



ELKHART INDEPENDENT SCHOOL DISTRICT

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN CHAPTER 81, HEALTH AND SAFETY CODE SUBCHAPTER H

Facility Name: Elkhart Independent School District

Date of Adoption: January 22, 2001

Most Recent Updated: February 10, 2017

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN
CHAPTER 81, HEALTH AND SAFETY CODE
SUBCHAPTER H

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In accordance with Health and Safety Code, Chapter 81, Subchapter H, and analogous to OSHA Bloodborne Pathogens Standard, the following exposure control plan exists:

1. EXPOSURE DETERMINATION

The Elkhart Independent School District Bloodborne Pathogens Exposure Control Plan requires employers to perform an exposure determination for employees who have occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment. This exposure determination is required to list all job classifications in which employees have occupational exposure, regardless of frequency. The following job classifications apply:

- a) Maintenance and their Substitutes
- b) Custodial (Housekeeping) and their Substitutes
- c) Nurse and Substitute Nurses
- d) Special Education Teachers and their Substitutes
- e) Agriculture/Mechanics/Shop Teachers and their Substitutes
- f) Art Teachers and their Substitutes
- g) Coaches and their Substitutes
- h) Extra-Curricular Sponsors
- i) Cheerleader Sponsors
- j) Trainers (student and adult)
- k) P. E. Teachers and their Substitutes
- l) Science Teachers and their Substitutes
- m) Theatre Teachers and their Substitutes
- n) Home Economics Teachers and their Substitutes
- o) Bus Drivers and their Substitutes
- p) Administrators
- q) Cafeteria Workers and their Substitutes
- r) Others _____

The job descriptions for the above employees encompass potential occupational exposure risks to bloodborne pathogens.

2. IMPLEMENTATION SCHEDULE AND METHODOLOGY

Elkhart ISD's plan outlines a schedule and method of implementation for the various elements of the exposure control plan.

Compliance Methods

1. Safety Training in Bloodborne Pathogen Exposure Control will be provided for all employees in the Elkhart Independent School District via an annual online BBP update training.
2. Universal precautions are observed to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious materials are considered infectious regardless of the perceived status of the source individual.
3. Engineering and work practice controls are used to eliminate or minimize exposure to employees. Where occupational exposure remains after institution of these controls, personal protective equipment in the form of **gloves** is used.
4. Supervisors and workers examine and maintain engineering and work practice controls within the work center on a regular schedule.
5. **Handwashing facilities** are available to employees who may incur exposure to blood or other potentially infectious materials and are readily accessible for use following exposure.
6. If handwashing facilities are not feasible, an **antiseptic cleanser in conjunction with a clean cloth/paper towels, or antiseptic towelettes, or waterless disinfectant** is available. If these alternatives are used, then the hands are to be washed with soap and running water as soon as feasible.
7. After removal of personal protective gloves, employees wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and running water. If employees incur exposure to their skin or mucous membranes, then those areas are washed with soap and water or flushed with water as appropriate as soon as feasible following contact.
8. Clean up of blood or other potentially infectious materials will be accomplished using the following cleansers.
 - **HDQ for floors**
 - **Hepacide for other surfaces**

Needles

This section of the plan has been reviewed and, as injections are not administered by school employees, has been determined not to be applicable at this time. The plan will be updated annually and this section will be revised as appropriate if the need arises.

Contaminated Sharps Discarding and Containment

Contaminated sharps will be disposed of in a **Contaminated Sharps Container** located in the Nurses Office. The container will be closable, puncture resistant, leakproof on sides and bottom, and biohazard labeled or color-coded.

Work Area Restrictions

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. 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.

All procedures are conducted in a manner to minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

Collection of Specimens

This section of the plan has been reviewed and has been determined not to be applicable at this time. The plan will be updated annually and this section will be revised as appropriate should the need arise.

Contaminated Equipment

Equipment, which may become contaminated with blood or other potentially infectious materials, is examined prior to servicing or shipping and decontaminating as necessary unless the decontamination of the equipment is not feasible. Employers place a **biohazard label on all portions of contaminated equipment that remain** to inform employees, service representatives, and/or manufacturer, as appropriate.

Personal Protective Equipment

Personal protective equipment in the form of, **disposable gloves**, is provided without cost to employees. Personal protective equipment is chosen based on anticipated exposure to blood or other potentially infectious materials. The protective equipment is considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employee's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of the time for which the protective equipment is used. All personal protective equipment is fluid resistant.

All personal protective equipment is disposed of by the employer at no cost to employees. All replacements are made by the employer at no cost to employees.

All garments that are penetrated by blood are removed immediately or as soon as feasible and placed in an **appropriate container**. All personal protective equipment is removed prior to leaving the work area and placed in an **appropriate container**.

