

CATTARAUGUS-ALLEGANY-ERIE-WYOMING BOCES

EXPOSURE CONTROL PLAN

Revised 09/2014

The Cattaraugus-Allegany BOCES recognizes the need to protect its employees from occupational exposure to bloodborne pathogens, which include, but are not limited to, Hepatitis B virus (HBV) and human immunodeficiency virus (HIV). This Exposure Control Plan has been established to eliminate or minimize employee exposure.

I EXPOSURE DETERMINATION

Tasks, procedures and job classifications have been evaluated to determine where occupational exposure to blood or body fluids may occur. The U.S. Department of Labor, Health and Human Services and the New York State Health Department have established guidelines used to classify employees according to their potential for exposure. These guidelines classify employees into three exposure groups, which determine frequency of training and requirements for offering Hepatitis B vaccinations:

Group I - this group includes all procedures or other job-related tasks that involve an inherent routine potential for mucous membrane or skin contact with blood, body fluids or tissue, or a potential for spills or splashes of them, and normal work routines which involve no exposure to blood, body fluids or tissues, but exposure or potential exposure may be required as a condition of employment. These tasks include emergency medical care for first aid provided by the School Nurses assigned to the Special Education Division, as well as clinical training of nursing students and first aid provided by the Practical Nursing (PN) Instructors located at the Career & Technical Centers. The tasks provided to Special Education Option IV (multiply disabled) students including cauterizations and working with tracheotomies and feeding tubes are also included in this category.

The job titles included in this group are:

- a) School Nurse
- b) PN Instructor
- c) Special Education Teachers/Aides and related staff
- d) Special Education one-on-one Aide

Group II - this group includes employees who utilize normal work routines which involve no routine exposure to blood, body fluids or tissues, but exposure or potential exposure may be required as a condition of employment. Included are staff designated and trained to perform first aid and maintenance and cleaning staff because they may be called upon to clean up body spills. Special Education staff working with Option IIB (moderately or severely disabled) students who are at or above age of puberty are included because these students may not practice good hygiene and could expose the staff to blood or genital secretions. Also included are Home-based Special Education staff and the Early Intervention and Pre-Kindergarten (Pre-K) evaluation team staff who visit students in their homes because of the greater potential of hepatitis B infection in this population.

The job titles included in this group are:

- a) Staff designated and trained to perform first aid
- b) Maintenance Mechanic, Maintenance worker and Cleaner
- c) Special Education Teacher, Aide and related staff i.e. Therapist, Adaptive Physical Education Instructor, etc. who work with Option IIB Students
- d) Home-Based Special Education Staff
- e) Early Intervention and Pre-School evaluation team staff
- f) Adult Education Family Educators staff
- g) Adult Education Staff who work in Correctional Facilities

Group III - this group includes employees who utilize normal work routines which involve no routine exposure to blood, genital fluids or body fluids visibly contaminated with blood, but exposure to other body fluids which have a low potential of containing blood may be required as a condition of employment. Although these tasks involve little risk of transmitting the HBV and HIV virus, there is the risk of transmitting other infectious agents such as hepatitis A or cytomegalovirus (CMV).

The tasks involved in children's personal care giving, such as toileting and diapering, are included in this category because it is not likely that visible blood will be present in these body fluids. Staff exposed to children's biting is also included in this category.

Also included in this category is the Career & Technical Education staff because students under their supervision may suffer minor cuts and abrasions from the sharp objects handled in the shops and classrooms. Occasional exposures, while not expected, may occur.

The job titles included in this group are:

- a) Pre-K Teacher and Aide
- b) Early Childhood Teacher and Aide
- c) Special Education Supervisor
- d) Special education Teacher, Aide and related staff i.e. Therapist, Adaptive Physical Education Instructor, ect. Other than those included in groups I and II
- e) Career & Technical Education Teacher and Aide
- f) Building Principal

This category also includes employees who utilize normal work routines that involve no anticipated exposure to blood, body fluids or tissues. Persons who perform these duties are not called upon, as part of their employment, to perform or assist in emergency medical care or first aid, or to be potentially exposed in some other way. These employees include all remaining staff and faculty.

