I. INTRODUCTION

In December 1991 the Occupational Safety and Health Administration (OSHA) issued safety standard regulations for the handling of bloodborne pathogens. On May 6, 1993 the standard became mandatory for all entities subject to OSHA control. The School board has adopted a bloodborne pathogens policy.

The Bloodborne Pathogen exposure control plan covers employees having a potential for occupational exposure to blood or other potentially infectious materials, which may ultimately result in exposure to bloodborne diseases such as hepatitis B virus (HBV) or human immunodeficiency virus (HIV).

For purposes of this plan “occupational exposure” will mean reasonable anticipated skin, eye, mucous membrane, or potential (piercing mucous membranes or the skin barrier through needle sticks, human bites, cuts, abrasions, etc.) contact with blood or other potentially infectious materials (OPIM) that may result from the performance of the employee’s duties. OPIM include body fluid that is visually contaminated with blood, etc.

**Employees must contact Risk Management at 557-2890, immediately upon exposure.**

II. UNIVERSAL PRECAUTIONS

Universal precautions are intended to prevent occupational exposure to a Bloodborne infectious agent through contact with blood and other potentially infectious materials. Since blood is the single most important source of a Bloodborne infectious agent (such as HIV or HBV) in the occupational setting, one should assume that ALL blood, or body fluids containing visible blood, may carry an infectious agent. Universal precautions also apply to excretory and non-excretory body fluids, such as cerebrospinal fluid, but these are not considered a source of transmission in the school setting.

Universal precautions require that gloves be used for touching blood, or body fluids that contain visible blood, whenever possible. Disposable gloves (non-sterile or sterile), either latex or vinyl, provide barrier protection for both the student and the hands of the caregiver during performance of tasks when contact with blood, or body fluids containing blood is likely. These gloves must never be washed or cleaned with the intent to reuse. Soaps and disinfectants can cause deterioration or increase permeability of disposable gloves. Clean disposable gloves must be used for each task, removed as soon as the task is completed and disposed of appropriately.

General purpose utility gloves (rubber gloves) for housekeeping chores which involve potential contact with blood or body fluids may be decontaminated after contact and reused, but should be discarded if there are any signs of deterioration such as; holes, peeling, cracking, or discoloration.
Universal precautions do not apply to saliva unless blood is present. General infection control practices do recommend the use of gloves for examination of the mucous membranes, endotracheal suctioning or when caregiver’s hand(s) must enter a student’s mouth to perform a specific treatment such as brushing the teeth of children when gums bleed easily. Gloves need not be worn when feeding or wiping saliva or nasal discharge with a tissue.

The policy of the Omaha Public School District will be to use gloves when diapering, assisting with toileting, changing a dressing on a draining wound, or cleaning soiled articles of clothing.

Universal Precautions are practices and procedures that assist in the prevention of contact with blood and other body fluids. They are the best protection against HIV, Hepatitis B and other infectious agents. The following is a summary of universal safe work precautions:

1. Assume everyone is infected with HIV, Hepatitis B or other Bloodborne pathogens.
2. Avoid skin exposure to infected fluids. Fluids to be concerned about are:
   - Blood
   - Cerebrospinal fluid-a clear fluid surrounding the brain and spinal cord that may leak out of the nose, ears or mouth as a result of severe head injury
   - Amniotic fluid-the fluid in the uterus present during labor and delivery
   - Semen, vaginal fluids and breast milk may also contain Bloodborne pathogens, but are not common in first aid situations
   - Any fluid containing blood
   - Pericardial, peritoneal, pleural and synovial body fluids
3. Use a barrier (such as gloves, cloth, paper towel, etc.) to keep fluids from contact with your skin.
4. Be careful with sharps and dispose of sharps such as needles or lancets or contaminated broken glass in a puncture resistant container. Use tongs or other equipment to pick up glass contaminated with blood or OPIM.
5. Use disposable equipment whenever possible.
6. Dispose of items soiled with potentially infected fluids in leak proof bags or containers.
7. Wash hands thoroughly 15-20 seconds, minimum, with soap and water.
8. Clean up spills of potentially infected fluids with soap and water and disinfect spill area with appropriate disinfectant. (See Housekeeping)

III. ENGINEERING AND WORK PRACTICE CONTROLS

Engineering and work controls will be used to eliminate or minimize all employee exposure. The following engineering work practice controls and policies are to be used throughout the school district.

