disposed of in red bags. This situation would result only from extraordinary spills of blood or OPIM. Any material resulting from an extraordinary spill must be red bagged and should be considered medically hazardous. Red bags are stored in the nurse's office. Disposal of red bags is arranged through

Health Services or the Associate Director of Human Resources. The red bags will be picked up in a timely manner and disposed of properly

- Disposal of Sharps and Needles
Contaminated sharps are discarded immediately or as soon as reasonably possible in containers that are closable, puncture-resistant, leakproof on sides and bottoms. Additional sharps containers can be obtained by contacting Health Services. Health Services will arrange for disposal of filled sharps containers.
- Laundry
All contaminated towels, wash clothes, or other materials determined to be regulated waste (materials so saturated that bodily fluids are dripping from the material) should be disposed of in red bags. The district does not provide laundry services for such contaminated materials.
- Labels
The following labeling methods are used in the district:
 Red Bag
 Biohazard Label
Building Nurses will ensure warning labels are affixed or red bags are used as required if regulated waste or contaminated materials are in the building. Employees are to contact the Associate Director of Human Resources if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc. without proper labels.

HEPATITIS B VACCINATION

Health Services will provide training to employees on Hepatitis B vaccinations, addressing the safety, benefits, efficacy, methods of administration, and availability. The hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified in the exposure determination section of this plan. Vaccination is encouraged unless:

- Documentation exists that the employee has previously received the series
- Antibody testing reveals that the employee is immune
- Medical evaluation shows that vaccination is contraindicated.

However, if an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost by contacting their building Principal. Documentation of refusal of the vaccination is kept at Human Resources and the Operations Center.

Vaccinations will be provided through Work Fitness. Following hepatitis B vaccinations the Nurse's Written Opinion will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, contact the building Nurse, Health Para, or in their absence the building Secretary. The building nurse will conduct a confidential medical evaluation and follow-up. Following the initial first aid (clean the wound, flush eyes or other mucous membrane, etc.) the following activities will be performed.

- Completion by employee of the District's BLOOD/BODY FLUID CONTACT REPORT FORM. # 5945 (Forms available on the computer – District Forms File)

Building Nurses with assistance from Work Fitness, will

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual if possible
- Obtain consent and make arrangement to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider (district worker comp doctor assigned to case).
- If the source individual is already known to be HIV, HCV, and/or HBV positive new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g. laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.
- If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elect to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

Health Services, Building Nurses will ensure that the health care professional evaluating an employee after an exposure incident receive the following:

- A description of the employee's job duties relevant to the exposure incident
- Route(s) of exposure

- Circumstances of exposure
- If possible, results of the source individual's blood test
- Relevant employee medical records, including vaccination status

Health Services, Building Nurses will provide the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

PROCEDURES FOR EVALUATION THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

Health Services representatives will review the circumstances of all exposure incident to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, goggles etc.)
- Location of the incident
- Procedure being performed when the incident occurred
- Employee's training.

If it is determined that revisions are needed, information is to be sent to the Operations Supervisor and Health Services representative to ensure that appropriate changes are made to this ECP.

EMPLOYEE TRAINING

Employees with occupational exposure will receive Bloodborne Pathogen Training. Training shall be provided as follows:

- At the time of Hire (Training arranged through Human Resources)
- Annually thereafter (Training will be done by Building Health Services/Program Administrator)

Elements of the training program to include:

- A copy of the OSHA Standard
- A copy and explanation of the District's Exposure Control Plan
- Epidemiology, modes of transmission, and symptoms of bloodborne disease
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitation of engineering controls, work practices, and PPE

- An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- An explanation of the basis for PPE selection
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated and that the vaccine will be offered free of charge
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- 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
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person conducting the training session

RECORDKEEPING

Training Records

Training records are to be completed for each employee upon completion of training. These documents will be kept for 3 years at the Operations Center, 1008 West Kimberly Road.

The training records include:

- The dates of the training sessions
- The contents or a summary of the training sessions
- The names and qualification of persons conducting the training
- The names and job titles of all persons attending the training sessions

Employee training records are provided upon written request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the Associate Director of Human Resources.

