OSHA - Bloodborne Pathogens Training

June 2017

Required for all faculty/staff annually

Refresher training

- A brief overview
- Focuses on protection

More information and facts

- Meeting with School Nurse
- Pupil Personnel Services Director



Universal Precautions

Bloodborne Pathogens are organisms found in blood and other body fluids.

All blood and body fluids must be considered as infections.

Be Careful: Call custodian to clean <u>any</u> blood or body fluid.

Workplace Transmission

- Bloodborne Pathogens are spread through:
 - Infected human blood
 - Other potentially infectious materials (OPIM):
 - Body fluids containing visible blood
 - Semen
 - Vaginal secretions
 - Cerebrospinal fluid
 - Synovial fluid
 - Pleural fluid
 - Peritoneal fluid
 - Pericardial fluid
 - Amniotic fluid



Protect Yourself!

<u>BLOODBORNE PATHOGENS</u> Can cause diseases including but not limited to:

- Hepatitis B* virus
- Hepatitis C virus
- HIV/AIDS virus
- Ebola

*Hep B vaccine

• Offered by CCS to all Category I employees



CCS Bloodborne Pathogens Exposure Control Plan Your Guide to Safety

Know what is in the plan & where it can be found: a) School Office (Principal's or Assistant Principal's office) Know where your school's copy is kept!

- b) CCS website Faculty & Staff link
- c) School Nurse

If you have questions about potential exposure: Read the Exposure Control Plan See your Principal or School Nurse Call Pupil Personnel Services Director at Central Office

2017 Exposure Control Plan Updates

Includes most current versions of:



- OSHA's Bloodborne Pathogens Final Standard
- Current CCS Policy: 7260 Occupational Exposure to Bloodborne Pathogens
- Current Infectious Disease Policy from NC High School Athletic Association
- Current information on HIV/AIDS, Hepatitis A, B and C, Hepatitis B vaccine

Category I Employees



School NursesFirst Responders Athletic TrainersCustodians Coaches Plumber Diabetic Care ManagersAdministrators

Some EC teachers and Teacher's Assistants and Bus Drivers who care for the following students: Requiring invasive procedures Aggressive, may cause harm to self or others

These students may pose a risk of disease transmission if exposure to blood/body fluids is involved.

Category II positions (possible risk of occupational exposure)

- Biology/Chemistry lab teachers
- Maintenance workers
- Classroom teachers, substitute teachers and teacher assistants
- Pre-K teachers and teacher assistants
- Bus Drivers
- Secretaries (if responsible for first aid)
- Shop/Trade/Industry teachers
- Speech Therapists
- Cafeteria Staff

Examples of tasks causing risks:

- Emergency first aid
- Handling contaminated laundry
- Blood spill clean up
- Waste disposal
- Assisting with blood sugar monitoring
- Administering CPR
- Repair/handling contaminated equipment







Exposures in the CCS

Most often related to employees coming into contact with blood as a result of:

Bleeding injuries during fights

➢Other violent behavior including human bites that break the skin

>Injuries on the playground or athletic field

How to prevent exposures in emergency situations:

Keep gloves readily available

Cover broken skin with a bandage prior to your workday

Have gloves/first aid supplies available on playground/athletic field

Place barrier between blood and skin in emergency situation where gloves are not immediately available

Ways to Protect Yourself



 Hand washing with soap and water
 Best way to stop spreading of germs

- Disposable gloves
 Always wear gloves when handling blood/body fluids (keep gloves in right top desk drawer)
- <u>Bandaids</u> cover and protect open cuts

Resuscitation devices

 Mouthpieces, pocket masks or bag-valve mask devices must be used for CPR.







