

Bloodborne Pathogens Facts for At-Risk Employees

BBP Facts for At-Risk employees

Prepared by:

NYC Public Schools Office of Occupational Safety and Health 65 Court Street, Room 200 Brooklyn, NY 11201 718-935-2319

Revised Date:

09/2023

Table of Contents

What are Bloodborne Pathogens:	3
Employees with Risk	3
	_
BBP Training and Hepatitis B Vaccination	3
Smart Work Practices to Prevent Exposure to BBP	3
Exposure Incidents	4
Exposure Does Not Necessarily Mean Infection	4
Exposure Risks	5
Handling Exposure Incidents	5
- ·	
The Bloodborne Pathogens Standard - 29 CFR 1910.1030	5
Summary of Bloodborne Pathogens Diseases	6
3411111aly 01 b100000111e ratifugetis viseases	0

What are Bloodborne Pathogens:

Bloodborne Pathogens (BBP) are pathogenic micro-organisms present in human blood and can cause bloodborne diseases such as HIV/AIDS, Hepatitis B, Hepatitis C, Syphilis and Malaria. Bloodborne pathogens are spread when certain body fluids from an infected individual get into the bloodstream of an uninfected person. These pathogens are spread specifically through:

- Blood;
- Any body fluid which is visibly contaminated with blood. These include tears, feces, urine, nasal secretions, sputum, saliva, sweat and vomit; and
- Other Potentially Infectious Materials (OPIM) These include: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures.

Employees with Risk

Your principal/Site Employee Safety Administrator (SESA) has identified you as an employee whose job duties place you at occupational risk of exposure to blood and other potentially infectious materials. All at-risk employees are required to receive specialized training on bloodborne pathogens annually and be offered the opportunity to receive the hepatitis B vaccine. Work related exposure may occur through:

- · Providing medical care and direct student care;
- Providing First Aid and Cardio-pulmonary resuscitation;
- Providing direct bathroom care of students;
- Cleaning up blood and decontaminating surfaces such as adaptive equipment and changing tables;
- Handling contaminated sharp objects;
- · Receiving needle sticks with contaminated needles or syringes;
- Sustaining physical injuries such as student bites;
- Having uncovered open wounds. These include: cuts, nicks, burns, abrasions, and acne sores. Openings in the skin are potential viral entry points.

The Site Employee Safety Administrator (SESA) is your school's point-of-contact for the bloodborne pathogens program.

BBP Training and Hepatitis B Vaccination

You will receive an email with a link to view the online seminar for specialized training on bloodborne pathogens. The training is available 24/7 and can be viewed during your normal work hours. 24 hours after you complete this training, you will receive an offer to Accept or Decline the Hepatitis B vaccine. You **must respond**. The 3-dose vaccine is free and is provided during normal work hours at either a NYC DOH Health Clinic or your Healthcare Provider with all expenditures reimbursed. Check your NYCDOE (New York City Department of Education) email *frequently* for these notices.

Smart Work Practices to Prevent Exposure to BBP

Exposure to bloodborne pathogens can be prevented by employing a combination of preventive measures. These include understanding how these diseases are transmitted, using appropriate barriers such as gloves when contact with blood and body fluids is expected, handling and disposing of used needles and medical waste appropriately and

by practicing hand hygiene. The following precautions will go a long way to avoiding exposure to bloodborne pathogen diseases.

- 1. **Practice Universal Standard Precautions** All DOE employees must practice Universal Standard Precautions. This assumes that all human blood and certain body fluids are infectious for bloodborne pathogens.
- Wear gloves. Do not take chances always wear gloves when you are performing direct student care activities
 that involve contact with body fluids. Avoid touch contamination. Employees must take care to avoid touching
 other surfaces while wearing contaminated gloves e.g., adjusting your eyeglasses, touching desks, doorknobs
 or other students.
- 3. Wash hands. Hand washing is the single most effective method for controlling the spread of infectious diseases.
- 4. Never smash down on overflowing trash cans with your hands or feet.
- 5. **Disinfect Follow** procedures for cleaning up blood and infectious body fluids. Use diluted bleach or EPA approved disinfectants.
- 6. Clean changing tables and adaptive equipment before and after use.
- 7. Dispose of medical waste properly.
- 8. Cover all cuts, nicks, burns, acne sores, abrasions, and dermatitis.
- 9. Get the hepatitis B vaccine. It is extremely effective for preventing hepatitis B disease
- 10. Report all needle sticks and exposures to blood and other potentially infectious materials.
- 11. Get the required training on bloodborne pathogens.
- 12. Seek medical attention within 24—48 hours if you are exposed to blood or OPIM.

