Bloodborne Pathogens Training for School Staff

Insert Nurse Name, Credentials Here

Insert Organization Here

This presentation was adapted from the Ohio Department of Health, School and Adolescent Health’s Bloodborne Pathogens Training for School Staff presentation.
The information contained in this presentation represents a compilation of best practice standards and policies that are consistent with the Ohio Revise Code and OSHA regulations.

It is important to note that each local board of education has the authority to develop school policies and procedures specific to its school district.
Contact Information:

Contact the Lorain
County General Health
District

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M-F 8:00 – 4:30 pm

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Training Objectives

Provide a basic understanding of:

1. Bloodborne pathogens (BBP)
2. Common modes of transmission of BBP
3. Methods to prevent transmission of BBP
4. Information to help school staff maintain compliance with the BBP standard
Purpose of BBP Training

- School required to identify possible at-risk staff
- Educating staff who could be in contact with BBP
- Site specific exposure plans-coaches, custodians, high risk students…..

It’s extremely important that you understand and can access our school’s Exposure Control Plan!
Regulatory Authority

**OSHA** (Occupational Safety & Health Administration)
- Federal Agency
- Covers private sector employees including private schools

**Ohio PERRP** (Public Employee Risk Reduction Program)
- Ohio Bureau of Worker’s Compensation
- Covers public sector employees including public schools
What are Bloodborne Pathogens?

- Disease-causing viruses, bacteria and other microorganisms carried in the bloodstream

- Most common BBP are:
  - Human Immunodeficiency Virus (HIV)
  - Hepatitis B Virus (HBV)
  - Hepatitis C Virus (HCV)
  - Syphilis
Hepatitis B Virus (HBV)

- Means “inflammation of the liver”
- Most infectious bloodborne hazard
- Can survive outside the body for up to a week
- Vaccination for HBV is available and effective
HBV Transmission

- Contact with HBV body fluids
- Unprotected sex with multiple partners
- Sharing needle/injecting drug use
- Infected mother to baby during birth
- Sharps/needle sticks
HBV Symptoms

Possible symptoms of HBV:

- Flu-like symptoms (fever, fatigue, loss appetite, aches and pains, nausea and vomiting)
- Abdomen Pain
- Skin and whites of eyes turn yellow (jaundice)
- Dark urine (like cola or tea)
- Clay color stools

Some people have no symptoms at all!
Hepatitis B Vaccine

Must be offered free to all staff at risk of occupational exposure to blood or other potentially infectious materials (OPIM)

- At-risk staff should be notified by the district
- Series of three injections over seven months
- If declining vaccine, staff must sign declination statement
Hepatitis C Virus (HCV)

- Long-term effects include chronic liver disease and death
- No treatment or vaccine is available
- Virus does not survive well out of the body
HCV Transmission

- Injecting drug use
- Hemodialysis (long term)
- Blood transfusion or organ transplant before 1992
- Mother to baby (delivery and breast feeding)
- Needle sticks
- Sexual exposure (rarely)
HCV Symptoms

Symptoms are similar to HBV

- Pain on right side of abdomen
- Jaundice
- Fatigue
- Appetite loss
- Nausea
- Dark-colored urine
- Pale stools
Human Immunodeficiency Virus (HIV)

- Attacks immune system and causes AIDS
- AIDS is the second-leading cause of death among 25-44 year olds
- No cure, no vaccine available
HIV Transmission

- unprotected sex or sharing needles (most common)
- Mother to baby during pregnancy or delivery
- Breast feeding
HIV Symptoms

- Flu-like symptoms
- Night sweats or fever
- Weight loss
- Fatigue
- Swollen glands
- Can develop AIDS-related illnesses including neurological problems and cancer

A person with HIV may carry the virus for 10 years or more without developing symptoms.
What is Syphilis

- Bacterial Infection
- Can be treated with antibiotics
- Fragile, surviving only briefly on surface
- Transmitted sexually
- 4 different stages
Stages of Syphilis

- **Primary**
  - Chancre sore
  - Contagious
- **Secondary**
  - Body rash
  - Not contagious if treated
- **Latent**
  - No symptoms
  - Not contagious
- **Tertiary**
  - Effect heart, eyes, brain, nervous system, bones, MR/DD…
  - Damage is permanent
Transmission of BBP

Transmitted when there’s **direct contact** with blood or OPIM of an infected person

1. Blood/OPIM entering open cuts, wounds or skin abrasions

2. Blood/OPIM splashing into eyes, nose or mouth area (mucous membranes)
Exposure Control Plan

- Identification of at-risk staff
- Identification of at-risk jobs and tasks
- Vaccination program
- Work practice controls
- Use of personal protective equipment
- Post exposure incident procedure

