



Bloodborne Pathogen Compliance Plan



DISTRICT POLICY

The Wayne-Westland Community School District is consistently developing and implementing policies and procedures to safeguard the health and well-being of district employees and promote a safe work environment. To that end, the school district has developed the following Bloodborne Pathogens Compliance Manual and Exposure Control Plan to comply with the OSHA and MIOSHA Bloodborne Pathogen Standard. This Standard has been specifically enacted to “reduce exposure to hepatitis B virus (HBV), human immunodeficiency virus (HIV) and other bloodborne pathogens” to which employees may be exposed in their workplace.

This school district, in an effort to reduce the risk of employee exposure to all infectious diseases, has determined that not only the body fluids identified by the Standard but ALL body fluids have the potential for risk of exposure to infectious diseases. Therefore, employees should follow the principles of Universal Precautions as they apply to all body fluid exposure.

The school district has implemented the enclosed Exposure Control Plan to comply with the intent and the letter of the law regarding the Bloodborne Pathogen Standard. The main objective of this plan is to protect employees from potential work place hazards by reducing occupational exposure to HBV, HIV, and other bloodborne pathogens.

It is the district’s full intention that, if necessary, the physical facilities, work practice and other areas will be modified to attain this goal. In addition, employees will be informed and trained so that they, too, can contribute to the reduction and elimination of exposure.

PROGRAM MANAGEMENT

Central to effective implementation of the Exposure Control Plan are the following major categories of responsibility:

Exposure Control Officer

School Nurses

Supervisors

Training Instructors

Employees

EXPOSURE CONTROL OFFICER is responsible for the overall management and support of the school district's Bloodborne Pathogen Compliance Program. The Exposure Control Officer should be knowledgeable in health care practices and have an administrative ability to implement, manage and assure compliance with this regulation.

The following employee has been designated as the school district's Exposure Control Officer:

Supervisor of Special Education

School Nurses, as the health professionals in this school district, will provide the knowledge base with regards to health care practices and will assist with training, exposure follow-up and other necessary components of the Bloodborne Pathogen Compliance Program as so directed by the Supervisor of Special Education.

Supervisors, are to be responsible for exposure control in their work areas. All supervisors will work directly with the Exposure Control Officer and employees to ensure that proper exposure control procedures are followed.

Training Instructor, is responsible for providing information and training to all employees who have the potential for exposure to bloodborne pathogens. The Training Instructor will be knowledgeable in the subject matter as it relates to this standard.

Employees, have the most important role in the Blood borne Pathogen Compliance Program, for the final success of this plan is dependent upon them. Therefore, employees must be aware of tasks they perform that involve exposure to bloodborne pathogens, they must take the bloodborne pathogen module in Safe Schools, or equivalent and they must conduct operations in accordance with appropriate work practices and procedures outlined in this plan to reduce exposure to all body fluids.

METHODS OF COMPLIANCE

In order to effectively eliminate or minimize exposure to bloodborne pathogens in the school district, the Exposure Control Plan provides the following basic components is mandated by the Standard

- Identifies in writing, job classifications and tasks/procedures within a job classification where occupational exposure to bloodborne pathogens might occur.
- Provides written procedures for general cleaning, for handling contaminated materials and for disposing of hazardous waste within all buildings and facilities in the district.
- Identifies appropriate personal protective equipment that is readily accessible to employees.
- According to OSHA and MIOSHA policies, an employer may elect to postpone offering and administering the HBV vaccine series to Category A designated first aid

trained employees if the following conditions exist: The primary job assignment of the first aid provider is not the rendering of first aid. (MIOSHA/CET-5230)

- Identifies, the employees who, under specific circumstances as defined by exposure determination and medical follow-up for exposure incidents, may receive hepatitis B vaccine prophylaxis at no cost to the employee.
- Identifies special disposal procedures including warning labels or color-coded container for use with hazardous waste.
- Provision of training by qualified trainer that contains content as specified by the Standard. Opportunities during training for supervised practice with personal protective equipment and procedures designed to reduce the likelihood for exposure which will be used in the employee's work.
- Provides for a training plan by a qualified specialist as specified by the Standard.
- Includes written procedures which meet the requirements for medical record keeping.

EXPOSURE ASSESSMENT/DETERMINATION

The beginning step in implementation of the Bloodborne Standard is the assessment and exposure determination of job classifications, positions and employees within the district. This is of vital importance as the designation of coverage under this regulation requires the employer to fully implement all aspects of the regulation, with the exception of pre-exposure vaccination for designated first aid providers whose primary job responsibility **is not** the provision of first aid. (This exception provision is optional for employers and requires additional administrative tasks.)

In order to conduct the assessment, the school district has listed the most logical job classifications that may have the potential for exposure to blood or other potentially infectious material (OPIM) and could reasonable anticipate such exposure, along with the types of tasks that may be involved in each of those job descriptions.

To facilitate determination of which employees in the school district **may** encounter exposure situations to bloodborne pathogens (including those who, as part of their written or understood job description, are expected to perform first aid or emergency care), the Assessment Tool (Appendix) has been utilized for employees who fit the following general work categories:

- Nurses
- First-aid providers
- Special education staff
- Coaches

- Bus drivers, aides
- Preschool and day care staff
- Other job classifications with potential for exposure

EXPOSURE DETERMINATION

The Wayne-Westland Community School District has determined that for the purposes of the Standard of Bloodborne Pathogens employees will be given a Category designation based upon their job description. Employees whose primary job assignment is the rendering of first aid will be offered at the District's expense, pre-exposure hepatitis B vaccine. All other employees will be offered a post-exposure evaluation within 24 hours of a documented "exposure incident".

CATEGORY A:

The Wayne-Westland Community School District has determined that employees who have occupations that require procedures or other occupation related tasks that involve exposure or reasonably anticipated exposure to blood or other potentially infectious materials or that involve a likelihood for spills or splashes of blood or other potentially infectious materials shall receive a classification of "Category A". This includes procedures or tasks conducted in non-routine situations as a condition of employment.

In this school district the following tasks and procedures have been identified as involving reasonable anticipated exposure to blood or other potentially infectious material

- Treatment of minor injuries, i.e. bloody nose, scrape, minor cut
- Initial emergency care of injuries that require medical or dental assistance, i.e. damaged teeth, broken bone, protruding thought the skin, severe lacerations.
- Care of students who need assistance in daily living skills, such as toileting, dressing, hand washing, feeding, and menstrual needs.
- Care of students who exhibit behaviors that may injure themselves, or others, i.e. biting, hitting, and scratching.
- Care of injured person during a sport activity.
- Delivery of instructional services or therapy in a home base setting.
- Teaching of laboratory classes in which blood or blood products are used.

Employees designated as "Category A" will comply with all applicable components of the Bloodborne Pathogen Standard as identified by the Exposure Control Plan. They will be offered pre-exposure hepatitis B vaccine series at the school district's expense.

CATEGORY B:

In this school district occupations classified as "Category B" for purposes of bloodborne pathogens do not require tasks that involve exposure to blood or other potentially infectious material on a routine basis as a condition of employment. Employees in occupations in this category are not required to perform or assist in emergency medical care of first aid and are

not reasonably anticipated to be exposed in any other way. Employees in “Category B” will be in compliance with all applicable components of the Exposure Control Plan when performing their job responsibilities. These employees will be offered a “Post Exposure Evaluation” following a documented “exposure incident” at the expense of the school district.

PROCEDURE FOR ASSESSMENT OF RISK FOR EMPLOYEE IN ORDER TO DETERMINE CATEGORY DESIGNATION

Employees who are determined by the school district, in the course of their implied or written job responsibilities, to be in Category B who have reason to question the category designation, may request a job assessment. The request should be addressed to the Exposure Control Officer. The Exposure Control Officer will provide the employee within five working days of receipt of the requested an Assessment Tool to be completed.

The employee will complete and return the Assessment Tool to the Exposure Control Officer. A committee consisting of the Exposure Control Officer, school nurse and E.C.G.R. representative will review all pertinent information and respond in writing to the employee no later than 20 working days form receipt of the completed Assessment Tool.

The employee may request a meeting with the committee when questions remain following the committee’s decision. This request must be in writing and sent to the Exposure Control Officer.

METHOD OF COMPLIANCE

- **Universal Precautions**
- **Engineering and Work Practice Controls**
- **Personal Protection and Barriers**
- **Cleaning and Disinfection**
- **Disposal Procedures**
- **Information and Training**

UNIVERSAL PRECAUTIONS

UNIVERSAL PRECAUTIONS:

Universal precautions is a standard approach for handling body fluids which must be used consistently by all persons. According to the concept Universal Precautions, all human blood and certain human body fluids are to be treated as if known to be infected with HIV and HBV and other bloodborne pathogens. Although exposure to body fluids covered by this standard other than blood is unlikely in a school setting, the following body fluids are also to be treated as being infectious:

- Blood
- Semen
- Vaginal secretions
- Cerebrospinal fluid
- Synovial fluid
- Pleural fluid
- Pericardial fluid
- Amniotic fluid
- Saliva (dental practice only)
- Blood-contaminated body fluids
- All body fluids where it is difficult or impossible to differentiate.

