

# BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

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## MEMPHIS SHELBY COUNTY SCHOOLS (MSCS)



Dr. Marie N. Feagins, Superintendent

**REVISED March 11, 2024**

DEVELOPED FROM MODEL OSHA PLAN

### **Bloodborne Pathogens Standard**

The following Exposure Control Plan contains all elements required by the OSHA Bloodborne Pathogens Standard (29 CFR 1910.1030).

## **Exposure Control Plan**

Memphis Shelby County Schools is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document to assist our organization with implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
  - Universal Precautions
  - Engineering and work practice controls
  - Personal protective equipment
  - Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding exposure incidents.

Implementation methods for these elements of the standard are discussed in the subsequent pages of this plan.

## Shelby County Board of Education

Policy

4007

Issued Date: 08/26/10

### BLOODBORNE PATHOGEN EXPOSURE CONTROL

The Shelby County Board of Education follows the rules and regulations of OSHA Standard 29 C.F.R. 1910.1030. Measures, outlined in the Standard and needed to eliminate or minimize the likelihood of employee exposure to bloodborne pathogens, especially HBV and HIV will be instituted as follows:

1. Development of a Bloodborne Pathogen Exposure Control Plan;
2. Training of all employees in universal precautions;
3. Determination of employee exposure risk status;
4. In-depth training of employees determined to be at risk for occupational exposure to bloodborne pathogens and the use of measures and equipment to reduce their risk for exposure;
5. Institution of engineering controls and work procedures to minimize risk;
6. Provision of personal protective equipment to protect employees during exposure incidents; and
7. Provision of HBV vaccination and when required boosters to employees at risk for occupational exposure to bloodborne pathogens during discharge of their normal duties and responsibilities.

The Shelby County Board of Education will provide post exposure medical evaluation for employees exposed to bloodborne pathogens because of contact with blood or other potentially infectious materials during an exposure incident. Further medical treatment, medical prophylaxis or counseling indicated by the post exposure medical evaluation will be supplied by the Shelby County Board of Education.

Required training will be repeated on an annual basis and the Exposure Control Plan will be reviewed and updated once a year.

## **PROGRAM ADMINISTRATION**

- Risk Management is responsible for implementation of the ECP. Exceptional Children and Health Services and Risk Management Departments will maintain, review, and update the ECP at least annually and whenever necessary to include new or modified tasks and procedures. Contact location/phone number: 901-416-2424 or 416-5515
- Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.
- Division Directors and Principals are responsible for exposure control in their schools and respective areas. They work directly with Exceptional Children and Health Services and Risk Management and assigned employees to ensure the proper exposure procedures are followed.
- The Operations department will provide and maintain all necessary personal protective equipment (PPE), engineering controls, labels, etc. as required by the standard. This department will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes. Contact location/phone number: Central Office – (901) 416-5300.
- The Human Resources Department, Exceptional Children and Health Services and The Office of Risk Management will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained. Contact location/phone number: Central Office – (901) 416-5300.
- Exceptional Children and Health Services will be responsible for training and documentation of training.
- The Office of Risk Management will also be responsible for documentation of training and making the written ECP available to employees, OSHA, and NIOSH representatives. Contact location/phone number: Central Office – (901) 416-5515.

## **EMPLOYEE EXPOSURE DETERMINATION**

[1910.1030\(c\)\(2\)\(i\)](#)

The following is a list of all job classifications at our establishment in which all employees have potential increased occupational exposure risk:

### **Job Title:**

Plant Managers  
Physical Education/Wellness Teachers  
Coaches  
Special Education Teachers  
Medical Records Clerks  
Special Education Teacher Assistants  
Cafeteria Workers  
School Nurses

The following is a list of job classifications in which some employees at our establishment have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

### **Job Title:**

Regular Teachers  
Administrators  
Clerical Staff  
Substitute Teachers

### **Tasks/Procedures:**

Students showing blood or other body fluids  
Same  
Same  
Same

## **METHODS OF COMPLIANCE**

[1910.1030\(d\)\(1\)](#)

### **Universal Precautions**

All employees will utilize universal precautions. Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

### **Exposure Control Plan**

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will be reviewed in their annual refresher training. All employees can review this plan at any time during their work shift by contacting the Bloodborne Pathogen Coordinator at their building. If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

Exceptional Children and Health Services and Risk Management are responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Memphis Shelby County Schools will solicit input from health professionals and clinical staff responsible for direct patient care who are potentially exposed to injuries from contaminated sharps in identification, evaluation, and selection of effective engineering and work practice controls to improve practice. This collaboration will be documented in the Exposure Control Plan.

### **Engineering and Work Practices Controls**

Engineering and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below:

- Sharps disposal containers are inspected and maintained or replaced by Exceptional Children and Health Services School Nurse staff whenever necessary to prevent overfilling. Sharps will be disposed using a “Regulated Biomedical Waste Disposal Service” contractor to ensure safe disposal as well as proper treatment of needles, syringes, lancets, and other bio-hazardous materials.

This facility identifies the need for changes in engineering controls and work practices through review of OSHA records, interviews, committee activities, etc.

We evaluate new procedures and new products regularly by attending annual training provided by Exceptional Children and Health Services and Risk Management.

Exceptional Children and Health Services and Risk Management are responsible for ensuring that these recommendations are implemented.

### **Personal Protective Equipment (PPE)**

PPE is provided to our employees at no cost to them. Exceptional Children and Health Services and the Operations Department provide training in the use of appropriate PPE for specific tasks or procedures.

The types of PPE available to employees are as follows:

Disposable nitrile gloves, eye protection, reusable rubber utility gloves, germicidal soap, antiseptic toiletries.

PPE is located in the school office and may be obtained through the front office clerical staff or the Plant Manager.

All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in a regular wastebasket.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or other potentially infectious material (OPIM), and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

**\*\*Please see the Plant Manager for more information on the proper way to handle used PPE.**

### **Handwashing**

- Employers shall provide handwashing facilities which are readily accessible to employees.
- When provision of handwashing facilities is not feasible, the employer shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.
- Employers shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.

- Employers shall ensure that employees wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

## **Housekeeping and Waste-Management**

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded, and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling sharps disposal containers is to allow the School Nurse or designated school personnel to properly manage this process using the following guidelines in compliance with 29 CFR 1910.1030(d)(2)

- Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed except as noted in paragraphs (d)(2)(vii)(A) and (d)(2)(vii)(B) below. Shearing or breaking of contaminated needles is prohibited.
- Contaminated needles and other contaminated sharps shall not be bent, recapped or removed unless the employer can demonstrate that no alternative is feasible or that such action is required by a specific medical or dental procedure.
- Such bending, recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed technique.
- Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be:
  - Puncture resistant;
  - Labeled or color-coded in accordance with this standard;
  - Leak-proof on the sides and bottom; and
  - In accordance with the requirements set forth in paragraph (d)(4)(ii)(E) for reusable sharps.

The procedure for handling other regulated waste is to dispose of in an appropriate manner as determined by the Plant Manager.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded. Sharps disposable containers are located in the Health Room.



Bins and pails are cleansed and decontaminated as soon as feasible after visible contamination.

Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

### **Laundry**

We do not handle laundry in Memphis Shelby County Schools.

### **Labels**

The Plant Manager is responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify the School Principal if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc. without proper labels.

## **HEPATITIS B VACCINATION & POST-EXPOSURE EVALUATION/FOLLOW-UP**

Exceptional Children and Health Services will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability.

The hepatitis B vaccination is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this plan. Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune; or 3) medical evaluation shows that the vaccine is contraindicated.

However, if an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination later at no cost. Documentation of refusal is kept at the Human Resources office.