*The plan must be accessible!"
Potential Risk of Exposure

**Jobs:**
1. School nurses
2. Coaches & athletic trainers
3. Custodians
4. Secretaries

**Tasks:**
1. Illness/injury care
2. Caring for sports injuries
3. Cleaning up bloody waste
4. Performing first aid
Work Practice Controls

Methods that reduce chance of exposure

- Universal precautions
- Hand washing
- Engineering control (such as sharps containers)

Personal Protective Equipment (PPE) must be used when risk remains
Universal Precautions

Treat ALL human blood as if it’s infectious

- Assist in prevention of contact with blood and OPIM
- First line of defense against exposure risks to BBP
Standard Precautions

- Apply when possibility of contact with blood or OPIM
- Apply to the following even if blood is not visible:
  - Feces
  - Urine
  - Sweat
  - Nasal secretions
  - Vomit
Hand Washing

Wash hands before
  - Eating

Wash hands after
  - Any contact with blood, body fluids or soiled objects
  - Using the toilet
  - Assisting with personal hygiene

This is the single most important technique for preventing the spread of infectious diseases.
Hand Washing Technique

1. Use soap & water to wash hands when available

2. Always use soap & water if hands are visibly soiled

http://www.co.lacrosse.wi.us/Health/Environmental/docs/HandWsh.htm
Alcohol-based Hand Sanitizers

Procedure:
1. Apply to palm of one hand
2. Rub hands together
3. Rub the product over all surfaces of hands and fingers until hands are dry

*Remember: If hands are visibly soiled, wash with soap & water!*
Personal Protective Equipment (PPE)

Specialized clothing or equipment that provides protection against infectious material

- Gloves
- Gowns
- Eye protection
- Resuscitation devices
PPE in Schools

- Employer ensures all employees use appropriate PPE
- Provided at no cost to staff
- Must be accessible
- Type of PPE is determined by task
PPE Guidelines: Gloves

- Wear during possible exposure with potentially infectious materials
- Check gloves before use
- Remove contaminated gloves before leaving work area
- Wash hands after removing gloves
- Never reuse disposable gloves
- Types include vinyl, latex, neoprene or utility gloves
Glove Removal Demonstration

Step 1

Step 2

Step 3

Step 4

Step 5
Disposing of Sharps

- Discard all contaminated sharps in designated container
- Containers found where sharps are used
- Disposal regulated by Ohio EPA
Signs and Labels

- Biohazard Sign: warns that container holds blood or OPIM

- Staff responsible for disposal will be informed of district policy

- Waste such as bloody tissues can be disposed of in plastic-lined trash cans
  - Do not need biohazard label
Clean Up and Decontamination

Some commercial solutions will effectively disinfect surfaces and equipment

- Look for “tuberculocidal agent that kills hepatitis B virus”
- Store cleaners according to label instructions

Household chlorine bleach

- Solution must be made fresh every 24 hours
- Use a 10% bleach solution
Cleaning Blood Spills

- All surfaces and equipment must be decontaminated with appropriate cleaning solution
- Take your time and be careful
- Avoid splashing contaminated fluids
- Wear appropriate PPE
Blood Spill Cleaning Process

- Apply gloves
- Absorb spill
- Apply 10% bleach solution or approved disinfectant
- Let solution sit for appropriate time
  - Bleach solution = 15 minutes
  - Follow label on other products
Exposure Incident

- A specific incident that results in blood or OPIM entering the skin
- Enters through non-intact skin or mucous membranes
  - Eyes
  - Nose
  - Mouth
  - Genital/anal tissue
Exposure Incident Procedure

1. Immediately
   - Wash exposed area with soap & water
   - Flush splashes to nose, mouth or skin with water
   - Irrigate eyes with water or saline

2. Report incident according to your district plan

3. District will provide for additional medical evaluation and treatment, if needed
BBP Training Requirements

Must be completed:

- Annually
- Any time your job duties change and put you at higher risk of exposure

If received training within past year, only updates are required
Questions
References

- OSHA BBP Safety & Health Topics

- OSHA BBP Training Regulations
  http://www.osha-slc.gov/OshStd_data/1910_1030.html

- Ohio Public Employment Risk Reduction Program
  http://www.colostate.edu/Orgs/safefood/NEWSLTR/v8n3s06.html

- US Centers for Disease Control and Prevention
  http://www.cdc.gov

Resources

- School District Exposure Plan