All school districts are required to be in compliance with the standard Universal Precautions as identified by the Occupational Safety and Health Administration (OSHA) Standard for Bloodborne Pathogens and the Michigan Occupational Health Standard Commission (MIOSHA) rules for Bloodborne Infectious Diseases being (408.1024) of the Michigan Compiled Law.

The Exposure Control Plan for the Wayne-Westland Community Schools provides the components necessary in order to comply with the Bloodborne Pathogen Standard. The goal of the plan is to decrease the potential risk for Bloodborne infectious diseases in the school district.

It is to that objective that the Wayne-Westland Community School District recognizes blood and body fluids identified by the standard as always being infectious. The school district, for purposes of reducing the risk for an infectious diseases, recognizes additional body fluids which have the potential for risk of exposure to infectious diseases other than those caused by bloodborne pathogens. Employees are encouraged to practice universal precautions when in contact with all body fluids. Other body fluid to be considered for purposes of universal precautions with or without the presence of visible blood include the following:

- Saliva
- Secretions from the nose and throat
- Urine
- Feces
- Vomitus
- Drainage from scabs and other skin lesions even though visible blood in not present.

BASIC COMPONENTS OF UNIVERSAL PRECAUTIONS:

HAND WASHING: Hand washing is the single most important means of preventing the spread of infections. The principle of good hand washing is that of using friction in combination with soap and water to mechanically remove micro-organisms.

BARRIERS: Barriers in the form of single-use gloves and other personal protective equipment that prevents exposure of body surface, mucous membranes, and personal clothing to body fluids.

CARE WITH CONTAMINATED SHARPS: Special procedures including the use of mechanical devices to pick up contaminated sharps such as blood-covered glass and place them in puncture resistant containers.

CLEANING AND DISINFECTION: Written procedures for cleaning, which identifies the method of decontamination to be used in addition to cleaning following contact with blood or other body fluids.

DISPOSAL OF ITEMS POTENTIALLY INFECTED WITH BLOOD OR OTHER BODY FLUIDS:

Procedures for disposal of contaminated items in leak proof containers and special disposal for items considered as "biohazardous waste".

ENGINEERING & WORK PRACTICE CONTROLS

ENGINEERING AND WORK PRACTICE CONTROLS

Using appropriate engineering and work practice controls should eliminate or minimize employee exposure to bloodborne pathogens. The procedures and controls listed in this section are being institutionalized in the school district, and will periodically be reviewed and updated at least annually.

This section on engineering and work practice controls has two parts. The first refers to general work practices as required by the Standard. The second provides procedures that include the principles of “Universal Precautions” to specific work activities/tasks in the Wayne-Westland Community School District.

GENERAL WORK PRACTICES

HAND WASHING: Hand washing is the most important method for preventing the spread of infectious diseases. In the Wayne-Westland Community School District readily accessible facilities which contain warm running water with liquid soap and single-use towels are available in the buildings and should be immediately utilized upon contact with blood or body fluids.

When hand washing facilities are not feasible, the school district will provide either appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels and antiseptic towelettes. If an alternative for an acceptable hand washing facility is used hands should still be washed as soon as feasible after use of the antiseptic towel cleaner.

PROPER HAND WASHING IS CRUCIAL TO PREVENTING THE SPREAD OF INFECTION:

- Textured jewelry on hand or wrists (i.e. rings with stones) should be removed prior to hand washing and kept off until completion of any care procedure and hands are rewashed.

- Turn of faucet
- Lather hand and wrists with warm water and soap (liquid or antibacterial soap is recommended).
- Use friction to clean between fingers, around nails and all other surfaces. (15 seconds)
- Rinse area thoroughly and dry with paper towel or air dryer
- Use paper towel to turn off faucets
- Clean area of spills and splashes
- Use lotion on hands as needed.

WHEN HAND WASHING FACILITIES ARE NOT AVAILABLE:

- Use towelettes or waterless hand sanitizer.
- Wash hands as soon as hand washing facilities are available.

Hands should be washed:

- Immediately following contact with blood or body fluids
- Following removal of gloves
- Before and after eating
- After using the bathroom
- After coughing or sneezing
- After blowing nose (your own or someone else's)
- After providing direct care for a student, before helping another
- After changing a diaper
- After contact with used equipment
- Upon arrival and before departure

EXPOSURE TO BODY FLUIDS:

- Use disposable vinyl gloves for any contact or potential contact with body fluids.
- If skin comes in contact with body fluids all affected surfaces should be washed with soap and water as soon as possible.
- Mucous membranes should be irrigated for one to two minutes following exposure to blood or body fluids.
- Promptly report exposure to blood or other potentially infectious material and exposure to any body fluid when it involves non-intact skin or mucous membrane (eye, nose, mouth) to the building administrator.
- Employees shall not share water bottles, make-up reeds for wind instruments, or allow student to do so.
- Employees are prohibited from eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses in work areas where there is reasonable likelihood of exposure to body fluids.

PROCEDURES INVOLVING BLOOD OR BODY FLUIDS shall be performed in such a way as to minimize splashing, spraying, splattering, and generation of droplets of these substances. Mouth pipetting/suctioning of blood or OPIM is prohibited. i.e. sucking out snake bites, delivery method of oral suctioning.

Specimens of blood or other potentially infectious material shall be placed in a leak proof container during collection, handling, processing, storing, transporting, or shipping. If contamination of the outside of a primary container is likely, a second leak proof container shall be placed over the outside of the first and closed to prevent leakage during handling, processing, storing, transporting, or shipping. If puncture of the primary container is likely, it shall be placed within a leak proof, puncture resistant secondary container. All containers shall be labeled or color-coded in accordance with the provisions of R. 325.10014.

FOOD AND DRINK shall not be kept in refrigerators, freezers, cabinets or on shelves, counter-tops or bench-tops where blood or other potentially infectious material is present.

PERSONAL PROTECTIVE EQUIPMENT shall be used where occupational exposure remains after institution of engineering and practice controls.

WORK ACTIVITIES/TASKS

AGGRESSIVE BEHAVIOR

GENERAL GUIDELINES:

- Use appropriate techniques to restrain and, therefore, limit exposure from biting and other aggressive behaviors.
- Follow proper glove use/removal procedures and utilize protective clothing to minimize skin exposure.
- Proper washing techniques should be followed if biting or aggressive behavior results in exposure to blood or other body fluids.
- Contact your supervisor or building administrator and complete the Employee Accident Report form.

MANAGEMENT OF HUMAN BITES:

When a human bite occurs, a medical evaluation (including an assessment of tetanus vaccination status) is recommended as soon as possible. Bites frequently result in infection with organisms other than HIV and HBV. Victims of bites should be evaluated by a physician for exposure to blood or other infectious body fluids.

PROTOCOL FOR SCHOOL DISTRICT STAFF WHEN SUSTAINING A HUMAN BITE DURING WORK ACTIVITY:

- Immediately and thoroughly wash site with antibacterial soap and water.
- Contact your supervisor or building administrator and complete an employee injury form
- If the skin has been broken or there is evidence of injury, you will be advised to proceed to the medical clinic servicing WWCS D employees.
- Appropriate medical protocol will be followed at the clinic which involves measures designed to reduce the risk for infection by HBV and to counsel a worker concerning issues regarding HIV and HBV.

PROTOCOL FOR MANAGEMENT OF A STUDENT WHO HAS SUSTAINED A HUMAN BITE

- Instruct the student to wash the area thoroughly with soap and water.
- Contact the parent by telephone
- The parent should be instructed to take the child to their family physician or medical clinic for proper care.
- A student accident report must be completed.
- Contact must be made with the parent the next school day to determine the results of the physician visit. Record all pertinent information on the student accident report form.

FOR ART/INDUSTRIAL ART CLASSES/AUTO BODY SHOP CLASSES:

- A sharps container will be available in or close proximity to the classroom whenever sharp implements are being used. The sharps container will be used for disposal of contaminated sharps.
- The teacher will instruct all students regarding safe handling and disposal of sharps whether contaminated or uncontaminated.
- In the event of an injury the teacher will encourage the student to self- manage the wound by having the student apply direct pressure and proceed to the nearest treatment area. Whenever the wound is severe or there is doubt 911 will be called and emergency first aid procedures implemented.
- Applicable procedures for clean-up and disinfection following body fluid spillage will be followed.

BLOD SPILLS, CLEAN UP:

MAJOR: A major blood/OPIM spill would exhibit one or more of the following characteristics: A sufficient quantity of blood/OPIM is released to make containment difficult and results in saturation of the absorbent material used to contain it. It produces a large area of contamination so that the use of personal protective equipment in addition to gloves is required. It meets the requirements for bio-hazardous waste disposal.