Vaccination will be provided by a medical provider selected by Exceptional Children and Health Services at a location to be announced,

Following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. It will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

Should an exposure incident occur, contact Risk Management (901) 416-5515 or Health Services at (901)416-2424.

An immediately available confidential medical evaluation and follow-up will be conducted by Memphis Shelby County Schools Occupational Health Services Provider. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and plan to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's results were conveyed to the employee's health care provider.
- If the source individual is already known to be HIV, HCV, and/or HBV positive, new testing need not be performed.

- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.
- If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

### **ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP**

The Human Resources department ensures that health care professional (s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogen standard.

The Human Resources department ensures that health care professionals evaluating an employee after an exposure incident receives the following:

- A description of the employee's job duties relevant to the exposure incident
- Route(s) of exposure
- Circumstances of exposure
- If possible, results of the source individual's blood test
- Relevant employee medical records, including vaccination status

The Human Resources department provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

## **PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT**

The Human Resources, Risk Management, and Exceptional Children and Health Services Departments will collaborate to review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used (including type and brand)
- Source of the device
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eyes shields, etc.)
- Location of the incident
- Procedure being performed when the incident occurred
- Actions taken as a result of the incident, (such as employee decontamination, clean-up, notifications made, etc.)
- Employee's training
- How the incident was caused, (accident, unusual circumstances such as equipment malfunction, power outage, etc.)

The Medical Records Clerk or school designee will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log. (included in the ECP)

If revisions to this ECP are necessary Exceptional Children and Health Services will ensure that appropriate changes are made.

## **EMPLOYEE TRAINING INFORMATION**

All employees who have occupational exposure to bloodborne pathogens receive ***initial and annual training*** conducted by the BBP Coordinator at the school. This person attends an annual training at the Central Office conducted by the Memphis-Shelby County Health Department.

All employees who have occupational exposure to bloodborne pathogens receive training on epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA bloodborne pathogen standard
- An explanation of our ECP and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitations of engineering controls, work practices, and PPE
- An explanation of the types, uses, location, removal, handling, documentation, and disposal of PPE
- An explanation of the basis for PPE selection
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- Information on the appropriate actions to take and persons to contact if an emergency involving blood or OPIM occurs
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person

conducting the training session

Training materials for this facility are available from Exceptional Children and Health Services.

## **RECORDKEEPING**

### **Training Records**

Training records are completed for each employee upon completion of training. **These documents will be kept for at least three years at the school.**

The training records include:

- The dates of the training session
- The contents or a summary of the training sessions
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the Human Resources or Exceptional Children and Health Services.

### **Medical Records**

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1030, "Access to Employee Exposure and Medical Records."

The Human Resources office is responsible for maintenance of the required medical records. These confidential records are kept in the Central Office for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the Human Resources office.

### **OSHA Recordkeeping**

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by the Human Resources office.

### **Sharps Injury Log**

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidences must include at least:

- Date of the injury
- Type and brand of the device involved (syringe, suture needle)
- Department or work area where the incident occurred
- Explanation of how the incident occurred

This log is reviewed as part of the annual program evaluation and maintained for at least 5 years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report.



## **HEPATITIS B VACCINE DECLINATION (MANDATORY)**

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 vaccine 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 cost to me.

Signed: (Employee Name) Date: \_\_\_\_\_

**DUPLICATE AS NECESSARY**

## EXPOSURE INCIDENT REPORT

Name of Reporting Employee: \_\_\_\_\_

Date of Report: \_\_\_\_\_

Work Location of Employee: \_\_\_\_\_

Location of Exposure Incident: \_\_\_\_\_

Cause of Exposure Incident: \_\_\_\_\_

\_\_\_\_\_

Employees/Students Exposed to BBP: \_\_\_\_\_

\_\_\_\_\_

Exposure Sites on Body: \_\_\_\_\_

Engineering Controls in Place: \_\_\_\_\_

\_\_\_\_\_

Work Practice Controls in Place: \_\_\_\_\_

\_\_\_\_\_

Personal Protective Equipment Used: \_\_\_\_\_

\_\_\_\_\_

Source Individual(s): \_\_\_\_\_

\_\_\_\_\_

Special Clean-Up/Decontamination Instructions/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
School Administrator Signature

