

Quileute Tribal School

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INFECTION CONTROL PROGRAM POLICY

Subject: Infection Control Program

Purpose: The purpose of this policy is to implement and document the Quileute Tribal School's (the School) Infection Control Program and comply with State and Federal safety regulations. It may supplement existing policy, including the Employee Manual approved by the Board in February 2014, but any conflicts or clarifications will be resolved by the terms of this policy.

Basic Program

In order to safeguard the school community from the spread of certain vaccine-preventable diseases and in recognition that prevention is a means of combating the spread of disease, the School Board (the Board) strongly urges that susceptible school staff members (including volunteers) provide evidence of immunity against TD (Tetanus-Diphtheria) and MMR (Measles, Mumps and Rubella). Staff members born prior to January 1, 1957 need not provide evidence of immunity to measles since these individuals are considered naturally immune.

To facilitate this prevention program, the Board authorizes the superintendent to make arrangements for staff immunization at a convenient time and place, and at a nominal cost to the staff member. These immunizations would commonly include TD, MMR and the season flu. A "susceptible" staff member may be exempt from the requirements for immunization by filing a written objection to such immunization on the basis of religious or philosophical grounds, when a private physician certifies that the staff member's physical condition contraindicates immunization or when the staff member provides documentation of immunity by blood test.

In the event of an outbreak of a vaccine-preventable disease in school, the superintendent or designated School health officer has the authority to exclude a susceptible staff member. A staff member granted an exemption for religious, philosophical or medical reasons or without an acceptable immunization record on file may be excluded, as he/she is considered to be susceptible. If excluded he/she is not eligible to receive sick leave benefits because of the exclusion itself. To qualify for benefits, he/she must be ill or temporarily physically-disabled.

The superintendent or designee shall evaluate all job duties of School employees to determine which employees have reasonably anticipated on-the-job exposure to blood or other potentially infectious material. The School shall maintain a list of job classifications where employees have reasonably anticipated exposure to blood or other potentially infectious material (See Exhibit A for the initial list). The hepatitis B vaccine shall be provided at the School's expense to all employees identified as having risk of directly contacting blood or other potentially infectious material at work.

In the event that an employee, when acting as an agent of the School, has a specific exposure to blood or other potentially infectious material, the employee will be provided, at School expense, with confidential medical evaluation, follow-up and treatment, if indicated.

The School shall provide annual training to all employees with reasonably anticipated exposure to blood or other potentially infectious material, at a minimum. All employees shall receive School provided training on HIV/AIDS within six months of initial employment.

Records shall be kept in strict confidence regarding the hepatitis B vaccine status of all employees with reasonably anticipated exposure to blood or other potentially infectious material and for each occupational exposure an employee has to blood or other potentially infectious material. The records shall be kept for the duration of the employee's employment, plus thirty years. The School shall also keep records that employees have received appropriate training.

Policy and Procedures

Immunization/Vaccination:

Staff members, including substitutes, student teachers and volunteers, are encouraged to complete an immunization history form to be placed on file at the Accounting office. In the event of an outbreak of a vaccine-preventable disease in school, the local health officer has the authority to exclude all susceptible persons, including school staff. This authority would likely be exercised in the event of one or more cases of measles or rubella within the school. Susceptible, as related to measles, means any staff member born after January 1, 1957.

A staff member may claim an exemption for health, religious or philosophical reasons. However, such a staff member who files an exemption may be excluded if an outbreak occurs at his/her school. A staff member who is excluded is not eligible to receive sick leave benefits unless he/she is ill or physically disabled or is otherwise provided for in a written employment agreement. Employees may provide the School with documentation of HBV immunity or a statement of contraindication to vaccination from the employee's licensed healthcare provider.

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

Vaccinations shall be given according to recommendations of the United States Public Health Service and administered by, or under the supervision of, a licensed healthcare professional. The Hepatitis B vaccination shall be made available after the employee has received the required training and within 10 working days of initial assignment to all employees who have occupational exposure risk. The School may offer flu vaccinations at little or no cost to employees.

Post-Vaccination Testing for Immunity:

Testing for immunity after vaccination is not recommended routinely but is advised for persons for whom a suboptimal response may be anticipated, such as those who have received vaccine in the buttock, persons over 50 years of age, and persons known to have HIV infection. Post-vaccination testing for persons at occupational risk who may have needle stick exposures necessitating post-exposure prophylaxis. When necessary, post-vaccination testing should be done between one and six months after completion of the vaccine series to provide definitive information on response to the vaccine. This decision to test for immunity is made by a licensed healthcare professional and is paid for by the School.

Infection Control Program Details:

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

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. Exhibit A to this policy contains the list of employee positions identified.

All job duties should be evaluated for the risk of exposure to blood or potentially infectious material. The School shall maintain a list of job classifications with reasonably anticipated exposure to blood or other potentially infectious material. This list will be reviewed and/or updated as needed annually at a minimum.

Employees identified as having reasonably anticipated exposure to blood or other potentially infectious material shall be offered the hepatitis B vaccine at the School's expense.

