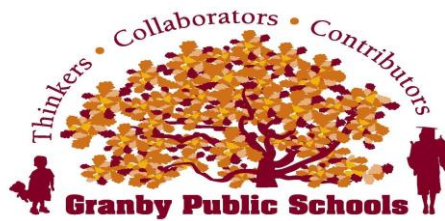


Granby Public Schools

Bloodborne Pathogens

Exposure Control Plan



2023-2024

The Granby Public schools is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this endeavor, 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."

It is the policy of the Granby Public Schools

- To regard all exposures as potentially infectious, Universal precautions will be observed at all times.
- To provide employees with the necessary training, immunizations and personal protective equipment (PPE) necessary for protection from communicable disease
- To recognize the need for work restrictions based upon infection control concerns
- To regard all medical information as strictly confidential. No employee's health information will be released without signed written consent of the employee
- To maintain an Exposure Control Plan related to Bloodborne Pathogens

The Exposure Control Plan is a key document to assist our school district in implementing and ensuring compliance with the standard, thereby protecting our employees. This Exposure Control Plan includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
 1. Standard precautions
 2. Engineering and work practice controls
 3. Personal protective equipment
- Hepatitis B vaccination
- Post-Exposure evaluation and follow-up
- Communication of hazards to employees and training
- Record keeping
- 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 Exposure Control Plan (ECP).

PROGRAM ADMINISTRATION

The Granby Public Schools Safety Committee is responsible for the implementation of the ECP. The Granby Public Schools Safety Committee along with the representation from health services will maintain, 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 (OPIM) must comply with the procedures and work practices outlined in this ECP.

The Granby Public Schools with assistance of the School Health Services will maintain and provide all necessary personal protective equipment (PPE), engineering controls (e.g., sharps

containers), labels, and red bags as required by the standard and ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

The Granby Public Schools Safety Committee and Human Resources will be responsible for ensuring that all medical actions required are performed and that appropriate employee health and OSHA records are maintained. In addition, the Safety Committee and Human Resources will be responsible for organizing training, documentation of training, making the written ECP available to employees, OSHA, and NIOSH representatives.

Contacts:

Human Resources – (860) 844-5264

School Health Supervisor – (860) 844-3038

EMPLOYEE EXPOSURE DETERMINATION

The Granby Public Schools is required to identify those tasks and procedures in which occupational exposure to blood and other potentially infectious material (OPIM) may occur and to identify the positions whose duties include those tasks and procedures identified with occupational exposure. Individuals whose positions have been identified as placing the individual at risk of exposure will be required to receive bloodborne pathogen and exposure control training, personal protective equipment (PPE), the opportunity to obtain the Hepatitis B vaccination series, among other benefits that may be provided under the standard, and will be required to comply with the requirements of the exposure control plan and the Bloodborne Pathogens Standards. A copy of this plan will be provided to individuals whose tasks and duties are reasonably identified with occupational exposure.

The following tasks are anticipated to involve possible exposure to blood, body fluids or other potentially infectious materials (OPIM)

- The providing of immediate medical attention to adults or children who become ill or injured;
- The restraining of adults or children who could be infectious;
- The removal and disposal of solid waste and household waste that could potentially contain contaminated materials, blood, body fluids, or OPIM, or sharps;
- Direct physical contact with sewage or residuals either raw or in process;
- Direct physical contact with machinery, tanks or systems conveying sewage or residuals;
- The repair and/or replacement of toilet and urinal fixtures;
- The cleaning of toilets, urinal, floors and privacy partitions;
- The transportation of elderly and disabled persons;
- The preparation and dispensing of meals
- The direct physical contact of blood, body fluids or OPIM in carrying out educational services and recreational services

The following is a list of all job classifications within the Granby Public Schools in which employees have High to Low occupational exposure:

High Risk- reasonably anticipated to involve exposure to blood, body fluids or OPIM in the performance of the above duties

Moderate Risk- Not reasonably anticipated to involve exposure to blood, body fluids or OPIM, but may upon specific assignments

Low Risk- Unlikely to involve exposure to blood, body fluid or OPIM,

All employees with **High Risk** job categories will receive initial and mandatory annual refresher training.

All employees with **Moderate Risk** job categories will receive “targeted training”. Only those individuals with “at risk” assignments/job tasks will be trained upon hiring and refreshed annually if remaining in the same assignment. Others in this category will receive Exposure Avoidance training materials upon hiring.

