

**Bloodborne Pathogens Standards
Exposure Control Plan**

*NLCC, MCA & Noah's Ark
1370 S. Novato Blvd.
Novato, CA 94947*

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Annual Review Date:

August

I. Policy Statement

It is the policy of *NLCC, MCA & Noah's Ark* to provide a safe environment for all employees and visitors and to comply with all State and Federal Regulations as they apply to our facility. This exposure control plan has been established by *NLCC, MCA & Noah's Ark* in order to minimize and to prevent, when possible, the exposure of our employees to disease-causing microorganisms transmitted through human blood and as a means of complying with the Bloodborne Pathogens Standard.

In accordance with the California Code of Regulations, Title 8 (8CCR), Section 5193 entitled BLOODBORNE PATHOGENS, This exposure control plan is written and will be implemented by *NLCC, MCA & Noah's Ark* as outlined in this document.

This exposure control plan will be reviewed annually by the *Head of Schools*, who will assess compliance with these regulations, institute changes where necessary, and ensure that all equipment, supplies and training materials are available to all employees.

Copies of this plan are available (for review by an employee) in the following locations: 1370 S. Novato Blvd. An employee may obtain a copy of this plan within 15 days of their request to the Head of Schools.

Responsible Persons:

Head of School , Preschool Director, NLC Connection Pastor & Maintenance

Standards

Critical Definitions

"Blood" means human blood, human blood components and products made from

human blood.

"Bloodborne Pathogens" means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Standards
(cont.)

"Contaminated" means the presence or the reasonable anticipated presence of blood or other potentially infectious materials on an item or surface.

"Decontamination" means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use or disposal.

"Employee" means a person who is hired by another person, or by a business, firm, etc., to work for wages or salary.

"Engineering controls" means controls (e.g., sharps disposal containers, self sheathing needles) that isolate or remove the Bloodborne pathogen hazard from the workplace.

"Exposure incident" means a specific eye, mouth, and other mucous membrane, non-intact skin, or parental contact with blood or other potentially infectious material that results from the performance of an employee's duties.

"HBV" means hepatitis B virus.

"HIV" means human immunodeficiency virus.

"Occupational Exposure" means reasonably anticipated skin, eye, mucous membrane, or parental contact with blood or other potentially infectious materials that may result from performance of an employee's duties.

"Other Potentially Infectious Materials" means

1.

The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult to differentiate between body fluids;

3.

Standards - definitions (cont.)

Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and

HIV - containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organ, or other tissues from experimental animals infected with HIV or HBV.

"Parental" means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

"Personal Protective Equipment" is specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

"Regulated Waste" means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially

infectious materials.

"**Sterilize**" means the physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

"**Universal Precautions**" is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

"**Work Practice Controls**" means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g. prohibiting recapping of needles by a two handed technique).

Standards - Exposure Control Plan (cont.)

Basic components of this exposure control plan include:

Exposure Determination

Methods of Compliance

Hepatitis B Vaccination Policy

Procedures for Evaluation and Follow-up Exposure Incidents

Recordkeeping procedures

II. Exposure Determination

All job categories in which it is reasonable to anticipate that an employee will have skin, eye, mucous membrane, or parental contact with blood or other potentially infectious materials (listed below) will be included in this exposure control plan. 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).

List A- Employees Are Exposed

All employees in job categories listed here are included in the plan: Secretary, Primary administer of first aid.

List B-Some Employees Are Exposed

Job classifications in which some employees may have occupational exposure are included on this list. Since not all the employees in these categories are expected to incur exposure to blood or other potentially infectious materials, the tasks or procedures are also listed. The job classifications and associated tasks for these categories are as follows:

Janitor

Job Classification

Teacher's Aides

Teacher

Tasks/Procedures

Recess Duty - First Aide

Recess Duty - First Aide

A. Universal Precautions

III. Methods of Compliance

All blood or other potentially infectious materials (as defined in critical definitions page) shall be handled as if contaminated by a bloodborne pathogen. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious material. All employees will receive training in universal precautions and will follow universal precautions procedures at all times.

