



Vancouver Island West School District 84
OCCUPATIONAL HEALTH & SAFETY PROGRAM

SECTION B

BIOHAZARDOUS CONTROL PROGRAM

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SECTION B

BIOHAZARDOUS CONTROL PROGRAM

INTRODUCTION

All employees of Vancouver Island West School District 84 can be exposed to diseases while at work. This program shall provide information and work procedures that will minimize the risk of exposure for employees who may come in contact with bloodborne pathogens that may be present in blood and/or body fluid.

Bloodborne pathogens refer to organisms that are present in human blood or human blood components (e.g. plasma, platelets, exuded substances from wounds) that are capable of causing diseases for humans. Some examples of diseases caused by bloodborne pathogens include HIV, Hepatitis B and C, malaria and syphilis.

Germs are spread via droplets or are air-borne:

- **Sneezing, coughing or spitting** - i.e. colds, flu, chicken pox;
- **Direct contact** - i.e. mononucleosis;
- **Directly touching infected area** – i.e. herpes, scabies;
- **Fecal-oral** – spread from feces to mouth (ingestion, poor hand washing and contaminated water supply – Hepatitis A, Salmonella, E.Coli);
- **Blood and body fluids** – spread through direct body fluid contact with infected body fluid – HIV, Hepatitis B and C, sexually transmitted diseases;

Blood and body fluids that may spread HIV or Hepatitis B or C: blood, semen, vaginal secretions, breast milk, saliva (Hep B only), any body fluid with visible blood, and other fluids such as amniotic, pleural, etc.

Body fluids that do not spread HIV and Hepatitis B or C, unless they are visibly contaminated with blood: tears, vomit, sweat, urine, feces, sputum, nasal secretions.

**ALL EMPLOYEES OF VANCOUVER ISLAND WEST SCHOOL DISTRICT 84
ARE EXPECTED TO FOLLOW THE UNIVERSAL PRECAUTIONS
AS DESCRIBED IN THIS PROGRAM.**

**Treat the blood and body fluids of every person as if the blood and body fluids
are infected with a transmittable disease:**

- ⇒ Use gloves, mask and/or disposable coveralls when you are at risk of exposure to another person's body fluids;
- ⇒ Wash your hands
- ⇒ Pick up sharps and dispose of them as explained in this program
- ⇒ Handle garbage safely; and,
- ⇒ Follow the correct procedure for clean-ups!

WHO MIGHT BE AT RISK?

In Vancouver Island West School District 84, the following jobs might be exposed to biohazardous materials (blood and body fluids):

- Administrative Assistant (School)
- Bus Driver
- Carpenter
- Computer Technician
- Custodian
- Electrician
- First Nations Education Assistant
- Library Assistant
- Noon Hour Supervisor
- Operations Supervisor
- Principal
- Special Needs Teacher Assistant
- Speech and Language Education Assistant
- StrongtStart Facilitator
- Teacher
- Vice-Principal
- Youth and Child Care Worker
- All other employees!

Work procedures have been developed to minimize or eliminate the risks of exposure, and are part of the Biohazardous Control Program in the District. If other hazards are identified, they need to be assessed to determine the risk of exposure and then, if necessary, procedures must be developed to minimize those risks.

Complete the Risk Assessment Worksheet which will provide the risk score for each identified hazard. This will help in setting priorities for controlling the risk associated with each of the hazards.

IDENTIFYING THE RISK

Date: _____

Name of Person completing this form: _____

Job Title: _____

List all the tasks this job title does that have a risk of contact with biohazardous materials.	Note the hazards associated with each task (blood, body fluids) and the most likely route(s) of exposure (ingestion of contaminated foods, skin puncture by a needle, eye contact or mucous membrane contact, etc.)

Completing a risk assessment identifies all tasks and procedures in which there is a potential for occupational exposure to a bloodborne pathogen, or to other biohazardous materials.

RISK ASSESSMENT

Risk Assessment Worksheet

NAME AND JOB TITLE OF WORKER AT RISK: _____

I Task	II Control Procedure	III Likelihood of a worker being exposed		IV Frequency a worker is exposed		V Consequence of exposure		III x IV x V Risk Score	
		With	W/out	With	W/out	With	W/out	With	W/out

Does the implemented control procedure eliminate or minimize the risk?

YES _____ NO _____

Date Form Completed: _____

The risk scores are used to determine the priority for implementing control procedures.

Are other control procedures more effective?

