Bloodborne Pathogens

Teachers On Call Employee Training:
How to handle exposure incidents that you may encounter in the early child care setting or in schools
This presentation is designed to advise administrators, childcare providers, caregivers, and school health staff about specific infectious diseases that you may encounter in the childcare setting or in schools.

It is intended to provide specific disease prevention and control guidelines, which are consistent with the national standards set forth by the American Public Health Association, OSHA, and the American Academy of Pediatrics.
Bloodborne Pathogens are microorganisms that are present in human blood and can cause disease in humans.

Infectious diseases can include, but are not limited to:

- Hepatitis B
- Hepatitis A
- HIV
- Methicillin resistant Staph infections (MRSA)
What are Bloodborne Pathogens?

- A variety of infections have been documented in children attending childcare, which sometimes spread to caregivers and others at home.
- Infants and preschool-aged children are very susceptible to contagious diseases because they...
  - Have not been exposed to many infections
  - Have little or no resistance to these infections
  - Have not received any or all of their vaccinations
According to the Centers for Disease Control and Prevention, Hepatitis C is the most common, chronic bloodborne infection in the US.

Staph infections can be prevalent and spread quickly in gyms, athletic arenas, and in any grouping of people.

One millimeter of blood can contain over 100 million infectious doses of hepatitis B or C.

OSHA’s Bloodborne Pathogens standard (29-CFR-1910.1030) prescribes safeguards to protect workers against exposure to blood, mucus, secretions, and other infectious threats.
Who is covered by the standard?

- All employees who could be “reasonably anticipated” to face contact with blood or other potentially infectious materials as a result of job duties – **this includes all educational staff**
- Some educators are more at risk:
  - Nurses
  - Janitors
  - Teachers, Assistants, and Aides
  - Paraprofessionals
  - Coaches
  - Anyone with first aid responder duties at a school or center
Why are young children at increased risk?

* Young children are at increased risk for contracting infectious diseases because they...
  * Are grouped together and are exposed to many new germs
  * Have immune systems that are not fully developed to fight germs
  * Do not have complete control of bodily fluids that contain germs
  * Have personal habits that can spread germs, including thumb sucking, rubbing eyes, and putting things in their mouths
K-12 students are at increased risk for contracting infectious diseases because...

- They may have piercings
- They can get paper cuts, scrapes, or oozing cuts
- They sometimes bite or are victims of biting
- They may have rashes, acne/pimples, or nosebleeds
How does exposure occur?

- Educators incur risk each time they are exposed to bloodborne pathogens.
- Any exposure may result in infection and subsequent illness.
- Since it is possible to become infected from a single exposure incident, these incidents must be prevented whenever possible.
Caregivers helping an injured, ill, or diapered child or student can become unknowingly contaminated or contaminate others.

Human body fluids may or may not be visibly contaminated with blood and can be potentially infectious.
What do you do when exposure occurs?

- It is critical that you wear gloves and wash your hands thoroughly with soap after glove removal.
- Disinfect the area before touching your eyes, mouth or nose, or any other individual.
What do you do when exposure occurs?

* In an emergency situation when gloves are not available, you must scrub your hands and disinfect all surfaces or areas that have touched any bodily fluids, immediately without touching anything or anyone else in the interim.

* If time permits, it is wise to also scrub up before attending to the injured or ill.
First aid kits, gloves, and other protections will be made readily available to provided to all education staff members when needed.

- Gloves are worn when an educator may have contact with blood or potential infectious diseases.
- Disposable (single use) gloves shall not be washed or decontaminated for re-use
- Gloves shall be replaced as soon as feasible whenever their ability to function as a barrier becomes compromised
Key tip: For Pre-K, Early Child Care, and Paraprofessionals, handwashing (for both the staff member’s hands and the child’s hands) is an important step, even when using gloves.

When to wash hands:
- Before and after contact with injured/ill student or child
- Whenever you remove gloves
- Before and after use of the bathroom
- Prior to and after meal breaks
- After coughing or sneezing
An exposure incident is any contact with blood or other potentially infectious fluids, including touching:

- Eyes, mouths, and other mucous membrane
- Non-intact skin, such as skin with dermatitis, hangnails, cuts, abrasions, chafing, or acne
- Pierced mucous membranes or skin through human bites, cuts, and abrasions
When an educator experiences an exposure incident:

* He/she must institute the required follow-up procedures in the school or center Exposure Control Plan
* Each educational facility will have a copy of their Exposure Control Plan accessibly to educators
Contamination refers to the presence of blood or bodily fluids on an item or surface.

These situations require decontamination – using chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item so they are no longer capable of transmitting infectious disease.
Work surfaces must be decontaminated with an appropriate disinfectant after completion of procedures and when surfaces are contaminated.

Appropriate disinfectants include:

- Diluted bleach solution made up within the last 24 hours (household bleach diluted between 1:10 and 1:100 with water)
- EPA-registered sterilants or products effective against HIV/HBV
- Sterilants / high level disinfectants cleared by the FDA
Decontamination

* Protective coverings used to cover changing tables and other areas shall be removed, the area disinfected, and the covering replaced as soon as completed.
* Receptacles contaminated with bodily fluids, blood, or infectious bacteria must be decontaminated on a regular schedule.
* Soiled clothing shall be handled as little as possible and placed in a plastic bag.
Implementation of OSHA’s Bloodborne Pathogens standard will protect educational staff against exposure to infectious and communicable diseases, and significantly reduce their risk of contracting bloodborne diseases.

Content provided by the Minnesota Department of Education, the Minnesota Department of Labor and Industry, and the Wisconsin Division of Public Health. See further information at www.doli.state.mn.us