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.20, "Access to Employee Exposure and Medical Records." These confidential records are kept at the Operations Center, 1008 West Kimberly Road for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to: Associate Director of Human Resources, Administrative Service Center, 1606 Brady Street, Davenport, Iowa 52806

OSHA Recordkeeping

DCSD is exempt from keeping an OSHA 300 log, except when notified by OSHA to do a survey for the following year.

DEFINITIONS

Blood – human blood, human blood components and products made from human blood.

Bloodborne pathogens – pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).

Contaminated – the presence or the reasonably anticipated presence of blood or other potentially infectious materials.

Contaminated laundry – laundry that has been soiled with blood or other potentially infectious materials or may contain sharps.

Contaminated sharps – any contaminated object that can penetrate the skin including, but not limited to, needles, sharps, and broken capillary tubes.

Decontamination – the use of physical or chemical means to remove, inactivate or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use or disposal.

Disinfect – to inactivate virtually all recognized pathogenic microorganisms but not necessarily all microbial forms (e.g. bacterial endospores) on inanimate objects.

Engineering controls – controls that isolate or remove the hazard from the workplace.

Exposure incident – 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.

Handwashing facilities – a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

HBV - Hepatitis B Virus

HIV – Human Immunodeficiency Virus

Infectious waste – blood and blood products, contaminated sharps, pathological wastes, and microbiological wastes.

Licensed Healthcare Professional – a person whose legally permitted scope of practice allows him or her to independently perform the activities required from Hepatitis B Vaccination and Post-Exposure Evaluation and Follow-up.

Occupational Exposure – reasonable 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.

Other Potentially Infectious Material – the following body fluids: semen, vaginal secretion, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, and any body fluid that is visibly contaminated with blood.

Parenteral – exposure occurring as a result of piercing the skin barrier.

Personal Protective Equipment (PPE) – specialized clothing or equipment worn by an employee to protect him/her from a hazard.

Regulated Wastes - liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and wastes containing blood or other potentially infectious materials.

Sharps – any object that can penetrate the skin including, but not limited to, needles, sharps, and broken capillary tubes.

Source individual – any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.

Universal Precautions – refers to a method of infection control in which all human blood and body fluids are treated as if known to be infectious for HIV, HBV, or other bloodborne pathogens.

Work practice controls – controls that reduce the likelihood of exposure by altering the manner in which a task is performed.

ECP REVIEW/AVAILABILITY

The plan shall be reviewed and updated annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. An employee who feels his/her job duties would result in an exposure to blood or other potentially infectious materials on a constant basis may petition to be included in the pre-exposure

immunization group. The District, in consultation with the District Medical Director or other authorized medical personnel, will determine if the employee should be included in this pre-exposure immunization group. Petition requests should be sent to: Operations Supervisor, Operations Center, 1008 West Kimberly Road, Davenport, Iowa 52806.

Petitions should include:

- Employee name
- Job title
- Employment location
- Brief explanation of why you believe that you have occupational exposure to blood or other potentially infectious materials.
- Principal's signature (email acceptable)

A copy of the plan is available to all district employees for examination and copying on the District website; www.davenportschools.org Operations, Health, Safety, Environment link or upon request. Requests should be made to Operations Supervisor, Operations Center, 1008 West Kimberly Road, Davenport, Iowa 52806. Telephone: 386-3351.

The following Hepatitis B Vaccine Declination must be include in any HBV Employee information. The exact wordage must be used

HEPATITIS B VACCINE DECLINATION (MANDATORY)

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 (HBV) 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.

Signed: (Employee Name) _____

Date: _____

District contact personal:

Director of Human Resources: Linda McClurg 336-5089

Associate Director of Human Resources: Jill Cirivello 336-3813

Operations Supervisor: Donna Neppel Cooper 386-3351

Director of Exceptional Education: Betty Long 336-5005

Health Services Building Representative: Alma Bragg 388-9880

District Medical Director: Dr. Greg Garvin