YES _____ NO _____

SCORING THE RISK

QUANTIFYING the RISK

Table 1 - Likelihood of Exposure

What is the likelihood of exposure?	Assign
Most certainly	5
Highly likely.	4
Quite possibly, would not be unusual.	3
An unusual sequence or coincidence of events could result in exposure	2
A highly unusual sequence of events makes it remotely possible.	1
Highly unlikely.	0.5
Practically impossible	0.1

Table 2 – Frequency of Exposure

The hazardous event occurs:	Rating
Continuously (or many times daily)	5
Frequently (approximately once daily)	3
Usually (from once per week to once per month)	2
Occasionally (from once per month to once per year)	1
Rarely (it has been known to happen)	1

Table 3 – Consequence of Exposure

The task(s) performed could result in disease from exposure	Value
Most certainly.	5
Highly likely.	4
Quite possibly, would not be unusual.	3
An unusual sequence or coincidence of events could result in an accident.	2
A highly unusual sequence of events makes it remotely possible.	1
Highly unlikely.	0.5
Practically impossible.	0.1

UNIVERSAL PRECAUTIONS

WHAT ARE UNIVERSAL PRECAUTIONS?

“Universal precautions” – treat the blood and body fluids of every person as if the blood and body fluids are infected with a transmissible disease.

THE UNIVERSAL PRECAUTIONS for Vancouver Island West School District 84 are as follows:

Wear Personal Protective equipment (ie. GLOVES) whenever there is a risk of exposure to another person’s body fluids, wash hands, pick up sharps as shown above, handle garbage safely, and follow the correct procedure for clean-up of spills of blood and certain body fluids, clean and disinfect contaminated areas.

NOTE: Blood and body fluid contact with INTACT SKIN IS NOT CONSIDERED TO BE A RISK.

EMERGENCY DECONTAMINATION PROCEDURES (HYGIENE FACILITIES)

WHEN should you wash your hands?

- Wash your hands when you tear a glove or you think that the glove may have leaked. Remove the gloves and wash your hands immediately.
- Wash your hands after removing gloves at the end of the task, even if the gloves appear to be intact.
- Wash your hands immediately after accidental contact of unprotected but **INTACT SKIN** with blood or certain body fluids. Be sure to wash well, but avoid the use of abrasive cleaners that might break the skin or cause irritation.
- If you have accidental contact with **NON-INTACT SKIN**, follow the procedure shown below. **Ensure you have washed your hands** before eating, drinking, smoking, biting your nails, handling contact lenses, and applying personal care products (such as lip balm or makeup).
- Wash your hands before leaving a work area.
- If there is no water available, use a waterless hand cleanser that contains a disinfectant. Be sure to follow the instruction provided by the manufacturer. THEN, wash your hands thoroughly with soap and water as soon as possible.
- See *Handwashing Procedures poster at end of document.*

Contact with non-intact skin or mucous membranes

- Flush the affected area with large amounts of water.
- Seek medical attention immediately.

IF THE FOLLOWING HAPPENS:

- Skin is punctured with a contaminated sharp; or,
- A mucous membrane (the eyes, nose, or mouth) is splashed with blood and certain body fluids; or,
- Non-intact skin is splashed with blood and certain body fluids;

Get the advice of a physician as soon as possible and explain the cause of the puncture to the doctor (bring the sharp, if possible).

BUT FIRST:

Get first aid immediately:

IF SKIN IS PUNCTURED:

- Let the wound bleed freely. Promote bleeding by putting the affected area low to the ground. Wash the affected area thoroughly with mild soap and water. Seek medical attention immediately.

IF MUCOUS MEMBRANE is SPLASHED with blood/body fluids OR NON-INTACT skin is splashed with blood/body fluids:

- Flush with lots of clean water at a sink or eyewash station.

Ensure the incident is reported after first aid and the visit to the physician.

See "Report of Contact with Biohazardous Materials" next page.

Was the incident reported to Supervisor? _____

Did the worker attend first aid? _____

Did the worker attend medical aid? _____

Do you know of any reason why anyone involved in this incident would object to being involved in an investigation into this exposure?

Reported by: _____

SUPERVISOR'S REPORT:

(Attach Incident Investigation Report form.)

Signature of Supervisor

Date

WORK PROCEDURES FOR CUSTODIANS AND OUTSIDE WORKERS

When work involves picking up refuse, weeding and flowerbed preparation, or using a grass trimmer, there is always a hazard from discarded needles and syringes.

