EXPOSURE CONTROL PLAN
For
BLOODBORNE PATHOGENS
Purpose

It is the goal of the Sioux City Community School District to reduce significant risk of infection by minimizing or eliminating occupational district exposure to blood and other infectious materials by educating about universal precautions and by post exposure medical follow up to include appropriate medical treatment and counseling.

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**Definitions**

OSHA definitions utilized in the SCCSD Exposure Control for Bloodborne Pathogens

<table>
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<tr>
<th>Term</th>
<th>Definition</th>
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</thead>
<tbody>
<tr>
<td>Blood</td>
<td>Human blood, human blood components and products made from human blood.</td>
</tr>
<tr>
<td>Bloodborne Pathogens</td>
<td>Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).</td>
</tr>
<tr>
<td>Contaminated</td>
<td>The presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.</td>
</tr>
<tr>
<td>Contaminated Laundry</td>
<td>Laundry which is wet with blood or other potentially infectious materials and presents a reasonable likelihood of soak through or leakage from the bag or container; laundry which may contain sharps.</td>
</tr>
<tr>
<td>Contaminated sharps</td>
<td>Any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.</td>
</tr>
<tr>
<td>Decontamination</td>
<td>The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point they are no longer capable of transmitting infection and the surface or item is rendered safe for handling use or disposal.</td>
</tr>
<tr>
<td>Director</td>
<td>The Director of the National Institute of Occupational Health and Safety, U.S. Department of Health &amp; Human Services, designated representative or regulatory agency.</td>
</tr>
<tr>
<td>Disinfect</td>
<td>To inactivate virtually all recognized pathogenic microorganisms but not necessarily all microbial forms (e.g., bacterial endospores) on inanimate objects.</td>
</tr>
<tr>
<td>Engineering Controls</td>
<td>Controls that isolate or remove the hazard from the workplace.</td>
</tr>
<tr>
<td>Exposure Incident</td>
<td>A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee’s duties. In addition, reasonably anticipated contact with all body fluids in situations where it is difficult or impossible to differentiate between body fluids. The exposure determination shall be made without regard to the use of personal protective</td>
</tr>
</tbody>
</table>
equipment.

First Aid provider unvaccinated for Hepatitis B
An employee who is not assigned to the response back up team, whose primary job assignment is not the routine performance of first aid and who, in the absence of or in addition to the team, responds to an injury resulting from a workplace incident.

Handwashing Facilities
Facility providing an adequate amount of running table water, soap, and single use towels, or hot air drying machines.

HBV
Hepatitis B virus

HIV
Human Immunodeficiency virus

HCV
Hepatitis C Virus

Occupational Exposure
Reasonable 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. This definition excludes incidental exposures that may take place on the job, and that are neither reasonable nor routinely expected and that the worker is not required to incur in the normal course of employment. (Good Samaritan acts are not considered an occupational exposure.)

Other potentially infectious materials
(1) The following body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, and any body fluid that is visibly contaminated with blood; (2) any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV or HBV containing cell or tissue cultures, organ cultures, and culture medium or other solutions; and blood, organs or other tissues from experimental animals infected with HIV or HBV.

Parenteral
Piercing mucous membranes or the skin barrier through needlesticks, human bites, cuts, abrasions, etc.

Personal protective equipment (PPE)
Specialized clothing or equipment worn by an employee for protection against a hazard.

Regulated waste (Potentially infectious)
Liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if
compressed; items that are caked with dried blood or other potentially infectious materials; all tissue specimens; isolation wastes associated with highly communicable disease.