All employees with **Low Risk** job categories will receive Exposure Avoidance training materials upon hiring, and the option of attending annual refresher training on Exposure Avoidance

Annual exposure avoidance training will be offered to all employees, in all risk categories

Job Title	Task/Procedure	Level of Training Required	Exposure Risk
Registered Nurse	Direct client care for injuries involving non-intact skin and mucous membranes, illnesses involving emesis, and procedures including, but not limited to, injections, changing ostomy bags, toileting, oral or gastrostomy feedings, suctioning, catheterizations, and blood glucose monitoring; providing assistance to students/staff with bleeding or other potentially infectious materials injuries.	Exposure and work place procedure Training	High
Custodians and Maintenance Staff	Cleaning body fluid spills (urine, feces, emesis, blood) disposal of regulated waste and laundry, cleaning contaminated broken glass, sharps removal	Exposure and work place procedure Training	High
Other persons who have job descriptions, which requires them to provide first aid to students/staff.	Providing assistance to students with bleeding or other potentially infectious materials, injuries /occurrences	Exposure and work place procedure Training	High
Teachers, Instructional Assistants who work in Emotionally, Mentally and Physically Disabled Programs	Biting incidents by students, diapering, toileting/cleaning nose/mouth secretions feeding (oral or gastrostomy) providing assistance to students with bleeding or other potentially infectious materials injuries.	Exposure Avoidance Training	Moderate
Speech therapists	Cleaning nose/mouth secretions, combative behavior, swallowing therapy, biting incidents by students.	Exposure Avoidance Training	Moderate
Physical and Occupational Therapists	Tooth brushing, biting incidents by students, cleaning nose/mouth secretions, and emesis clean up.	Exposure Avoidance Training	Moderate
Coaches,	Providing assistance to student with bleeding or other potentially infectious materials, injuries/occurrences	Exposure Avoidance Training	High
Regular Education Teachers and Teacher Assistants	Job description does not designate as “first responder”. Defers to school nurse when providing assistance to students with bleeding or other potentially infectious materials, injuries	Exposure Avoidance Training	Low
Building Principals/Assistant Principals	Job description does not designate as “first responder”. Defers to school nurse when, assisting students with bleeding or other potentially infectious materials.	Exposure Avoidance Training	Low
Substitute Teachers and Temporary/seasonal Employees	Job description does not designate as “first responder”. Defers to school nurse when providing assistance to students and EE with bleeding or other potentially infectious materials, injuries occurrences	Exposure Avoidance Training	Low
Office Staff,	Job description does not designate as “first responder”. Defers to school nurse when providing assistance to students and EE with bleeding or other potentially infectious materials, injuries occurrences	Exposure Avoidance Training	Low

METHODS OF IMPLEMENTATION AND CONTROL

Standard Precautions

All employees will utilize Standard Precautions. They refer to the use of hand hygiene, and use of barriers and protective measures when dealing with blood, all body fluids, secretions, and excretions except sweat, regardless of whether they contain visible blood, non-intact skin, and mucous membranes.

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 Human Resources at the Central Office. A direct link to the ECP will be maintained for employee access on the District webpage.

The Granby Public Schools 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 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 District will identify the need for changes in engineering control and work practices through the Safety Committee. The Safety Committee will evaluate the need for new procedures or new products by reviewing and tracking current procedures and products.

The specific engineering controls and work practice controls used are listed below.

Hand washing and Hand Washing Facilities. Frequent hand washing is the most important technique for preventing the transmission of disease. Proper hand washing should occur immediately before applying and immediately after removal of PPE, after contact with a bleeding victim, the handling of potentially infectious materials, the cleaning or disinfecting of contaminated equipment, the use of restroom facilities, before and after eating, before and after preparing food. Hand washing facilities must be provided in areas where occupational exposure to bloodborne pathogens exists. If facilities are not available alternate hand, washing methods are allowable until proper washing is possible. I.e. antiseptic hand cleaning solutions or gels and paper towels or antiseptic towelettes

Guidelines for handling body fluids. Avoid direct skin contact with all body fluids. Disposable gloves are mandatory when it is reasonably anticipated that employees will have hand contact with blood or other potential infectious materials.