1. ENGINEERING CONTROLS

   Engineering controls are controls, which isolate or remove the Bloodborne pathogen hazard from the workplace. The following engineering controls will be used in the District:
The District will maintain appropriate containers for the disposal of needles or sharps in the nursing office and other areas as requested.

All sharps will be disposed of in the special sharps container.

The District will maintain appropriate receptacles for the deposit of contaminated clothing, protective clothing, and other articles.

Engineering controls will be examined, maintained or replaced on a regularly scheduled basis.

2. **WORK PRACTICE CONTROLS**

Work practice controls are those controls that reduce the likelihood of an exposure by altering the manner in which the task is performed. The following work practices will be used in the District:

- Training sessions as a goal will be held within ten (10) working days for all new employees. Annual reviews will be conducted at a facility meeting or in District wide In-services.
- Contaminated needles will not be bent, recapped, or removed but will be disposed of in appropriately labeled containers.
- Procedures involving blood or OPIM will be performed in a manner to minimize splashing, spraying or spattering. To minimize exposure to blood or OPIM wear disposable gloves. Do not re-use disposable gloves. Wash your hands with soap and water after removing gloves. If utility gloves are used decontaminate them appropriately by washing with detergent and water. Disinfect according to procedure.
- In the event you become exposed to any blood or OPIM, wash in the area with soap and water or flush mucous membranes immediately and report to your supervisor. As soon as possible contact Risk Management 557-2890. If necessary, professional medical attention will be provided, including Hepatitis B vaccine.
- Mouth suctioning of blood or OPIM is prohibited.
- If specimens of blood or OPIM are present in the school they should be in leak proof containers, appropriately labeled, and closed prior to storing or transporting. Equipment which may become contaminated with blood or OPIM shall be decontaminated, or appropriately labeled, as soon as is feasible after the contamination occurs. Affected employees and, if necessary, outside servicing agents, will be informed of the contamination of the equipment prior to any handling, servicing or shipping of the equipment.
- Wherever possible and appropriate, employees should practice self-management of injuries and should teach students the same. The principle of self-management is that the people whose blood or other body fluids are exposed should themselves, if possible, manage, treat, clean and dispose of the contaminated materials, thereby avoiding contact by a second party.

3. **FIRST AID/HEALTHCARE**

- Use gloves or other personal protective equipment (PPE).
- Use paper toweling to wipe injury and, if appropriate, allow person to rinse injury with running water.
- Place soiled materials into a lined waste container and direct person to perform as much of these procedures as possible.
- Soiled clothing should be removed and placed into a plastic bag for laundering if feasible.
- Assist in cleaning affected area; use cotton swabs to apply medicine if appropriate.
- Follow other procedures for care in minimizing direct contact with blood or body fluids.
- Wash hands thoroughly.
Note: If you do not have access to PPE or exposure control kits, help the injured person to care for him/herself. Demonstrate how to do this, i.e. holding paper towels over bloody nose and applying pressure. Instruct person in cleanup of any blood spills. Place a barrier (i.e. paper toweling) between yourself and the injury if you need to provide assistance.

4. HANDWASHING

Washing one’s hands with soap and running water is one of the most effective ways to prevent the spread of disease through blood or OPIMS, employees shall wash their hands with soap and water whenever exposure occurs. Although hand washing may be advisable in other situations, employees must thoroughly wash their hands or any other contaminated skin with soap and water in the following situations:

- Immediately after the removal of gloves or other personal protective equipment.
- Following contact of hand or other skin with blood or OPIM.
- In some situations, such as on athletic fields or field trips, hand washing facilities may not be available. In this case, the person in charge of the event (i.e.: coach, teacher, etc., who is taking the class on the field trip) shall ensure that antiseptic towelettes are available for use. Antiseptic towelettes which may be used for this purpose are stored in the nurse’s office area and in general supply in each attendance center and may be obtained through the nurse or person designated for the overall responsibilities of the facility.

