

SPRECKELS UNION SCHOOL DISTRICT

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

CAL/OSHA STANDARD, CCR-T8 5193

Last Annual Review or Revision Date: July 5, 2022

TABLE OF CONTENTS

| | |
|---|----|
| A. Purpose..... | 2 |
| B. Exposure Determination..... | 3 |
| C. Implementation Methodology..... | 3 |
| 1. Compliance Methods..... | 3 |
| 2. Personal Protective Equipment..... | 4 |
| 3. Housekeeping..... | 4 |
| 4. Waste Disposal..... | 5 |
| 5. Hepatitis B Vaccine and Post-Evaluation and Follow-Up..... | 5 |
| 6. Information and Training..... | 8 |
| 7. Record Keeping..... | 9 |
| 8. Evaluation and Review..... | 10 |
| Appendix “A”: RECORD OF HEPATITIS “B” VACCINE DECLINATION | 11 |

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

In accordance with the Cal/OSHA Bloodborne Pathogens Standard, the following exposure Control plan has been developed:

A. Purpose

The purpose of this exposure control plan is to:

1. Eliminate or minimize employee occupational exposure to blood or certain Other body fluids;
2. Comply with Cal/OSHA Bloodborne Pathogens Standard, CCR-T8 5193

B. Exposure Determination

The state of California (Cal/OSHA) requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or Other Potentially Infectious Material (OPIM). 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 may be expected to incur an occupational exposure, regardless of frequency. At district facilities the following job classification are in this category:

Health Aides Custodian/Maintenance Staff
Bus Drivers Special Education Instructional Aides

C. Implementation Methodology

Cal/OSHA also requires that this plan include the methods of implementation for the various requirements of the standard. The following complies with this requirement.

1. Compliance Methods

Universal precautions will be observed at all district facilities in order to prevent contact with blood or Other Potentially Infectious Materials (OPIM). All blood will be considered infectious regardless of the perceived status of the source individual.

Hand washing facilities shall be made available to the employees who incur exposure to the blood or other potentially infectious materials. Cal/OSHA requires that these facilities be readily accessible after incurring exposure.

Supervisors shall ensure that after the removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.

2. Personal Protective Equipment

PPE Provision

Supervisors are responsible for ensuring that the following provisions are met.

All personal protective equipment used in district facilities will be provided without cost to employees. The personal protective equipment shall consist of gloves. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employee's clothing or skin, under normal conditions of use and for the duration of time which the protective equipment will be used. Protective gloves will be available at each site where exposure exists, including on each school bus.

PPE Use

Supervisors shall ensure that the employee uses appropriate PPE unless the supervisor show that the employee temporarily and briefly declined to use PPE when under rare and extraordinary circumstances it was the employees professional judgment that in specific instance its use would have prevented the delivery of healthcare or posed an increased hazard to the safety of the worker or co-worker. When the employee or supervisor makes this judgment, the circumstances shall be investigated documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

PPE Accessibility

Supervisors shall ensure that appropriate PPE in the appropriate sizes is readily accessible at the work site or is issued without cost to employees. Hyper-allergenic gloves, glove liners, powerless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

Gloves

Gloves shall be worn where it is reasonably anticipated that employees will have contact with blood, non-intact skin, mucous membranes or other potentially infectious materials (OPIM) or when handling or touching contaminated items or surfaces.

Disposable gloves used at district facilities are not to be washed or decontaminated for re-use and are to be replaced when they become contaminated, 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 gloves is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or their ability to function as a barrier is compromised.

3. Housekeeping

Decontamination will be accomplished by utilizing the following materials: Lysol or 10% bleach solution.

All contaminated work surfaces will be decontaminated after completion of procedures and immediately after any spill of blood or OPIM as well as the end of the work shift if the surface may have become contaminated since the last cleaning. Any broken glassware which may be contaminated will not be picked up directly with the hands. A mechanical means shall be used.

