

SPRING VALLEY SCHOOL DISTRICT

Employee Exposure Control Plan

Revised 9/2023

POLICY

I. PURPOSE

The purpose of this exposure control plan (ECP) is to

- Eliminate or minimize employee occupational exposure to blood or certain other body fluids;
- Comply with *OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030*.

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 (PPE)
 - 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.

The Spring Valley School District is committed to providing a safe and healthy 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

II. PROGRAM ADMINISTRATION

The Registered Nurse is responsible for implementation of the ECP. The Registered Nurse will maintain, review, and update the ECP at least annually and whenever necessary to include new or modified tasks and/or procedures. The Registered Nurse will also submit the ECP to the District's Medical Advisor for annual review and approval.

III. EXPOSURE DETERMINATION

The school district is required to perform an exposure determination concerning which employees may be likely to incur occupational exposure to blood or other potentially infectious

materials. The exposure determination is made without regard to the use of personal protective equipment (i.e. employees are considered to be exposed even if they wear personal protective equipment). Spring Valley School District has determined that the following job classifications may be expected to incur such occupational exposure, regardless of frequency:

- School Registered Nurse and LPN
- Health room aides and other miscellaneous staff trained to administer medications delegated by the RN
- Designated CPR, first-aid responders and medical response team
- Special-ed teachers in self-contained classrooms of the developmentally disabled
- Teacher aides working with the developmentally delayed
- Bus drivers
- Cardinal Kids Staff

Additionally, some employees in the following job classifications may have occupational exposure to blood or other potentially infectious materials, if they are designated as responsible for certain tasks or procedures:

1. Principal/Dean of Students

Tasks: 1st aid/CPR designated responder, crisis intervention, possible transporting wounded

2. Coaching Staff

Tasks: 1st aid/CPR responder, transporting wounded students, clean and dispose of bloody or contaminated wastes

3. Custodians

Tasks: Clean and dispose of bloody or contaminated wastes

4. Pool Employees

Tasks: 1st aid/CPR designated responder, clean and dispose of bloody or contaminated wastes

5. Clerical Staff

Tasks: 1st aid provider

6. Elementary Teachers and Aides

Tasks: 1st aid provider, clean and dispose of bloody or contaminated wastes

IV. IMPLEMENTATION SCHEDULE AND METHODOLOGY

The policies and procedures set forth in this plan are required by OSHA to meet the requirements of the standard.

A. COMPLIANCE METHODS

Universal precautions, hand washing, and other engineering and work practice controls will be in place to eliminate or minimize exposure of school employees. Where occupational exposure remains after instituting these controls, personal protective equipment (PPE) will be used. Employees found not in compliance are subject to disciplinary action. The following methods of compliance will be observed in all schools in the Spring Valley School District:

1. Universal Precautions

Universal precautions, a method of infection control in which all human blood and other potentially infectious materials are treated as if known to be infectious, regardless of the perceived status of the source individual, will be observed by all school employees.

2. Hand Washing

Readily accessible hand washing facilities with soap, warm water and paper towels are located in each school building in restrooms and designated health service clinic areas. Each employee assigned student oversight duties external to the building where hand washing facilities are not accessible is equipped with antiseptic hand cleaners or towelettes. Employees shall wash their hands frequently and thoroughly before and after care of students, as well as immediately or as soon as feasible after removal of gloves or other PPE.

B. ENGINEERING AND WORK PRACTICE CONTROLS

1. Needles

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken.

2. Containers for Sharps

All contaminated sharps (including needles and syringes, lancets, etc.) are to be discarded immediately or as soon as feasible in a puncture resistant, leak proof container, which is labeled with biohazard warning, color coded red and sealed prior to disposal. The containers are placed in all areas where these items are generated, such as health service units, etc.

3. Contaminated Supplies

Minimally contaminated items used for minor first aid care will be handled with universal precautions as if they were infectious waste.

They will be contained in plastic lined containers, closed, and disposed of with daily trash in a larger, heavy-duty plastic bag of sufficient strength to preclude bursting and tearing during handling, storage or transport.