Gloves are worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. **All gloves provided are latex free.** (No employees, at the time of adoption of this plan, are Latex sensitive.)

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. Utility gloves are discarded if they are cracked, peeling, torn, punctured, exhibit other signs of deterioration, or when their ability to function as a barrier is compromised.

Housekeeping

Worksites are maintained in a clean and sanitary condition. A schedule for cleaning and the method of decontamination, based upon the location within the facility, the type of surface to be cleaned, the type of soil present, and the tasks or procedures being performed in the area follows.

- Restrooms are cleaned three or more times daily and as needed with EPA approved cleansers.
- Campus buildings are cleaned daily and as needed with EPA approved cleansers.
- Laundry facilities are cleaned daily and as needed with EPA approved cleansers.
- The Cafeteria is cleaned on an on-going basis and at the end of each day with EPA approved cleansers.
- Blood and other spills of potentially infectious materials on floors are cleaned with **HDQ, a one-to-ten mixture of bleach and water, or another EPA-approved disinfectant.**
- Blood and other spills of potentially infectious materials on other environmental surfaces are cleaned with **Hepacide, a one-to-ten mixture of bleach and water, or another EPA-approved disinfectant.**

All contaminated work surfaces are decontaminated after completion of procedures, immediately or as soon as feasible after any spill of blood or other potentially infectious material, and at the end of the work shift.

All containers used for contaminated materials are disposed of or inspected, cleaned, and decontaminated after use.

Protective coverings (e.g., plastic wrap, aluminum foil, etc.) used to cover equipment and environmental surfaces are removed and replaced as soon as feasible when they become contaminated.

Any broken glass that may be contaminated is not picked up directly with the hands. **Students must be instructed not to pick up broken glass on campus or in buildings.**

Blood and other potentially infectious material spills are cleaned up with **HDQ on floors and Hepacide on other surfaces. Cleaning tools such as mops will be decontaminated after use on Blood and other potentially infectious materials.**

Regulated Waste Disposal

This section of the plan has been reviewed and has been determined not to be applicable at this time. The plan will be updated annually and this section will be revised as appropriate should the need arise.

Laundry Procedures

Although soiled linen may be contaminated with pathogenic microorganisms, the risk of disease transmission is negligible if it is handled, transported, and laundered in a manner that avoids transfer of microorganisms to personnel, and environments. Rather than rigid rules and regulations, hygienic and common sense storage and processing of clean and soiled linen is recommended.

Laundry is processed at the following locations.

- Field House
- Old Field House
- High School Gym
- Middle School Gym
- Intermediate School 500 Building (non-bloody laundry only)
- Elementary School Nurse's Office (non-bloody laundry only)
- Special Education Trailer (non-bloody laundry only)
- Life Skills Trailer (non-bloody laundry only)
- Home Economics Room (non-bloody laundry only)

Disposable gloves are worn during the handling of laundry. Underwear is bagged separately for each individual. Bloody laundry is washed and dried separately. EPA approved laundry products are used. (At time of plan adoption) These include Nice and Clean and White and Brite.

Hepatitis B Vaccine

Hepatitis B vaccinations were offered the first year or two following plan adoption but the practice was discontinued by the third year.

Post Exposure Evaluation and Follow Up

When the employee incurs an exposure incident, the employee reports to his/her immediate supervisor, followed by the school nurse who reports the incident to the Superintendent's office. All employees who incur an exposure incident are offered a confidential medical evaluation and follow up as follows:

- Leave campus immediately for Dr. Larry Burch's (or replacement's) office with appropriate paper work.
- Documentation of the route(s) of exposure and the circumstances related to the incident.
- Identification and documentation of the source individual, unless the employer can establish that identification is infeasible and prohibited by state or local law. After obtaining consent, unless law allows testing without consent, the blood of the source individual should be tested for HIV/HBV infectivity, unless the employer can establish that testing of the source is infeasible or prohibited by state or local law.
- The results of testing of the source individual are made available to the exposed employee with the employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
- The employee is offered the option of having his/her blood collected for testing of the employee's HIV/HBV serological status. The blood sample is preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV serological status. If

the employee decides prior to that time that the testing will be conducted, then testing is done as soon as feasible.

- The employee is offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service.
- The employee is given appropriate counseling concerning infection status, results and interpretations of tests, and precautions to take during the period after the exposure incident. The employee is informed about what potential illnesses can develop and to seek early medical evaluation and subsequent treatment.
- The Superintendent is designated to assure that the policy outlined here is effectively carried out and maintains records related to this policy.