<table>
<thead>
<tr>
<th>Source individual</th>
<th>Any individual, living or dead, whose blood, body fluids, tissues, or organs may be a source of exposure to the employee.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sterilize</td>
<td>The use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.</td>
</tr>
<tr>
<td>Standard Precautions</td>
<td>A method of infection control in which all human blood and certain fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.</td>
</tr>
<tr>
<td>Work practice controls</td>
<td>Controls that reduce the likelihood of exposure by altering the manner in which a task is performed.</td>
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</table>
IMPLEMENTATION

This plan is developed in accordance with Occupational Safety and Health Administration Rules and Regulations, Title 29, Part 1910-1030 as published in the Federal Register on December 6, 1991, pp. 64004-64182. The Exposure Control Plan has been developed to eliminate or minimize occupational exposure to bloodborne pathogens.

I. Timelines for Implementation

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 6, 1992</td>
<td>Standard</td>
</tr>
<tr>
<td>May 5, 1992</td>
<td>The Exposure Control Plan</td>
</tr>
<tr>
<td>June 4, 1992</td>
<td>Information and training record keeping</td>
</tr>
<tr>
<td>June 4, 1992</td>
<td>Engineering and work practice controls</td>
</tr>
<tr>
<td>July 6, 1992</td>
<td>Personal Protective Equipment</td>
</tr>
<tr>
<td>July 6, 1992</td>
<td>Housekeeping</td>
</tr>
<tr>
<td>July 6, 1992</td>
<td>Hepatitis B vaccination</td>
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<tr>
<td>July 6, 1992</td>
<td>Post-exposure evaluation and follow up</td>
</tr>
<tr>
<td>July 6, 1992</td>
<td>Labels and signs</td>
</tr>
<tr>
<td>July 8, 1992</td>
<td>OAP</td>
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<td></td>
<td>Revised April, 1999</td>
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<td></td>
<td>Revised November, 2001</td>
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<tr>
<td></td>
<td>Revised September, 2003</td>
</tr>
<tr>
<td></td>
<td>Revised May, 2010</td>
</tr>
</tbody>
</table>

Copies of this plan and Standard Precautions document will be posted on the district’s website for employee access.

The plan will be reviewed and updated at least annually and whenever necessary.

II. Responsibility for Implementation

Engineering or work practice controls are used to eliminate or minimize employee exposure. These controls are examined and maintained or replaced on a regular schedule to ensure their effectiveness.

A. The Superintendent or designee is responsible for ensuring and monitoring the Exposure Control Plan.

B. The Superintendent or designee and the Head Nurse will:
   1. Review guidelines for Standard Precautions and revise as needed.
   2. Provide a list of job classifications with reasonable occupational exposure.
3. Provide ongoing consultation regarding implementation of an exposure control plan.
4. Develop and coordinate staff education.
5. Collaborate with local agency to provide post exposure follow up care, assist with exposure control plan, and administration of exposure hepatitis vaccine with certain workers.
6. Develop a system of record keeping for staff education.
7. Assist with compliance training including the use and limitations of methods that will present and reduce exposure including appropriate engineering controls work practices and personal protective equipment and appropriate disposal of contaminated/regulated waste. Prohibiting eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses where reasonable likelihood of occupational exposure; prohibiting food and drink in refrigerators, freezers shelves, cabinets, counter tops or benchtops where blood or other potentially infectious materials are present; avoiding splashing, spraying, spattering, and generating droplets of blood or other potentially infectious materials during procedures involving these substances.
8. Provide and revise as needed a list of all job assignments in which district employees have a reasonable anticipated occupational exposure with an explanation of team response plan.
9. Provide and revise as needed a list of job assignments in which specific employees have occupational exposure explaining specific team member assignment and location of listing.
10. Provide and revise as needed a list of all tasks and procedures performed by assigned employees in which occupational exposure could occur.
11. Assure and document employee orientation and annual training.
12. Review all applicable procedures in the department to include requirements for personal protective equipment and the management of contaminated sharps, wastes and soiled equipment.
13. Assure personal protective equipment and other necessary supplies are available in accessible locations.
14. Evaluate compliance:
   a. Include in performance evaluation
   b. Initiate and document disciplinary action for continued noncompliance.
EXPOSURE DETERMINATION

I. Job Classifications

The following are job assignments specific to employees having occupational exposure as first responders to medical situations and will be offered the Hepatitis B vaccine series.

