MANAGEMENT SUPPORT SERVICES

Infection Control Program

All new staff members, including substitutes, hired after September 1, 1993, are required to complete an <u>Immunization History</u> form to be placed on file at the District office. District volunteers are strongly encouraged to complete this form as well. One dose of measles, mumps, rubella vaccine administered after the age of one year, is required for all school staff born after January 1, 1957. In the event of an outbreak of measles, mumps, or rubella in school, the local health officer has the authority to exclude all susceptible persons, including school staff. Susceptible, as related to measles, means any person born after January 1, 1957, who hasn't received the measles vaccine or hasn't provided proof of immunity.

A staff member may claim an exemption from immunization for health, religious, or philosophical reasons. However, such a staff member who files an exemption may be excluded from school/work if an outbreak occurs at his/her school or worksite. Staff employees who qualify for sick leave or other leaves provided in the collective bargaining agreement are eligible to use such leaves; however, exempt employees are not automatically eligible for sick leave due to their exemption if an outbreak occurs.

If a staff member needs an immunization, he/she should contact a personal physician or clinic. Immunizations may also be available at a nominal cost from the county health district.

Infection Control Program for Bloodborne Pathogens (HIV & Hepatitis B):

The District's infection control program shall be consistent with WAC 296-62-08001, Bloodborne Pathogens and the Guidelines for Implementation of Hepatitis B and HIV School Employee Training published by the Superintendent of Public Instruction.

The District shall provide training to all employees regarding HIV/AIDS and Hepatitis B. The training shall be provided by January 1993 and within 10 days of initial employment. The training shall include:

- History and epidemiology of HIV/AIDS and Hepatitis B;
- Methods of transmission of HIV/AIDS and Hepatitis B;
- Methods of prevention of infection including universal precautions for handling body fluids;
- State and federal laws barring discrimination against persons with HIV/AIDS;
- State and federal laws regulating the confidentiality of a person's HIV antibody status;
- The effect of contracting HIV/AIDS on the person, his/her family, community, and relationship.

Significant new discoveries or changes in accepted knowledge regarding HIV/AIDS and Hepatitis B shall be provided to employees within one calendar year of notification from the Superintendent of Public Instruction, unless the Department of Health notifies the District that prompt dissemination of the information is required.

Staff at Risk of Exposure

All job duties shall be evaluated for the risk of exposure to blood or potentially infectious material. The District shall maintain a list of job classifications with reasonably anticipated exposure to blood or other potentially infectious material. Examples of employees with reasonably anticipated risk of exposure include custodians, athletic trainers, some coaches, some teachers, some bus drivers, some office personnel, and other staff who are judged to have reasonably anticipated on-the-job exposure to blood or other potentially infectious materials. All employees with reasonably anticipated on-the-job exposure to blood or other potentially infectious material shall be identified. Potentially infectious human body fluids are blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult to differentiate between body fluids.

Employees with reasonably anticipated exposure to blood and other potentially infectious material shall participate in District-provided training within ten days of employment and annually. The training shall be provided by a qualified person and shall include opportunities for questions. The training shall include:

- A general description of bloodborne diseases
- An explanation of modes of transmission of bloodborne pathogens
- An explanation of the use and limitations of methods of control
- Information about personal protective equipment
- Information on the Hepatitis B vaccine
- A description of procedures to follow if an exposure incident occurs
- An explanation of sign, labels, tags, and color coding used to designate biohazards
- Where to obtain a copy of WAC 296-62-08001, Bloodborne Pathogens
- An explanation of the District's infection control plan and how to obtain a copy
- How to identify tasks and activities that may involve exposure to blood or other potentially infectious material
- Appropriate actions to take in emergencies involving blood or other potentially infectious material
- "Universal Precautions" will be stressed as the primary prevention technique

The District shall also keep records of training sessions including the dates, a summary of the material, names and qualifications of the trainers, and names of employees attending the training. These records shall be kept for three years.

All employees identified as having reasonably anticipated exposure to blood or other potentially infectious material shall be offered the Hepatitis B vaccine at the District's expense.

Post Exposure Follow-up

If an employee has a specific exposure to blood or other potentially infectious material, the District will provide a free and confidential medical evaluation and follow-up performed by an appropriately trained and licensed health care professional. Any necessary post-exposure treatment shall be provided.

Records

The Hepatitis B vaccination status and records regarding any occupational exposure, if any, shall be kept in strict confidence during employment, plus thirty years, for any employee with reasonably anticipated exposure to blood or other potentially infectious material. The records of occupational exposures shall include:

- the employee's name and social security number
- the employee's Hepatitis B vaccination status
- examination results, medical testing, and follow-up procedure records
- the healthcare professional's written opinion
- a copy of information provided to the healthcare professional

Treatment of staff with HIV/AIDS or Hepatitis B, or other Sexually Transmitted Diseases

A staff member with HIV/AIDS has a specific right to privacy; he/she is not required to disclose any information pertaining to his/her disease.

Any disclosure made pursuant to a release must be accompanied by the following statement:

"This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by state law. A general authorization for the release of medical or other information is not sufficient for this purpose." Release of information regarding the testing, test result, diagnosis, or treatment of a staff member with HIV/AIDS or Hepatitis B may only be made pursuant to an effective release and only to the degree permitted by the release. To be effective, a release must be signed and dated, must specify to whom the release may be made and the time period for which the release is effective. School personnel may not disclose any information about the condition or identity of a person who has HIV/AIDS or Hepatitis B without this specific release.

No person may be compelled to disclose the identity, test results, diagnosis, treatment, or prognosis of a staff member with HIV/AIDS consistent with RCW 70.24.105. All discussions and records will be treated as confidential.

On the disclosure that a staff member has been identified as having acquired immunodeficiency syndrome (AIDS) or as being infected with HIV or Hepatitis B, the superintendent, principal or supervisor, local health officer, school nurse. and the private physician shall confer as necessary and determine the appropriate placement of the employee. The staff member will be accommodated in a least restrictive manner, free of discrimination, without endangering the other staff or students. He/she may only be excluded from work on the written concurrence of the public health officer and the staff member's own personal physician that remaining on the job would constitute a risk, either to the staff member, or the students, or other staff.

Approved: <u>June 30, 1993</u> Revised: <u>May 23, 2001</u>