Interaction with Healthcare Professionals

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

- A copy of the school's exposure control plan
- A description of the exposed employee's duties as they relate to the exposure incident
- Documentation of the route(s) of exposure and circumstances under which the exposure occurred
- Results of the source individual's blood tests
- Medical records relevant to the appropriate treatment of the employee

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

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

Health care professionals are instructed to limit their written opinions to:

- Whether the Hepatitis B vaccine is indicated
- Whether the employee has received the vaccine
- The evaluation following an exposure incident
- Whether the employee has been informed of the results of the evaluation
- 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)
- Whether the healthcare professional's written opinion is provided to the employee within 15 days of completion of the evaluation

Use of Biohazard Labels

This section of the plan has been reviewed and has been determined not to be applicable at this time. The plan will be updated annually and this section will be revised as appropriate should the need arise.

Training

Training for all employees is conducted prior to initial assignment to tasks where occupational exposure may occur. All employees also receive **annual refresher training**. Training is to be **conducted within one year of the employee's previous training**.

Initial training during the 2000-2001 school year will be conducted by **Allied Mobil Health**. Following training will be provided via the Internet and will include an explanation of the following:

- Chapter 96. Bloodborne Pathogen Control
- OSHA Bloodborne Pathogen Final Rule
- Epidemiology and symptomatology of bloodborne diseases
- Modes of transmission of bloodborne pathogens
- Elkhart ISD's exposure control plan (i.e., points of the plan, lines of responsibility, how the plan will be implemented, where to access the plan, etc.)
- Procedures which might cause exposure to blood or other potentially infectious materials at this facility
- Control methods which are used at the facility to control exposure to blood or other potentially infectious materials
- Personal protective equipment available at this facility (types, use location, etc.)
- Hepatitis B vaccine program at the facility
- Procedures to follow in an emergency involving blood or other potentially infectious materials
- Procedures to follow if an exposure incident occurs, to include U.S. Public Health Service Post Exposure Prophylaxis Guidelines
- Post exposure valuation and follow up
- Signs and labels used at the facility
- An opportunity to ask questions with the individual conducting the training

Recordkeeping

According to OSHA's Bloodborne Pathogens Standard, medical records are maintained by the school nurse.

According to OSHA's Bloodborne Pathogens Standard, training records are maintained by the Superintendent.

ANNUAL REVIEW OF PLAN

(Signature of person responsible for maintaining training records)

Signature_____Date—January 2002

Signature_____Date—January 2003

Signature_____Date—January 2004

Signature_____Date—January 2005

Signature_____Date—February 2006

Signature_____Date—January 2007

Signature_____Date—January 2008

Signature_____Date—February 2009

Signature_____Date—January 2010

Signature_____Date—January 2011

Signature_____Date—January 2012

Signature_____Date—March 2013

Signature_____Date—March 2014

Signature_____Date—March 2015

Signature_____Date—June 2016

Signature.....Date—February 2017

APPENDIX B

ASSESSMENT TOOL

Criteria for Plan	Yes	No	N/A
1. The exposure control plan is located in each work center			
2. Employees at occupational risk for bloodborne pathogens exposure are identified			
3. Employees comply with universal precautions when performing duties			
4. Employees appropriately use engineering controls in the work center			
5. Employees employ safe work practices in performance of duties			
6. Handwashing facilities are readily accessible in the work centers			
7. Employees regularly wash their hands, especially after glove removal			
8. Employees deposit contaminated sharps in biohazard containers immediately after use			
9. Employees change filled biohazard containers when full			
10. Employees do not eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses in the work area			
11. Food and beverages are not kept in close proximity to blood or bodily fluids			
12. Employees do not mouth pipette/suction blood or bodily fluids			x
13. Employees place specimens in leak resistant containers after collection			x
14. Employees place specimens in biohazard leakproof containers for shipment			x
15. Employees properly decontaminate equipment before servicing or shipping for repairs or place a biohazard label to inform others the equipment remains contaminated.			
16. Employees wear the designated fluid resistant personal protective equipment/attire appropriate for the task at hand			
17. Employees place the contaminated personal protective equipment in the appropriate receptacles			
18. Employees maintain a clean environment at all times			
19. Employees use an EPA approved germicide properly to decontaminate and clean the facility and equipment			
20. Employees know the safe procedure for contaminated, broken glass clean up			
21. Employees demonstrate knowledge of the agency's policies regarding disposal and transport of regulated waste by placing regular waste, special waste, and/or biohazard waste in appropriate containers and transporting the waste according to policy			
22. Employees place wet laundry in leak resistant bags or containers and transport used laundry in biohazard leakproof containers.			
23. Each employee knows his documented hepatitis B vaccine status			
24. Employees know where and to whom to report exposure incidents			
25. An employee occupational exposure protocol is practiced in accordance with U.S. Public Health Service			
26. Employees are oriented and receive annual training to the exposure control plan			
27. Recording and reporting occupational exposures are conducted in accordance with OSHA's Bloodborne Pathogens Standard			
28. Medical and training records are maintained in accordance with OSHA's Bloodborne Pathogens Standard			