Prior to disturbing an area that has refuse or the potential for hidden needles, carefully turn the material over with a stick and look for any discarded needles. Always use heavy leather gloves or a tool when picking up refuse

If using a grass trimmer, ensure co-workers are a safe distance away. If you see someone approaching, stop work.

Always use universal precautions to pick up discarded needles.

When collecting litterbags, do not push more litter into the bag and do not remove litter from the bag. Do not try to compress bags of litter.

Follow the established work procedures (copy attached):

- Work Procedures for Picking Up Sharps and Other Items
- Work Procedures for Handling Garbage
- Work Procedures for Contaminated Laundry
- Work Procedures for Spill Cleanup

Be sure to make a report of any contact with biohazardous materials.

WORK PROCEDURES FOR PICKING UP SHARPS AND OTHER ITEMS

- taken from WSCB booklet, page 26 HIV, AIDS, Hepatitis B and C – Preventing Exposure at Work

Needles and other items (for example, condoms) that may carry the HIV and the hepatitis B and C viruses are often thrown away in streets, public washrooms, regular garbage, parks, alleys, vacant lots, and on beaches. They have also been found under mattresses and pillows, in garbage cans, and behind toilets.

Don't pick up sharps and other items unless you have the proper equipment and PPE, and you have been instructed how to do so safely. Don't pick up anything with the intention of discarding it later. For example, don't put a used needle in your pocket that isn't in a proper pocket container. You could injure yourself before you discard it.

**Do not place needles in regular garbage under any circumstances.
You may create a hazard for others.**

Follow these steps to pick up improperly discarded sharps and other items that could carry HIV and the hepatitis B and C viruses:

1. All worksites have been supplied with waterproof gloves and sharps collector containers (both large and one-needle containers). Have disposable waterproof gloves (such as natural rubber latex, neoprene, nitrile, and vinyl) and the proper sharps container ready.
2. Put the gloves on. Place the sharps container next to the needle or other item. Do not hold the container in your hand, or you might accidentally puncture yourself.
3. If you are comfortable using tongs or pliers, use them to pick up the needle (or other item) and place it into the sharps container. This is the preferred method. If you are not comfortable using the tongs or pliers, pick up the needle by its shaft - with your gloved hand. In both cases, place the needle into the sharps container, pointed end first, away from you. Do not insert your fingers into the opening of the container and keep your free hand out of the way.
4. Remove and discard the gloves using proper procedures. Wash your hands with soap and water.
5. Don't fill the large sharps container to the top. When it is about three-quarters full replace it with a new one and properly dispose of the old one.
6. Dispose of the container as directed. Inform the office if the supply of sharps containers and/or gloves requires replenishing.

Do not reach for objects you cannot see.

Look before reaching. Don't use your hands to feel or reach into any area or container if you can't see the contents or if you don't know what's there. Use a long-handled stick or other object - not your hands - to explore hidden spots. A flashlight could be used to move objects and to shed light on hard-to-see objects.

Empty the contents of purses, packs, and other containers by turning them upside down over a table or other flat surface.

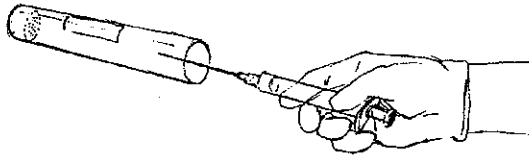
Picking Up Condoms

If you find a used condom, do not use your bare hands to pick it up. Use waterproof gloves, tongs, or something else to pick it up and throw it in the garbage.

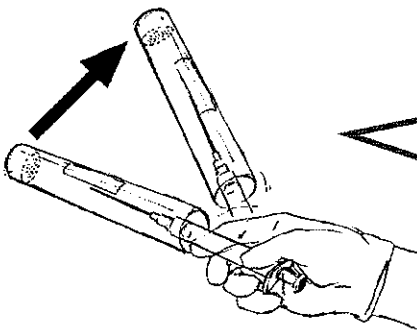
Reference: WCB HIV/AIDS, and Hepatitis B and C Preventing Exposure at Work

How to Pick Up a Needle Using a One-needle Container

One-needle containers - that fit easily into pockets - have been designed for outdoor workers who may not be close to sharps disposal equipment. The following method is for a one-needle container. You must use only **one hand** with this technique to avoid jabbing yourself:



Use one hand only, ease the sharp end of the needle into the container
Wear disposable, waterproof gloves.
Use a proper puncture-resistant and leak proof, one-needle container.
Hold the blunt end of the syringe in one hand. Then ease the sharp end of the needle into the opening of the container. Do not use your other hand to guide it.