4. Waste Disposal

Plastic bags will be available at all site locations where exposure exists. All contaminated items will be placed in designated plastic bags, sealed, and placed in trash dumpster. The designated plastic bags shall be placed in a secondary container if leakage of the primary container is possible. The second container shall be closeable, constructed to contain all contents and prevent leakage during handling, storage, and transport or shipping. Liquid or caked blood or OPIM that could be released during handling shall be handled as regulated waste as defined by Section 5193 (b).

Sharps shall be disposed via an approved container as defined in Section 5193 (b).

5. Hepatitis B Vaccine and Post-Exposure Evaluation and Follow-Up

General

The Spreckels Union School District shall make available the Hepatitis B vaccine and vaccination series to all employees* who have occupational exposure, and post exposure follow-up to employees who have had an exposure incident.

*(designated First Aid responders who respond only as a collateral duty and are not health care or public safety personnel will only be vaccinated after exposure to an incident where blood/OPIM is present)

The Superintendent or designee shall ensure that all medical evaluations and procedures including the Hepatitis B Vaccine, vaccination series and post exposure follow-up, including prophylaxis are:

- a) Made available at no cost to the employees;
- b) Made available to the employees at a reasonable time and place;
- c) Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional;
- d) Provided according to the recommendation of the U.S. Public Health Service.

All laboratory tests shall be conducted by an accredited laboratory at no cost to the employee.

Hepatitis B Vaccination

The Superintendent or designee is in charge of the Hepatitis B vaccination program.

Hepatitis B vaccination shall be made available to Health Aides only and only after Health Aides have received training in occupational exposure and within 10 working days of initial assignment unless the Health Aide has previously received the complete Hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

Participation in a pre-screening program shall not be prerequisite for receiving Hepatitis B vaccination.

If the Health Aide initially declines Hepatitis B vaccination but at a later date, while still covered under the standard decides to accept the vaccination, the vaccination shall then be made available.

All employees who decline the Hepatitis B vaccination shall sign a Cal/OSHA required waiver indicating their refusal (Appendix A).

If a routine booster dose of Hepatitis B vaccine is recommended by the U.S. Public Health Services at a future date, such booster doses shall be made available.

Post Exposure Evaluation and Follow-Up

All exposure incidents shall be reported, investigated and documented. When the employee incurs an exposure incident it shall be reported to their immediate supervisor.

Following a report of an exposure incident, the exposed employee shall immediately receive a confidential medical evaluation and follow-up, including at least the following elements:

- a) Documentation of the route of exposure, and the circumstances under which the exposure incident occurred;
- b) Identification of the source individual, unless it can be established that the identification is infeasible or prohibited by State or local law.
- c) The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine Bloodborne Pathogens infectivity. If consent is not obtained, the immediate supervisor shall establish that legally required consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
- d) When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.

- e) Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

Collection and testing of the blood for HBV and HIV serological status will comply with the following:

- a) The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained;
- b) The employee will be offered the option of having their blood collected for testing for HIV/HBV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological status.

All employees who incur an exposure incident will be offered post-exposure evaluation and follow-up in accordance with the Cal/OSHA standard. All post exposure follow-up will be performed by a medical clinic or group so designated by the school district for such purpose.

Information Provided to the Health Professional

The employee's immediate supervisor shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination and evaluation an employee after an exposure incident is provided the following additional information:

- a) A copy of 5193
- b) A written description of the exposed employee's duties as they are related to the exposure incident;
- c) Written documentation of the route of exposure and circumstances under which the exposure occurred;
- d) Results of the source individuals blood testing, if available; and
- e) All medical records relevant to the appropriate treatment of the employee including vaccination status.

Health Professional's Written Opinion

The employee's immediate supervisor shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.

The healthcare professional's written opinion for HBV vaccination and post exposure follow-up shall be limited to the following information:

- a) Whether vaccination is indicated for the employee and if the employee has received such vaccination;

- b) A statement that the employee has been informed of the results of the evaluation; and
- c) A statement that 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.