PROTOCOL FOR MAJOR BLOOD SPILLS IN SCHOOLS: (CONTACT BUILDING ADMINISTRATOR)

- Glove
- Cover area with absorbent paper toweling or other approved absorbent if possible
- Keep students away from area
- Contact custodian so that the spill may be cleaned, decontaminated and removed immediately. Materials such as paper towels, gauze squares, or clothing used in treatment of blood/OPIM spills that are blood-soaked (saturation is such that fluid can be wrung out of the material) shall be designated as a bio-hazard. These items shall be disposed of following procedures for disposal of bio-hazardous waste
- Materials used in treatment of blood/OPIM spills that are not blood soaked may be double bagged and sealed before disposal into covered receptacle designated for that purpose (Yellow)
- Follow glove removal and hand washing procedures.

MINOR: A minor blood/OPIM spill would involve a small amount of blood/OPIM which is readily contained by a paper towel or other approved absorbent and is confined to a small area. Such a spill will require adherence to universal precaution procedures during cleanup but would not require bio-hazards waste disposal.

PROTOCOL FOR MINOR BLOOD/OPIM SPILLS IN SCHOOLS: (CONTACT BUILDING ADMINISTRATOR)

- General education personnel: follow protocol for major spills
- Special education personnel in self-contained classrooms: may choose to follow routine cleaning/disinfection procedures for the special education classroom. When spill involves porous or absorbent surfaces (i.e. carpeting) call the custodian.
- Special education staff **not** in self-contained classrooms; follow protocol for major spills
- Athletic: follow procedures for location of the event as long as they are in compliance with the Standard.

FIRST AID

ACCIDENTAL EXPOSURE OF EMPLOYEE TO BLOOD/OPIM WHILE ADMINISTERING FIRST AID

- Immediately wash/irrigate contaminated area of skin/mucous membrane.
- Report exposure to building administrator as soon as possible.

ASTHMA: Asthma inhalers will be kept in individual plastic bags

CARE OF WOUNDS AND CHANGING DRESSINGS

- Use disposable gloves and avoid contact by using appropriate barriers
- Direct person to self-manage injury if possible
- Minimize splashing, spraying, splattering and generation of droplets when attending to an injured person.
- Use antiseptic pad or paper towel to wipe injury.
- When appropriate, wash injury with water or soap and water while avoiding exposure.
- Remove soiled clothing to be laundered appropriately.
- Follow blood-spill cleanup procedures.
- Remove/dispose of gloves and all soiled materials into plastic bag, tie. Place in plastic lined covered receptacle.
- Follow hand washing procedure.

CPR/RESUSCITATION:

- Avoid unprotected mouth to mouth resuscitation by using barriers such as CPR shields or bag/mask resuscitation device.
- Utilize protective outerwear based on situation and availability
- Follow appropriate glove use and removal procedure when visible blood or OPIM
- After provision of CPR, wash face/hands thoroughly, utilizing proper washing procedures.
- Dispose of used CPR shield, bag/mask, and protective outerwear in a plastic bag that is subsequently tied and removed to a covered plastic lined container. (Yellow)

DIABETES:

- Students with diabetes do their own blood glucose monitoring. Special accommodations may be required in unusual circumstances (Contact school nurse).
- Students with diabetes are responsible for placing and removing paper towel barrier on work surface.
- Students with diabetes change and dispose of their own lancet into the sharps container
- Forceps will be used to remove lancet from automatic lancing device when the diabetic student is unable to do so.
- Students with diabetes should perform their own Ketone testing.
- Storage of all diabetic paraphernalia will be secured in a safe area accessible to the diabetic student

EPI-PEN:

- Follow Epi-Pen Emergency Health Plan. Contact Exposure Control Officer for school nurse follow-up
- Use disposable gloves
- After use of Epi-Pen call custodian for proper disposal of Epi-Pen injector into “small sharps” container.
- Never attempt to remove stinger with ungloved fingernail
- Remove gloves, and dispose of into plastic bag, tie and place in plastic lined waste container.
- Use proper hand washing technique

HOME-BASED INSTRUCTION AND THERAPY: Employees responsible for instruction or therapy in a home-based setting will consider ALL body fluids as potentially infectious. They will be in compliance with all aspects of the school district exposure control plan.

- During instruction and/or therapy an employee should be positioned away from the student so as to minimize the potential for mucous membrane exposure to body fluids, if possible. When this is not feasible, the employee will utilize personal protective equipment.
- Students with tracheostomies should have a tracheostomy “nose or other protection to prevent splattering, coughing, or spraying of respiratory secretions during the visit. Refer to the school nurse if follow-up is needed.
- Hands should be washed prior to working with a student, following exposure to body fluids and at the end of the visit. Employees will carry towelettes or waterless hand washing product and disposable toweling in the event that hand washing facilities are not readily available
- The employee will avoid contamination by body fluids while nursing procedures are being performed during the visit.
- Toys and/or equipment being used in a home-based setting will be bagged and taken to the school for cleaning and disinfection prior to use with another student.
- A referral recommending home-based instruction in a home with a student or family member with a communicable disease, immunosuppressive disorder or other health concern that could impact the delivery of service, should have a home assessment by the school nurse prior to IEPC or the first instructional visit. The school nurse would confer with parent, physician and the Wayne County Department of Health to provide recommendations pertinent to the safe delivery of educational service.

MUSIC CLASSES: Employees will not nor allow students to share mouthpieces or reeds from wind instruments.

NURSING CARE PROCEDURES IN THE SCHOOL SETTING:

Instructional model: Nursing procedures being performed as part of an instructional program preparing students for nursing careers will be in compliance with the method of infection control called Body Substance Isolation (BSI). This is an acceptable alternative to universal precautions which defines all body fluids and substances as infectious.

- Employees and students participating in the instructional model must adhere to all other provision of the Standard for Bloodborne Pathogens and the Wayne-Westland Community School District Exposure Control Plan.
- When utilizing outside community agencies as part of the instructional program educational personnel and students will be knowledgeable about and comply with the exposure control plan pertinent with that community agency.
- Employees and students will follow all rules for bio-hazardous waste disposal.
- All PPE utilized during nursing procedures will be removed before employees and student leave the instructional area.
- All work surfaces will be cleaned and disinfected at the end of the class day or immediately following body fluid contamination.

Service model: Nursing care procedures are performed as part of the related services component of the educational program. A student requiring nursing procedures during the school day will have a School Health Plan developed by the school nurse in conjunction with parental request/approval and physician direction. The plan and delivery of service will be in compliance with the infection control method know as BSI which considers all body fluids to be infectious. This acceptable alternative to universal precautions will require compliance by the nurses and other trained employees in all other aspects of the Standard for Bloodborne Pathogens and the school district exposure control plan.

- The school nurse will make every effort to secure some method of containing respiratory secretions from tracheostomy openings of students during the school day.
- All nursing procedures will be accomplished in a manner which will minimize splashing, spraying, splattering and generation of droplets of body fluids in the school environment.
- Employees are not to eat, drink, apply cosmetic, or handle contact lenses in an area where nursing procedures are being performed. Food and beverages will not be stored or left on counter tops in this area.
- The nurse of designee will be responsible for cleaning and disinfection of the area in which nursing procedures are performed. An exception would be in the case of absorbent surfaces (i.e. carpeting) which would be the responsibility of the

custodian. All sinks and stationary equipment in an area where nursing procedures are performed will remain on the cleaning schedule for the custodian.

- Emptying, cleaning and disinfection of contaminated equipment will take place in a sink designated as a “utility sink.” Employees are not to eat, drink, apply cosmetics, or handle contact lenses in this area. Food and beverages will not be stored or left on counter tops in this area. The nurse will be responsible for initial cleaning and disinfection of the counter and sink area where body fluids may be present following emptying, cleaning and disinfection of contaminated equipment. The area will remain on the cleaning schedule of the custodian.
- Gloves and other PPE will be utilized for all nursing procedures in which there is potential for exposure to body fluids.
- PPE and cleaning procedures for contaminated equipment will be included in the individualized school health plan for a student requiring related service.

PHYSICAL EDUCATION AND ATHLETIC COMPETITIONS, GENERAL GUIDELINES:

It is recommended that students with open lesions not participate in close physical contact sports unless the lesion are dry or the lesion can be appropriately dressed with bandage or gauze in a secure manner to prevent leakage of body fluid.

- Use separate towels for each individual for wiping sweat or secretions
- Use clean water for each individual for cleaning wounds.