The Cattaraugus-Allegany BOCES recognizes that this is a task oriented categorization and it is possible that any school employee may perform tasks from a higher category dependent upon the nature of the particular situation or event. This exposure determination will be reviewed regularly to ensure that each employee is categorized properly, and employees can request to have their jobs reviewed at any time.

II) INFORMATION AND TRAINING

- A. All BOCES employees, regardless of group, will receive the same training and follow the same guidelines so they understand the need for universal precautions and how to safely respond to injured students or co-workers.
- B. All employees will be trained initially upon assignment and Group I and II employees will receive training annually. Additional training will be provided when changes such as modification of tasks or procedures or institution of new tasks or procedures affect an employee's occupational exposure.
- C. The training will be provided at no cost to the employees during working hours. The material used will be appropriate in content and vocabulary to the education level, literacy and language of the employees.
- D. The training will contain the following elements:
 - 1) An accessible copy of the regulatory text of the standard and an explanation of its contents.
 - 2) A general explanation of the epidemiology and symptoms of bloodborne diseases.
 - 3) An explanation of the modes of transmission of bloodborne pathogens.
 - 4) An explanation of the Exposure Control Plan and the means by which the employees can obtain a copy of the written plan.
 - 5) An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
 - 6) An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices and personal protective equipment
 - 7) Information on the types, proper uses, location, removal, handling, decontamination and disposal of personal protective equipment.
 - 8) An explanation of the basis for selection of personal protective equipment.
 - 9) Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge.
 - 10) Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
 - 11) An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.

- 12) Information on the post-exposure evaluation and follow-up that the district is required to provide for an employee following an exposure incident.
- 13) An explanation of the signs and labels and/or color-coding which identify potentially infectious material.
- 14) An opportunity for interactive questions and answers with the person conducting the training session.

III) METHODS OF COMPLIANCE

- A) All BOCES employees shall observe **universal precautions** to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, **all body fluids shall be considered potentially infectious materials.**
- B) Personal hygiene kits will be provided at no cost to district employees. These kits shall include, at a minimum, 2 pairs of disposable latex gloves, 3 disposable paper towels, 1 gallon size plastic bag with zip lock seal, 2 cleansing towelettes, 1 alcohol towelette, 1 gauze pads 4"x 4", 2 Band-Aids. These kits will be located in all classrooms, school vehicles and shops. Each employee will be trained in the proper use of the kit and be responsible for informing their supervisor when their kit needs to be restocked.
- C) In the event that an injured individual requires emergency medical care or first aid, the first employee on the scene shall activate the emergency response plans as indicated in the building-level school safety plan for the facility. First aid kits will be provided in the PN classrooms and in the shops as well as in the main office area of each Career & Technical Center. These kits shall include, but not be limited to, gloves gowns, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks or other ventilation devices. PN Instructors and staff designated and trained to perform first aid will be responsible for informing their supervisor when the kits need to be restocked.
- D) In the event of a large spill of blood or body fluids, the employee shall keep all individuals away from the spill and notify the maintenance and/or custodial staff who will clean up the spill. The maintenance and/or custodial staff will be provided with personal hygiene kits and packets of disinfectant to be used on any body fluid spills. They will utilize all the necessary precautions to prevent direct contact with the spill and ensure that the spill is thoroughly disinfected before attempting any clean up. The maintenance and/or custodial staff will be responsible for informing their supervisor when the kits or disinfectant packets need to be restocked.
- E) The following work control practices shall be observed:
 1. Employees shall wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
 2. Employees shall wash their hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