Note: all other findings or diagnosis shall remain confidential and shall not be included in the written report.

6. Information and Training

The Superintendent or designee shall insure that training is provided to the employees at the time of initial assignment to tasks where occupational exposures may occur, and that it shall be repeated within twelve months of the previous training. Training shall be provided at no cost to the employee and at a reasonable time and place. Training shall be tailored to the education and language level of the employee, and offered during the normal work shift. The training will be interactive and cover the following elements:

- a) An accessible copy of the standard and explanation of its contents;
- b) A discussion of the epidemiology and symptoms of Bloodborne diseases;
- c) An explanation of the modes of transmission of Bloodborne pathogens;
- d) Explanation of the Spreckels Union School District's Bloodborne Pathogen Exposure Control Plan, and the method for obtaining a copy;
- e) The recognition of tasks that may involve exposure;
- f) An explanation of the use and limitations of methods to reduce exposure, for example engineering controls, work practices and personal protective equipment (PPE);
- g) Information on the types, uses, location, removal, handling, decontamination, and disposal of PPE's;
- h) An explanation of the basis of selection PPE's;
- i) Information on the Hepatitis B vaccination, including efficacy, safety, method of administration, benefits, and that it will be offered free of charge;
- j) Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM;
- k) An explanation of the procedures to follow if an exposure incident occurs, including the method of reporting and medical follow-up;
- l) Information on the evaluation and follow-up required after an employee exposure incident;

The person conducting the training shall be knowledgeable in the subject matter.

Employees who have received training on Bloodborne pathogens in the twelve months preceding the effective date of this policy shall only receive training in provisions of the policy that were not covered.

Additional training shall be provided to employees when there are any changes of tasks or procedures affecting the employee's occupational exposure.

7. Record Keeping

Medical Records

The Superintendent or designee is responsible for maintaining medical records related to occupational exposure as indicated below. These records will be kept at the District Office.

Medical records shall be maintained in accordance with T8 California Code of Relation Section 3204. These records shall be kept confidential and not disclosed without employee's written consent and must be maintained for at least the duration of employment plus 30 years. The records shall include the following:

- a) The name and social security number of the employee;
- b) A copy of the employee's HBV vaccination status' including the dates of vaccination and ability to receive vaccination;
- c) A copy of all results of examination, medical testing, and follow-up procedures;
- d) A copy of the information provided to the healthcare professional, including a description of the employee's duties as they relate to the exposure incident, and documentation of the routes of exposure and circumstance of the exposure;
- e) A confidential copy of the healthcare professional's opinion.

Training Records

Each Safety Committee Chair is responsible for maintaining the following training records. These records will be kept in each site's Safety Binder.

Training records shall be maintained for three years form the date of training. The following information shall be documented:

- a) The dates of the training sessions;
- b) An outline describing the material presented;
- c) The names and qualifications of persons conducting the training;
- d) The names and job titles of all persons attending the training session.

Availability

The employee's records shall be made available to the employee or to his designated representative for examination and copying upon request in accordance with T8 CCR-GISO Section #3204.

All employee records shall be made available to the Chief of the Division of Occupational Safety and Health (DOSH) and the National Institute for Occupational Safety and Health (NIOSH).

Transfer of Records

If this facility is closed or there is no successor employer to receive and retain the records for the prescribed period, the Chief of DOSH shall be contacted for final disposition in accordance with the Section 3204.

8. Evaluation and Review

The Superintendent or designee is responsible for annually reviewing this program, and its effectiveness, and for updating this program as needed.

Appendix "A"

RECORD OF HEPATITIS "B" VACCINE DECLINATION

I understand that due to my occupational exposure to blood or other potentially infectious material, 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 me.

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.

Employee Name_____

**Employee
Signature**_____ **Date**_____

**Employer
Representative**_____ **Date**_____