BLOOD SPILL ON ANOTHER ATHLETE:

- Any open skin lesions which have come into contact with blood or saliva of another athlete should be thoroughly washed by scrubbing the skin with soap and running water.
- If athlete’s skin at area of blood contact is intact, have that athlete wash off his own skin with disposable towel containing soap and water. If blood spill is extensive, it is recommended that student scrub skin with soap under running water.
- If athlete or employee is exposed to the blood of another person in the eye or mouth, flood exposed area for 1 to 2 minutes under running water. All first aid kits should contain a large container of sterile eye wash.
- If vomitus is involved, all blood spill procedure apply.

BLOOD SPILL ON ATHLETE’S CLOTHING:

- Athlete must remove soiled garment, wash skin under area of soiling with soap and water and put on clean garment.
- Place soiled garment in a leak proof bag
- Clothing soaked with body fluids should be washed according to procedure outlined in Laundry section. If clothing is to be washed at student’s home a copy of the laundry guidelines should be sent to the home.

FLUIDS: Should be dispensed in individual single-use cups to prevent transfer of saliva from one person to another.

SHOWER PRECAUTIONS: Razors and other personal hygiene items should **NEVER** be shared. The sharing of razors is a practice which has the potential of transferring blood from one person to another, creating a risk for the transfer of bloodborne pathogens.

Note: In the Wayne-Westland Community School District whenever an incident occurs during a school sponsored activity involving possible exposure of a student to another's body fluids, an accident report will be completed and the parent notified.

SHARPS, HANDLING OF:

- Employees are warned against putting toothpicks, pens, pencils or other potentially contaminated sharp items in the mouth
- Use disposable or utility gloves provided by the school district for handling of contaminated sharps.
- Mechanical devices such as tongs or dust pan and broom will be utilized to pick up broken glass. Call the custodian for proper clean-up and disposal.
- Contaminated sharps such as blood-covered broken glass etc. will not be picked up by hand to avoid an exposure incident. Call the custodian for clean-up and disposal.
- Needles and other contaminated sharps should not be bent, recapped or removed. Shearing or breaking off contaminated needles is absolutely prohibited.
- Reusable contaminated sharps (i.e. paper cutter, scissors) shall be cleaned and disinfected by the custodian following procedures. Reusable contaminated sharps will not be stored or processed in such a manner that requires employees to reach by hand into the containers where sharps have been placed.

SPECIAL ADAPTATIONS IN THE EDUCATIONAL ENVIRONMENT

BOWEL AND BLADDER TRAINING:

An employee may be assisting a student with bowel/bladder training or may be providing complete hygiene following bowl/bladder incontinence. In either situation the employee providing assistance will be educating the student with the goal of promoting optimum independence every time bowel or bladder incontinence is encountered. This includes observance of an instruction in all applicable hygiene procedures as developmentally appropriate.

When clean intermittent catheterization is ordered by a student's physician and requested by a parent, an individual health plan and applicable education/training/supervision will be provided by the school nurse. The plan and training must be in place prior to implementation of the procedure.

- Bowel and bladder training and/or assistance with incontinence should only occur in a bathroom
- Gather all supplies before proceeding. Wet paper toweling or remove perineal wipes from container before proceeding in order to prevent unnecessary contamination of faucets, and/or container.
- Employees must use disposable gloves for the procedure and other necessary protection for clothing, skin, and mucous membranes.
- Remove soiled clothing if necessary and place in leak proof bag. When clean clothing is not available, contact parent immediately for replacement.
- When using toilet paper or cleaning perineal area wipe female students from front to back
- Clean area as necessary using disposable towels, soap and water.
- Dispose of soiled disposable materials into plastic lined covered receptacle designated for that purpose.
- Remove and dispose of gloves into plastic lined covered receptacle.
- Follow proper hand washing procedure. Encourage and instruct student in hand washing.
- Follow applicable cleaning/disinfection procedure, which requires using clean disposable gloves.
- Remove and dispose of gloves, wash hands.

DIAPERING:

- Procedure shall be performed in an area and on a surface designated as private for personal hygiene. (i.e. bathroom, area with privacy partition)
- Use protective barrier on surface when diapering (table paper, blue pad) to minimize contamination of the work surface.
- Gather all supplies needed. Wet paper toweling or remove diaper wipes from container before proceeding, in order to minimize contamination of faucets and/or container.
- Follow proper glove use/removal procedures and utilize additional protective equipment if needed.
- Dispose of soiled materials into plastic lined covered receptacle designated for that purpose. (Yellow)
- Dispose of gloves into receptacle.
- Wash hands.
- Follow applicable cleaning/disinfection procedures using clean disposable gloves.
- Follow proper hand washing procedures after glove removal.

FEEDING:

- Always wash hands before and after feeding a student.

- Always use disposable gloves when feeding involves possible exposure to body fluids, lesions noted on student's face, or when non-intact skin on the feeder's hands are present.
- Position the student to prevent splashing and splattering of body fluids into the face, skin, or clothing. When this is not possible use appropriate PPE.
- Follow glove removal/disposal procedures.
- Should skin, eye, mouth, nose be splashed with body fluids wash or irrigate area immediately. Notify building administrator when exposure involves blood/OPIM, non-intact skin eye or other mucous membrane.

MENSTRUAL HYGIENE, ASSISTING WITH REMOVAL OF SANITARY PAD:

- Should occur in a bathroom or, in the case of students with special needs, an area designated for diapering.
- Always use disposable gloves. Other protective equipment may be required.
- Gather supplies and dampen disposable toweling to be used in cleaning the perineal area before proceeding, so as to avoid contaminating faucets or bathroom sink with blood. Utilizing perineal wipes is advocated.
- Remove soiled clothing and place in leak proof bag. Contact parent immediately if clean clothing is not available. Soiled clothing is sent home in the leak proof bag along with laundry instructions.
- All soiled disposable materials are placed in leak proof bag and subsequently into plastic lined covered container designated for that purpose. (Yellow)
- Clean blood or when possible instruct student to clean blood from skin with disposable toweling.
- When the student is not independent in affixing clean sanitary product and dressing, the employee should dispose of contaminated glove and reglove if necessary to assist with these activities
- Follow applicable cleaning/disinfection procedures for blood spill.
- When student has participated in care, instruct in hand washing procedure.

TOOTHBRUSHING:

In programs where toothbrushing is part of the curriculum, each child must have his or her own toothbrush, clearly identified. Absolutely no sharing or borrowing of toothbrushes is permitted. Brushing may be done with a dry toothbrush. If toothpaste is desired, each child should have his own tube or a pre-measured amount dispensed by the teacher.

- Area designated for toothbrushing shall not be in an area where food, dishes or eating utensils are stored.
- Use disposable gloves while assisting child. If more than one child requires assistance, wash hands and use a new pair of gloves with each child.
- Minimize splashing and spraying.

- Store toothbrushes separately in an upright position, properly labeled and with a protective covering that is ventilated.
- Replace toothbrushes periodically with signs of wear or visible contamination and after a student has been ill with a communicable disease.
- Dispose of toothbrushes and all disposable materials utilized in the procedure (i.e. gloves, paper cups) into a leak proof bag, which is tied.
- Wash hands and instruct the student in hand washing.
- Follow cleaning/disinfection procedures.

SPEECH THERAPY/ORAL STIMULATION:

- Use disposable gloves when hands are around face and mouth.
- Do not put fingers in student's mouth if possible.
- Follow glove removal and hand washing procedure.
- Position oneself to avoid spraying of saliva into face, utilize other protective equipment as necessary. (i.e. face shield, mask, glasses with face shield).
- Disposable equipment is discarded following use into a leak proof bag tied.
- Reusable equipment is cleaned/disinfected following applicable procedures. Disposable single-use equipment should be utilized whenever possible.
- Work area is cleaned/disinfected following contamination with body fluids
- Should non-intact skin, eye, nose or mouth be splashed with blood or body fluids, wash or irrigate area immediately. Notify building administrator as soon as possible.

PERSONAL PROTECTIVE EQUIPMENT & BARRIERS

PERSONAL PROTECTIVE EQUIPMENT (PPE):

All personal protective equipment used in this school district will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or body fluids. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employee's clothing, skin, eye, mouth, or other mucous membranes under normal conditions of use and for the duration of the time in which the protective equipment will be used. It must fit the wearer and be appropriate for each user. Allergies will be considered in the availability of gloves or other personal protective equipment.

USE: The school district will ensure that employees use appropriate PPE. Under rare and extraordinary circumstances, an employee may decline to use PPE; these cases will be investigated and documented. The investigation and documentation will be the responsibility of the supervisor or administrator and may be delegated to the school nurse.

ACCESSIBILITY: The school district will ensure that appropriate PPE is readily accessible at the work site or issued to employees covered under the Standard. Employees will be informed of the location and accessibility of PPE.