3. In all cases where splashing, spraying, spattering and generation of droplets of blood or other potentially infectious materials may occur, employees shall use masks in combination with eye protection devices and appropriate protective clothing.
4. Broken glassware which may be contaminated shall not be picked up directly with the hands, but with mechanical means such as a brush and dustpan.
5. Red bags or containers will be located in the PN classroom and shall be used for the disposal of all material which is saturated with blood or body fluids containing blood (regulated Waste). It is not likely that this type of waste would be generated at the school. However, in the event of an accident with large amounts of blood soaked material, this material will be placed in the red bags or containers and be given to the emergency personnel to transport to the local hospital for disposal. Should the local hospital not accept the regulated waste, the waste will be manifested and picked up by an approved medical waste transporter such as Med-Serv at 716-875-3203 or Buffalo Medical Waste, Inc. at 716-636-0048.
6. Sharps used in the PN Classrooms shall be disposed of in the sharps containers located there. A syringe count notebook is maintained by the PN Instructor and kept in a locked cabinet. In the PN program the sharps are used on mannequins and injector pads (the needles are not used by the students on each other). When the sharps container is full it will be disposed of properly with the local health care agency.
7. Small amounts of blood on bandages, gauze, feminine hygiene products, etc., need not be considered infectious (regulated) waste and can be placed in a plastic bag in the regular trash. Custodians removing this trash will remove the plastic bag and place it in another plastic bag before disposal. (Double bag.)

IV) HEPATITIS B VACCINATION

- A) The hepatitis B vaccine and vaccination series will be made available at no cost to all Group I and Group II employees after an employee has received the necessary training. Prescreening will not be a prerequisite for receiving the hepatitis B vaccination.
- B) Licensed health care professionals from the County Health Department or the School Nurse will perform the vaccinations.
 - 1) All Group I and Group II employees shall be offered the vaccination within 10 working days of initial assignment. The only exception to this is employees who have been designated and trained to perform first aid but who render first aid only as a collateral duty. These employees will be offered the hepatitis B vaccinations as soon as possible, but in no event later than 24 hours, after they render assistance in any situation involving the presence of blood or other potentially infectious materials, when no specific exposure incident occurs. In the event of a specific exposure incident employees will be treated with Gamma Globulin and any other recommended treatment and follow-up.
 - 2) All Group I, II and Group III employees shall sign a consent/declination form prior to receiving the vaccination. If the employee declines the hepatitis B vaccination because they have previously received the complete hepatitis B

vaccination series, or antibody testing has revealed that the employee is immune, it shall be so noted on the form.

- C) If the employee initially declines the hepatitis B vaccination, but at a later date while still covered under the standard decides to accept the vaccination, the Cattaraugus-Allegany BOCES will make available the hepatitis B vaccination at that time.
- D) If routine booster dose(s) of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) will be made available at no cost to all Group I, II and Group III employees.

V) POST-EXPOSURE EVALUATION AND FOLLOW-UP

- A) Post-exposure evaluation and follow-up will be provided to all employees who have had an exposure incident.
- B) Following a potential exposure incident, the employee will report the incident to their supervisor or the Human Resources staff immediately. The employee will be provided with the Blood and Body Fluids Incident Form. The form will document the route(s) of exposure and the circumstances under which the suspected exposure incident occurred.
- C) The incident form will be completed by the employee and reviewed by the Human Resources staff. The Human Resources staff will consult with the employee's immediate supervisor, other health professionals on staff or a consulting physician to determine whether a potential exposure has occurred. If it hasn't, the employee will be informed of no further action needed. If it is determined that a potential exposure incident has occurred, the employee will be referred to a health care professional as soon as possible. Employees who have had an exposure incident will be entitled to a professional medical evaluation, laboratory testing and prophylaxis at no cost to the employee.
- D) In the event of employees being outside of district buildings and/or unable to contact their immediate supervisor or the HR Department (such as during weekend or evening activities) for evaluation and review of a potential exposure incident, employees will immediately contact the nearest medical office or emergency room for proper evaluation and follow-up. In the event that this occurs, employees will then be required to report the incident to their supervisor or the HR Department as soon as possible thereafter.
- E) A copy of completed forms will be provided to the employee and the form will be filed in the Human Resources Office.
- F) The health care professional evaluating the employee after an exposure incident will be provided:
 1. A copy of the regulation "Occupational Exposure to Bloodborne Pathogens"
 2. A description of the exposed employee's duties as they relate to the potential exposure incident

3. A copy of the blood and body fluids incident form documenting the route(s) of exposure and the circumstances under which the suspected exposure incident occurred
4. All medical records relevant to the appropriate treatment of the employee including vaccination status which are the districts' responsibility to maintain
5. Results of the source individual's blood testing, if available. 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. If consent cannot be obtained from the source individual to have their blood tested, the district will establish that legally required consent cannot be obtained.