If an employee has a specific exposure to blood or other potentially infectious material, the School 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.

Following a report of an exposure incident, the School will immediately make available to the exposed employee a confidential medical evaluation and follow-up. The follow-up shall be:

- 1. Available at no cost to the employee.
- 2. Available at a reasonable time and place.
- 3. Performed by or under the supervision of a licensed healthcare provider.
- 4. Provided according to the United States Public Health Service (USPHS) recommendations, current at the time of evaluation.

If an employee has direct contact with blood or other potentially infectious materials, as from a needlestick, cut, bite, or eye splash, post-exposure treatment may be necessary. This depends on whether the source of the blood or other body fluid is infected with Hepatitis B, HIV, or Hepatitis C, and whether the employee exposed has previously received Hepatitis B vaccine. Referral to an appropriate licensed healthcare professional must occur as soon as possible after exposure for provision of immediate protection from Hepatitis B/HIV infection. Treatment for other exposure(s) will be initiated by the licensed healthcare provider.

Employees with reasonably anticipated exposure to blood and other potentially infectious material shall participate in School provided training within ten days of employment and annually. The training shall include:

- 1. A general description of blood-borne diseases;
- 2. An explanation of modes of transmission of blood-borne pathogens;
- 3. An explanation on the use and limitations of methods of control;
- 4. Information about personal protective equipment;
- 5. Information on the hepatitis B vaccine;
- 6. A description of procedures to follow if an exposure incident occurs;
- 7. An explanation of signs, labels, tags, and color coding used to designate biohazards;
- 8. Where to obtain a copy of WAC 296-62/823, blood-borne pathogens;
- 9. An explanation of the School's infection control plan and how to obtain a copy;
- 10. How to identify tasks and activities that may involve exposure to blood or other potentially infectious material; and
- 11. Appropriate actions to take in emergencies involving blood or other potentially infectious material.

The training shall be provided by a qualified person and shall include opportunities for questions. The School shall provide training to all employees regarding HIV/AIDS. The training shall be provided within six months of initial employment. The training shall include:

- 1. History and epidemiology of HIV/AIDS;
- 2. Methods of transmission of HIV;
- 3. Methods of prevention of HIV infection including universal precautions for handling body fluids;
- 4. Current treatment for symptoms of HIV and prognosis of disease prevention;
- 5. State and Federal laws barring discrimination against persons with HIV/AIDS; and
- 6. State and Federal laws regulating the confidentiality of a person's HIV antibody status.

Significant new discoveries or changes in accepted knowledge regarding HIV/AIDS shall be transmitted to employees within one calendar year of notification from the Washington Superintendent of Public Instruction, unless the Department of Health notifies the School that prompter dissemination of the information is required.

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:

- 1. The employee's name and social security number;
- 2. The employee's hepatitis B vaccination status;
- 3. Examination results, medical testing, and follow-up procedure records;
- 4. The healthcare professional's written opinion; and
- 5. A copy of information provided to the healthcare professional.

The School 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.

Legal References:

WAC 246-110-001	Control of Communicable Disease
WAC 296-62-08001	Bloodborne Pathogens
WAC 392-198	Training – School Employees – HIV/AIDS
WAC 296-823	Occupational Exposure to Bloodborne Pathogens
RCW 70.02	Medical Records
RCW 70.24.290	School Employee Education and Training

INFECTION CONTROL PROGRAM POLICY

EXHIBIT A – GENERAL JOB CATEGORIES WITH A REASONABLY ANTICIPATED ON-THE-JOB DIRECT EXPOSURE TO BLOOD OR OTHER POTENTIALLY INFECTIOUS MATERIAL

The following jobs have been determined to reasonably anticipate an on-the-job exposure to blood or other potentially infectious material:

Registrar
Bus Driver
Cook
Cook's Assistant or Helper
Custodian
Carving Instructor
Physical Education (PE) Teacher
Fitness Trainer
Athletic Coach or Trainer

This list can be modified at a later date based upon changes in job descriptions and/or a reassessment of an individual's risk of exposure to blood or other potentially infectious material in accordance with the Infection Control Program Policy.

INFECTION CONTROL PROGRAM POLICY

EXHIBIT B – ACKNOWLEDGEMENT OF RECEIPT OF INFECTION AND EXPOSURE CONTROL PROGRAM POLICIES

I,, have received and reaction and Exposure Control Program Policies.	
Signature	 Date
Print Name	

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EXHIBIT C – HEPATITIS B VACCINE DECLINATION FORM FOR QUILEUTE TRIBAL SCHOOL

I understand that due to my occupational exposure to blood or other potentially infectious materials (OPIM), I may be at risk of acquiring Hepatitis B virus (HBV) infection.

You have given me the opportunity to be vaccinated with the Hepatitis B vaccine at no charge to myself.

However, I decline the Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If, in the future, I continue to have occupational exposure to blood or other potentially infectious materials, and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

I have already received the Hepatitis B vaccination series.		
Dates vaccine received:		
Employee's Signature	Date	
Employee's Name (Print)		