UPKEEP: The school district will repair, replace, clean, launder, and dispose of PPE utilized for purposes of this Standard at no cost to the employee. Hypo-allergenic gloves or appropriate substitutes shall be provided to employees who are allergic to the gloves normally provided. Employees will inform their supervisor or administrator in writing of faulty, worn, dirty or other

problematic PPE. This information will be forwarded to the Exposure Control Officer. Employees shall not take personal protective clothing home for disinfection or laundering. Contaminated personal protective equipment will be bagged on site (work area) for proper decontamination or disposal. The employer will repair or replace PPE as needed to maintain its effectiveness, at no cost to the employee.

GENERAL RULES FOR USE OF PPE: If personal protective equipment is to do its job, employer and employees must adhere to the following:

- You must be trained to properly use the equipment.
- Equipment must be appropriate for the task you are performing
- You must use the appropriate PPE each time you perform a task
- Your PPE must be free of physical flaws that could compromise your safety
- Before leaving your work area, you must remove all protective equipment and place it in the designated area or container for washing, decontamination or disposal.
- You must remove equipment as soon as possible if it is penetrated by blood or other potentially infectious material.
- You must wash your hands immediately upon removal of personal protective equipment

PPE AVAILABLE FOR USE IN THIS SCHOOL DISTRICT:

In this school district PPE includes but is not limited to the following:

GLOVES: Disposable or single-use gloves used in first aid and as a barrier to prevent contamination of hands by body fluids shall be checked for proper fit and punctures after being put on and prior to use. Pull them snug to insure good fit. To remove gloves, they should be rolled or pulled from the wrist to the fingers so that the glove is inside out. This minimizes contamination. Disposable gloves should be disposed of immediately after use and whenever integrity is compromised. Single-use refers to use for a single work activity or student. Disposable gloves are not intended to be used for more than one activity or student. Under no circumstances should disposable gloves be reused.

Utility gloves used for clean-up must be cleaned and decontaminated after use. If they are to be reused, they must be inspected and discarded if they have deteriorated and the integrity is compromised. Signs of wear include but are not limited to cracking, peeling, discoloration, tears or punctures. Utility gloves will be utilized by custodial personnel in this school district for clean-up of blood and body fluid spills when disposable gloves would not be appropriate for the task.

Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; and when handling or touching contaminated items for surfaces.

Disposable gloves shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when the ability to function as a barrier is compromised. Disposable gloves shall **not** be washed or decontaminated for re-use.

Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

GOWNS AND LAB COATS: Disposable and reusable gowns or lab coats (fluid resistant) will be utilized in this district when the potential for splashing of body fluids exists during cleanup of major blood spills, the potential exists for contamination from handling materials or in other occupational exposure situations. Contaminated disposable gowns will be bagged at the work site for proper disposal. Contaminated reusable gowns/lab coats will be bagged at the work site for laundering. Under no circumstances shall an employee take contaminated reusable gowns/lab coats home to be laundered.

FACE SHIELDS/MASKS: Face shields and masks may be used whenever the potential for splashing, spraying, spattering, dropping, or aerosolization of body fluids exists, and contamination of mucous membranes can be reasonably anticipated. This may be the case during a serious accident, clean-up of a body fluid spill, or during activities requiring close proximity to a student with potential for body fluid exposure. (i.e. feeding of a handicapped student who spits). The reusable face shield shall be cleaned and decontaminated following each use. Masks shall be disposed of following procedures for disposal of contaminated materials. Under no circumstances shall this equipment be shared with another employee. This equipment is obtainable through your school nurse or vocational tech nursing personnel who will instruct the employee or student in the proper use and decontamination of such equipment. This equipment will be available to all custodians for cleanup of body fluid spills. Custodian will be instructed in its proper use.

EYE PROTECTION: Eye protection may be used where the potential for exposure to eyes or mucous membranes from blood or body fluid splashing, spraying, spattering, dropping, or aerosolization exists. Eye protection equipment should be decontaminated following use. Such equipment is available through your school nurse or vocational technology nursing personnel who will instruct the employee or student in the proper use and cleaning of such equipment. Custodial personnel will have this equipment available for use during cleanup of body fluid spills and be instructed in the use. Employees and students shall not under any circumstance share eye protection equipment.

MOUTH PIECES: Mouth pieces will be provided to employees designated as “first responders” in order to avoid direct contact with blood or saliva during resuscitation.

RESUSCITATION BAGS: Resuscitation bags will be available for use with “first responders” designated for students with special needs and students who are too young for mouth pieces. They will be utilized only with specialized training.

OTHER VENTILATION DEVICES: Other ventilation devices may be utilized in the school setting under special circumstances. The school nurse will be responsible for the health plan when such devices are to be utilized for students or personnel in the school.

GLOVE REMOVAL: When removing gloves, you must take care that no substances from the soiled gloves contact your hands. REMEMBER, contamination may not be visible, so follow a safe procedure for glove removal every time.

HOW TO DON STERILE GLOVES

1. Remove the first glove by peeling it back with the fingers on the opposite hand. Remove the glove by rolling it inside out to the second finger joints (do not remove completely).
2. Remove the other glove by turning its outer edge on the fingers of the partially ungloved hand.
3. Remove the glove by turning it inside out entirely to ensure that the skin of the health-care worker is always and exclusively in contact with the inner surface of the glove.
4. Discard gloves.
5. Perform hand hygiene after glove removal according to the recommended indication.

NB: Donning surgical sterile gloves at the time of a surgical intervention follows the same sequence except that:

- it is preceded by a surgical hand preparation
- donning gloves is performed after putting on the sterile surgical gown
- the opening of the first package (non-sterile) is done by an assistant
- the second packaging (sterile) is placed on a sterile surface other than that used for the intervention
- gloves should cover the wrists of the sterile gown

EXPOSURE CONTROL PLAN/ENGINEERING AND WORK PRACTICE CONTROLS PPE/BARIERS

TYPE	USE/REMOVAL	CONTAMINATION/DISPOSAL
Blue pads, table paper	To minimize contamination of a surface when diapering, or providing personal hygiene, or health care procedures	Dispose of into plastic lined covered receptacle designated for diapers. (Yellow)
Gloves, Disposable	Avoiding skin exposure to blood or body fluids when performing any work activity which makes such exposure likely. Performing any work activity with non-intact skin on hands. Protecting hands when using disinfectant/chemicals. When handling contaminated sharps. When handling contaminated equipment, supplies, or dirty laundry.	Dispose of after each care session Dispose of into plastic lined covered receptacle designated for diapers. (Yellow)
Gloves, Utility (Higher density may be disposable or reusable)	For maintenance/building /grounds. For situations where broken glass, sharp or rough surfaces are likely to be encountered. For general housekeeping activities. Major blood or OPIM spills. (Note: gloves must fit tightly at wrists to prevent contamination of hands around cuffs. Do not use if integrity of glove is compromised.	When used for blood cleanup, must be cleaned and decontaminated after use. (Wash with soap and water, use disinfectant following product dilution formula. Air Dry.) Inspect all gloves before use, if integrity compromised, discard. Utility gloves must also be inspected following use. Discard if integrity compromised.

	<p>In accordance with the level of exposure encountered. Situations where splashes of blood or other body fluids to which universal precautions apply are likely to occur. In cleanup of major blood or OPIM spills.</p>	<p>Disposable are to be placed in leak-proof plastic bags. Non-disposable eyewear, clean with soap and water, follow with 70% isopropyl alcohol. When saturated with blood or OPIM must be double bagged into red biohazard bags.</p>
Protection Kit	Usually would be used by custodian	When not saturated with blood or OPIM, may be double bagged, sealed and placed in refuse receptacle designated for such use.
Resuscitation Equipment (CPR micro shield bag-valve masks, oxygen demand valve resuscitators)	For barrier in resuscitation. Must be trained in use of this equipment.	Disposable placed in leak-proof plastic bag. Reusable bag-masks and other such equipment will be cleaned/disinfected by school nurse or sent with student to whom it belongs and from who it was used.

CLEANING/ DISINFECTION

CLEANING/DISINFECTING PROCEDURES FOR THE INSTRUCTIONAL ENVIRONMENT:

The Wayne –Westland Community School District will maintain clean sanitary conditions in the work site.

All equipment, materials, environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious material:

- Work surfaces shall be cleaned and decontaminated with appropriate disinfectant after completion of procedures, when surfaces are overtly contaminated. Immediately when blood or other potentially infectious material is spilled, at the end of the work shift if the surface may have become contaminated since the last cleaning.
- Protective coverings, such as plastic wrap, aluminum foil, or plastic-backed absorbent paper may be used to cover equipment and environmental surfaces. These coverings shall be removed and replaced at the end of the work shift if contaminated or as soon as feasible when they become overtly contaminated. MIOSHA STANDARD FOR BLOODBORNE PATHOGENS (6/93).