Lift and tip the needle and container up so that the container falls down over the needle and covers the sharp end of the needle.

- Once the sharp end of the needle is enclosed in the container, you can safely grasp the container and syringe with your other hand to place the cap on the container. Make sure the cap is on securely. When you turn the container over (cap up), the needle will embed itself in the styrofoam plug. Discard in a suitable disposal container at your first opportunity.
- Remove and discard the gloves. Wash your hands with soap and water at your first opportunity.

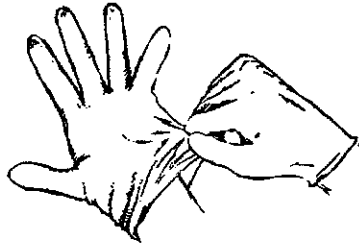


MAKE SURE CAP IS ON SECURELY.

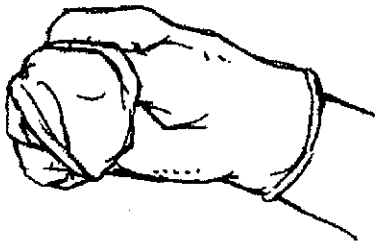
REMOVING DISPOSABLE GLOVES

Remove disposable gloves as soon as possible if they become damaged or contaminated, and remove them after you have completed the task that required gloves. Gloves should also be removed before leaving the work area. **Do not wash and reuse your gloves.** Use new gloves for each new task.

Follow these steps to make sure your hands do not contact any blood or body fluids left on used gloves:

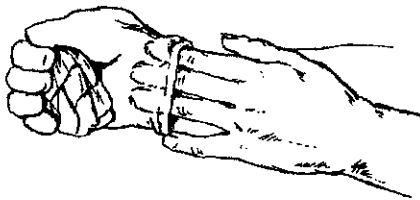


With both hands gloved, grasp the **outside** of one glove at the top of the wrist.

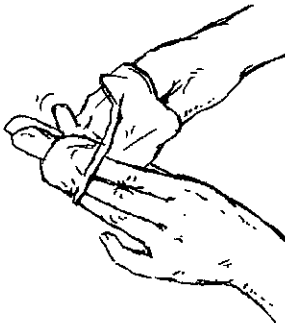


Peel off this glove from wrist to fingertips while turning it inside out, as you pull the glove off your hand and away from you.

Hold the glove you just removed in your gloved hand.



With the ungloved hand peel off the second glove by inserting your fingers on the **inside** of the glove at the top of your wrist.



Turn the glove inside out while tilting it away from you, leaving the first glove inside the second.

- Dispose of the entire bundle promptly in a waterproof garbage bag.
- Wash your hands thoroughly with soap and water as soon as possible after removing gloves and before touching non-contaminated objects and surfaces.

WORK PROCEDURES FOR HANDLING GARBAGE

Follow these steps to prevent contact with sharps and other items improperly discarded in garbage:

- Handle garbage as little as possible.
- Use waterproof garbage bags.
- Be alert. If possible, look for sharps sticking out of the bags. Listen for broken glass when you move the bag.
- Don't compress garbage or reach into garbage containers with your bare hands.
- Don't use your bare hands to pick up garbage that has spilled out of an overflowing container. Wear puncture-resistant and liquid-resistant gloves (the type worn by fire fighters), or use other tools designed for picking up garbage.
- Don't let garbage bags get too full, if possible. Leave enough free space at the top of the bag, so that when you grab it, you grab the top of the bag only - not any of the contents. You may have to change bags more often to prevent them from getting too full. This will also make them lighter -and thus easier to hold away from your body.
- Hold garbage bags by the top of the bag, away from your body. Don't hold garbage bags against your body.
- Don't place one hand under the bag to support it.
- If your skin is punctured, let the wound bleed freely. Wash with mild soap and water and report to your First Aid Attendant immediately.
- If your skin is punctured with a contaminated sharp, or your eyes, nose or mouth is splashed with blood and certain body fluids, report it to First Aid and get the advice of a physician as soon as possible. Explain the cause and provide the contaminated sharp, if possible.

