

# **Community High School District 117**

**PART 1: Bloodborne Pathogens Standard**

**PART 2: Hazard Communications Standard**

Revised August 2013

# Part 1 Bloodborne Pathogens Standard

The following Exposure Control Plan includes all elements required by the OSHA bloodborne pathogens standard (29 CFR 1910.1030).

## Science Department Chairpersons

Elizabeth Potter-Nelson	Antioch High School
Mark Prorise	Lakes High School

## Fine Arts Department Chairpersons

Wanda Teddy	Antioch High School
Matthew Kastor	Lakes High School

## Applied Technology Department Chairperson

Susie Soukup	Antioch & Lakes High Schools
--------------	------------------------------

## Maintenance Department

Ray Finato	Antioch High School
------------	---------------------

## Principals

Brad Hubbard	Antioch High School
Steve Plank	Lakes High School

## Exposure Control Plan

### POLICY

CHSD 117 is committed to providing a safe and healthful work environment for its 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 Bloodborne Pathogens."

The ECP is a key document to assist the organization in implementing and ensuring compliance with the standard, thereby protecting 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
- Recordkeeping
- 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**

- Jennifer Nolde is responsible for implementation of the ECP. Jennifer Nolde will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact location/phone number: 847-838-7180.

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.

- Each Department will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. Each Department will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.
- Each Department 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. Contact location/phone number: 847-838-7180.
- Each Department and the Principals will be responsible for training, documentation of training, and making the written ECP is available to employees, OSHA, and NIOSH representatives. Contact location/phone number: 847-838-7180.

## **EMPLOYEE EXPOSURE DETERMINATION**

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

Job Title Department/Location

Certified Staff

Science Dept, Fine Arts Dept, Applied Tech Dept

Support Staff

District Employed Maintenance Staff

The following is a list of job classifications in which some employees at the District have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

Maintenance – Handling Regulated Chemicals

Maintenance – Handling Regulated Waste

Teachers – Handling Regulated Chemicals

Teachers – Handling Regulated Waste

## **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 contacting Jennifer Nolde in Human Resources or by viewing it through the District intranet. If requested, the District will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

Jennifer Nolde is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

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

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

This facility identifies the need for changes in engineering controls and work practices through review of OSHA records and employee interviews.

Both front-line workers and management officials are involved in this process in the following manner: Recommendation comes to management from front line Dept. Chairs.

Jennifer Nolde is responsible for ensuring that these recommendations are implemented.

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

PPE is provided to our employees at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided by GCN and Department Chairs.

The types of PPE available to employees are as follows:  
Gloves, eye protection, wash stations, footwear, face shields, AEDs.

PPE is located in the designated departments. and may be obtained through, Department Chairs by personal request. The listed individuals will ensure stock of items.

All employees 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 designated containers located in appropriate science, Applied Tech and Art rooms and the maintenance area.**
- Wear appropriate gloves when it is 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 or contaminated, or if their ability to function as a barrier is compromised.
- 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, spatters, 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.

## **Housekeeping**

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section “Labels”), and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling other regulated waste is:  
Waste is discarded in containers that are closeable,  
puncture resistant, leak proof and red in color.

Bins and pails (e.g., wash or emesis basins) are cleaned and  
decontaminated as soon as feasible after visible contamination.

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

### **Laundry**

The following contaminated articles will be laundered by this  
company:

None

## **Labels**

The following labeling methods are used in this facility:

Bio Hazard Label and Red Bags

Department Chairs are responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify **Department Chairs** if they discover regulated waste containers, refrigerators containing any chemicals or contaminated equipment, etc., without proper labels.

## **HEPATITIS B VACCINATION**

Jennifer Nolde will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability through the use of GCN training modules and personal interview.

The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this plan. 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 at the District Office.

Vaccination will be provided by employees' primary care physician or a physician of choice.

Following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. It 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 Jennifer Nolde at the following number 847-838-7180 jnolde@d117.org.