WORK SURFACES AND EDUCATIONAL EQUIPMENT ARE USUALLY NOT MAIN SOURCES FOR TRANSMISSION OF DISEASE. THE POTENTIAL FOR SPREAD OF INFECTION DOES EXIST, HOWEVER, SOILED SURFACES AND EQUIPMENT SHOULD BE CLEANED AFTER USE. DISINFECTION SHOULD FOLLOW WHEN OBVIOUSLY CONTAMINATED WITH BLOOD OR BODY FLUIDS.

Custodial personnel will adhere to all requirements of the MIOSHA STANDARD FOR BLOODBORNE PATHOGENS (6/93). Written procedures for cleaning and disinfection by custodial personnel will be provided by the Maintenance & Operations Department via the Cleaning Standards Handbook and the Custodial Handbook and reviewed at least annually. These instructions will consider all cleaning agents/disinfectants being utilized by custodians in the school environment. These instructions will be provided to all custodial personnel, building administrators and the Exposure Control Officer via the district website, wwcsd.net.

Chemical germicides that are approved for use as “hospital disinfectants” and are tuberculocidal when used at recommended dilutions can be used to decontaminate spills of blood and other body fluids

In the Wayne-Westland Community School District, sodium hypochlorite (bleach) will be the only disinfectant available for use by other than custodial personnel unless approved by the Exposure Control Officer.

PROCEDURE FOR MIXING SODIUM HYPOCHLORITE SOLUTION (BLEACH):

FOR PAIL: No less than ¼ cup of sodium hypochlorite to 1 gallon of water (1:100) nor stronger than 1 part bleach to 10 parts of water. (The 1:100 solution is sufficient for most disinfection in classrooms other than for obvious blood/OPIM spills.)

FOR SPRAYER: Hypochlorite solution will not be used in spray bottles since it is difficult to control over-spray exposure to clothes and mucous membranes.

PLASTIC BOTTLE WITH CLOSABLE CAP: Not less than 1 tablespoon sodium hypochlorite to one quart of water. (1:100). The bottle must be properly labeled as to contents including the strength of the solution. Note: Bleach solution must be prepared prior to use and disposed of the same day. It will be ineffective if stored.

GENERAL RULES FOR CLEANING/DISINFECTING:

- Wear gloves for cleaning/disinfecting.
- Do not allow the disinfecting solution to come in contact with skin or mucous membranes. If solution does contact skin, rinse immediately with water and/or soap and water.
- Protect eyes from inadvertent splashing of chemicals.
- Do not mix bleach with other chemical cleaning or disinfecting agents.
- When solid or liquid matter is visible, remove matter with absorbent material, pre-clean with the disinfectant or soap and water before using final application of disinfectant. Soil renders germicides ineffective for disinfection.
- Disinfectant solution must be in contact with a surface for ten minutes before excess fluid is removed unless otherwise specified in the safety data sheet.

- Mops used for cleaning must be rinsed in disinfecting solution, and air dried (mop head up).
- Remove single-use gloves following cleaning and dispose of in covered waste receptacle.
- When utility gloves are used to clean and disinfect following a blood or body fluid spill, the gloves are to be washed, disinfected and air dried.
- All surfaces touched by contaminated gloved hands must also be disinfected. (i.e. mop handles, doorknobs, faucets).
- Wash hands with soap and water and apply hand lotion as needed.
- Cleaning/disinfection of the instructional environment is performed immediately upon contamination with body fluids and at least daily at the end of the instructional day if contamination by body fluids is likely since previous cleaning.
- Whenever a germicidal solution is diluted and contained in a receptacle other than the original receptacle, it must be properly labeled as to the name of the chemical and the strength of the mixture. A Safety Data Sheet (SDS) must be available on site.
- Broken glassware that may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, vacuum cleaner, tongs, cotton swabs, or forceps.

AT ALL TIMES KEEP CHEMICALS OUT OF REACH OF CHILDREN.

BLOOD/OPIM SPILLS, CLEAN-UP

NON-CUSTODIAL PERSONNEL: Follow blood spill procedures under the general rules for cleaning and disinfecting.

CUSTODIAL STAFF: In the Wayne-Westland Community School District, the custodian shall respond immediately to any major spill in order to clean, decontaminate and remove the material.

- Use disposable or intact utility gloves following procedure.
- Use additional PPE as required by the situation
- Apply absorbent material to contain blood/OPIM spill
- All such material must be disposed of in a leak-proof bag.
- If the spill is in sufficient quantity that absorbent material is caked or overly saturated (drips or can be wrung out) with blood or other potentially infectious material, the spill will be considered BIOHAZARDOUS WASTE and procedures for disposal of regulated waste will be followed.
- Discard all disposable items into leak proof bag.
- Non-disposable items/equipment are disinfected.

- Follow procedures for glove removal and disposal of other personal protective equipment before leaving area of spill. Reglove with clean gloves to return to custodial area for disinfection of non-disposable items.
- Wash hands
- Materials such as paper towels, gauze squares or clothing, used in the treatment of blood-soaked or caked with blood shall be bagged, tied and designated as biohazard.

SCHOOL BUSES: In this school district each transportation vehicle will have a body fluid cleanup kit on board. At a minimum it should contain a sanitary absorbent material, paper towels, disposable gloves, antiseptic towelettes and leak proof bags. The bus driver or aide will contain the body fluid spill by using the absorbent designed for that use. The area will be covered by paper towels and students kept away from the area. When the bus returns to the garage all cleaning/disinfection will proceed as for the type of surface.

DISINFECTION OF CONTAMINATED REUSABLE SHARPS: Reusable sharps that are contaminated with blood or other potentially infectious materials shall NOT be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed. They should be washed using tongs and a long handled brush in soapy water, rinsed and disinfected following general rules for disinfections.

The order in which washing and decontamination shall be performed shall be chosen so as to minimize exposure to blood or other potentially infectious material.

DISINFECTION OF HARD NON-ABSORBENT SURFACES: Follow general rules for cleaning/disinfection.

- Using disposable gloves, remove all visible solid or liquid matter with disposable towels or other absorbent material
- Use an approved disinfecting solution or soap and water to clean surface.
- A second application of clean disinfectant solution to the surface is required. Allow solution to remain in contact with the surface for ten minutes or as directed by the manufacturer.
- Air dry unless rinsing is required by the manufacture of the germicide. (Sodium hypochlorite solution is always air dried.) Note: Sodium hypochlorite solution will corrode metals.
- Disposable items are discarded in a leak proof bag.
- Non-disposable items are soaked in disinfectant solution.
- Follow glove removal and hand washing procedures.

DISINFECTION OF ABSORBENT SURFACES, INCLUDING CARPET: (Custodial Only)

- Using disposable or utility gloves apply a sanitary absorbent agent, let dry then vacuum. Solid particles may require a broom and dustpan.
- Apply germicidal carpet cleaner, then vacuum or follow manufacturer's directions.

- Soak non-disposable items in disinfectant.
- Place all disposable items, including gloves, into leak-proof bag
- Wash hands

DISINFECTION OF EQUIPMENT FOLLOWING POSSIBLE CONTAMINATION WITH BLOOD OR OTHER POTENTIALLY INFECTIOUS MATTER:

- Immediately remove contaminated equipment from use covering and labeling as a hazard until cleaning and disinfections
- Follow procedures for non-absorbent or absorbent surfaces and all general rules for cleaning disinfection, when possible. Rinse off disinfecting solution if equipment will be placed in mouth (i.e. athletic mouth guard) or it is required by the type of equipment.
- All equipment requiring servicing that has had likely or actual contamination by blood or OPIM must be disinfected prior to handling, servicing or shipping.
- When contaminated equipment that is to be transported cannot be completely decontaminated on site prior to servicing, this information **MUST** be conveyed to the service representative or manufacturer prior to handling, servicing or shipping. A readily observable biohazard label stating which portions are contaminated is to be affixed to the equipment so that it cannot be lost or unintentionally removed.

DISHES/EATING UTENSILS: Use Disposable whenever possible.

- Rinse debris from dishes.
- Wash in warm sudsy water and rinse.
- Soak in sanitizing solution of 2:25 ounces bleach to five gallons of water (approximately 2300ppm) for two to five minutes.
- Air dry dishes before storing

NOTE: Do not allow clean or dirty dishes to stand in a sink which had washing occurs.

FLOORS AND LARGE MATS:

- Wear disposable or utility gloves.
- Apply a sanitary absorbing agent to spill if necessary. Pick up solid particles with broom and dust pan. Dispose of in leak proof bag.
- Use an approved disinfectant solution for cleaning.
- Clean/disinfect using a two-bucket/two-mop system:
 - Bucket #1 and mop #1 with disinfectant
 - Dip, wring out, mop surface
 - Dip, wring out mop again
 - Bucket #2 and Mop #2 with clean disinfectant
 - Dip, wring out lightly, mop surface
 - Allow to air dry

Rinse and wring out mop #2 in Bucket #2

Repeat procedure for mop #1

Hang both mops to air dry

- Soak other non-disposable items (i.e. brush/dustpan) in clean disinfecting solution
- All disposable items are placed in leak proof bags.
- Empty buckets in utility sink (or if unavailable may use a toilet)
- Rinse bucket #1 with solution from bucket #2
- Follow glove removal and hand washing procedures.

