

TABLE OF CONTENTS

INTRODUCTION AND ACKNOWLEDGEMENT.....	2
.....	3
BLOODBORNE PATHOGEN CONTROL PLAN.....	3
PURPOSE OF EXPOSURE CONTROL PLAN.....	3
POST EXPOSURE CONTROL PLAN.....	3
EXPOSURE DETERMINATION.....	4
TRAINING AND EDUCATION OF EMPLOYEES.....	4
HITCHCOCK ISD BLOODBORNE PATHOGEN CONTROL PLAN.....	5
Job Classification.....	5
Medical Personnel including school nurses, clinic assistants, athletic trainers, and middle school coaches who coach athletics.....	5
Safe work practices for medical personnel.....	5
Personal Protective Equipment.....	6
Job Classification.....	6
Special Education Teachers, Day Care Workers, Physical Therapists, Occupational Therapists, Speech Therapist, and Aides working with developmental, adaptive behavior, and special medical needs students.....	6
Personal Protective Equipment.....	7
Job Classification.....	7
Administrators, Teachers, Counselors, Aides, Clerical, and Substitute teachers.....	7
Job Classification.....	8
School Police Officer.....	8
Job Classification.....	10
Maintenance Personnel who do Plumbing.....	10
EMPLOYEE USE OF PERSONAL PROTECTIVE EQUIPMENT.....	10
PERSONAL PROTECTIVE EQUIPMENT.....	11
OFFERING OF HEPATITIS B VACCINE TO EMPLOYEES.....	11
POST EXPOSURE PLAN.....	11
EXPOSURE INCIDENT REFERRAL PROCEDURE.....	11
SHARPS INJURY.....	12
APPENDIX A.....	13
HEALTH SERVICES.....	14
UNIVERSAL PRECAUTIONS INFORMATION.....	14
HEPATITIS B VACCINE DECLINATION STATEMENT.....	15
EMPLOYEE EXPOSURE REPORT.....	16
Hitchcock Independent School District.....	17
ANNUAL REVIEW OF BLOODBORNE PATHOGEN PLAN.....	17
APPENDIX B.....	19
ASSESSMENT TOOL.....	20

Hitchcock Independent School District

BLOODBORNE PATHOGEN PLAN

INTRODUCTION AND ACKNOWLEDGEMENT

Several types of bloodborne pathogens have become prevalent in recent years. These include Human Immunodeficiency Virus (HIV), hepatitis B and hepatitis C. Because students or staff may be unaware that they have these infections or may choose not to reveal their history to others, all blood and other potentially infectious materials (OPIM) from any source must be considered potentially infectious. Therefore, precautions should be used when handling all blood products.

Hitchcock ISD has developed a bloodborne pathogen plan to eliminate or minimize exposure to bloodborne pathogens. On the following pages, you will find information concerning protecting yourself from these viruses and other infectious diseases.

Included, you will find universal precautions for all employees as well as precautions specific to certain job classifications.

Please sign this form acknowledging that you have received a copy of the Hitchcock ISD Bloodborne Pathogen Plan.

Printed Name

Signature

Date

TO BE KEPT IN PERSONNEL FILE

Hitchcock Independent School District

BLOODBORNE PATHOGEN CONTROL PLAN

School districts are required to identify personnel whose job duties expose them to blood and potentially infectious body fluids. Not every school employee is occupationally exposed to bloodborne pathogens. However, every school employee must understand the dangers of infection and safe practices to minimize risks.

PURPOSE OF EXPOSURE CONTROL PLAN

The purpose of the Exposure Control Plan is to decrease the risk of exposure to bloodborne pathogens for employees. This will be accomplished by :

Identifying job tasks that are at greatest risk for exposure to blood.

Training and education of employees.

The use of personal protective equipment by employees.

By offering Hepatitis B vaccinations to employees.

POST EXPOSURE CONTROL PLAN

This describes steps to be taken in the event of an exposure incident. In accordance with Health and Safety Code, Chapter 81, Subchapter H, and analogous to OSHA Bloodborne Pathogens Standards, Hitchcock ISD will follow an exposure control plan. This plan will be updated annually and kept in a central location within each school.