4. Work Area Restrictions

In work areas such as the School Health Unit or other designated areas, food and beverages may not be kept in the same refrigerators, freezers, shelves, cabinets or on counter tops where blood or other potentially infectious materials are present. All procedures involving blood or OPIM exposure will be done using the correct techniques and by performing all health care procedures in a way that minimizes splashing, spraying and spattering.

5. Personal Protective Equipment (PPE)

The school district school health nurse is responsible for ensuring that personal protective equipment is selected and provided without cost to employees.

Personal protective equipment includes gloves, mouthpieces, resuscitation bags and/or disposable one-way ventilation devices for all personnel designated as first aid/CPR responders or otherwise exposed to blood or OPIM (other potentially infectious materials).

a. PPE Provision

Appropriate equipment will be selected by the school nurse and purchased with district funds in quantity sufficient to supply anticipated need. The principal and/or his/her designee shall ensure that appropriate PPE in the correct sizes is readily accessible at each site or is issued to designated staff and repaired or replaced as necessary to maintain its effectiveness.

b. PPE Use

Each school is responsible for monitoring to ensure equipment is appropriately used and supply is adequate. The school principal and/or his/her designee is responsible for day-to-day monitoring to assure staff are utilizing the equipment supplied.

c. PPE Cleaning, Laundering and Disposal

All PPE will be laundered, or disposed of, by the employer at no cost to the employees. All repairs or replacements will be made by the employer at no cost to the employees.

d. Gloves

Gloves and other PPE shall be worn when it is reasonably anticipated that the possibility of contamination exists. Disposable gloves will be used for all procedures other than for utility purposes and are not to be washed or decontaminated for re-use and are to be replaced as necessary.

Utility gloves may be decontaminated and re-used as long as the ability to function as a barrier is not compromised. Discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.

e. Additional Protection

Other PPE is generally not required in the school setting but will be made available for individual cases as determined necessary by the school nurse.

6. Housekeeping

All schools in Spring Valley School District will be inspected and cleaned with an EPA approved disinfectant cleaning product and decontaminated as necessary. See the chart below:

Area	Schedule	Cleaner
Health Unit	Daily	EPA approved disinfectant/cleaning product
All bathrooms	Daily and as necessary	EPA approved disinfectant/cleaning product

All contaminated work surfaces will be decontaminated after completion of procedure(s) and immediately after any blood or OPIM spill, as well as at the end of the work shift if surfaces have become contaminated since the last cleaning. Materials used for decontamination include the following:

- a. Chlorine bleach in properly labeled spray bottles noting 1 to 10 solution for decontaminating surface. Diluted solutions must be changed daily

- b. EPA approved, tuberculocidal, viricidal disinfectant cleaner

All housekeeping bins, pails, cans, waste containers and similar receptacles and cleaning equipment are inspected following each use and cleaned and decontaminated as necessary by the user. The building custodial supervisor is responsible for weekly monitoring of this equipment to ensure compliance.

Broken glassware which may be contaminated with blood or OPIM will be picked up with dustpans and hand brooms to avoid personal contact.

C. WASTE DISPOSAL

1. Sharps

Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are closable, rigid, puncture-resistant, leak-proof on sides and bottom, and labeled or color-coded. Reusable containers are not to be used.

Containers for contaminated sharps are to be easily accessible to personnel and located close to the immediate area(s) of use. Sharps containers are available in the health rooms and in the handicapped-accessible bathrooms in both buildings.

The containers are maintained upright and replaced as necessary by the RN and LPN to avoid overfilling. The containers are chemically disinfected, closed and sealed prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping. Sharps containers are disposed of in accordance with state and local regulations.

2. Other waste

Items contaminated with blood or other potentially infectious body fluids will be chemically disinfected to decontaminate the item(s), bagged, and disposed of in accordance with state and local regulations. Red biohazard bags are available in the health offices and at the request of maintenance.

3. Laundry Procedures

All laundry will be considered as if contaminated with blood or OPIM and be handled as little as possible, using universal precautions and protective gloves. Laundry will be contained in color coded red bags for transportation to the in-school washer and dryer site.