G) The health care professional's medical evaluation shall include:

1. Identification and documentation of the source individual, unless the district has established that identification is infeasible or prohibited by federal, state or local law.
2. Provision of the results of the source individual's blood testing, if performed, accompanied by information regarding applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
3. Collection and testing of the exposed employee's blood after consent is obtained. 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.
4. Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service.
5. Counseling
6. Evaluation of reported illnesses

H) The employee will be provided with a copy of the evaluating health care professional's written report within 15 days of the completion of the evaluation.

I) The health care professional's written opinion for hepatitis B vaccination shall be limited to whether hepatitis B vaccination is indicated for the employee and if the employee has received such vaccination.

J) The health care professional's written opinion for post-exposure evaluation and follow-up shall be limited to the information that the employee has been informed of the results of the evaluation and 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. All other findings or diagnoses will remain **confidential** and shall not be included in the written report.

VI) HAZARD COMMUNICATION

- A) The Cattaraugus-Allegany BOCES requires its employees to use universal precautions in the handling of all material and laundry contaminated by blood or other potentially infectious materials.
- B) Red bags or containers will be located for the disposal of all material which is saturated with blood or body fluids (Regulated Waste). Sharps containers will be located in the PN classrooms for the disposal of sharps.

VII) RECORDKEEPING

- A) Medical records will be kept in the Business Office for each employee with occupational exposure to Bloodborne Diseases. The records will include:
 - 1. The name and social security number (last four digits) of the employee
 - 2. A copy of the employee's hepatitis B vaccination status including the dates of all the hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination
 - 3. A copy of the information provided to the health care professional evaluating an employee after an exposure incident
 - 4. Copies of the health care professional's written opinion following an exposure incident
- B) A copy of all results of examinations, medical testing and follow- up procedures regarding an exposure incident are maintained by the health care professional evaluating an employee after an exposure incident and are not available to Cattaraugus-Allegany BOCES.
- C) All employee medical records will be kept **confidential** and will not be disclosed or reported without the employee's written consent to any person within or outside the workplace except as required by law. The medical records will be maintained for at least the duration of employment plus 30 years.
- D) Training records will be kept in the Cattaraugus-Allegany BOCES Health, Safety & Risk Management Office for all employees. The records will include:
 - 1. The dates of the training sessions
 - 2. A summary of the contents of the training session
 - 3. The names and qualifications of persons conducting the training
 - 4. The names and job titles of all persons attending the training sessions

The training records will be maintained for three years from the date on which the training occurred.

VIII) AVAILABILITY OF PLAN

- A) The Human Resources Office and the Health, Safety & Risk Management Office will maintain copies of the Exposure Control Plan and will make them available to all employees.
- B) All employees will be directed to contact their supervisor for access to a copy of the plan.
- C) Information regarding availability of the plan will be provided in the Employee Handbook and discussed at all related training sessions.

IX) PLAN REVIEW

The Exposure Control Plan will be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

X) UPDATES

Article 27-F of New York State Public Health Law protects the confidentiality and privacy of anyone who has been tested for or exposed to HIV; HIV infection or HIV/AIDS-related illness; or been treated for HIV/AIDS related illness.

Cattaraugus Allegany BOCES

CONSENT/WAIVER FORM For Hepatitis B Vaccination

Please read this sheet carefully!

I understand the benefits and risks of Hepatitis B vaccination. I understand that I must receive at least 3 intramuscular doses of vaccine in the arm over a 6-month period to confer immunity. However, as with all medical treatment, there is no guarantee that I will become immune or that I will not experience an adverse side effect from the vaccine.

Hepatitis B vaccine will be made available at no charge to employees having blood exposure. I understand that routine booster dose(s) of Hepatitis B vaccine is not recommended by the U.S. Public Health Service at this time but that if they are recommended by the U.S. Public Health Service at a future date, such booster dose(s) will be made available at no charge to employees having blood exposure.