Designated Administrator: _____

Committee:

Signature

Title

_____ School Nurse _____

_____ UTMB Physician _____

Consultant _____

Date Plan Prepared: December 6, 2000

Adoption Date: December

EXPOSURE DETERMINATION

The Texas Department of Health Bloodborne Pathogens Exposure Control Plan requires employees to identify employees who have exposure to blood or other potentially infectious materials. This determination is made without regard to the use of personal protective equipment. The following is a list of job classifications in which employees may have occupational exposure, regardless of frequency.

1. School Nurse.
2. Clinic Assistants.
3. Athletic Trainers.
4. School Police Officers.
5. Special Education teachers working with children who bit or those who become combative and/or have medical needs.
6. Teachers working with developmental students.
7. Teacher Aides working with the above students.
8. Campus Administrators.
9. Teachers and Counselors.
10. Maintenance personnel who do plumbing.
11. Occupational Therapists, Physical Therapists, Speech Therapists and their assistants.
12. Day Care Workers.
13. Substitute Teachers.

TRAINING AND EDUCATION OF EMPLOYEES

All employees will attend an inservice on universal precautions to avoid exposure to bloodborne pathogens in blood and body fluids. Each employee will be given a copy of the overview of the plan, as well as, a job specific plan to prevent exposure. Each employee will sign a form acknowledging receiving the handout and attendance at the inservice. A copy of the complete Bloodborne Pathogen Control Plan with appendices will be kept in a central location in each school. Employees will have access to the plan at all times.

Inservice will be conducted by: TBA, School Nurse.

Records will be kept by: Office Personnel, Central

Plan will be made available on each campus by: Campus Administrator

HITCHCOCK ISD BLOODBORNE PATHOGEN CONTROL PLAN

Job Classification

Medical Personnel including school nurses, clinic assistants, athletic trainers, and middle school coaches who coach athletics.

WORK TASK	POTENTIAL EXPOSURE SITUATION
Providing first aid to students and staff	Exposure to blood and other potentially infectious materials (OPIM)
Performing medical procedures for children with special healthcare needs	Exposure to blood and OPIM Exposure to aerosol droplets of potentially infectious body fluids
Cleaning of equipment	Exposure to blood and OPIM Exposure to sharp instruments
Giving injections to children with special healthcare needs	Exposure to blood and OPIM Exposure to sharp instruments
Provide CPR or rescue breathing if needed	Exposure to blood or OPIM to mucous membranes of rescuer
Worksite cleanup	Exposure to blood or OPIM from soiled bandages, laundry, or contact with contaminated surfaces
Assist students with hygiene	Exposure to urine and/or feces

Safe work practices for medical personnel

1. Hands and other skin surfaces should be washed with soap and water after contact with blood or body fluids and after removal of gloves.
2. When cleaning small amounts of blood off of surfaces, gloves should be worn. The blood should be cleaned up with a paper towel which is then discarded in a covered wastebasket that is double or triple bagged. The contaminated surface should be cleaned with 10% bleach solution or disinfectant from plant operations. Hands should be washed immediately after gloves are removed.
3. If a large spill of blood (100cc or more) or OPIM occurs, the area should be immediately covered with dry absorbent provided by plant operations. Students should be removed from the area and custodians called for cleanup and disinfection.
4. Wear gloves if first aid must be provided to **anyone**. Gloves should be discarded after first aid is provided and hands washed immediately.
5. Do not pick up glass or other sharp objects with bare hands. Call a custodian for cleanup.
6. As soon as possible, remove any clothing that becomes contaminated with blood. Until laundered contaminated clothing should be kept separately from other clothing.

7. Do not recap needles. Place all sharps in red sharps container.
8. Bandages or articles containing blood should be placed in covered trash can or contained within a tied plastic bag.
9. Bandages or articles with large amounts (100 cc or more) of blood should be placed in red biohazard bags. Call districtwide nurse or safety engineer for pickup and special handling.
10. Non-disposable equipment contaminated with blood or OPIM should be cleaned in hot soapy water and then disinfected in a 10% bleach solution.
11. A barrier device (i.e. microshield, Laerdal mask) will be used when performing CPR to limit exposure to saliva, mouth sores, or other body fluids.

