Lincoln Public Schools PROTOCOL FOR BLOODBORNE PATHOGENS

EVALUATION OF EXPOSURE INCIDENTS: The incident form should be used by the building administrator to identify and correct problems in order to prevent recurrence of similar incidents.

HEPATITIS B VACCINE - All employees in Category I because they are "at

risk" of occupational exposure to blood or potentially infected body fluids, will be offered free of charge the Hepatitis B vaccine at the time of employment. Additionally, all first aid providers who render assistance in any situation involving the presence of blood or other potentially infectious materials, regardless of whether or not a specific exposure incident occurs, must be offered the full immunization series as soon as possible, but in no event later than 24 hours. If an exposure incident has taken place, other post-exposure follow-up procedures must be initiated immediately.

- 1. All Category I employees are strongly urged to participate in this program.
- 2. A consent form will be signed if the employee decides to accept the vaccine. (see attached Appendix 1)
- 3. A statement of Declination per OSHA guidelines will be signed if the employee refuses the vaccine. (see Appendix 1 attached). If an employee declines and later opts to receive the vaccine this can be done at any time and at no cost to the employee.
- 4. The vaccine will be available to employees who have occupational exposure to blood or potentially infected body fluids at any time during their employment at no cost.
- 5. The vaccine requires that three doses of Recombivax will be given over a six month period and as outlined in the consent form. If a routine booster dose(s) of Hepatitis B vaccine is recommended by the USPHS at a future date, such dose(s) will be made available at no cost to the employee. Information about the vaccine is available in the school nurse's office.
- 6. A history of vaccination will be maintained on the "Hepatitis B Vaccination Documentation Form" (Appendix 2) by Human Resources.
- C. UNIVERSAL PRECAUTIONS Universal precautions can be defined as a method of infection control. It makes use of appropriate protective devices for contact with the blood or body fluids from ALL persons at ALL times. It considers every individual's blood and body fluids as potentially infectious. Body fluids include blood, drainage from scrapes and cuts, feces, urine, vomitus, semen, respiratory secretions and saliva.
- **D. ENGINEERING CONTROLS** Engineering controls are those that remove the hazard of exposure or isolate the worker from the hazard of exposure.
- **E. SAFE WORK PRACTICE CONTROLS** (see attached Appendix 3) These are methods which reduce the risk of occupational exposure during tasks that involve contact with blood and/or potentially infectious materials.

F.EXPOSURE CONTROL PRECAUTIONS INVOLVING ENGINEERING
CONTROLS, UNIVERSAL PRECAUTIONS, AND SAFE WORK PRACTICES

- 1. All personnel will avoid all direct contact with blood and body fluids (drainage from cuts and wounds, semen, feces, urine, vomitus, respiratory secretions and saliva).
- 2. All personnel must use one way valve emergency respiratory devices in resuscitation.
- 3. All personnel will wear protective gloves when coming in contact with blood and body fluids (including toileting and diapering).
- 4. All personnel will wash hands thoroughly with soap and water after removing gloves and flush with copious amounts of water and soap immediately after contact with blood and body fluids.
- 5. If exposure occurs outside the building or in an area where the employee is unable to readily wash his/her hands (at a sporting event or field trip), a skin disinfectant should be used and can be found in first aid kits.
- 6. Disposable gloves and materials with blood or body fluids must be discarded in red biohazard bags located in closed containers located in the custodian's and nurse's offices.
- 7. Place contaminated sharps and other potentially infectious waste in labeled or color-coded leak-proof puncture-resistant containers that are closable and easily accessible to nurses and custodians. These containers should not be allowed to overfill.
- 8. If clothing becomes contaminated, it should be placed in a red biohazard bag for proper cleaning.
- 9. When a spill occurs, the building administrator or custodian will limit access to areas of potential exposure with markers. The janitorial staff will be notified to immediately clean the area.
- 10. Any contaminated areas of the school will be washed immediately with a strong solution of bleach and water mixed on site (1 part bleach to 10 parts water) or the district approved antimicrobial/antiviral solution.
- 11. In cleaning up blood or body fluids appropriate protective personal equipment must be worn. For routine spills, rubber gloves and long handled scrub utensils must be used. For large and unusual spills it is advised to use face and eye protection and wear a sanitary suit.
- 12. All locker rooms, lavatories and nurses offices will be cleaned daily using disinfectant. Custodial staff are required to wear rubber gloves and use long handled scrubbing utensils.
- 13. All mops and cleaning tools are to be disinfected after the job is done.
- 14. Discard all biohazard red bag waste according to federal, state and local regulations. Such waste is only to be transported off school property by a licensed vendor. (see attached Appendix 4)

- G. <u>PERSONAL PROTECTIVE EQUIPMENT</u> The Lincoln Public Schools will provide, at no cost to the employee, appropriate barriers such as listed below, i.e., gloves, masks, containers. These protective barriers will be accessible to employees and be cleaned, repaired and replaced as needed. Appropriate barriers shall be those which are impervious to blood and other potentially infectious substances (as per OSHA standards).
 - 1. Gloves Disposable non-latex rubber gloves will be located in the nurse's office, custodial areas and self-contained classrooms. Heavy duty rubber gloves will be located in the custodial areas.
 - 2. One way valves for respiratory resuscitation (CPR) will be located in the nurse's office.
 - 3. All needle like contaminated objects ("sharps") will be deposited in red sharps disposal containers located in the nurse's office.
 - 4. Plastic red biohazard bags, labels and closed biohazard containers for disposal of wastes containing blood and other body fluids will be located in the nurse's' office and custodial areas.
 - 5. Eyewear and face shield dust mask will be located in the custodial areas.
 - 6. Sanitary coveralls are available in the custodial areas and are to be worn in the presence of any blood or body fluids of significant quantity.
 - 7. Signs (cones with appropriate labels) to identify restricted areas will be available in custodial areas and building administrator's offices.
 - 8. Approved skin disinfectant will be included in all First Aid kits located throughout the buildings.

POST-EXPOSURE EVALUATION AND FOLLOW-UP – EXPOSURE PLAN

In order to safeguard his/her health, any employee who or gets splashed in the eye, mouth or skin cut with blood or body fluids, especially if it involves large amounts or prolonged exposure MUST report the exposure and take advantage of the following confidential procedures:

- 1. Exposed individual will immediately obtain an incident report form from the building administrator/nurse.
- 2. Complete an incident report of the exposure and submit it to the building administrator immediately.

The incident report includes: (see attached incident report Appendix 6)

- a description of the employee's duties as they relate to the exposure
- documentation of the manner and circumstances of the exposure, and the immediately post-exposure treatment
- identification of the source individual
- identify use of personal protective equipment according to Table I (Appendix 7)
- 3. The building administrator will request that the source individual report to the designated medical facility for HBV and HIV testing as soon as possible.
- 4. The exposed individual should report, at no cost, to the designated facility for:
 - consultation
 - collection and testing of the employee's blood for baseline HBV and HIV (employee consent required)
 - post-exposure prophylaxis as recommended by the U.S. Public Health Service, when medically indicated

- counseling, as needed
- evaluation of reported illnesses

APPENDICES

- 1) Hepatitis B Vaccination Consent Form
- 2) Hepatitis B Vaccination Documentation Form
- 3) Work Practice Controls
- 4) List of Regulated Medical Waste Transporters
- 5) Exposure Incident Report
- 6) Table I Exposure Control Plan[11]

Approved First Reading: November 20, 2023 Approved Second Reading: Adopted: