

The Superintendent or designee shall meet state and federal standards for dealing with bloodborne pathogens and other potentially infectious materials in the workplace. The Superintendent or designee has established a written Exposure Control Plan designed to protect employees from possible infection due to contact with bloodborne viruses, including human immunodeficiency virus (HIV) and Hepatitis B virus (HBV) and Hepatitis C virus (HCV).

The Governing Board shall determine which employees have occupational exposure to bloodborne pathogens and other potentially infectious materials. In accordance with the district's Exposure Control Plan, employees having occupational exposure shall be offered the Hepatitis B vaccination.

Any employee not identified as having occupational exposure in the district's exposure determination may petition to be included in the district's employee inservice and Hepatitis B vaccination program. Any such petition should be submitted to the Superintendent or designee who shall evaluate the request and notify the petitioners of his/her decision. The Superintendent or designee may deny a request when there is no reasonable anticipation of contact with infectious material.

**Definitions:**

*Occupational Exposure* means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

*Exposure Incident* means a specific eye, mouth, other mucous membrane, nonintact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

*Parenteral contact* means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

A *sharp* is any object that can be reasonable anticipated to penetrate the skin, or any other part of the body and result in an exposure incident.

A *sharps injury* is any injury caused by a sharp, including but not limited to cuts, abrasions, or needlesticks.

*Work practice controls* are controls that reduce the likelihood of exposure by defining the manner in which a task is performed.

*Engineering controls* are controls, such as disposal containers, needleless systems, and sharps with engineered sharps injury protection that isolate or remove the bloodborne pathogens hazard from the workplace.

*Engineered sharps injury protection* is a physical attribute built into a needle device or into a non-needle sharp which effectively reduces the risk of an exposure incident.

**Exposure Control Plan:**

The district's Exposure Control Plan contains the following components:

- 1.0 A determination of which employees have occupational exposure to blood or other potentially infectious materials.
- 2.0 A description of the schedule and method for implementing exposure control requirements, including but not limited to:
  - a. Universal precautions
  - b. Engineering and work practice controls
  - c. Personal protective equipment

- d. Housekeeping schedules
  - e. Hepatitis B vaccination
  - f. Post-exposure evaluation and follow-up
  - g. Informing employees about biohazards, including:
    - (1) Labels and signs, and
    - (2) Training
  - h. Maintenance of training and medical records
- 3.0 The district's procedure for evaluating circumstances surrounding exposure incidents.
- 4.0 An effective procedure for gathering information about each such exposure incident involving a sharp, as required for the log of sharps injuries.
- 5.0 An effective procedure for periodically determining the frequency of use of the types and brands of sharps involved in exposure incidents documented in the sharps injury log.
- 6.0 An effective procedure for identifying currently available engineering controls and selecting such controls as appropriate for the procedures performed by employees in their work areas and or departments.
- 7.0 An effective procedure for documenting instances when a licensed healthcare professional directly involved in a patient's care determines, in the reasonable exercise of clinical judgment, that the use of an engineering control would jeopardize an individual's safety or the success of a medical, dental or nursing procedure.
- 8.0 An effective procedure for obtaining the active involvement of employees in reviewing and updating the Exposure Control Plan with respect to the procedures performed by employees in their respective work areas or departments.

The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary to:

- 1.0 Reflect new or modified tasks and procedures affecting occupational exposure.

- 2.0 Reflect new or revised employee positions with occupational exposure.
- 3.0 Review the exposure incidents which occurred since the previous up-date.
- 4.0 To the extent that sharps are used in the district, reflect progress in implementing the use of needleless systems and sharps with engineered sharps injury protection.
- 5.0 Review and respond to information indicating that the Exposure Control Plan is deficient in any area.

Sharps Injury Log:

The Superintendent or designee shall establish and maintain a log recording exposure incidents involving a sharp. The exposure incident shall be recorded within 14 working days of the date the incident is reported to the district.

The information recorded shall include the following, if known or reasonably available:

- 1.0 Date and time of the exposure incident
- 2.0 Type and brand of sharp involved in the exposure incident
- 3.0 A description of the exposure incident, including:
  - a. Job classification of the exposed employee
  - b. Department or work area where the exposure incident occurred
  - c. The procedure that the exposed employee was performing at the time of the incident
  - d. How the incident occurred
  - e. The body part involved in the incident
  - f. If the sharp had engineered sharps injury protection, whether or not the protective mechanism was activated and whether or not the injury occurred before, during, or after the protective mechanism was activated
  - g. If the sharp had no engineered sharps injury protection, the injured employee's opinion as to if and how such a mechanism could have prevented the injury
  - h. The employee's opinion about whether or not any other engineering, administrative or work practice could have prevented the injury.