Reference: WSCB HIV/AIDS, and Hepatitis B and C Preventing Exposure at Work

WORK PROCEDURES FOR CONTAMINATED LAUNDRY

Isolating the laundry and minimizing manual handling prevents worker exposure to laundry contaminated with blood and/or other biohazardous material. The laundry is:

- Effectively bagged or containerized at the location of use
- Not sorted or rinsed in the location of use
- Handled as little as possible

When contaminated laundry is wet and there is a reasonable likelihood of soak-through or leakage, the laundry is placed and transported in other leak-resistant bags or containers.

When laundry which is contaminated with a known or suspected bloodborne pathogen is sent for processing to a laundry or dry cleaning facility, **the direct supervisor** must provide the following written information to the facility:

- Identity and nature of materials which could pose a hazard
- General precautionary measures to be followed

Bags and other containers of laundry contaminated with a known or suspected bloodborne pathogen must be labelled unless universal precautions are taken and distinctive-coloured bagging is used.

WORK PROCEDURES FOR SPILL CLEANUP

Once any exposure incident has been attended to, clean up spills as soon as possible.

Don't clean up blood and certain body fluids unless you have been trained to do so and have the equipment and PPE needed to do so safely.

Cleanup kits are provided and available. These kits are can be obtained by contacting the Supervisor.

Procedures for cleaning up spilled blood and certain body fluids should include the following steps:

1. Restrict access to the area.
2. Make sure plastic bags are available for removal of contaminated items from the spill site (follow bagging and labelling procedures). Have dilute bleach or germicide ready.
3. Dispose of any sharps first according the procedure outlined above under the title in this "Picking up Sharps".
4. Wear disposable, waterproof gloves (such as natural rubber latex, neoprene, nitrile, and vinyl). If necessary, wear other PPE, such as a face shield and a gown, to act as a barrier against contact with blood and certain body fluids and the dilute household bleach. If using a germicide, check the material safety data sheet (MSDS) to find out what type of glove to use.
5. Cover your shoes or boots with disposable, waterproof covers if they could become contaminated during clean up.
6. Wipe up visible material first with disposable towels (or in another way that prevents direct contact with blood and certain body fluids). Dispose of the material and paper towels in waterproof garbage bags.
7. After you have carefully removed all the obvious material, it may be necessary to change gloves. Then decontaminate the area by carefully pouring over the spill site a germicide approved for use as a hospital disinfectant, or a solution of household bleach and water. Leave the solution on for 10 minutes, and then wipe it up with disposable towels. Discard the towels in the waterproof garbage bags.
8. Clean and decontaminate all soiled, reusable equipment and supplies. Properly discard any disposable items.
9. Wear the gloves to remove other protective equipment such as face shields and footwear covers. Dispose of or clean PPE (for example, face shields, aprons, boot covers) according to the manufacturer's directions
10. Properly remove and dispose of your gloves. Wash your hands.

What to use to clean and disinfect contaminated areas:

- Put on the proper PPE.
- Use disposable towels to clean up all visible material. Discard the towels in a waterproof garbage bag.
- Disinfect the area with a bleach solution.

BLEACH SOLUTION

A solution of 1 part of common household bleach to 100 parts of water (1:100 ratio) will kill HIV and the hepatitis B and C viruses except with spills involving a large amount of blood. With spills involving large amounts of blood, apply a solution of 1 part common household bleach to 10 parts of water (1:10 ratio). In both cases, leave the solution on for about 10 minutes. You can also use a germicide that is approved for use as a health care disinfectant

Caution: Do not mix cleaning chemicals such as bleach and ammonia, and ensure that you follow MSDS directions concerning the use of the cleaning agent.

Reference: WSCB HIV/AIDS, and Hepatitis B and C Preventing Exposure at Work

VACCINATION AGAINST HEPATITIS B

Vaccination against Hepatitis B virus is available to employees at no cost, upon request, for all employees who have, or who may have, occupational exposure to Hepatitis B.

Employees must submit their vaccination receipt to Pacific Blue Cross for reimbursement.

The receipt must include the Drug Identity Number (DIN#).

Any amount not covered by an employee's extended health coverage can be submitted to the District Office for reimbursement.

Travel expenses to the closest health facility will be reimbursed, upon submission of an expense claim form and receipts, only if the vaccination is not available at the local public health office.

BIOHAZARDS – WCB Regulations

Definitions

6.33 - In Sections 6.33 to 6.41

"Biohazardous material" means a pathogenic organism, including a bloodborne pathogen, which due to its known or reasonably believed ability to cause disease in humans, would be classified as Risk Group II, III or IV as defined by the Medical Research Council of Canada, or any material contaminated with such an organism;

"Occupational exposure" means reasonably anticipated harmful contact with blood or other potentially biohazardous material that may result from the performance of a worker's duties.