IV. BLOODBORNE PATHOGEN SUPPLIES

Appropriate supplies are available and readily accessible for each employee’s use.

1. It shall be the responsibility of any employee who uses Bloodborne pathogen cleanup supplies to appropriately wash, decontaminate, or dispose of after use. The school district shall be responsible for storing, cleaning, laundering, decontaminating, repairing, replacing or disposing of such supplies.

2. All personal protective supplies which are penetrated by blood or OPIM should be removed as soon as feasible.

3. Bloodborne Pathogen clean-up supplies are stored in the nurse’s office, Head Engineer’s office, and custodial closets of each building and in a location designated and communicated by the appropriate administrators in all other sites. The supplies may be checked out or obtained for use by contacting the building administrator. The following supplies are available in the District for use by its employees.

- Disposal Gloves
- Appropriate Disinfectant
- Absorbent Material
- Plastic bag (small)
- Dust Pan and Broom
- Paper Towels
- Rug Shampoo
- Large Plastic Bags
- CPR Protector, Mouth to Mouth Barrier
- Sharps container
V. HOUSEKEEPING

1. All equipment and/or environmental working surface shall be cleaned and decontaminated with an appropriate disinfectant as soon as feasible after contact with blood or OPIM.

2. Protective coverings used to cover equipment and environmental surfaces shall be removed and decontaminated or replaced as soon as feasible when they become contaminated with blood.

3. All bins, pails, cans, and waste paper baskets, which have a reasonable likelihood of contact, shall be inspected, cleaned, and decontaminated on a regularly scheduled basis, or upon visible contamination. Used sanitary napkin receptacles should be emptied and decontaminated daily.

4. Broken glassware shall not be picked up by hand, but by using a broom and dustpan, tongs, vacuum cleaner, or other mechanical means.

5. An intermediate level disinfectant should be used to clean surfaces contaminated with body fluids. Such disinfectants will kill vegetative bacteria, fungi, tubercle bacillus and viruses. The disinfectant should be registered by the U.S. Environmental Protection Agency (EPA) for use as a disinfectant in medical facilities and hospitals.

6. The following cleaning schedule and method of decontamination will be implemented in the District:
   - Blood OPIM Spill Cleanup on Hard Surfaces
   - Use disposable gloves. Do not reuse disposable gloves. If utility gloves are used, decontaminate after use with soap and water and appropriate disinfectant.
   - Spray body fluid with the appropriate disinfectant.
   - Use and absorbent material such as paper towels or absorbent powder to absorb the spill.
   - Remove body fluid with paper towels or dustpan and broom. Place in plastic bags.
   - Disinfect spill area as follows:
     – Carpet—Use rug shampoo. DO NOT USE BLEACH
     – Hard Surfaces—Use disinfecting soap and water
   - Spray disinfected area with the proper disinfectant. Let this disinfectant set for ten (10) minutes before allowing spill area to be reused.
   - Mops should be soaked in disinfectant and washed thoroughly in hot soapy water and rinsed. Flush cleaning materials to sanitary sewer or place in plastic bags as appropriate. Non-disposable cleaning equipment (dust pans, brooms, mops, buckets, etc.) should be thoroughly rinsed in the disinfectant. The disinfectant solution should be promptly disposed of in the sanitary sewer. All cleaning equipment used (mops, pans, buckets, brooms, etc.) should be sprayed with the phenolic agent before storing.
   - Remove disposable gloves and discard in plastic bag with body fluid.
   - Dispose of plastic bag in appropriate container.
   - Wash hands thoroughly with warm water and liquid hand soap.