Personal Protective Equipment

1. Disposable gloves for wear while administering first aid or handling OPIM.
2. Breathing barrier device for use when performing CPR.
3. Full face shield or goggles for use when there is a risk of aerosolized blood droplets by splashing or from a medical procedure.

Job Classification

Special Education Teachers, Day Care Workers, Physical Therapists, Occupational Therapists, Speech Therapist, and Aides working with developmental, adaptive behavior, and special medical needs students

WORK TASK	POTENTIAL EXPOSURE SITUATION
First Aid	Exposure to blood or other potentially infectious material (OPIM)
Special medical procedures	Exposure to blood or OPIM
Perform CPR in emergency situations	Mouth to Mouth contact with saliva or OPIM
Worksite cleanup - small spills	Exposure to blood or OPIM
Restraining violent students	Risk of being bitten. Exposure to blood or OPIM
Diapering or providing toileting activities	Exposure to feces or urine

Safe work practices for certain special education personnel:

1. Hands and other skin surfaces should be washed with soap and water after contact with blood or body fluids and after removal of gloves. Antiseptic hand cleaners need to be used when soap and water are not available. Hands should be washed as soon as possible.

2. When cleaning small amounts of blood off of surfaces, gloves should be worn. The blood should be cleaned up with a paper towel which is then discarded in a wastebasket lined with a plastic liner. Custodians should be called to apply the appropriate disinfectant. Hands should be washed immediately after gloves are removed.
3. Wear gloves if first aid must be provided to **anyone**. Gloves should be discarded after first aid is provided and hands washed immediately.
4. Do not pick up glass or other sharp objects with bare hands. Call a custodian for cleanup.
5. Remove any clothing as soon as possible that becomes contaminated with blood. Until laundered contaminated clothing should be kept separately from other clothing.
6. Wear gloves when diapering or providing toileting activities for students. Wash hands immediately after removing gloves.
7. Use mouth barrier (i.e. microshield, ambu bag) if required to perform CPR.
8. Report to school nurse or principal immediately if blood exposure incident occurs (see definition of exposure incident).

Personal Protective Equipment

Disposable gloves for use when administering first aid, diapering, or handling blood or OPIM.

Barrier device (microshield, ambu bag for certain students) for performing rescue breathing.

Job Classification

Administrators, Teachers, Counselors, Aides, Clerical, and Substitute teachers

WORK TASK	POTENTIAL EXPOSURE SITUATION
Administering first aid	Contact with blood or other body fluids
Performing CPR in emergency situation when medical personnel not present	Contact with saliva and other body fluids
Controlling violent students including using physical restraint	Contact with blood or other body fluids. Potential of being bitten by violent student

Safe work practices for administrators, teachers, aides, clerical, substitute teachers

1. Allow student to take care of own first aid (i.e. washing wound) with supervision and direction if possible.
2. Hands and other skin surfaces should be washed with soap and water after contact with blood or body fluids and after removal of gloves. Antiseptic hand cleaners need to be used when soap and water are not available. Hands should be washed as soon as possible.

3. When cleaning small amounts of blood off of surfaces, gloves should be worn. The blood should be cleaned up with a paper towel which is then discarded in a wastebasket lined with garbage bag liner. Custodians should be called to apply the appropriate disinfectant. Hands should be washed immediately after gloves are removed.
4. Wear gloves if first aid must be provided to anyone. These should be discarded after first aid is provided and hands washed immediately.
5. Do not pick up glass or other sharp objects with bare hands. Call a custodian for cleanup.
6. Remove any clothing as soon as possible that becomes contaminated with blood. Until laundered contaminated clothing should be kept separately from other clothing.
7. Report to school nurse or principal immediately if blood exposure incident occurs (see definition of exposure incident).

Protective Equipment:

1. All teachers should have gloves available in their classroom at all times.
2. CPR responders (School Nurse, Health Aides, Coaches, Trainer, Sponsors, and any faculty with CPR training) will have a mouth barrier device to use in case they must perform mouth to mouth resuscitation.