B. Work Practice Controls

Shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.

C. Hand

Hand washing is a primary infection control measure which is protective of both employee and others. Appropriate hand washing must be diligently practiced. Employees shall wash hands thoroughly using soap and water whenever hands become contaminated and as soon as possible after removing gloves or other personal protective equipment. When other skin areas or mucous membranes come in contact with blood or other potentially infectious materials, the skin shall be washed with soap and water, and the mucous membranes shall be flushed with water, as soon as possible. Antiseptic towelettes are provided and are to be used immediately after possible contamination if immediate hand washing is not feasible. Hands shall be washed with soap and running water as soon as feasible.

D. Protection for Hands

Employees are advised to use band-aids on all cuts, open sores and abrasions to their hands.

Gloves will be worn when it can be reasonably anticipated that hand will contact blood or other potentially infectious materials, mucous membranes, and non-intact skin.

Methods of Compliance (cont.)

Specific tasks at this school which require the wearing of disposable gloves are:

- All First Aid
- Abrasions

- Runny Noses
- Cuts
- Bloody Noses
- Potty Accidents

The use of gloves while performing the above tasks **is not optional.** Teachers and Aides must keep gloves with them at all times and are responsible for maintaining a supply on their clipboard at all times as well. Employees will be instructed that failure to wear gloves as indicated will lead to a series of progressive disciplinary steps culminating in dismissal.

E. Housekeeping

Spills of blood or body fluids should be treated with chlorine bleach. The bleach should be left on the spill for several minutes. Wearing gloves, remove the bleach treated spill with disposable gloves into a plastic bag.

IV. Hepatitis B Vaccination Policy

General Statement of Policy

All employees who have been identified as having exposure to bloodborne pathogens (see II. Exposure Determination) will be offered the hepatitis B vaccination series at no cost to them. In addition, these employees will be offered post-exposure evaluation and follow-up at no cost should they experience an exposure incident on the job.

All medical evaluations and procedures including the hepatitis B vaccination series, whether prophylactic or post-exposure, will be made available to the employee at a reasonable time and place. This medical care will be performed by or under the supervision of a licensed physician, physician's assistant, or nurse practitioner. Medical care will be performed by or under the supervision of a licensed physician, physician's assistant, or nurse practitioner.

Hepatitis B Vaccination Policy (cont.)

Medical care and vaccination series will be according to the most current recommendations of the U.S. Public Health Service. A copy of the bloodborne pathogens standard will be provided to the healthcare professional responsible for the employee's hepatitis B vaccination.

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

Hepatitis B Vaccination

The vaccination is a series of three injections. The second injection is given one (1) month from the initial injection. The final dose is given six (6) months from the initial dose. At this time a routine booster dose is not recommended, but if the U.S. Public Health Service, at some future date recommends a booster, it will also be made available to exposed employees at no cost.

The vaccination will be made available to employees after they have attended training on bloodborne pathogens and within 10 working days of initial assignment to a job category with exposure. The vaccination series will not be made available to employees who have previously received the complete hepatitis B vaccination series; to any employee who has immunity as demonstrated through antibody testing; or to any employee for whom the vaccine is medically contraindicated. Any exposed employee who chooses not to take the Hepatitis B vaccination will be required to sign a declination statement.

Any employee desiring hepatitis B vaccine would first check with their own insurance provider to see if they are covered for this. If they are, they would proceed to make an appointment with their doctor for the vaccine. If there is a co-pay the school will reimburse the employee.

If their insurance does not cover the vaccine, they will inform the administration who will direct them to the Sutter Medical Clinic where they can make an appointment for

their vaccine. The school will pay the clinic charges.

V. Procedures for Evaluation & Follow-up of Exposure Incidents

An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or parental contact with blood or other potentially infectious materials that result from the performance of an employee's duties.

Employees who experience an exposure incident must immediately report their exposure to their Supervisor. When an employee reports an exposure incident, he/she will immediately be offered a confidential medical evaluation and follow-up including the following elements:

- documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;
- identification and documentation of the source individual unless identification is not feasible.