The district's Exposure Control Plan shall be accessible to employees in accordance with law. It also shall be made available to the Chief or Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or his/her designee, upon request for examination and copying.

Exposure Determination:

The district's exposure determination shall be made without regard to the use of personal protective equipment and shall include:

- 1.0 All job classifications in which all employees have occupational exposure to bloodborne pathogens.
- 2.0 Job classifications in which some employees have occupational exposure.
- 3.0 All tasks and procedures or groups of closely related tasks and procedures in which occupational exposure occurs and which are performed by employees listed in item #2 above.

Vaccination:

Hepatitis B vaccinations shall be provided at no cost to those employees determined to have occupational exposure to blood and other potentially infectious materials. Employees who decline to accept the vaccination shall sign the Hepatitis B declination statement as required by law (Appendix I).

The district may exempt designated first-aid providers from the pre-exposure Hepatitis B vaccine if:

- 1.0 Rendering first-aid is not the primary job responsibility of the employee and is not performed on a regular basis.
- 2.0 The district's Exposure Control Plan provides that:
  - a. Employees report all first-aid incidents involving the presence of blood or other potentially infectious materials before the end of the work shift during which the incident occurred.
  - b. Designated first-aid providers participate in the bloodborne pathogens training program.
  - c. The full Hepatitis B vaccination series shall be made available to unvaccinated first-aid providers no later than 24 hours after they render assistance in any situation involving the presence of blood or other potentially infectious material regardless of whether or not an exposure incident occurred.
- 3.0 The district implements a procedure to ensure the above requirements are met.

**Protective Equipment:**

The district shall provide appropriate personal protective equipment at no cost to the employee. The district shall maintain, repair, make accessible and require employees to use and properly handle protective equipment.

**Information and Training:**

The district shall provide a training program as specified by law to all employees in job classifications which have been determined to have some degree of occupational exposure. This program shall be offered at the time of initial assignment, annually thereafter, and whenever a change of tasks or procedures affect the employee's exposure.

Employees who fall within the definition of designated first-aid providers shall also receive training. Such training shall include the specifics of reporting first-aid incidents which involve blood or body fluids which are potentially infectious.

**First-Aid Incidents:**

Unvaccinated designated first-aid providers must report any first-aid incident involving the presence of blood or other potentially infectious material, regardless of whether an exposure incident occurred, by the end of the work shift. The full Hepatitis B vaccination series shall be made available to such employees no later than 24 hours after the first-aid incident.

**Exposure Incidents (Post-evaluation and Follow-up):**

All exposure incidents must be reported as soon as possible to the Superintendent or designee. Following a report of an exposure incident, the district shall provide the exposed employee with a confidential medical evaluation and follow-up as required by law. The district shall maintain the confidentiality of the affected employee and the exposure source during all phases of the post-exposure evaluation.

**Records:**

Medical and training records shall be kept in accordance with law. Medical records shall be maintained for the duration of employment plus thirty years. Training records shall be maintained for three years from the date of training. The sharps injury log shall be maintained five years from the date the exposure incident occurred. An employee's records shall be made available to that employee and to the National Institute for Occupational Safety and Health in accordance with law.

Medical records for each employee with occupational exposure will be kept confidential as appropriate and transferred or made available in accordance with law.

Employee Groups Eligible for Hepatitis B Vaccination Program:

Certificated:

- Nurses
- Physical Education Teachers
- Athletic/Intramural Directors

Classified:

- Clerical Support Services
- Health Clerks
- Instructional Assistants/Severely Handicapped

Support Services Unit:

- Custodians
- Senior Custodians
- Site Custodial Supervisors
- Athletic Facility Workers
- Maintenance Service Workers
- Bus Driver
- Driver Instructor
- Maintenance Plumber
- Transportation Dispatcher

**Legal References:**

Code of Regulations, Title 8

3204 General Industry Safety-Access to Employee Exposure and  
Medical Records

5193 General Industry Safety-Control of Hazardous Substances

Code of Federal Regulations, Title 29

1910.1030 Bloodborne Pathogens

Board of Trustees

August 1994

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**Hepatitis B Vaccine Declination**

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If, in the future, I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Employee Name (Please print)

\_\_\_\_\_  
Date

Distribution:

Human Resources  
Regional Nurse, District Health Office