7. Laundry Instructions for Clothing Soiled with Body Fluids:
The school district will use Universal precautions with all soiled or contaminated laundry. Any contaminated items, which can be laundered, will be bagged at the site of the contamination and handled as little as possible. The following procedure will be used for handling items that have been contaminated with Bloodborne pathogens:
Handling at the site of contamination
- Do not sort or rinse at site of contamination.
- Wear disposable gloves
- Bag items at the site of contamination using leak proof, clear plastic bags. These can be obtained from the Head Custodian.
- Deposit tied and/or sealed bags in area designated by the Head Custodian.

Handling in Laundering Area
- Wear disposable gloves
- Spray the suspect bloodborne pathogen affected area with a phenolic agent.
- Wait ten (10) minutes.
- Wash the contaminated laundry separate from normal laundry.
- Spray inside of plastic bag (preferably clear) with phenolic agent, tie and/or seal and dispose of as trash.

8. Cleanup of Objects contaminated with Blood/OPIM (i.e. athletic equipment)
- Use gloves. Do not reuse disposable gloves. Utility gloves should be properly decontaminated after use.
- Discard contaminated items that cannot be cleaned into a lined container.
- Wash objects using warm water and general purpose cleaner.
- Disinfect the object using approved disinfectant. Read and follow instructions on the disinfectant container.
- Rinse clear after disinfecting if object is to be placed in mouth, i.e. mouth guard for football players, or follow appropriate decontamination procedures.
- Dispose of contaminated cleaning material in a lined container
- Notify your supervisor, the Housekeeping Supervisor, Schoolhouse Planning, or Environmental, if exposure potential exists.

VI. TRAINING

A training program on bloodborne pathogens will be provided for all employees with the potential for occupational exposure. Training will be provided during working hours, at no cost to the employee. Attendance at training sessions is mandatory.

Initial training will be provided for all employees. Where occupational exposure may occur, annual training for employees will be provided within one year of their previous training. Additional training will be provided if changes in an employee’s assignments affect the employee’s occupational exposure.

The training program will be conducted by individuals who are knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace. The training program will contain, at a minimum, the following elements:
1. A copy of the OPS Bloodborne Pathogen Exposure Control Plan and an explanation of its contents
2. A general description of common bloodborne pathogen diseases
3. An explanation of the modes of transmission for bloodborne pathogens
5. Discussion about how to recognize activities that may involve exposure to blood and OPIM
6. An explanation of the use of engineering controls, work practices, and personal protective equipment to reduce exposure.
7. Information on the Hepatitis B vaccine and the conditions under which it is offered free of charge to employees.
8. Information on appropriate actions to take and persons to contact in an emergency involving blood or OPIM
9. An explanation of the procedure to follow if an exposure incident occurs, including the methods of reporting and the medical follow-up that will be made available.
10. A summary question and answer period at the end of the course.
Bloodborne Pathogen Exposure Control Plan

DEFINITIONS

Amniotic Fluid  The fluid surrounding a fetus while it is developing.

Blood  Human blood, human blood components and products made from human blood.

Bloodborne Pathogen  Pathogenic (disease causing) microorganisms that are present in human blood. They can cause disease in humans. The pathogens include, but are not limited to, Hepatitis B Virus (HBV) and Human Immunodeficiency virus (HIV).

Cerebrospinal Fluid  The fluid surrounding the brain and spinal cord

Contaminated  The presence or the reasonable anticipated presence of blood or other potentially infectious materials in an item or surface.

Contaminated Sharps  Any contaminated object that can penetrate the skin including, but not limited to needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Contaminated Laundry  Laundry which has been soiled with blood or other potentially infectious materials, or which may contain sharps

Decontamination  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.

Engineering Controls  Methods or procedures such as sharps disposal containers, self sheathing needles, etc. which are designed to isolate or remove a bloodborne pathogens hazard from the workplace.

Exposure Incident  A specific eye, mouth, other mucous membrane, non-intact skin or potential contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.

Hand washing Facilities  A facility which provides an adequate amount of running, potable water, soap and single use towels or hot air drying machines.

HBV  Hepatitis B Virus

HIV  Human Immunodeficiency Virus

Occupational Exposure  Reasonable anticipated skin, eye, mucous membrane or other potential contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.