<table>
<thead>
<tr>
<th>Job Classification</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nurses</td>
<td>First Aid</td>
</tr>
<tr>
<td>2. Emergency response teams</td>
<td>First Aid</td>
</tr>
</tbody>
</table>

The Hepatitis B vaccine series will also be available, on a voluntary basis, to all District employees.

METHOD OF COMPLIANCE

I. Standard Precautions

The procedures of standard precautions should be employed at all times when providing care of all students, regardless of their infectious-disease status.

A. The Sioux City Community School District will provide appropriate facilities for handwashing. Hands must be thoroughly washed between all direct student contacts or after handling soiled or contaminated equipment.
   1. Hands and other skin surfaces must be washed with soap and water or flush membranes with water immediately and thoroughly if contaminated with blood or potential infectious body fluids or materials.
   2. Hands must be washed immediately after gloves are removed.
   3. Where handwashing facilities are not available, antiseptic towelettes will be available for staff use.

II. Personal Protective Equipment

A. All personnel must routinely use and have access to personal protective equipment (PPE) when there is a potential for exposure to blood or other infectious body fluids or materials. Personal protective equipment is readily available in the work area/health office/administrative office at no cost. Special arrangements can be made for unique needs of staff members.

B. Gowns, masks, and protective eyewear prevent exposure of the mucous membranes of the eye, nose, or mouth. PPE should be worn if the procedure or care given is likely to produce droplets of blood or fluids containing visible blood. PPE will be available in the health office at each school building. Building
Emergency Response Teams will determine additional placement of PPE for that particular building.

C. CPR shields will be available in the nurse's office and each school's first aid kit.

D. The District will clean, launder, and dispose of personal protective equipment at no cost to the employee.

E. The Sioux City Community School District will repair/replace protective equipment as needed to maintain its effectiveness at no cost to the employee.

F. All personal protective equipment is removed prior to leaving the work area.

G. Garments that have become contaminated or penetrated by blood or other potentially infectious materials shall be removed and placed in a double plastic bag for decontamination or disposal.

H. Gloves must be worn when the employee has the potential to have direct skin contact with blood, other potentially infectious body fluids or materials, mucous membranes and non-intact skin or when handling items or surfaces soiled with blood or other potentially infectious body fluids or materials.
   1. Disposable single-use gloves must be changed as soon as possible when visibly soiled, torn, punctured, or when their ability to function as a barrier is compromised.
   2. Disposable single-use gloves cannot be washed or disinfected for re-use.
   3. Gloves must be changed after contact with each patient.
   4. Utility gloves may be disinfected for re-use if the integrity of the gloves is not compromised.
   5. Non allergic gloves, when needed, are available.

III. Housekeeping

A. The district ensures that the work site is maintained in a clean and sanitary condition. All equipment and environmental working surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials.

   1. Contaminated surfaces are decontaminated with an appropriate disinfectant immediately or as soon as feasible when surfaces are contaminated.
   2. All bins, pails, cans, and similar reusable receptacles which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials are inspected. Receptacles are cleaned and decontaminated immediately or as soon as feasible upon visible contamination.
B. Broken glassware which may be contaminated shall not be picked up directly with the hands. Mechanical means such as a brush and dust pan or tongs should be used. Janitors shall be responsible for this disposal.

C. Double bag all main offices, nurses’ offices, and restroom waste receptacles.

D. **THE PRODUCTS TO BE USED IN ROUTINE DISINFECTION OF HARD SURFACES, DISINFECTION OR CARPET SPILLS, REMOVAL OF BODY FLUID FROM THE ENVIRONMENT AND TRASH DISPOSAL ARE AS follows:**
   1. For surfaces: use designated Environmental Protection Agency (EPA) approved germicidal agent.

E. **Regulated Waste**
   1. Sharps should not be recapped, removed from disposable syringes or bent or broken by hand.
      a. Needles and sharps should be immediately placed in a properly labeled EPA approved leakproof puncture resistant containers. These containers will be maintained in an upright position, replaced routinely and not allowed to be overfilled.
      b. These containers will be located in each health office.
      c. These containers when moved are closed immediately prior to removal and placed in a red biohazard bag. The second container is also closable, leakproof, constructed to handle all contents and appropriately labeled.
      d. Sharps contaminated with blood or other potentially infectious materials not stored in a manner that requires employees to reach by hand into the containers.
   2. When needing to dispose of other regulated waste, the containers must be closable, able to contain all contents and prevent leakage and be labeled or color coded.
      a. Gloves must be worn when disposing of regulated waste.
      b. When the blood or other potentially infectious material is liquid, semi-liquid or caked with dried blood, is not absorbed in materials, and is capable of releasing the substance if compressed, use red biohazard bag for disposal. The red bags are available in the school’s health office.
      c. All containers of regulated waste will have warning labels which include "biohazard" legend. If outside contamination of regulated waste container occurs, it is placed in a second container and the second container must meet the same requirements of the original.
container.

d. Disposal of regulated waste shall be done in accordance with Iowa regulations.

F. Contaminated Laundry
1. Contaminated laundry should be handled as little as possible and with gloved hands. Disposable cloths should be used whenever possible.
2. Contaminated laundry is not to be sorted or reused.
3. Whenever contaminated laundry is wet and may soak through, the laundry is placed in a red bag to prevent soak-through or leakage to the exterior.
4. Students with their own contaminated clothes should remove them when possible. Place them in a closed plastic bag and send home. Students will not be allowed back in school until change of clothes has taken place.
5. When linens are essentially dry with minimum contamination, they may be placed in a double plastic bag (such as in P.E.) at location it was used.
6. Gloves and other personal protective equipment should be used when employees are in contact with contaminated laundry.

IV. First Aid/Health Care Procedures

A. Minor scrapes, cuts and human bites.
1. When possible, students should be encouraged to take care of their own minor injuries. They can wash the cuts and apply bandages.
2. Employees who help clean minor cuts and scrapes should wear disposable gloves and wash hands after removing gloves.

B. Large blood spills (example: serious nosebleeds/cuts)
1. Encourage students to apply pressure with their own hand.
2. Employees should provide a barrier between their skin and the blood of others. Employees should glove and apply pressure over the student's hand. A thick layer of paper towels or cloth can also provide a barrier.
HEPATITIS B VACCINATION PROGRAM

The District will offer the Hepatitis B vaccination series to employees who, in the performance of their duties, have reasonable occupational exposure. Also, post exposure evaluation and follow up will be provided for all employees who have an exposure incident.

The District ensures all medical evaluations and procedures including the Hepatitis B vaccine and vaccination series, post exposure follow up and prophylaxis will be made available at no cost to the employee at a reasonable time and place under supervision of another licensed health care professional. This will be done according to the recommendations of the US Public Health Service current at the time the evaluations and procedures take place.

The District ensures that all laboratory tests are conducted by an accredited laboratory at no cost to the employee.

A. Hepatitis B Vaccine

1. Hepatitis B vaccination is available after the employee has received the required training and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

2. The District will not make participation in a prescreening program a prerequisite for receiving hepatitis B vaccination.

3. If the employee initially declines hepatitis B vaccination but at a later date, while still covered under the plan, decides to accept the vaccination, the District provides for the hepatitis B vaccination at that time.

4. The District, utilizing the licensed health care professional, assures that employees who decline to accept hepatitis B vaccination offered by the District sign the following statement, "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.

5. If a routine booster dose(s) of hepatitis B is recommended by the US Public Health Service at a future date, such booster(s) will be made available.
6. The required Bloodborne Pathogen training, is received by all employees. The District offers to all first aid providers unvaccinated for hepatitis B who have rendered assistance in any situation involving the presence of blood or OPIM, regardless of whether an actual exposure incident as defined by the standard occurred, (a.) The full hepatitis B vaccination series as soon as possible, but in no event later than 24 hours following the exposure, and (b.) The appropriate post-exposure evaluation, prophylaxis, and follow up.

POST-EXPOSURE

I. Protocol & Follow Up

A. A copy of the OSHA guidelines is available to employees to assure compliance with regulations.

B. Following a report of an exposure, the school principal or school nurse or supervisor shall complete the report "Post Exposure to Body Fluids Evaluation (Appendix A) and include the following elements and procedures:
   1. Date and time the exposure incident occurred.
   2. Employee name.
   3. Hepatitis B vaccination status of employee.
   4. Location within the school where the exposure incident occurred.
   5. Type of potentially infectious body fluid(s) involved in the exposure incident.
   6. Source of the infectious material (nature of the exposure).
   7. Circumstances under which the exposure incident occurred (type of work/duty being performed).
   8. Cause of incident (accident, equipment malfunction, etc.).
   9. Personal Protective Equipment being used at the time of the incident.
   10. Actions taken following the incident (handwashing, wound cleansing, decontamination, etc.).
   11. Recommendations/plans to avoid repetition of exposure incident.
   12. The principal or school nurse or supervisor completing the report shall immediately notify the Human Resources office in the district.

C. The principal or school nurse or supervisor shall inform the employee to contact Mercy Business Health Services (712-274-4250 or 1-800-711-3923) immediately if exposure occurs between hours of 8:00AM to 4:30PM Monday through Friday; OR Mercy Urgent Care (274-4250 or 1-800-711-3923) 5:00PM to 8:30PM Monday through Friday, Saturdays 9:00AM – 5:00PM, Sundays Noon – 5:00PM. Employee should ask to talk to a registered nurse (RN) when they make the call.
The physician at Mercy Business Health or Urgent Care will determine if employee should be seen at clinic or go to Mercy Medical Centers Emergency Room Department for evaluation. The Post Exposure report shall accompany the employee to Mercy Business Health Services or Mercy Urgent Care or Mercy Medical Center Emergency Room Department.

If exposure is after the above hours the employee will contact their supervisor or principal. If unable to contact supervisor or principal, employee can go to Mercy Medical Center Emergency Room. Employee must notify the Human Resources office, in the district, of the exposure the next regular work day.

D. Mercy Business Health Services will provide confidential medical evaluation and follow up including the following:

1. Identification and documentation of the source individual, unless it can be established that identification is infeasible or prohibited by state or local law;
   a. The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV, Hepatitis C and HIV infectivity. If consent is not obtained, it shall be established that legally required consent cannot be obtained. When the source individual's consent is not required by law (HBV and HCV), the source individual's blood, if available, shall be tested and the results documented. The condition, "if available" applies to blood samples that have been drawn from source individuals for other testing, and OSHA does not expect post-exposure re-drawing of the source individual's blood without obtaining the source individual's consent.
   b. When the source individual is already known to be infected with HBV, HCV or HIV, testing for the source individual's known Hepatitis or HIV status need not be repeated.
   c. Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of the applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

2. Collection and testing of blood for HBV, HCV and HIV serological status:
   a. The exposed employee's blood shall be collected as soon as feasible and tested for HBV, HCV and HIV serological status after consent is obtained. Informed consent should include at least the following information:
      1) the nature of the test to be performed,
      2) the benefits and risks of testing,
      3) alternatives including the benefits and risks of such
alternatives and,
4) the exact limits of confidentiality.
b. If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 180 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.

3. Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service;
a. Counseling (concerning infection status, including results of and interpretation of all tests; psychiatric/emotional support follow-up should be made available, if indicated); and
b. Evaluation of reported illnesses.

II. Information Provided to the Healthcare Professional

A. Sioux City Community School District shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided a copy of the regulation.

B. Sioux City Community School District shall ensure that the healthcare professional evaluating an employee after an exposure incident is provided the following information:
1. A copy of this regulation;
2. A description of the exposed employee's duties as they relate to the exposure incident;
3. Documentation of the route(s) of exposure and circumstances under which exposure occurred.
4. Results of the source individual's blood testing, if available; and
5. All medical records relevant to the appropriate treatment of the employee including vaccination status.

III. Healthcare Professional's Written Opinion

A. Mercy Business Health Services shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.
1. The healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.
2. The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:
a. That the employee has been informed of the results of the
evaluation; and
b. That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.

3. All other findings or diagnoses shall remain confidential and shall not be included in the written report.

COMMUNICATION OF HAZARDS TO EMPLOYEE

I. Labels/Signs

A. Warning labels are affixed to containers of regulated waste containing blood or other potentially infectious materials.

B. Labels have the legend shown below:

![BIOHAZARD]

C. Labels are fluorescent orange or orange-red or predominantly so, with lettering or symbols in a contrasting color.

D. Labels are affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.

E. Red bags or red containers may be substituted for labels.

II. Information and Training

A. All employees will complete an online Bloodborne Pathogen Training by September 30 each year.

B. The District requires all employees to do the online Bloodborne Pathogen training program which is provided at no cost to the employee and during working hours.

C. Materials are appropriate in content and vocabulary to educational level, literacy,
and language of employees.

D. The training will include:
   1. An accessible copy of the regulatory text of this plan will be posted on the Sioux City Community School District website for employee access;
   2. A general explanation of the epidemiology and symptoms of bloodborne disease, primarily HIV, HBV and other hepatitis viruses. Employees should be informed that there are other bloodborne pathogens in addition to HIV and Hepatitis (syphilis, malaria, babesiosis, brucellosis, leptospirosis, arboviral infection, relapsing fever, Creutzfeldt-Jakob disease, HTLV-I and viral hemorrhagic fever);
   3. An explanation of the modes of transmission of bloodborne pathogens;
   4. An explanation of the employer's exposure control plan and the means by which the employee can obtain a copy of the written plan;
   5. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
   6. An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment;
   7. Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
   8. An explanation of the basis for selection and limitations of personal protective equipment;
   9. Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge;
   10. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;
   11. 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;
   12. Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident;
   13. An explanation of the signs and labels and/or color-coding and "red bagging" required;
   14. An opportunity for questions and answers with knowledgeable person;
   15. An explanation of the incident report and follow up procedures for first aid providers unvaccinated for Hepatitis B.

E. The training program covers subject matters as it relates to the school setting.
RECORDKEEPING

I. Medical Records

A. Mercy Business Health Services for the Sioux City Community School District shall establish and maintain an accurate record for each employee with occupational exposure in accordance with 29 CFR 1910.20.

B. This record shall include:
   1. The name and social security number of the employee;
   2. A copy of the employee's hepatitis B vaccination status including the dates of all the hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination;
   3. A copy of all results of examinations, medical testing, and follow-up procedures after an exposure;
   4. A copy of the healthcare professional's written opinion following exposure;
   5. A copy of the information provided to the healthcare professional following an exposure.

C. Confidentiality. Sioux City Community School District shall ensure that employee medical records are:
   1. Kept confidential and separate from other personnel records.
   2. Are not disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by this section or as may be required by law.

D. Mercy Business Health Services for the Sioux City Community School District shall maintain the records for at least the duration of employment plus 30 years in accordance with 29 CFR 1910.20.

II. Training Records

A. Training will consist of all employees completing an online Bloodborne Pathogens Training program (see Appendix B for online directions) by September 30 each year. Sioux City Community School District shall maintain training records:
   1. The names and dates of all employees completing the online training.

III. Availability

A. The Sioux City Community School District shall ensure that all records required to be maintained by this section shall be made available upon request to the
Assistant Secretary of Labor for OSHA and the Director of the National Institute of OSHA for examination and copying.