I have had an opportunity to ask questions, and all my questions have been answered to my satisfaction. I believe that I have adequate knowledge upon which to base an informed consent.

I understand that participation is voluntary and my consent or refusal of vaccination does not waive any rights under my employment contracts. In addition, I can withdraw from the vaccination regimen at any time.

Please check one (1):

- I grant permission for the Cattaraugus County Health Department to administer the three (3) doses of Hepatitis B vaccine. I fully realize my responsibility to immediately report any side effects of the vaccine to the Personnel Office.
- I decline to be immunized at this time because I have previously received the complete Hepatitis B vaccination series on _____ (date), or have received antibody testing which revealed immunity to the Hepatitis B virus.
- 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 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 Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Signature

Date

Print Name



Cattaraugus Allegany BOCES
RECORD OF VACCINATION
For Hepatitis B

Name: _____

| Vaccine Given | Dose | Date | Administered By | Reactions |
|---------------|------|------|-----------------|-----------|
|---------------|------|------|-----------------|-----------|

Dose #1 (Day 1) _____

Dose #2 (Day 30) _____

Dose #3 (Day 180) _____

Allergies: _____

Vaccine not given as indicated because: _____



Cattaraugus-Allegany BOCES

BLOOD & BODY FLUIDS INCIDENT FORM

All information within this form is strictly CONFIDENTIAL as per HIPPA 45 CFR Part 160 and Part 164.

Employee Name: _____ Employee S.S. #: _____

Job Title: _____ School: _____

I. DESCRIPTION OF INCIDENT (to be completed by employee)

A. Briefly describe what happened. Date & Time of Incident

B. Wounds

1. Did the incident involve a wound? yes no If no, go to section C.
2. Did the wound result in visible bleeding? yes no
3. Was the wound caused by: needle human bite other sharp instrument [specify] other [specify]
4. Was the object causing the wound covered with blood/body fluids? yes no

C. Blood /Body fluid exposure

1. Did the individual's blood/body fluids come in contact with your body? yes no If no, go to section D.
2. What was the substance to which you were exposed?
 blood feces urine emesis [vomit] sputum sexual fluids saliva
3. If the substance was anything other than blood, was there any blood visible in the fluid? yes no

4. What part of your body was exposed to the substance? (Check all that apply) mouth eyes nose ears
skin [specify location] _____ other [specify] _____

5. How long was your body part in contact with the substance?

6. If the exposure was to your skin, do you have any abrasions which would allow a body fluid to enter your body? yes
 no If no, go to section D. If yes, what was the nature of your abrasion? acne dermatitis [rash or irritation]
 cracks due to dry skin unhealed cuts or scratches
 other [specify] _____

D. Personal Protection

1. Which of the following procedures were being used at the time of the incident? [Check all that apply] () cuts/open wounds covered with bandages () mask () vinyl/Latex gloves () pocket ventilator/ambu bag () goggles/glasses () other [specify]

2. After incident, what did you do? () washed hands/exposed area () changed clothes () flushed eyes/rinsed mouth () showered () other [specify]

The supervisor was notified as follows: Date: _____ Time: _____

The supervisor notified BOCES school nurse/LPN instructor: Date: _____ Time: _____

II. SIGNIFICANCE OF EXPOSURE (to be completed by BOCES school nurse or appropriate LPN staff)

A. Did an exposure occur which could transmit disease? () yes () no

- 1. If no, inform the employee of no further action needed.
- 2. If yes, refer employee for appropriate evaluation and treatment.

B. For evaluation, provide to the healthcare professional evaluating the employee:

- 1. A copy of the regulation "Occupational Exposure to Bloodborne Pathogens"
- 2. A description of the exposed employee's duties as they relate to the exposure incident
- 3. A copy of the Blood & Body Fluids Incident Form
- 4. All medical records relevant to employee treatment including vaccination status
- 5. Information on the source individual if so provided:

a. Name of source: _____

b. Home address: _____ Home phone: _____

c. Has the source's blood been tested: () yes () no
If no, will the source consent to have his/her blood tested? () yes () no

III. SIGNATURES

Signature of Employee Date

Signature of BOCES Supervisor/School Nurse Date