**Job Classification
School Police Officer**

WORK TASK	POTENTIAL EXPOSURE SITUATION
Administering first aid	Contact with blood or other body fluids
Controlling violent students including apprehension	Contact with blood or body fluids. Potential of being bitten by violent student
Contact with drug paraphernalia	Accidental self inoculation and needle sticks
Contact with weapons, esp. knives, razors	Cuts from potentially contaminated items
Crime scene investigations	Contact with blood and other body fluids
Administering CPR	Contact with saliva, open wounds of the mouth, aerosol droplets

Safe work practices for school security:

1. Whenever employees handle uncooperative or violent individuals, they should attempt to keep the individual's back towards themselves. This reduces the risk of being bitten. Employees should make every effort to obtain additional, trained assistance whenever they handle uncooperative or violent individuals.

2. Gloves must be worn when there is reasonable anticipation of touching blood, body fluids, mucous membranes or non-intact skin while performing duties.
3. Gloves must be worn while handling items or surfaces obviously contaminated with blood or body fluids.
4. Hands and other skin surfaces should be washed immediately and thoroughly with water and antiseptic cleaner if contaminated with blood or body fluids.
5. Hands should be washed immediately upon removal of gloves.
6. Clothing which becomes contaminated with blood or other body fluids during custodial work must be removed as soon as possible and separated from other clothing until properly laundered.
7. Areas of equipment which becomes contaminated with blood or other body fluids should be cleaned immediately with a bleach solution of 10 parts of water to one part of bleach. Exception: carpeted surfaces and other fabrics should be cleaned with another type of disinfectant cleaner which will not remove color.

Personal Protective Equipment:

1. Disposable gloves for wearing while administering first aid.
2. Breathing barrier device for use when performing CPR.

Job Classification
Maintenance Personnel who do Plumbing

WORK TASK	POTENTIAL EXPOSURE SITUATION
Working with sewer lines	Contact with blood, body fluid, feminine sanitary items, soiled bandages, needles or sharps
Administration of first aid	Contact with blood or other body fluids

Safe work practices for plumbers

1. Heavy duty rubber gloves must be worn by employees whenever they anticipate touching blood, body fluids and contaminated waste while they conduct their duties.
2. Hands and other skin surfaces should be washed immediately and thoroughly with water and antiseptic cleaner if contaminated with blood or body fluids.
3. Eye protection must be worn while working on sewer lines, toilets, sinks or other potentially infectious items or equipment.
4. Clothing which becomes contaminated with blood or other body fluid during work must be removed as soon as possible and properly laundered.
5. Equipment which becomes contaminated with blood or other body fluid should be cleaned immediately with a bleach solution of 10 parts water to one part of bleach. Exception: carpets or fabrics should be cleaned with proper custodial disinfectant.
6. Report any expose to your supervisor immediately.

Personal Protective Equipment

1. Heavy duty rubber gloves must be worn when anticipating handling contaminated waste.
2. Eye protection for use when working on potentially infectious items or equipment.

EMPLOYEE USE OF PERSONAL PROTECTIVE EQUIPMENT

Employees shall use personal protective equipment or devices provided by the district when a hazard is identified. The employee shall contact his/her direct supervisor when protective equipment needs replacing or repair.

The School Nurse will provide personal protective equipment as needed.

PERSONAL PROTECTIVE EQUIPMENT

TASK	GLOVES	PROTECTIVE EQUIPMENT
Noncontact class activities		
Taking vital signs or administering medication. Contact with intact skin		
Diapering	X	
Contact with non-intact skin or mucous membranes	X	
Invasive procedures such as catheterization, suctioning	X	
Handling soiled towels, dressings or other materials	X	
Picking up broken glass or sharps		
Cleaning contaminated equipment	X	
Providing CPR		CPR Mask (located in Clinic)

Gloves: disposal gloves are not to be washed or decontaminated for reuse. They should be replaced when damaged and after each use. Hands should be washed every time gloves are removed. Non-latex gloves are available for those with latex allergies.