If the infected status of the source individual is unknown, the individual's blood will be tested as soon as feasible after consent is obtained. Request for said consent will come from the employee's attending physician. Exposed employee will be informed of the results of the source individual's testing,

The exposed employee's blood shall be collected as soon as feasible after consent is obtained, and tested for HBV and HIV serological status. If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.

The exposed employee will be offered post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Health Service. The exposed employee will be offered counseling and medical evaluation of any reported illnesses.

The following information will be provided to the healthcare professional evaluating an

employee after an exposure:

- a copy of bloodborne pathogens standards, (CCR Title 8)
- a description of the exposed employee's duties as they relate to the exposure incident;

Exposure Incident Follow Up (cont.)

- the documentation of the route(s) of exposure and circumstances under which exposure occurred;
- results of the source individual's blood testing, if available;
- all medical records relevant to the appropriate treatment of the employee including vaccination status.

NLCC, MCA & Noah's Ark 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 written opinion **will be limited to** the following information:

- the employee has been informed of the results of the evaluation;
- the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation of treatment.

NOTE: All other findings shall remain confidential and shall not be included in the written report.

VI. Employee Training

Employees will be trained regarding bloodborne pathogens at the time of initial assignment to tasks where exposure may occur and annually, during work hours. Additional training will be provided whenever there are changes in tasks or procedures which affect employees' occupational exposure; this training will be limited to the new exposure situation.

The training approach will be tailored to the educational level, literacy, and language of the employees. The training plan will include an opportunity for employees to have their questions answered by the trainer.

[insert name] is responsible for arranging and/or conducting training. (A variety of methods may be used; e.g. lecture, demonstration, videotapes, & written materials.)

Employee Training (cont.)

The following content will be included:

1. explanation of this exposure control plan and how it will be implemented;
2. procedures which may expose employees to blood or other potentially infectious materials;
3. control methods that will be used at this facility to prevent/reduce the risk of exposure to blood or other potentially infectious materials; explanation of the basis for selection of personal protective equipment;
4. information of the hepatitis B vaccination program including the benefits and safety of vaccination;
5. information on procedure to use in an emergency involving blood or other potential infectious materials;
6. what procedure to follow if exposure incident occurs;
7. explanation of post-exposure evaluation and follow-up procedures.

VII. Recordkeeping Procedures

Procedures **are** in place for maintaining both medical and training records. If *NLCC*, *MCA & Noah's Ark* should cease business, and there is no successor employer to receive and retain the records for the prescribed period, then the Director of the National Institute for Occupational Safety and Health (NIOSH) will be notified at least three months prior to the disposal of records. The records will be transmitted to NIOSH, if required by the Director, within the three month period.

Medical Recordkeeping

A medical record will be established and maintained for each employee with

exposure. The record shall be maintained for the duration of employment plus 30 years in accordance with (CCR Title 8). The Principal of the school will be responsible for maintaining medical records.

Recordkeeping Procedures (cont.)

The record shall include the following:

- name and social security number of the employee
- a copy of the employee's hepatitis B vaccination status with dates of hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccinations
- a copy of examination results, medical testing, and any follow-up procedures
- a copy of the information provided to the healthcare professional who evaluates the employee for suitability to receive hepatitis B vaccination prophylactically and/or after an exposure incident.

Confidentiality of Medical Records

The record will be kept confidential. The contents will not be disclosed or reported to any person within or outside the workplace without the employee's express written consent, except as required by law or regulation.

Training Records

Training records shall be maintained for 3 years from the date on which the training occurred.

The following information shall be included:

- dates of training sessions
- contents or a summary of the training sessions
- names and qualifications of trainer(s)
- names and job titles of all persons attending

Training records shall be provided upon request for examination and copying to employee representatives, and to California Occupational Safety and Health Administration (Cal-OSHA) in accordance to (CCR Title 8)

This document will be updated annually from the date of its implementation.