

Bolton Public Schools Exposure Control Plan October 2019

The District understands and acknowledges that the laws and interpretations of the laws may change over time. Readers of this manual are expected to check additional resources, such as Occupational Safety and Health Administration (OSHA), Connecticut Department of Labor's Division of Occupational Safety and Health (CONN-OSHA), etc. to ensure compliance with the law. This Manual is intended to provide general guidance and explanation of the procedures related to Bolton Public Schools Exposure Control Plan.

Table of Contents

	ment.	1 2
Chapter 1	Policy	3
Chapter 2	Program Administration	4
Chapter 3	Employee Exposure Determination	5
Chapter 4	Methods of Implementation and Control	6
	Universal Precautions	6
	Exposure Control Plan	6
	Engineering Controls and Work Practices	6
	Personal Protective Equipment (PPE)	7
	Procedure for Handling used PPE	7
	Housekeeping	8
	- Laundry	8
	- Labels	8
Chapter 5	Hepatitis B Vaccination	9
Chapter 6	Post-Exposure Evaluation and Follow-Up	10
Chapter 7	Administration of Post-Exposure Evaluation and Follow-Up	11
Chapter 8	Procedures for Evaluating the Circumstances Surrounding An Exposure Incident	12
Chapter 9	Employee Training	13
Chapter 10	Recordkeeping	14
	■ Training Records	14
	Medical Records	14
	OSHA Recordkeeping	14
	Sharps Injury Log	14

Acknowledgement

The Bolton Public Schools Exposure Control Plan has been developed to provide the District with general information regarding the implementation of workplace safety and health standards.

The revision to this document began in December 2018 and was completed in March 2019. The District acknowledges Occupational Safety and Health Administration's (OSHA) model Exposure Control Plan, which served as a template for the District's final product.

Introduction

The following Exposure Control Plan (ECP) includes all elements required by the OSHA Bloodborne Pathogens standard (29 CFR 1910.1030).

CHAPTER ONE: POLICY

Bolton Public Schools (District) 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 bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document to assist our District 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
- Recordkeeping
- Procedures for evaluating circumstances surrounding an exposure incident

The methods of implementation of these elements of the standard are discussed in the subsequent pages of this ECP.

CHAPTER TWO: PROGRAM ADMINISTRATION

The District's Human Resource (HR) Department is responsible for the implementation of the ECP, and falls under the oversight of the District's Safety Committee. The Safety Committee will 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 must comply with the procedures and work practices outlined in this ECP.

The District's HR Department will maintain and provide all necessary personal protective equipment (PPE), engineering controls (i.e., sharps containers), labels, and red bags as required by the standard. The HR Department will ensure that adequate supplies of the above mentioned equipment are available in the appropriate sizes.

The District's HR Department will be responsible for ensuring that all medical actions required are performed and that appropriate employee health and OSHA records are maintained.

The District's HR Department will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives.

Contact Information:

Bolton Public Schools Human Resource Department phone number: 860-643-1569 x 3405

CHAPTER THREE: EMPLOYEE EXPOSURE DETERMINATION

The following is a list of all job classifications in District in which **all** employees have occupational exposure. The following terms are used: Bolton Center School (BCS), Bolton High School (BHS), and Central Office (CO):

JOB TITLE DEPARTMENT/LOCATION

NurseBCS/BHSCustodianBCS/BHS/COAdministratorBCS/BHS/CO

The following is a list of job classifications in which **some** employees in 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:

JOB TITLE TASK/PROCEDURE

Paraprofessional Emergency First Aid/Health Care for Special Needs Students

Teacher, Coach Emergency First Aid/CPR
Crisis Team (Bldg. Level) Emergency First Aid/CPR

CHAPTER FOUR: METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions

OSHA defines Universal Precautions as an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for human immunodeficiency virus (HIV), Hepatitis B virus (HBV), and other bloodborne pathogens. Click here for OSHA Standard 1910.1030.

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. All employees have an opportunity to review this plan at any time during their work shifts by contacting the school nurse or an administrator. If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

The District Safety Committee 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 Practices

Engineering Controls: Methods used to reduce or eliminate workplace hazards.

Work Practices: Practices that reduce the possibility of exposure by changing the way a task is performed.

Engineering controls and work practices will be used to prevent or minimize exposure to bloodborne pathogens. Changes to this document will be based on an annual review by the Safety Committee. Those used are listed below:

Engineering Controls	Work Practices		
Sharps Containers	Hand Washing		
Biohazard Bags	Using PPE		
Eyewash station	No recapping needles		
	Safety glide syringes		
	Proper sharps disposal		
	Proper disinfectant procedures		
	Appropriate practices for handling laundry		

Sharps disposal containers are located in the Health Room at the Bolton Center School and the Bolton High School. They are inspected and replaced by the nurse whenever necessary to prevent overfilling.

The District identifies the need for changes in engineering control and work practices through employee feedback, review of OSHA records, and Safety Committee input. We evaluate new procedures and new products by reviewing literature on new products and information from our suppliers.

Personal Protective Equipment (PPE)

PPE is provided to our employees at no cost to them. Training is provided by the District's HR Department in the use of the appropriate PPE for the tasks or procedures employees will perform.

The types of PPE available to employees are as follows:

Gloves, eye protection, face shields, gowns, pocket masks, hand sanitizer.

PPE is located in the Health Room at the Bolton Center School and Bolton High School and may be obtained through the school nurse or an administrator. If items need to be ordered or specific sizes are needed, please contact the school nurse.

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 and contaminated PPE must be disposed of in a biohazard bag and placed in the health room for proper disposal.
- Wear appropriate gloves when it can be reasonably anticipated that there may be hand contact with blood or other potentially infectious material 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 other potentially infectious material pose a hazard to the eye, nose, or mouth.
- Remove immediately, or as soon as feasible any garment contaminated by blood or other potentially infectious material. Avoid contact with the outer surface.

Procedure for handling used PPE

Disposable items may be thrown away in the regular garbage, unless they are so covered in blood that if squeezed the blood would drip or if scratched, the dried blood would flake off. Those items should be put into a red biohazard bag located in the Health Room at the Bolton Center School or Bolton High School. All contaminated clothing should be put in a red biohazard bag and placed in the Health Room for proper disposal.

Housekeeping

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling sharps disposal containers is: District's Medical Advisor disposes of filled sharp containers.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and are appropriately labeled. Sharps disposal containers are available in the Health rooms.

All bins, pails, cans, and similar receptacles shall be inspected and decontaminated on a regularly scheduled basis by custodial staff.

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

Laundry

The following laundering requirements must be met:

- Handle contaminated laundry as little as possible, with minimal agitation, and while wearing gloves.
- Place wet contaminated laundry in red biohazard bag prior to putting it in the Health Room.

Labels

The following labeling method(s) is used in District:

Equipment to be labeled

contaminated laundry

sharps

sharps

sharps container

medical waste

red bag, biohazard label

CHAPTER FIVE: HEPATITIS B VACCINATION

The District's HR Department 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:

- 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.

Employees may elect or decline the Hepatitis B vaccine, by filling out the <u>Hepatitis B Vaccine Explanation</u> <u>form</u>. 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 employees personnel file.

Vaccination will be provided by the District's Medical Advisor. The school nurse will provide you with contact information.

CHAPTER SIX: POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, contact the school nurse or an administrator.

An immediately available confidential medical evaluation and follow-up will be conducted by Corp Care. Following the initial first aid the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the District 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 human immunodeficiency virus (HIV), Hepatitis C (HCV), and Hepatitis B (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.

CHAPTER SEVEN: ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

The District's HR Department 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.

The District's HR Department 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

The District's HR Department provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

CHAPTER EIGHT: PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The District's Safety Committee, along with District Administrators 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 protection, etc.)
- Location of the incident
- Procedure being performed when the incident occurred
- Employee's training

The School Nurse will record all percutaneous injuries from contaminated sharps in the Sharps Injury Log.

If revisions to this ECP is necessary, the District's HR Department (working in conjunction with the District Safety Committee), will ensure that appropriate changes are made.

CHAPTER NINE: EMPLOYEE TRAINING

All employees who have occupational exposure to bloodborne pathogens receive training conducted by the District's HR Department. Training is mandatory, must occur at the time of initial assignment to tasks where occupational exposure may take place, and at least annually thereafter.

Training will cover:

- 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 District'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 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 is offered free of charge.
- Information on the appropriate actions to be taken 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 post-exposure evaluation and follow-up that the District 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.				

CHAPTER TEN: RECORDKEEPING

Training Records

Training records are completed for each employee upon completion of training, and will be kept for a period of three years in the employee's personnel file located in the District's HR Department. 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 the District's HR Department.

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 District's HR Department is responsible for maintenance of the required medical records. These confidential records are kept 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 District's HR Department.

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). If it does, the OSHA 300 log must be completed. The determination and the recording activities are done by the school nurse.

Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in the Sharps Injury Log. All incidences must include at least:

• Date of the injury.

- Case/Incident number.
- Type of device (i.e. syringe, needle, etc.)
- Brand name of the device
- Work area where the incident occurred.
- Explanation of how the incident occurred.

This log is reviewed at least annually as part of the annual evaluation of the program and is maintained for at least five years following the end of the calendar year that they cover. If a copy is requested by anyone, it must have any personal identifiers removed from the report.