

### **BLOODBORNE PATHOGEN POLICY**

RSU 56 is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following **Exposure Control Plan (ECP)** is provided to eliminate or minimize occupational exposure to blood borne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Blood borne Pathogens."

The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees. This 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 will be done within 30 days of employment and annually
- Recordkeeping- Declination form in personnel file and master spread sheet will be located in central office
- Procedures for evaluating circumstances surrounding exposure incidents

Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

### **PROGRAM ADMINISTRATION**

- Building administrators, their designees and the Director of Building, Grounds, and Transportation are responsible for implementation of the ECP. The Director of Building, Grounds, and Transportation will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures.
- 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 Director of Building, Grounds, and Transportation and/or school nurse will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers) and labels. Biohazard waste will be double bagged and disposed of as required by the standard. The Director of Building, Grounds, and Transportation will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.
- The Director of Building, Grounds, and Transportation, Building Administrators and/or their designees will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.
- Director of Building, Grounds, and Transportation, Building Administrators and/or their designees will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives.

**EMPLOYEE EXPOSURE DETERMINATION**

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

<b><u>Classification</u></b>	<b><u>Tasks/Procedures</u></b>
Nurses	Care of injured students and employees
Custodians/Bus Drivers	Cleaning and maintenance of RSU # 56 building and grounds; Care of injured students
School Secretaries/Principals/Asst.Principals	Care of injured students
All classroom teachers/Ed Techs	Care of injured students
Athletic Directors/Coaches/Athletic Trainer	Care of injured students
School Nutrition Director/Staff	Care of injured students
After School Program staff	Care of injured students
Substitute staff will be trained at the discretion of the supervisor and/or administrator	

**METHODS OF IMPLEMENTATION AND CONTROL**

Universal Precautions- All employees will utilize universal precautions.

**Exposure Control Plan**

Employees covered by the blood borne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work shifts by referring to the policy manual or the RSU No 56 website.

### **Engineering Controls and Work Practices**

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

Sharps disposal containers are inspected and maintained or replaced by the nursing staff annually or whenever necessary to prevent overfilling.

RSU 56 identifies the need for changes in engineering controls and work practices through the regular review of the Regulatory Agencies at State and Federal levels, and safety committee review.

The Director of Building, Grounds, and Transportation will evaluate new procedures and new products as needed.

Both front-line workers and management officials are involved in this process through staff meetings and district workshops and safety committee meetings.

The Director of Building, Grounds, and Transportation, Building Administrators and/or their designees is responsible for ensuring that these recommendations are implemented.

### **Personal Protective Equipment (PPE)**

PPE is provided to all RSU 56 staff and students at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided by the Building Administrator and their designees and the Director of Building, Grounds, and Transportation.

The types of PPE available to RSU 56 staff and students include but are not limited to gloves, masks, CPR masks and eye protection. PPE is located in the nurses' offices and/or custodian offices, and/or may be obtained through the appropriate department/locations. Employees will obtain PPE by contacting the above individuals.

All RSU 56 staff and students using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in the trash.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or other potential infected material (OPIM), and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.

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- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, splatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- 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.

The procedure for handling used PPE is as follows:

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded.

The procedure for handling sharps disposal containers is: district nurses will arrange for disposal of sharps container through Rumford Community Hospital.

Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

### **HEPATITIS B VACCINATION**

The Superintendent's designees will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability.

The hepatitis B vaccination series is available at no cost after initial employee training. Human resources will be responsible for providing new employees with the hepatitis B vaccination information and obtain declination signature if applicable. Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune; or 3) medical evaluation shows that vaccination is contraindicated.

However, if an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept in the Central Office Personnel File.

Vaccination plans will be arranged for by the employee through Swift River Occupational Health.

### **POST-EXPOSURE EVALUATION AND FOLLOW-UP**

Should an exposure incident occur, the Building Administrator and/or his/her designee will be contacted.

An immediately available confidential medical evaluation and follow-up will be conducted by the Superintendent's designee. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements 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.
- 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., law 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 elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

Occupational health ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard.

### **PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT**

The RSU 56 Safety Committee will review the circumstances of all exposure incidents to determine:

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

If revisions to this ECP are necessary, the Superintendent and/or designees will ensure that appropriate changes are made.

### **Employee Training**

All employees who have occupational exposure to bloodborne pathogens receive initial and annual training conducted by the Superintendent's designee/s.

All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA bloodborne pathogen standard.
- An explanation of RSU 56's ECP and how to obtain a copy.
- 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 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 the employer is required to provide for the employee following an exposure incident.
- 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 and/or color coding 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 are completed for each employee upon completion of training. These documents will be kept for at least three years in designated locations.

The training records include:

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

Employee training records are provided upon request to the employee or the employee’s authorized representative within 15 working days. Such requests should be addressed to RSU No.56’s Central Office and Human Resources.

**Medical Records**

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020, “Access to Employee Exposure and Medical Records.”

The RSU 56 Human Resources department is responsible for maintenance of the required medical records. These confidential records are kept in the Central Office 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 the Human Resources Department.

**OSHA Recordkeeping**

An exposure incident is evaluated to determine if the case meets OSHA’s Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by the Human Resources Department.

**RSU No. 56 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: \_\_\_\_\_ Date: \_\_\_\_\_  
(Employee Name)