\_\_\_\_\_  
Date

**Please submit a copy of this report to the Human Resources department.**

**DUPLICATE AS NECESSARY**

**Hepatitis B Vaccine Declination  
(Mandatory by OSHA)**

**Must be signed by any employee deemed “at-risk” and refuses the vaccination.**

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 vaccine 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 cost to me.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Bloodborne Coordinator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date

**Please send the original to Human Resources.** A copy should be made for the employee and the school principal.

**DUPLICATE AS NECESSARY**

## POST EXPOSURE REPORT

Teacher's Name: \_\_\_\_\_ School \_\_\_\_\_

ACTIVITY	DATE
Employee furnished with documentation regarding exposure incident.	_____
Source individual identified. _____ Name of source individual. _____	_____ _____
Source individual's infection status known. _____ Source individual's blood tested. _____ Results of blood test provided to exposed employee. _____ Consent of source individual obtained. _____	_____ _____ _____ _____
Exposed employee's blood collected. Blood Test results provided by employee.	_____ _____
Appointment arranged for employee with health care professional. Professional's name. _____ Documentation forwarded to health care professionals. <ul style="list-style-type: none"><li>▪ Bloodborne Pathogen Standard</li><li>▪ Description of Exposed Employee's Duties</li><li>▪ Description of Exposure Incident including route (s) of exposure</li><li>▪ Result of source individual's blood testing</li><li>▪ Employee's Medical Records</li></ul>	_____ _____ _____ _____ _____
Employee released from treatment by health care professional.	_____

Administrator: \_\_\_\_\_

**DUPLICATE AS NECESSARY**

## **BLOODBORNE PATHOGENS TRAINING RECORD**

Training must be conducted each school year. This document must remain on file in the office for audit. All school employees must be trained (cafeteria, office, teachers, Plant Manager, etc.) New employees must be trained as hired at the school when placed.

Training Session

Date\_\_\_\_\_ Instructor\_\_\_\_\_

Site of Training Session\_\_\_\_\_

<b>Attendee Name</b>	<b>Job Title</b>	<b>Work Site</b>

Please submit a copy of this report to Exceptional Children and Health Services and The Office of Risk Management.

**Following Pages:**

Post Exposure Sheet

Training Record

Declination Form (will be sent to Human Resources)

## SHARPS INJURY LOG

(29CFR 1910.1030(h)(5))

**\*\*Medical Records Clerk will maintain this report in the medication binder and forward a copy to CSH**

(This report should address any injury that results In tear, puncture or other break in the skin )

[illegible]

## Reference

**Part Number:** 1910  
**• Part Title:** Occupational Safety and Health Standards  
**• Subpart:** Z  
**• Subpart Title:** Toxic and Hazardous Substances  
**• Standard Number:** 1910.1030  
**• Title:** Bloodborne pathogens.  
  
**• Appendix:** A

[56 FR 64004, Dec. 06, 1991, as amended at 57 FR 12717, April 13, 1992; 57 FR 29206, July 1, 1992; 61 FR 5507, Feb. 13, 1996; 66 FR 5325 Jan., 18, 2001; 71 FR 16672 and 16673, April 3, 2006; 73 FR 75586, Dec. 12, 2008; 76 FR 33608, June 8, 2011; 76 FR 80740, Dec. 27, 2011; 77 FR 19934, April 3, 2012]

[http://www.osha.gov/pls/oshaweb/owadisp.show\\_document?p\\_table=standards&p\\_id=10051](http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=standards&p_id=10051)