MATS, SMALL: Follow procedure for nonporous surfaces using disposable toweling or cloths for cleaning/disinfecting whenever possible.

POTTY CHAIRS/COMMODOES: In general, commodes or potty chairs are not recommended. The extra handling required of this equipment greatly increases the risk of transmitting communicable diseases. If they must be used, the cleaning procedure is as follows:

- Using disposable gloves, empty all urine/feces from receptacle under the commode into the toilet.
- The receptacle under the commode/potty chair must be washed, rinsed and sanitized following each use.
- Sinks used for hand washing or for any food activity should not be used for this purpose. The receptacle may be washed in a utility sink, rinsed, completely submerged in a sanitizing solution for one minute and then air dried on a drying rack or utility sink draining counter.
- There should be adequate receptacles available so that soiled ones will not be reused prior to being sanitized.
- Follow glove removal hand washing procedures.

TOYS: In general, only washable toys and educational tools would be used with children who are diapered and/or drooling. There should be sufficient equipment provided for each child so that items are not shared between these children. Whenever possible, a toy that is mouthed should be washed before other children handle it.

- Remove toy from use immediately when visible contamination with blood or body fluids.
- Use gloves or paper towel to handle contaminated toy.
- Follow hand washing procedure.
- Follow cleaning/disinfection procedure for hard nonporous surfaces. Dish pans or lingerie/toy bags work best for small toys.
- Soft toys may be laundered following procedure for soiled laundry

- Soiled toys should be cleaned routinely at the end of the instructional day. Follow disinfection procedures if contaminated with body fluids.
- Follow glove removal and hand washing procedures.

PROCEDURES FOR HANDLING SOILED LAUNDRY:

In this school district all soiled laundry will be treated as contaminated and Universal Precautions will apply. Work activities will be reviewed periodically in order to minimize the necessity for on-site laundry. Student clothing which has been soiled with blood or body fluids should be bagged in a leak-proof plastic bag and sent home with the student along with a copy of "Laundry Instructions for Student Clothing Soiled with Blood or Body Fluids." (see form BBP-10)

INSTRUCTIONS FOR WAYNE-WESTLAND COMMUNITY SCHOOLS ON SITE LAUNDRY:

- Soiled laundry must be handled as little as possible using single-use disposable gloves and other appropriate personal protective equipment.
- Soiled item for on-site laundry will be containerized at the location in which used. Labeled leak-proof laundry bags will be provided. They should be replaced when obviously contaminated and/or at least weekly.
- Soiled laundry shall not be sorted or rinsed in the location of use. It shall be removed to a laundry room.
- Machine wash with hot water and detergent from the normal wash cycle in hot (160 degree) water. 1 cup of bleach to a full washer load of cold water.
- Dry in dryer on hottest setting possible

Use a clean laundry receptacle to return clean laundry to the location of use.

The school district will be responsible for cleaning of employee's garments contaminated by blood or other potential infections material during an exposure incident.

PROCEDURE FOR EMPLOYEE GARMENT CONTAMINATED WITH BLOOD/OPIM DURING AN EXPOSURE INCIDENT:

- Clothing will be removed as soon as feasible following contamination with blood or other potential infectious material and placed in a biohazard bag (red)
- Replacement clothing will be provided
- Containerized clothing will be sent to a district designated off-site facility for cleaning and decontamination
- The building administrator will contact the Exposure Control Officer for authorization

DISPOSAL PROCEDURES

DISPOSAL PROCEDURES FOR ITEMS CONTAMINATED WITH BLOOD, BODY FLUIDS OR OTHER POTENTIALLY INFECTIOUS MATERIAL

For purposes of this Standard, in the Wayne-Westland Community School District the following definitions will apply in the worksite:

BIOHAZARDOUS WASTE: Liquid or semi-liquid blood or other potentially infectious material. Such waste includes contaminated items that would release blood or other potentially infectious material in a liquid or semi-liquid state if compressed; items which are caked with dried blood or other potentially infectious material and which are capable of releasing these material during handling; sharps, broken glass, plastic or other sharp objects contaminated with blood or other potentially infectious material; pathological and microbiological waste that contains blood or other potentially infectious material.

REGULATED WASTE: Biohazardous waste intended for disposal which may present potential health and/or physical hazard and must be managed in accordance with federal and state regulations.

RECEPTACLES: In this district, there shall be a marked biohazard container in the custodial area for containment of all individual biohazard designated bags. This container will be red and/or labeled with a biohazard logo. The contents of these bags and this container will be considered regulated waste and will be subject to the Wayne-Westland School District Bio-Hazardous Waste Disposal Procedures.

All biohazard containers and bags shall be leak-proof and closable.

Individual biohazard bags will be red in color with a biohazard label.

In the event that regulated waste leaks from a bag or container, the bag or container shall be placed in a second container, and the area shall be cleaned and decontaminated.

Contaminated sharps, broken glass, plastic or other sharp objects will not be picked up directly with the hands. Tongs, forceps or a brush and dust pan should be used and the material disposed of in an appropriate sharps container. In this district the sharps containers (large or small) shall be closeable, puncture resistant, leak proof, red in color and/or labeled with a biohazard logo. Containers shall be maintained in an upright position. Containers shall be easily accessible to staff and located as close as feasible to the immediate area where sharps are used or can be reasonably anticipated to be found. (i.e. clinics, art classes, science class, health occupations, or custodial stations.) If an incident occurs where there is contaminated material that is too large for a sharps container the custodian will be notified immediately to remove the material to an appropriate biohazard container.

In this district, the employee will notify the building administrator when sharps containers become three/quarters full or at least annually, so that they may be disposed of as required. When nearly full, the sharps containers shall be taken to the Career Technical Center Receiving room for removal by the environmental contractor.

In this school district, YELLOW covered cans will be used for disposal of items contaminated with blood or body fluids that do not fit the definition for “biohazardous” and therefore are not “regulated waste”. (i.e., diapers, dressings or other items used in first aid.) Every building will have at least one such container located in the clinic area. The yellow container will be lined with a leak proof liner (not red in color) and disposed of into a second bag for regular trash pickup. The container lid will be cleaned daily and immediately when obviously contaminated with blood or body fluids.

Sanitary napkin receptacles will have a leak proof liner and contents will be double bagged at the end of each work day and disposed of in the trash.

Cleaning of Receptacles:

All bins, pails, cans and sanitary napkin receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a daily basis. They will be cleaned and decontaminated immediately or as soon as feasible upon visible contamination. All receptacles regularly used for disposal of material contaminated with body fluids will have a leak proof liner. Material removed from such receptacles does not require disposal as regulated waste unless it is caked or over-saturated with blood or other potentially infectious matter to the extent that containment is difficult or impossible. It DOES require double bagging prior to disposal with the trash.

Under no circumstance should an employee risk an exposure incident by reaching a hand inside any container designated a biohazardous waste (red or with biohazard label) or waste designated as requiring cautious handling (yellow containers).

WAYNE-WESTLAND BIOHAZARDOUS WASTE DISPOSAL

Biohazard waste is considered “regulated waste” which is composed of contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed.

Disposal of all medical waste shall be in compliance with the provisions of section 13801 to 13831 of Act No. 368 of the Public Acts of 1978, as amended, being 333.13804 to 333.13831 of the Michigan Compiled Laws, and known as the Medical Waste Regulatory Act.

All applicable requirements of the school district waste disposal procedures for regulated waste will apply for biohazardous waste.

Containerization and labeling: (R.32570014 MIOSHA Bloodborne Pathogen)

- Labels must be obviously affixed to containers of biohazardous waste that are red-orange in color with the biohazardous logo in black. Red bags or red container may be substituted for the warning label.
- Containers must be leak proof, puncture resistant, closable and disposable. If outside contamination of the container or bag is likely to occur, then a second leak proof container or bag that is closable, labeled or color-coded shall be placed over the outside of the first and closed to prevent leakage during handling, storage and transport.

DISPOSAL PROCEDURE:

- Biohazardous waste disposal requires that the building administrator contact the Executive Director of Maintenance and Operations. The administrator is responsible for seeing that the biohazardous waste is properly containerized and labeled if required.
- A transport label will be affixed securely to the waste container with the following information.
 - BIOHAZARDOUS WASTE
Wayne-Westland Community School District
Address of location:
Brief description of contents of container.
- Biohazardous waste ready for pick-up will be assigned to the custodian for safe storage until disposal is complete.