Personal Hygiene and eating. In areas where a reasonable likelihood of occupational exposure exists employees should refrain from eating, drinking, and applying cosmetics.

Employees should only use their own fingernail files, nail clippers, lipsticks, toothbrushes and should wash hands before and after meals, after bathroom use or whenever necessary.

Cleaning and Disinfecting. Decontamination and cleaning of all equipment and environmental and working surfaces must be completed immediately after contact with blood or other potentially infectious materials. Custodians should be contacted immediately to conduct the cleaning. Teachers and Support Staff should not attempt to clean a contaminated area. A disinfectant should be used that is effective in disinfecting fungicides, bacteria, and viruses. Decontaminated materials should be disposed of in the appropriate containers. Flushable materials can be flushed; other materials should be discarded in a red biohazard lined waste receptacle. Bins and pails should be cleaned and decontaminated as soon as possible after a visible contamination. Soiled rugs and carpets should be cleaned and disinfected promptly after blood or body fluid spills. Broken glassware, which may be contaminated, is picked up using mechanical means, such as a brush and dustpan.

Regulated waste is placed in containers, which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded and closed prior to removal to prevent spillage or protrusion of contents during handling. Regulated waste containers located in each school clinic and will be picked up by a licensed vendor.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture resistant, leak proof on sides and bottoms, and labeled or color-coded appropriately. Employees who use needles in the performance of their duties should take every precaution to prevent occupational exposure when handling needles and sharps. Sharps disposal containers are available at each school clinic and will be picked up by a licensed vendor.

Labels and Signs must be affixed to all containers of regulated waste and all other containers used to store or transport blood or OPIM. Warning labels should be affixed to contaminated equipment and shall also indicate which portions are contaminated. Labels should be orange or red-orange with letters and symbols of contrasting colors and be printed with the word "BIOHAZARD" and have the Biohazard legend.

Personal Protective Equipment (PPE)

PPE is provided to our employees at no cost to them. The School Nurses will be available to respond to questions regarding use of Personal Protective Equipment. The Facilities Staff and Athletic Coaching Staff will receive in depth training Bloodborne Pathogen Training via use of Safe Schools Training modules.

The types of PPE available to all employees are as follows:

- Gloves

Other equipment is available to employees as required by job and task:

- masks with or without eye shields
- gowns/aprons
- foot covers

PPE may be obtained through each school health Clinic or through Facilities Personnel.

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 PPE may be disposed of in waste receptacles. Severely contaminated PPE requiring Hazmat disposal should be disposed of in the appropriate Biohazard container in each School Clinic.
- Wear disposable gloves when it can be reasonably anticipated that there may be hand contact with blood or other potentially infectious materials, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, 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.

The procedure for handling used PPE is as follows:

- Grossly contaminated disposal items should go into red bags, then in biohazard waste containers
- Slightly or not contaminated items should be discarded in regular trash.

EMPLOYEE RESPONSIBILITIES

The Granby Public Schools employee is responsible for following all standard work place practices as stated in this Exposure Control Plan. Employees are responsible for reporting, documenting, and following all procedures in place when there is an exposure to bloodborne pathogens or OPIM.

Teachers and Support staff should not conduct first aid or attempt to handle, clean, or come in contact with Bloodborne Pathogens unless specific training has been conducted. Teachers and support staff should contact trained facilities or nursing staff to provide first aid or clean a contaminated area.

HEPATITIS B VACCINATION

The District will provide training to employees on Hepatitis B vaccinations, addressing the safety, benefits, efficacy, methods of administration and availability. This training is provided through a safety video and/or print material distributed at time of hire.

The Hepatitis B vaccination series is available at no cost after training to employees with identified High Risk of exposure, or targeted in the Moderate Risk of exposure category. Vaccination is encouraged unless:

- 1) documentation exists that the employee has previously received the series,
- 2) antibody testing reveals that the employee is immune,
- 3) medical evaluation shows that vaccination is contraindicated.

Documentation of refusal of the vaccination is kept at the Central Office in the employees personnel file.

Vaccinations will be provided by the Granby Board of Education.

Following Hepatitis B vaccinations, the health care professional's written opinion will be limited to whether the employee requires the hepatitis vaccine, and whether the vaccine was administered.

The District will identify the need for changes in engineering control and work practices through the Safety Committee. The Safety Committee will evaluate the need for new procedures or new products by reviewing and tracking current procedures and products.

