

OCCUPATIONAL EXPOSURE TO BLOODBORNE PATHOGENS

Policy Code:

7260

It is the policy of the board to comply with federal and state regulations and standards regarding bloodborne pathogens as set forth in the Federal Register, 29 C.F.R. 1910.1030, and the North Carolina Administrative Code, 13 N.C.A.C. 7F .0207, by attempting to limit or prevent occupational exposure of employees to blood or other potentially infectious bodily fluids and materials that may transmit bloodborne pathogens and lead to disease or death.

A. REASONABLY ANTICIPATED OCCUPATIONAL EXPOSURE

Employees who have occupational exposure to bloodborne pathogens are covered by the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard, the North Carolina Administrative Code, and this policy. "Occupational exposure" includes any reasonably anticipated skin, eye, mucous membrane, or parenteral (brought into the body through some way other than the digestive tract) contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. "Good Samaritan" acts, such as assisting a co-worker or a student with a nosebleed, would not be considered "reasonably anticipated occupational exposure," and employees whose only anticipated exposure to bloodborne pathogens would result from such acts are not considered to have occupational exposure.

B. UNIVERSAL PRECAUTIONS

Universal precautions must be used at all times. Employees should handle all blood, bodily fluid, and other potentially infectious material as if the material is infected. The program standards for the control of potential exposure to Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV) as outlined in the OSHA Rule, "Occupational Exposure to Bloodborne Pathogens" (Standard 1910.1030), and the NC Administrative Codes and/or the most current standards available must be followed.

C. EXPOSURE CONTROL PLAN

The superintendent shall ensure that an Exposure Control Plan is developed in accordance with OSHA regulations or the most current available federal and/or state standards issued to eliminate or minimize employee occupational exposure to blood or certain other bodily fluids that may carry infectious materials. In addition, the superintendent shall ensure that the following requirements are met.

1. The Exposure Control Plan must provide, at a minimum, for the following:
 - a. a determination of who is at risk for an exposure incident;
 - b. what the school system will do to protect employees from exposure incidents,

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- including the use of universal precautions, engineering, and work practice controls and, as appropriate, personal protective equipment;
- c. how to deal with an exposure incident, including post-exposure evaluation and follow-up;
 - d. who should be vaccinated for Hepatitis B; and
 - e. communication, training, and record-keeping procedures.
- 2. All elements of the Exposure Control Plan must be met.
 - 3. All employees must have access to a copy of the Bloodborne Pathogens Policy and Exposure Control Plan.
 - 4. The Exposure Control Plan must be reviewed and updated at least annually.

D. TESTING

An employee who suspects that he or she has been exposed to blood or bodily fluid on the job may request to be tested, at the school system's expense, provided that the suspected exposure poses a significant risk of transmission as defined in the rules of the Commission for Public Health. The HIV and HBV testing of a person who is the source of an exposure that poses a significant risk of transmission must be conducted in accordance with 10A N.C.A.C. 41A .0202 (4) (HIV) and 41A .0203(b)(4) (HBV). The school system shall strictly adhere to existing confidentiality rules and laws regarding employees with communicable diseases, including HIV or HIV-associated conditions.

E. NONDISCRIMINATION POLICY

The school system shall not discriminate against any applicant or employee who has or is suspected of having a communicable disease, including tuberculosis, HBV, HIV infection, or Acquired Immune Deficiency Syndrome (AIDS). An employee may continue to work as long as the employee is able to satisfactorily perform the essential functions of the job and there is no medical evidence indicating that the employee's condition poses a significant, direct threat to co-workers, students, or the public.

Legal References: 29 C.F.R. 1910.1030; G.S. 95 art. 16; 13 N.C.A.C. 7F .0207; 10A N.C.A.C. 41A .0202(4), 41A .0203(b)(4)

Cross References: Communicable Diseases – Employees (policy 7262)

Adopted: November 7, 2016