An immediately available confidential medical evaluation and follow-up will be conducted by Condell Medical Center. 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., 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 elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

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

Jennifer Nolde 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.

Jennifer Nolde ensures that the health care professional evaluating an employee after an exposure incident receives 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
- Human Resources Department provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

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

Jennifer Nolde 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 (O.R., E.R., patient room, etc.)
- procedure being performed when the incident occurred
- employee's training

If revisions to this ECP are necessary Jennifer Nolde will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.)

## **EMPLOYEE TRAINING**

All employees who have occupational exposure to bloodborne pathogens receive initial and annual training conducted by GCN.

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 the 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 use and limitations 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 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. Training materials for this facility are available on the District Intranet.

## **RECORDKEEPING**

### **Training Records**

Training records are completed for each employee upon completion of training. These documents will be kept for at least three years at GCN Training and by Department Chairpersons..

The training records include:

- the dates of the training sessions
- the contents or a summary of the training sessions
- the names and qualifications of persons conducting the training
- 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 Jennifer Nolde.

### **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."

Human Resources is responsible for maintenance of the required medical records. These confidential records are kept in the District 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 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 Jennifer Nolde.

**HEPATITIS B VACCINE DECLINATION (MANDATORY)**

**Given to employees as part of hiring packet. On file in the District Office personnel information**

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: \_\_\_\_\_

# **Part 2 Hazard Communication Standard**

The following Hazard Communication Program is based on the requirements of the OSHA Hazard Communications Standard, 29 CFR 1910.1200.

## **Model Hazard Communication Program**

### **1. Company Policy**

To ensure that information about the dangers of all hazardous chemicals used by CHSD 117 is known by all affected employees, the following hazardous information program has been established. Under this program, you will be informed of the contents of the OSHA Hazard Communications standard, the hazardous properties of chemicals with which you work, safe handling procedures and measures to take to protect yourself from these chemicals.

This program applies to all work operations in our company where you may be exposed to hazardous chemicals under normal working conditions or during an emergency situation. All work units of this company will participate in the Hazard Communication Program. Copies of the Hazard Communication Program are available in the District Office or on the District Intranet for review by any interested employee.

Jennifer Nolde is the program coordinator, with overall responsibility for the program, including reviewing and updating this plan as necessary.

### **2. Container Labeling**

Department Chairpersons will verify that all containers received for use will be clearly labeled as to the contents, note the appropriate hazard warning, and list the manufacturer's name and address.

Department Chairpersons will ensure that all secondary containers are labeled with either an extra copy of the original manufacturer's label or with labels marked with the identity and the appropriate hazard warning. For help with labeling, see Jennifer Nolde.

All containers are labeled with standard bio-hazard symbols.

### **3. Material Safety Data Sheets (MSDSs)**

Department Chairpersons are responsible for establishing and monitoring the company MSDS program. He/she will ensure that procedures are developed to obtain the necessary MSDSs and will review incoming MSDSs for new or significant health and safety information. He/she will see that any new information is communicated to affected employees. The procedure below will be followed when an MSDS is not received at the time of initial shipment:

- Containers will not be opened or distributed until MSDS sheets are obtained.
- Materials will be stored at room temperature in an appropriate locked cabinet until MSDS sheets are obtained.

Copies of MSDSs for all hazardous chemicals to which employees are exposed or are potentially exposed will be kept in close proximity to the chemical in the maintenance area and science area.

MSDSs will be readily available to all employees during each work shift. If an MSDS is not available, contact Jennifer Nolde.

MSDSs will be readily available to employees in each work area using the following format:

Paper Copies and Electronic Copies accessible through Flinn Scientific for Science information.

Note: If an alternative to paper copies of MSDSs is used, describe the format and how employees can access them.

When revised MSDSs are received, the following procedures will be followed to replace old MSDSs:

Outdated MSDS sheets will be removed and discarded. New MSDS sheets will be permanently affixed to existing file.