Exposure Incidents

Despite your best efforts at prevention, accidental exposures to bloodborne pathogens do occur. This means that another person's blood or other potentially infectious materials got into your bloodstream. Should you experience such an event, a post-exposure plan is in place. You have the right to the following:

- 1. Receive confidential post-exposure medical evaluation and follow up.
- 2. Free transportation to/from the medical facility.
- 3. Seek medical attention within scheduled work hours.
- 4. Request the testing of the source individual.
- 5. Obtain a copy of the health care professional's written opinion within 15 days of the evaluation's completion.

Exposure Does Not Necessarily Mean Infection

The risk of developing a bloodborne pathogen disease may vary with factors such as:

- The pathogen type;
- The type of exposure;
- The amount of blood or other body fluids involved in the exposure, and
- The amount of virus in the source's blood and other fluid at the time of exposure.

Exposure Risks

- 1. Needlesticks from used needles;
- 2. Another's blood in contact with eyes, nose, mouth or broken skin;
- 3. Assaults—bites, cuts, or knife wounds involving another's blood
- 4. Splashes or punctures especially when drawing blood.

Handling Exposure Incidents

Post exposure management can prevent infection following bloodborne pathogen exposures. Immediately after exposure employees must:

- Wash the affected area with soap and water.
- Flush splashes to the nose, mouth, or skin with water.
- Irrigate eyes with clean water or use bottled eye wash.
- Stop any bleeding by applying pressure.
- Bandage the injury.
- Report the incident to your supervisor immediately.
- Fill out the Bloodborne Pathogens Exposure Incident form in BBPCT or the Sharps Injury Report form if a contaminated sharp object was involved.
- Seek medical attention within 24 48 hours of exposure.

Your SESA will provide you with the appropriate documentation to log the incident and release you from work to seek medical attention. Related medical expenses are reimbursable. For detailed information on handling exposure incidents, ask your SESA for a copy of the *Exposure Incident Package*.

Not sure who your SESA is? Check out the Site-Specific Exposure Control Plan posted on your school's Health and Safety Bulletin Board.

The Bloodborne Pathogens Standard - 29 CFR 1910.1030

Purpose: To prevent the transmission of bloodborne pathogen diseases within potentially exposed workplace occupations.

Law in effect: This law has been in effect since 1992.

Who is covered: All NYCDOE employees whose job tasks bring them into routine contact with blood and other potentially infectious materials.

What is required: The NYCDOE is required to develop a written Exposure Control Plan; identify employees who are at risk; ensure that universal precautions are practiced; provide protective equipment; provide prompt evaluation and treatment to workers who have had a needle stick or other exposure to blood; offer Hepatitis B vaccinations to at-risk workers; train at-risk employees each year on bloodborne pathogen diseases, and adequately dispose of medical waste.

Who is responsible: Principals must ensure that their schools comply with this regulation. Site Employee Safety Administrators (SESAs) have been appointed by the principal to coordinate compliance activities.

Who enforces the law: The New York State Department of Labor, Public Employee Safety and Health Bureau (PESH). Fines may be levied for sites found not in compliance.

Summary of Bloodborne Pathogens Diseases

DISEASE	CAUSATIVE AGENT	INCUBATION PERIOD	SIGNS & SYMPTOMS	VACCINE AVAILABILITY
HIV/AIDS	HIV virus	2- 4 weeks	 Compromises the immune system Swollen lymph nodes, recurrent fevers, night sweats, fatigue, diarrhea, weightloss, infections in the mouth Opportunistic infections—TB, HBV, pneumonia, cancers 	NO
Hepatitis B	Hepatitis B virus (HBV)	2 – 6 months	 Causes inflammation of the liver About 30% of persons show no signs or symptoms. Jaundice, fatigue, abdominal pain, loss of appetite, nausea, vomiting, joint pain, dark colored urine 	YES
Hepatitis C	Hepatitis C virus (HCV)	6 - 7 weeks	 Causes inflammation of the liver Can be asymptomatic for many years Jaundice, fatigue, abdominal pain, loss of appetite, nausea, vomiting, joint pain, dark colored urine 	NO