**Licking Regional Educational Service Center**

**Bloodborne Pathogens Control Plan**

1. **Exposure Determination**

Staff members in the following job classifications have responsibilities for which they could reasonably anticipate exposure to blood and other potentially-infectious materials.

1. School nurses
2. Custodians
3. Teachers and aides who work with students who are prone to biting, scratching, and other such actions that can cause bleeding or exposure to saliva and other body fluids.
4. Teachers in vocational/technical education whose students work with equipment that can cause cuts or other injuries that produce bleeding.
5. Members of a school staff who have been designated to provide first aid when and if necessary.
6. Coaches
7. Bus drivers
8. Athletic trainers
9. **Inoculation**

Each of the staff members in the above-named categories shall be offered free vaccination with the Hepatitis B vaccine after training and within ten (10) days after reporting for duty at the start of the school year, or when employed.

The Director of Student Services shall determine which hospital or other health service shall give the vaccinations and to the necessary follow-up testing. S/He shall:

1. Arrange a schedule for vaccinations which makes it possible for the staff members to be vaccinated during their work time;
2. Obtain the necessary information concerning efficacy, safety, administration, and benefits of the vaccine so that each staff member can be properly informed prior to making a decision as to whether or not s/he wishes to be vaccinated;
3. Ensure that the results of post-vaccination testing are properly recorded and kept confidential.

If the staff member declines, s/he shall complete a form which shall be placed in the staff member’s confidential file.

If the staff member chooses to be vaccinated, s/he shall sign a form and report to the selected vaccine provider in accordance with the schedule or provide vaccination documentation from personal family practitioner.

**C. Precautions**

A plan should be developed to identify the likely situations where staff members could be exposed, to describe how such situations can be minimized, and the ways in which exposure will be managed. Each of the staff members are to be trained in these procedures when employed and at the beginning of each school year. The instructor is to be someone knowledgeable about blood-borne pathogens and other potentially-infectious materials, how they may be transmitted in a school setting, vaccinations, and the precautionary procedures. (Bloodborne pathogens online & communicable disease online, as well as provided by the district nurse-flying colors).

**D. Post-exposure Evaluation and Follow-Up Staff**

Whenever a staff member has contact with blood or other potentially-infectious material, s/he shall immediately contact their supervisor and complete an incident form. The District shall offer the staff member a confidential medical evaluation.

The parents of the student who caused the exposure are to be contacted promptly to obtain permission for the testing of the student’s blood for Hepatitis B and HIV viruses either in cooperation with their physician or by a District selected health service provider.

The exposed staff member or student is to be informed of the test results, if available, with the parents consent and in accordance with Federal and State laws concerning confidentiality.

The staff member’s blood should be tested with his/her consent. The staff member shall also receive postexposure treatment, if so indicated by the Public Health Service or treating physician.

The healthcare professional conducting the evaluation is to be provided:

1. A copy of the Federal regulations concerning the Exposure Control Plan;
2. A copy of form of staff training on blood borne pathogens and control.
3. A copy of the staff member’s job responsibilities vis-a-vis the exposure;
4. The results of the student’s blood test, if available;
5. A copy of the staff member’s medical records.

The healthcare professional shall within five (5) days after the evaluation provide the District with a written opinion containing:

1. A possible recommendation for Hepatitis B vaccination, if the staff member has not already been vaccinated;
2. Confirmation that the staff member has been adequately informed of the evaluation results and any further evaluation or treatment deemed necessary.

The staff member is to be given a copy of the written opinion with in fifteen (15) days after receipt by the District. The original opinion is to be filed in the staff member’s confidential file.

**E. Post-exposure Evaluation and Follow-Up Student**

Whenever a student (student A) has contact with blood or other potentially-infectious material, the teacher or staff member shall immediately contact their supervisor and complete an incident form. The District shall offer the student a confidential medical evaluation.

The parents of the student who caused the exposure (Student B) ,or staff member, are to be contacted promptly to obtain permission for the testing of the student’s blood for Hepatitis B and HIV viruses either in cooperation with their physician or by a District selected health service provider.

The exposed staff member or student is to be informed of the test results, if available, with the parents consent and in accordance with Federal and State laws concerning confidentiality.

Student A’s blood should be tested with his/her consent. The student shall also receive postexposure treatment, if so indicated by the Public Health Service or treating physician.

The healthcare professional conducting the evaluation is to be provided:

1. A copy of the Federal regulations concerning the Exposure Control Plan;

2. The results of the student B’s blood test, if available.

The healthcare professional shall within five (5) days after the evaluation provide the District with a written opinion containing:

1. A possible recommendation for Hepatitis B vaccination, if the staff member or student has not already been vaccinated;
2. Confirmation that the staff member or student has been adequately informed of the evaluation results and any further evaluation or treatment deemed necessary.

The staff member/parent is to be given a copy of the written opinion with in fifteen (15) days after receipt by the District. The original opinion is to be filed in the staff member’s/student’s confidential file.

**I have read and received a copy of the LRESC Bloodborne Pathogen Control Plan.**

**Confirmation Signature: Date:**