#### **4. Employee Training and Information**

Jennifer Nolde is responsible for the Hazard Communication Program and will ensure that all program elements are carried out.

Everyone who works with or is potentially exposed to hazardous chemicals will receive initial training on the hazard communication standard and this plan before starting work. Each new employee will attend a health and safety orientation that includes the following information and training:

- An overview of the OSHA hazard communication standard
- The hazardous chemicals present at his/her work area
- The physical and health risks of the hazardous chemicals
- Symptoms of overexposure
- How to determine the presence or release of hazardous chemicals in the work area
- How to reduce or prevent exposure to hazardous chemicals through use of control procedures, work practices and personal protective equipment
- Steps the company has taken to reduce or prevent exposure to hazardous chemicals
- Procedures to follow if employees are overexposed to hazardous chemicals
- How to read labels and MSDSs to obtain hazard information
- Location of the MSDS file and written Hazard Communication program

Prior to introducing a new chemical hazard into any section of this company, each employee in that section will be given information and training as outlined above for the new chemical hazard. The training format will be as follows:

A review of the use and handling methods that will prevent or reduce exposure will be completed. Appropriate Engineering Controls, Work Practice Controls and Personal Protective Equipment required will be presented and demonstrated if necessary.

#### **5. Hazardous Non-routine Tasks**

Periodically, employees are required to perform non-routine tasks that are hazardous.

Prior to starting work on such projects, each affected employee will be given information by Department Chairs about the hazardous chemicals he or she may encounter during such activity. This information will include specific chemical hazards, protective and safety measures the employee should use, and steps the company is taking to reduce the hazards, including ventilation, respirators, the presence of another employee (buddy systems), and emergency procedures.

Examples of non-routine tasks performed by employees of this company are:

None

## **6. Informing Other Employers/Contractors**

It is the responsibility of Ray Finato to provide other employers and contractors with information about hazardous chemicals that their employees may be exposed to on a job site and suggested precautions for employees. It is the responsibility of Ray Finato to obtain information about hazardous chemicals used by other employers to which employees of this company may be exposed.

Other employers and contractors will be provided with MSDSs for hazardous chemicals generated by this company's operations in the following manner:

Any contractors performing work on the CHSD 117 campus, and using chemicals provided by CHSD 117, will be provided with the associated MSDS information. Any needed training will be provided by contractor management and submitted to CHSD 117.

In addition to providing a copy of an MSDS to other employers, other employers will be informed of necessary precautionary measures to protect employees exposed to operations performed by this company.

Also, other employers will be informed of the hazard labels used by the company. If symbolic or numerical labeling systems are used, the other employees will be provided with information to understand the labels used for hazardous chemicals for which their employees may have exposure.

## **7. List of Hazardous Chemicals**

A list of all known hazardous chemicals used by our employees is attached to this plan. This list includes the name of the chemical, the manufacturer, the work area in which the chemical is used, dates of use, and quantity used. Further information on each chemical may be obtained from the MSDSs, located in the specified departments..

When new chemicals are received, this list is updated (including date the chemicals were introduced) within 30 days. To ensure any new chemical is added in a timely manner, the following procedures shall be followed:

Any non-routinely ordered chemical will be added to the list, MSDS sheets will be obtained prior to distribution, employees will be trained on proper chemical handling before use begins.

## **8. Chemicals in Unlabeled Pipes**

Work activities are sometimes performed by employees in areas where chemicals are transferred through unlabeled pipes. Prior to starting work in these areas, the employee shall contact Ray Finato for information regarding:

- The chemical in the pipes
- Potential hazards
- Required safety precautions. Include here the chemical list developed during the inventory. Arrange this list so that you are able to cross-reference it with your MSDS file and the labels on your containers. Additional useful information, such as the manufacturer's telephone number, an emergency number, scientific name, CAS number, the associated task, etc., can be included.

## **9. Program Availability**

A copy of this program will be made available, upon request, to employees and their representatives.