OFFERING OF HEPATITIS B VACCINE TO EMPLOYEES

All employees who have been identified as having possible occupational exposure to blood or other potentially infectious materials (OPIM) are offered the hepatitis B vaccine, at no cost to the employee, under the supervision of a licensed physician or licensed health care professional. The series of three (3) vaccines, given over a six (6) month period, is offered after bloodborne pathogens training and within ten (10) days of their first work day. If a person has previously received the completed hepatitis B vaccination series, a copy of the record will be provided to the employer. This series is optional to the employee. Employees who decline the hepatitis B vaccine must sign a declination statement. (Appendix A) Employees who initially decline the vaccine but who later elect to receive it may have the vaccine provided at no cost. Vaccination records will be kept in the employee=s personnel file.

POST EXPOSURE PLAN

Exposure incident: A specific eye, mouth, other mucous membrane, non-intact skin or skin penetrating contact with blood or other potentially infectious materials that results from the performance of an employee=s duties. (TDH #96.101 definitions) Hitchcock ISD will provide an employee with a post exposure evaluation and follow-up through a usual Worker=s Compensation when an exposure incident has occurred.

EXPOSURE INCIDENT REFERRAL PROCEDURE

All employees who incur a potential exposure incident should be offered a confidential medical

evaluation and follow-up as soon as feasible. As soon as an employee suspects that he/she has an exposure incident, the following procedures should be followed:

1. Employee must report incident or injury to the principal/supervisor **and** school nurse **immediately**.
2. The school nurse will provide first aid and evaluate the extent of the injury. The school nurse will recommend medical follow-up of an exposure incident has occurred.
3. The administrator and employee will complete the Worker's Compensation Injury Report and the HISD Employee Exposure Report located in the appendices. Copies will be kept by the school nurse. These forms will be taken by the employee to the physician of his/her choice. The medical provider should have a description of the employee's duties and the route and circumstances of the exposure. The medical provider should be given medical records relevant to the employee's hepatitis B vaccination status.
4. Copies of these reports will be sent to the designated administrator as soon as medically feasible.

SHARPS INJURY

Any injury caused by a sharp, including a cut, abrasion or needle stick.

Sharps: An object used or encountered in a health care setting that can be reasonably anticipated to penetrate the skin or any other part of the body and to result in an exposure incident and includes: needle devices, scalpels, lancets, (TDH #96.101) This may include teachers of shop classes and labs. Information concerning each contaminated sharps injury will be reported on the Texas Department of Health Contaminated Sharps Injury Reporting Form. [Form 59-10666] [See Appendix A]

1. Within ten (10) days of the injury, the form will be sent to the:
2. Galveston County Health Department
3. A copy will be kept in the school district Central Office file.
4. All information obtained or compiled by the Texas Department of Health in connection with a report under this chapter are confidential and not subject to disclosure. [TD&H 96.402]

APPENDIX A

Hitchcock Independent School District

HEALTH SERVICES UNIVERSAL PRECAUTIONS INFORMATION

What are universal precautions?

Universal precautions are the actions one takes to protect oneself from any and all body fluids excreted by others, on the assumption that any and all others may be infected with or carriers of disease and that any and all body fluids, not one's own may be infectious.

What body fluids are we talking about?

Vomitus, blood, feces, urine, and saliva must always be regarded as potential carriers of disease. For protection, Off-the-job, body fluids associated with sexual activity should be considered.

How do we protect ourselves?

1. Observing our own skin for wounds. Intact skin is generally sufficient defense against touched contamination.
2. Through frequent hand washing.
3. Use of gloves when we must deliberately handle body fluids.
4. Use of absorbent on expelled, body excretions before handing.
5. Washing as soon as possible when we come in contact with body fluids.
6. Teach students and fellow workers self-responsibility in handling their body fluids.

Examples:

A person with a nose bleed should be instructed to compress their own nostrils (and lean forward); a person with a bleeding cut should be given a compress of tissue, gauze, or paper toweling and instructed to apply pressure to the cut and to wash their wounds. (Even the youngest students can be taught to manage themselves).