EXPOSURE PROCEDURES, POST-EXPOSURE EVALUATION AND FOLLOW UP

An exposure includes:

1. A percutaneous (needle stick, sharps or cut) exposure to blood or body fluids
2. A mucous membrane exposure to blood or body fluids which include splashed in to eyes nasal mucous or the mouth
3. A cutaneous exposure to blood or body fluids when the employee's skin is chapped, abraded or otherwise not intact.

If an exposure occurs:

The employee must inform the school nurse and the school principal immediately. An incident report must be completed and submitted to Human Resources as soon as practical but not later than 24 hours. An immediate medical evaluation and follow-up will be conducted by Concentra. Following initial first aid, (clean the wound, flush eyes or other mucous membrane, etc.) the following activities will be performed in collaboration with Concentra or their medical provider:

- Document the route of exposure and how the exposure occurred.
- Identify and document the source individual (unless employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and arrange to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individuals 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 through the medical provider.
- 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 or per the medical facilities protocols; if the exposed employee elects to have the baseline

- sample tested during this waiting period, perform testing as soon as feasible.
- The exposed employee shall be offered counseling through the Employee Assistance Program and shall receive medical evaluations for reported illnesses following an exposure incident as required.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW UP

The Granby Public Schools Human Resources Department ensures that health 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 Granby Public Schools Human Resources 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

Following the evaluation of an employee with an exposure incident, the health care professional must provide to the Granby Public Schools a written opinion that includes:

- An opinion whether the Hepatitis B vaccination is indicated for the employee and if the employee has received the vaccination
- A statement that the employee has been informed of the results of the evaluation
- A statement that the employee has been told about any medical conditions resulting from exposure to blood or OPIM which require further evaluation or treatment
- All other findings or diagnoses shall not be reported in the health care professional's opinion letter or report and will remain confidential.

The Granby Public Schools Safety Committee will review the circumstances of all exposure incidents to determine:

- engineering controls in use at the time
- work practices followed
- a description of any devices being used
- protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields etc.)
- location of the incident
- procedure being performed when the incident occurred
- employee's level of training

If it is determined that revisions need to be made, the Safety Committee will make necessary changes to the ECP and notify the Superintendent Office to ensure the changes are initiated. .

(Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.)

EMPLOYEE TRAINING

All employees who have potential for occupational exposure to bloodborne pathogens receive training in accordance with their occupational risk category. Initial training is conducted at the time of assignment to tasks where occupational exposure may occur. The school nurses will be available to respond to questions related to Safe Schools refresher Trainings offered annually. The Facilities Staff and Athletic Coaching Staff will receive an in-depth annual re-fresher training.

All exposure control materials will be appropriate in content and vocabulary to the level and language of the employee being trained.

All employees who have potential occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen disease. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA standard
- An explanation of our Exposure Control Plan 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
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident in 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 each facility
- An opportunity for interactive questions and answers with the person conducting the training session

Persons assisting with the training shall be knowledgeable in all aspects of the Exposure Control Program as they relate to the workplace of the employees in training.

Training materials are purchased by the BOE and are available at the Central Office.

RECORDKEEPING

Records will be maintained in accordance with 29 CFR Part 1910.1030(h) (1) for employees covered by the standard. Employee participation in the exposure control plan will be documented, including:

- Name and Social Security number
- A copy of the employee Hepatitis B status including vaccinations and medical records relative to the employees' ability to receive the vaccination;
- A copy of all results of examinations, medical testing and follow up procedures as required by paragraph (f) (3) of the standard
- A copy of the health care professional's written opinion as required by paragraph (f) (5) of the standard
- A copy of the information provided to the healthcare professional as required by paragraph (f) (4) of the standard

Training records are completed for each employee upon the completion of training. These documents will be kept for at least three years at the BOE Human Resources Department.

The training records include:

- The dates of the training session
- The contents or a summary of the training session
- 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 Granby Public Schools, Human Resources Department, 15-B North Granby Rd, Granby, CT 06035.

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.2, "Access to Employee Exposure and Medical Records."

Human Resources is responsible for maintenance of the required medical records. These confidential records are kept at the Board of Education 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 Granby Public Schools, Human Resources Department, 15-B North Granby Rd, Granby, CT 06035.

OSHA RECORDKEEPING

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). Human Resources do this determination and the recording activities.