- The building administrator is responsible for completing a disposal request form. The completed form is sent to the Executive Director of Maintenance and Operations who shall review all request for disposal of biohazardous waste.
- The Executive Director of Maintenance and Operations shall maintain a Waste Accumulation area, keep wastes segregated, and shall handle, store, and dispose of all regulated waste in accordance with school district procedures.
- The Executive Director of Maintenance and Operations shall maintain a Manifest Register for each shipment of biohazardous waste and shall forward a copy of the register to the Exposure Control Officer.
- The Executive Director of Maintenance and Operations shall schedule all shipments with approved waste haulers and to approved waste sites in accordance with instructions of the waste permit.

INFORMATION & TRAINING

INFORMATION AND TRAINING

In the Wayne-Westland Community School District, information and training concerning bloodborne pathogens will be provided to all identified employees at no cost to the employee and during working hours.

- A. Training will be provided:
 - At the time of initial assignment.
 - Within two weeks following Board approval of the exposure control plan.
 - Annually.
- B. Additional training will be provided when changes such as modification or addition of tasks or procedures affect employee's occupational exposure.
- C. Material covered will apply to the educational level, literacy and language of employees being addressed.
- D. The contents of the training program will include:
 - Copy of Michigan Department of Health, Occupational and Health Standards Commission, Rules for Bloodborne Infectious Diseases.
 - Explanation of the epidemiology and symptoms of bloodborne disease.
 - Explanation of the modes of transmission of bloodborne pathogens.
 - Explanation of school district's Exposure Control Plan, its location, and means by which an employee may obtain a copy.
 - Assessment of tasks that may involve exposure.
 - Methods for preventing or reducing exposure (engineering controls and work practices).
 - Information on types, proper use, location removal, handling, decontamination, and disposal of personal protective equipment (PPE).
 - Explanation of selection of PPE. Efficacy, safety, administration, and benefits as well as the location and procedure for receiving the cost-free vaccination.

- Information on appropriate action to take and persons to contact in emergencies involving exposure.
 - Explanation of procedures to follow when an exposure incident occurs, including reporting methods and medical follow-up.
 - Information on post-exposure evaluation and follow-up which the school district is required to supply following an exposure incident.
 - Explanation of signs, labels, and color coding system.
 - Opportunity for a question and answer period.
- E. The person conducting the training will be knowledgeable in the material covered during the training course as it relates to the work place.
- F. Training records will be maintained for a period of three (3) years and will include name, occupation, name of person doing training (with qualifications) and a brief overview of contents—an agenda.
- G. Training curriculum: The school district will be using a combination of internally developed curriculum and one purchased to conduct the training. A copy of this curriculum will be maintained by the district and made available for review by employees or OSHA.

TRANSFERRED EMPLOYEE:

When a new employee joins the school district, or an employee changes jobs within the facility, the following process will take place to ensure that they are assessed and, if necessary, trained in the appropriate work practice controls:

1. The employee’s job classification and the tasks and procedures he/she will perform are evaluated by classifications and task lists which we have identified in our Exposure Control Plan as those in which occupational exposure occurs.
2. If the employee is transferring from one job to another within the facility, the job classifications and tasks/procedures pertaining to the previous position are also checked against these lists.
3. Based on this cross-checking, the job classifications and/or tasks and procedures which will bring the employee into occupational exposure situations are identified and documented. The employee will then be trained by the training coordinator or another instructor regarding any work practice controls with which the employee is not experienced. In addition, a complete bloodborne pathogen training and all other components of the regulation will be implemented.

HEPATITIS B VACCINATION & POST EXPOSURE EVALUATION POLICY

HEPATITIS B VACCINATION

HEPATITIS B VACCINATION POLICY

The Wayne-Westland Community School District will provide the hepatitis B vaccination to all Classification A employees who have occupational exposure to blood or other potentially infectious material.

The hepatitis B vaccine will be:

- Provided at no cost to the employee. The school district will not institute a reimbursement program, or require an employee to use health care insurance to pay for the vaccination if there is any co-pay for insurance or procedure. In addition, the school district will not require the employee to enter into an “amortization contract” which requires employee to reimburse the school district for cost of the vaccine if employee leaves prior to a specified time. No “out-of-pocket” costs will be incurred by the employee.
- Made available to employee at a reasonable time and place.
- Performed by a licensed physician or licensed health care professional following appropriate health care professional procedures.

AVAILABILITY OF HEPATITIS B VACCINE:

The hepatitis B vaccination will be made available after the employee receives the required training and within 10 school days of initial assignment to all employees who have occupational exposure.

Exemptions would include:

1. Employee who has received vaccine series previously.
2. Employees for who antibody testing has revealed that employee is immune.
3. Employees for who the vaccine is contraindicated for medical reasons.

The school district shall not require a prescreening program as a prerequisite for receiving the HBV vaccination. HBV antibody testing will be available for employees who desire such testing before deciding whether or not to receive the HBV vaccination. If the health care professional conducting the vaccination requires an antibody test prior to provision of the vaccination, the district will pay for the procedure.

An employee may decline the HBV vaccination, in which case the employee needs to sign a declination statement. The employee may, at a later date, request the vaccine; the school district shall grant the request at that time.

POST EXPOSURE EVALUATION & FOLLOW-UP PROTOCOL

The school district is responsible to evaluate an exposure incident (i.e. blood contact with mucous membrane by needle stick, cut, bite etc.).

In the event of an exposure incident, it is imperative that the employee and district follow the appropriate protocol. Time is important in providing the most comprehensive and protective treatment.

Any school district employee who has an exposure incident should follow the post-exposure protocol. The school district will be responsible for providing a confidential medical evaluation and follow-up after an exposure incident has been reported. The following protocol will be followed:

Exposed employee should:

- Immediately wash exposed area or flush mucous membrane with running water,
- Contact the building administrator/supervisor.

The building administrator/supervisor will:

- Provide the employee with an Employer's Basic Report of Injury Report to complete.
- Identify and document source individual (unless prohibited by law). Contact the source individual or in the case of a minor the parent/guardian. (Form BBP07). Inform the source individual, or in the case of a minor, the parent/guardian that a physician from a District designated medical facility may be making contact to discuss the source individual's health history, to request testing or to request permission to contact the source individual's health care provider. If the source individual or parent/guardian refuses to speak to the physician, it should be recorded as such and the Exposure Control Officer informed. The purpose of the testing is to determine HBV or HIV status of the source individual.
- Contact the Exposure Control Officer.
- Forward all necessary forms/documents to Exposure Control Officer.

The Exposure Control Officer will:

- Refer the employee to the District designated medical facility.
- Forward all necessary information to be provided to the District designated medical facility, including a referral letter, a description of the affected employee's duties as they relate to the exposure incident, provide a description of an PPE to be used, a copy of Exposure Control Incident Report and any medical records relevant to the incident (i.e. hepatitis B vaccination status).
- Inform the District designated medical facility as to the source individual's consent for testing and/or obtain permission for the District designated medical facility physician to contact the source individual or, in case of a minor, the guardian. If consent is not obtained, document as such. If consent is obtained the results of the source individual's testing will be made available to the exposed employee by the District designated medical facility. The employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- Investigate each exposure incident report and make appropriate recommendations.
- When notified by the District designated medical facility that an exposure incident has occurred, ensure that it is logged on the MIOSHA 300 form under "illness" Category g.

The exposed employee will:

- Proceed to the District designated medical facility as soon as possible and not later than 24 hours after the exposure incident for a confidential medical evaluation and follow-up.

- Provide consent/declination of blood collection and/or testing and post-exposure prophylaxis.

The District designated medical facility will:

- Evaluate exposure incident.
- Provide counseling with regards to medical risks and benefits before employee undergoes any evaluation, procedures, vaccinations or post-exposure prophylaxis.
- Ensure that post-exposure evaluation, procedures, prophylaxis and follow-up procedures are provided without cost to the employee and that they comply with current recommendations of the United States public health service, unless in conflict with R.325.70013.
- Ensure that the exposed employee's blood will be collected as soon as feasible and tested after consent is obtained. If the employee consents to baseline blood collection, but does not give consents to baseline blood collection, but does not give consent for testing, samples will be held for 90 days. In this time period, the employee may decide to have blood sample tested.
- Contact source individual's health care provider if consent is obtained.

For each evaluation pursuant to the provisions of this rule, an employer shall obtain, and provide an employee with a copy of, the evaluating health care professional's written opinion shall be limited to the following information:

- The health care professional's recommended limitations upon the employee's use of personal protective clothing or equipment.
- Whether hepatitis B vaccination is indicated for an employee and if the employee has received such vaccination.
- A statement that the employee has been informed of the results of the medical evaluation and that the employee has been told about any medical conditions which have resulted from exposure to blood or other potentially infectious material and which require further evaluation or treatment. The written opinion obtained by the employer shall not reveal specific findings or diagnoses that are unrelated to the employee's ability to wear protective clothing and equipment or receive vaccinations. Such findings and diagnoses shall remain confidential.