Personal Protective Items



Gloves, CPR masks

Provided for employees by CCS Ordered through Central Office

Cleaning Solution and supplies: NABC or Eco-Lyzer (Contact Custodian)





Housekeeping



- Immediately call a custodian to clean up and decontaminate surfaces that
- come into contact with blood or other potentially infectious materials
- An EPA-registered disinfectant solution (NABC or Eco-Lyzer) must be used for blood clean up
- Gloves should always be worn for cleanup
- Small spills –absorb blood with lots of paper towels or granular absorbent and then clean with approved disinfectant

Housekeeping (continued)



- Mops, pails, sponges, utility gloves must be decontaminated with approved disinfectant
- Broken glassware shall not be picked up directly with hands. Mechanical means must be used (broom and dust pan, tongs, etc.) and items must be placed in a rigid, puncture resistant container (e.g. sharps container, cardboard box).

Disposal of waste contaminated with blood and OPIM

The following procedures shall be followed for handling and disposal of such items that include, but are not limited to bloody bandages, gauze, dressings, sponges, paper towels, sanitary pads, swabs and used gloves or other PPE:

Waste disposal (cont'd)



- 1. Wear gloves
- 2. Place items in a leak proof plastic bag
- 3. Remove gloves using proper technique and place in the plastic bag with the contaminated items
- 4. Securely fasten the bag and place in a second plastic leak proof bag, also securely fastened, as an extra precaution
- 5. Dispose of as regular trash



When to use red biohazard bags:

For disposal of regulated waste including:

- Items that would release blood or other OPIM in a liquid or semi-liquid state if compressed
- Items that are caked with dried blood or OPIM and are capable of releasing these materials during handling
- Note-Red bags are generally not necessary at school

Use of red biohazard bags (continued)

- 1. Wear gloves
- 2. Place items in a red biohazard bag.



- 3. Remove gloves using proper technique and place in the biohazard bag with the contaminated items. *Double bag items and secure closure of both bags*.
- 4. Secure and close the bag to contain all contents and prevent leakage of fluids during handling, storage and transport.
- 5. If outside contamination of the bag occurs, it must be placed in a second bag or container.
- 6. The red biohazard bag shall be placed in an outside trash container to be picked up by the county sanitation department.

Sharps

- Never pick up sharp objects with your hands.
- Use broom and dustpan
- Place in puncture proof container with biohazard label
- Never re-cap a used needle;
- instead drop it into the sharps container without recapping.





Contaminated Sharps Disposal

- Sharps container must be maintained upright throughout use, replaced when necessary and not be allowed to overfill.
- Container shall be closed immediately prior to removal to prevent spillage or protrusion of contents
- Contact school nurse for disposal of filled Sharps Containers

Work Exposure

Direct Transmission

of blood or body fluids

one person to another through open cut, abrasion, sore, or membranes of eyes, mouth or nose



Indirect or Accidental Transmission

of blood or body fluids

touching contaminated object

(broken glass, dirty needle/knife, metal)

Touching contaminated surface
(Hep B Virus can live in a dried state on a surface for at least 7 days)

If I'm Exposed: What do I do?

- Wash exposed area immediately
- Notify supervisor
- Supervisor will notify BBP Coordinator
- Investigation will begin
- Complete BBP Exposure Report soon after exposure, within 24 hours



OSHA and CDC Guidelines will be used

to determine medical treatment & follow up. (take copy of form with you)



Exposure Determination

- ✓ <u>NEW EMPLOYEES</u>
- ✓ Employee who Changes position
- ✓ Any employee who thinks exposure status has changed, may request change of status any time during course of employment.

NEW EMPLOYEES: See School Nurse to schedule required <u>Initial</u> Bloodborne Pathogen Training.

Safety suggestions

Employees are encouraged to make suggestions for more effective engineering and work practice controls:

Examples:

- •Equipment
- Methods of disposal
- Disposal devices
- •Availability of disposable



Hepatitis B Vaccination Series

<u>Offered</u> to all Category I employees of CCS

Required for all children born on/after 7-1-94.

Vaccine Titer

Only if complete vaccine series is provided by CCS Test for Anti-HB within 1-2 months of vaccine completion. If no response, repeat vaccine series and Anti-HB or employee to be evaluated for HBsAg-positive status.