- a. Soiled laundry will be washed on-site in hot water, with detergent and disinfectant solution, and dried in a dryer on the “hot” setting.
- b. Student’s personal clothing items replaced because they are soiled with urine, feces, vomit, etc. will be handled with precautions, individually bagged and sent home with the student for home care.

D. POST-EXPOSURE EVALUATION AND FOLLOW-UP AND HEPATITIS B VACCINATION

1. Exposure Incidents

The OSHA Standard defines “exposure incident” as “specific eye, mouth, or other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM that results from the performance of an employee’s duties.”

All exposure incidents as defined by the OSHA Standard are reported to the school principal and the RN immediately or as soon as feasible. Exposure incidents are investigated and documented by the school RN, and the following information is provided with the referral to Western Wisconsin Health in Baldwin for confidential medical evaluation.

Exposure Incident Reports are to contain the following:

- Documentation of the route of exposure and the circumstances under which exposure incident occurred.
- A written description of the employee’s duties as they relate to the exposure incident.
- Identification and documentation of the source individual, including consent for blood testing to determine HBV and HIV infectivity. If consent cannot be obtained, the school RN will document the reason that legally required consent cannot be obtained.
- When the source individual is already known to be infected with HBV or HIV, testing will not be repeated. This information will be provided to the physician with the written consent of the source individual.
- All employee health records relevant to the appropriate treatment of the employee, including vaccination status.
- A copy of 29 CFR 1910.1030.

2. Hepatitis B Vaccine

As authorized by the superintendent and approved by the School Board, Spring Valley School District offers the Hepatitis B vaccination series at no cost to those designated employees who are considered to have occupational exposure. Routine post-vaccination testing is not offered.

The vaccine is made available to designated employees through Western Wisconsin Health after the employee has received BBP training and within ten (10) days for all designated new employees. Employees also have the option of refusing the Hepatitis B vaccination series. They must sign a waiver documenting their refusal and that they understood the significance of their action. The employee may reconsider his or her declination and must then be given the vaccine upon request, at no cost to the employee.

E. EMPLOYEE MEDICAL RECORDS

The School RN and/or District office is responsible for maintaining employee health records as indicated below. These records will be kept in a locked file, secured to protect the employee's right to privacy. Access to these records is restricted to the Superintendent and the School RN.

These records shall contain the following information:

- The name and social security number of the employee;
- A copy of the employee's HBV vaccination status, including the dates of vaccination;
- Any medical records relative to the employee's ability to receive the vaccination;
- Documentation of informed consent or refusal of HBV vaccination;
- A copy of the information provided to Western Wisconsin Health, including all exposure incident reports;
- A copy of the physician's written opinion following a post-exposure medical evaluation for BBP.

F. EMPLOYEE TRAINING

1. Employee Training

Prescribed training is provided to all school employees at the time of initial employment and annually thereafter. A copy of the ECP is available upon request to all new and current employees. The training is tailored to the educational and language level of the employee and offered during the normal work shift. The training allows time for interactive participation with questions and answer.

2. Training Records

The District Office and School RN are responsible for maintaining the training records. These records will be kept electronically and maintained for 5-7 years after the employee ceases to be considered an active employee. The training records document the following information:

- Date of completion
- WI DPI Bloodborne Pathogen Training
- Name of the staff that are required to complete the training.

3. Availability

All employee records will be made available to the employee in accordance with 29 CFR 1910.20.

All employee records shall be made available to the Assistant Secretary of Labor for OSHA and the Director of the National Institute for Occupational Health and Safety upon request.

G. EXPOSURE CONTROL PLAN IMPLEMENTATION AND REVIEW

Program Review

The RN is responsible for annually reviewing this program and for updating the program as needed. The review shall include:

- A list of new tasks that affect occupational exposure,
- Modifications of tasks and procedures,
- Evaluation of available engineering controls including engineered-safer needle devices,
- A list of new employee positions with potential for occupational exposure, and
- Solicited and documented input from non-managerial employees responsible for direct patient care for engineering and work practice controls.