7. In the case of avoiding hepatitis, it is also essential to avoid the sharing of foodstuff.

DO NOT TOUCH BODY FLUIDS OTHER THAN YOUR OWN

Every employee in the district will have access to disposable gloves by contacting the school health clinic. Teachers and aides will receive gloves, band aids and gauze in a kit during the beginning of each school year. Do not hesitate to use these gloves to protect yourself from body fluids. Your supply of gloves will be replenished upon request to the school nurse. Check your gloves often for damage. Please store them in an accessible area to your work location.

If you would like more information about communicable diseases or protecting yourself, please speak with your school nurse.

Hitchcock Independent School District

**HEPATITIS B VACCINE
DECLINATION STATEMENT**

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B Virus (HBV) infection. I have been given the opportunity to be vaccinated with the hepatitis B vaccine, at no charge to myself; 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 the hepatitis B vaccine, I can receive the vaccination series at no charge to myself.

Employee Name: _____
(Printed name)

(Signature)

Date: _____

-

Hitchcock Independent School District

**CONFIDENTIAL
EMPLOYEE EXPOSURE
REPORT**

Campus: _____ Date: _____

Employee's Name: _____ Position: _____

Date of Incident: _____ Time of Incident: _____

Description of Job/Task being done: _____

Source of Possible Exposure: _____

Route of Possible Exposure: _____

Circumstances under which possible exposure occurred: _____

First Aid Treatment: _____

Nurse: _____ Principal: _____ Date: _____

To be completed by physician

Employee informed of laws and regulations concerning disclosure of identity of source individual:
 Yes No

Comments: _____

Employee informed of signs and systems that should be watched for and reported to physician:
 Yes No

Employee offered blood collection testing: Yes No Date: _____

Employee refused blood collection: Yes No Date: _____

Employee refused blood testing: Yes No Date: _____

Post-exposure prophylaxis recommended: Yes No Date: _____

Please have employee sign that above areas were completed or refused at doctor's office.

Employee Signature: _____
_____ Date: _____

Written opinion from physician attached:

⊖ Yes ⊖ No Date: _____

Post-exposure medical evaluation completed by:

(printed name)

Date:

*(Physician's
signature)*

Please return report to:

_____ Date: _____

Hitchcock Independent School District

**ANNUAL REVIEW OF
BLOODBORNE PATHOGEN
PLAN**

Annual Review:

(Month/Year)

Reviewed by:

Signature

Title

School Nurse

UTMB Physician Consultant

Annual Review:

(Month/Year)

Reviewed by:

Signature

Title

School Nurse

UTMB Physician Consultant

Annual Review:

(Month/Year)

Reviewed by:

Signature

Title

School Nurse

UTMB Physician Consultant

APPENDIX B

Hitchcock Independent School District

ASSESSMENT TOOL

- | | | |
|--|-----|--------|
| 1. The exposure control plan is located in each work center? | Yes | No |
| 2. Employees at occupational risk for bloodborne pathogens exposure are identified? | | Yes No |
| 3. Employees comply with universal precautions when performing duties? | Yes | No |
| 4. Employees employ safe work practices in performance of duties? | Yes | No |
| 5. Handwashing facilities are readily accessible in the work center. | Yes | No |
| 6. Employees regularly wash their hands, especially after glove removal? | | Yes No |
| 7. Employees deposit contaminated sharps in biohazard containers immediately after use? | Yes | No |
| 8. Employees change filled biohazard containers when full? | Yes | No |
| 9. Employees do not eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses in the work area? | Yes | No |
| 10. Food and beverages are not kept in close proximity to blood or bodily fluids? | Yes | No |
| 11. Employees wear the designated personal protective equipment/ attire appropriate for the task at hand? | | Yes No |
| 12. Employees maintain a clean environment at all times? | Yes | No |
| 13. Each employee knows his documented hepatitis B vaccine status? | | Yes No |
| 14. Employees know where and to whom to report exposure incidents? | | Yes No |
| 15. An employee occupational exposure protocol is practiced in accordance with U.S. Public Health Service? | Yes | No |
| 16. Employees are oriented and receive annual training to the exposure control plan? | | Yes No |
| 17. Recording and reporting occupational exposures are conducted | | |

in accordance with OSHA=s Bloodborne Pathogens Standard? Yes No

18. Medical and training records are maintained in accordance with OSHA=s Bloodborne Pathogens Standard? Yes No