B. Employee training records required by this paragraph shall be provided upon request for examination and copying to employees, to employee representatives, to the Director of the National Institute of OSHA, and to the Assistant Secretary of Labor for OSHA in accordance with 29 CFR 1910.20.

C. Employee medical records required by this paragraph shall be provided upon request for examination and copying to the subject employee, to the Director, and the Assistant Secretary in accordance with 29 CFR 1910.20.

IV. Transfer of Records

A. The Sioux City Community School District shall comply with the requirements involving transfer of records set forth in 29 CFR 1910.20.

B. If the employer ceases to do business and there is no successor employer to receive and retain the records for the prescribed period, the employer shall notify the Director, at least three months prior to their disposal and transmit them to the Director of the National Institute for Occupational Safety and Health, if required by the Director to do so, within that three month period.
APPENDIX A
POST EXPOSURE TO BLOOD/BODY FLUIDS EVALUATION

Date of exposure: ___________ Date seen for follow up: ___________

Employee's name: ________________________________

Has employee received the HBV series? Yes _____ No _____

If yes, dates received: #1 ________ #2 ________ #3 ________

Location where incident occurred: ________________________________

Nature of exposure: Bite _____ Splash _____ Cut _____ Needlestick _____ Non-intact skin

_____ Mucous _____ Other _____ Membrane

Type of body fluid(s): __________________________________________

Circumstances of injury (type of activity being performed):
________________________________________________________________________________________

Cause of exposure incident (accident, equipment malfunction, etc.): _______________________________________

Personal protective equipment being used at the time of exposure incident:
________________________________________________________________________________________

Actions taken following the incident (handwashing, wound cleansing, etc.):
________________________________________________________________________________________

Recommendations/plans to avoid repetition of incident:
________________________________________________________________________________________

Identifiable source (student/employee name): ________________________________

Address and phone number: ________________________________________________

Source unknown (i.e., needle in trash, etc.) explain: ________________________________

________________________________________________________________________________________

Supervisor or School Principal or School Nurse signature

________________________________________________________________________________________

THIS FORM IS TO ACCOMPANY EMPLOYEE TO:
MERCY BUSINESS HEALTH SERVICES (MBHS), 3500 SINGING HILLS BLVD.
712-274-4250 or 1-800-711-3923, HOURS: M-F 8:00AM-4:30PM.

AFTER HOURS GO TO MERCY URGENT CARE, 3520 SINGING HILLS BLVD.
712-274-4250, HOURS: M-F 5:00PM-8:30PM, Saturday 9AM-5:00PM, SUNDAY NOON-5:00PM.

If no other options go to MERCY MEDICAL CENTER EMERGENCY ROOM, 801 5th STREET

Revised 1/14
APPENDIX B

DIRECTIONS FOR ONLINE BLOODBORNE PATHOGEN TRAINING

To access the training:
1. Go to the SafeSchools Training home page at:  
   http://siouxcityschools.ia.safeschools.com/login
2. Enter your employee ID number in the Username field to log in. This will bring you to the  
   Mandatory Training required annually by the Sioux City Community School District.
3. Access the Bloodborne Pathogen training one of two ways:  
   a. Click on the Bloodborne Pathogen training from the Mandatory Training list or  
   b. Click on the Extra Training tab at the top of the home page, scroll down to the Health  
      category, and select the Bloodborne Pathogen training to access the various course  
      versions. Next, select which course version you are required to take.
4. Review each component of the training and take the quiz before your Bloodborne Pathogen  
   training will be marked complete. Your training will be marked as “In Progress” until each  
   and every portion of the training is reviewed and the quiz is passed. If you are not able to  
   complete the entire training at once, you can log out and return to the training at a later time.  
   The system will save your completed portion until you return to complete the remainder.

To retake a course:  
Click on the Bloodborne Pathogen training as described above, and select “Restart Course”.

Logging Out:  
To log out, simply click on your employee ID number in the upper right hand corner of the screen  
and log out.