6.34 Exposure Control Plan

The employer must develop and implement an exposure control plan meeting the requirements of Section 5.54, if a worker has or may have occupational exposure to a bloodborne pathogen, or to other biohazardous material as specified by the board.

6.35 Risk identification

The employer must maintain a list of all job classifications and must identify all tasks and procedures in which there is a potential for occupational exposure to a bloodborne pathogen, or to other biohazardous material specified by the board.

6.36 Control Procedures

- (1) Engineering and work practice controls must be established to minimize or eliminate the potential for exposure to biohazardous material.
- (2) Personal protective equipment must be worn to shield workers from biohazardous material.
- (3) Housekeeping practices must be designed to keep the workplace clean and free from spills of biohazardous material.
- (4) Work procedures must ensure that laundry contaminated with biohazardous material is isolated and bagged, and handled as little as possible.
- (5) All regulated waste must be disposed of in accordance with federal, provincial and local regulations.
- (6) For bloodborne pathogens, the employer must implement a system of universal precautions for all tasks and procedures identified as having a potential for occupational exposure under Section 6.35.

6.37 Labels and Identification

- (1) Except as provided in subsections (2) to (4), a container of known or suspected biohazardous material must have a label affixed which discloses the product identifier, the name of the organism known or suspected to be present, information on the safe handling of the material, or a biohazard symbol, and a reference to an MSDS for the material if one has been prepared.
- (2) A label on a diagnostic specimen of human body fluid or tissue that is known or suspected to contain a biohazardous organism is exempt from subsection (1) if
 - (a) the label discloses a sample identifier, and the risk group number of any risk group II, III, or IV organism, as defined by the Medical Research Council of Canada, known or suspected to be present,
 - (b) the specimen is identified as biohazardous by use of a biohazard symbol or equivalent means, and
 - (c) sufficient information is provided to enable immediate contact with the medical professional providing the sample in the event of an emergency.
- (3) If a container of known or suspected biohazardous material is too small to be labelled, the employer is exempt from the requirements of subsections (1) and (2) if an equivalent system of hazard

communication is developed and implemented.

- (4) Laundry or waste material that is contaminated with a known or suspected bloodborne pathogen is exempt from subsections (1) and (2) if:
 - (a) all such material is handled using universal precautions, and
 - (b) an alternate and equally effective system of hazard identification, such as distinctive-coloured bagging, is used.
- (5) Known or suspected biohazardous material that is not in a container must be identified by
 - (a) posting a conspicuous and clearly legible placard that discloses the information required in subsection (1), or
 - (b) an equivalent means of hazard communication.

6.38 Education and Training

The employer must inform workers about the contents of the exposure control plan and provide them with adequate education and training to work safely with and in proximity to potentially biohazardous material.

6.39 Vaccination

Vaccination against hepatitis B virus must be made available at no cost to the worker, upon request, for all workers who have, or who may have, occupational exposure to hepatitis B virus.

6.40 Health Protection

- (1) A worker potentially exposed to Hepatitis B virus or another bloodborne pathogen in an exposure incident must be advised to seek a medical evaluation at the time of the incident.
- (2) The medical evaluation must be based on an assessment of the risks associated with the incident, and subsequent post-exposure health management must be provided as necessary.

6.41 Records

A record must be kept of all workers who are exposed to biohazardous or potentially biohazardous material while on the job, and of worker education and training sessions on biohazardous materials.

5.54 Exposure Control Plan

- (1) An exposure control plan must be implemented when
 - (a) exposure monitoring under section 5.53(3) indicates that a worker is or may be exposed to an air contaminant in excess of 50% of its exposure limit,
 - (b) measurement is not possible at 50% of the applicable exposure limit, or
 - (c) otherwise required by this WCB OHS Regulation.
- (2) The exposure control plan must incorporate the following elements:
 - (a) a statement of purpose and responsibilities
 - (b) risk identification, assessment and control
 - (c) education and training
 - (d) written work procedures, when required
 - (e) hygiene facilities and decontamination procedures, when required
 - (f) health monitoring, when required
 - (g) documentation, when required
- (3) The plan must be reviewed at least annually and updated as necessary by the employer, in consultation with the Joint OHS Committee, if any, or the worker health and safety representative, if any.