

Plano Independent School District

Bloodborne Pathogen

Exposure

Control Plan

2024-2025

TABLE OF CONTENTS

I.	The Plan/Review and Revision
II.	General Management of the Plan
III.	Exposure Determination
IV.	Information and Training
V.	Methods of Compliance
VI.	Handling of Sharps
VII.	Hepatitis B Vaccination
VIII.	Post Exposure Evaluation and Follow Up
IX.	Forms
X.	Definitions – Glossary of Terms

I. THE PLAN

- A. In accordance with Health and Safety Code Chapter 81, Subchapter H, and analogous to OSHA BloodBorne Pathogens Standard 1910.1030 the following exposure control plan exists. This exposure control plan (ECP) is designed to eliminate or minimize employee occupational exposure to bloodborne pathogens (BBP).
- B. To promote safe work practices, in an effort to meet Board Policy DBB (Legal) as mandated by the Texas Department of State Health Services (TDSHS) Bloodborne Pathogen Exposure Control Plan and Health and Safety Code 81.301-.307; 25 TAC 96.
- C. Revisions will be made to the original plan of 1994 as warranted and documented.
The ECP was revised May 1997, September 1999, December 2000, August 2006, September 2008, March 2012, October 2015, August 2016, September 2020, May 2021, June 2022 and August 2023.

II. GENERAL MANAGEMENT OF THE PLAN

- A. The ECP is available at <https://www.pisd.edu/Page/1858>
- B. Responsibilities for the ECP
 - 1. The assigned district health care professionals, along with each site-based manager at district locations, are responsible for the implementation of these procedures by:
 - a. Reviewing the ECP annually and revising as warranted. Documentation and storage of these revisions will be stored with the assigned district health professionals.
 - b. Providing initial training and availability for annual refresher training to all staff serving students.
 - c. Modifying the "at risk" list of employees and job classifications as needed
 - d. Offering access to hepatitis B vaccinations to high risk or potentially exposed employees and maintaining a record of any Classification 1 employee's written refusal of vaccination.
 - e. Recording all exposure incidents (e.g., sticks by needles or other "sharps") in a contaminated sharps injury log and reporting the sharps injury to TDSHS on a standardized form.
 - f. Providing a post exposure evaluation and follow up with any employee who has a sharps injury.
 - 2. All employees will share with their co-workers to ensure compliance with the letter, spirit and intent of the district's policies for the prevention of the transmission of disease among employees, students, and visitors to district sites.

C. EXPOSURE DETERMINATION

- A. Exposure definition for the Plano ISD: A district that employs personnel who provide services and have a risk of exposure to blood or other material potentially containing BBP in connection with exposure to sharps, shall comply with the minimum standard set by the TDSHS, including a district that operates a public school health clinic.
- B. Determination and identification of employees who are at risk for exposure to BBP is based on:
 - Risk of exposure to sharps according the Health and Safety Code

81.301-.307; TAC 25-96

- The yearly employee assignment and/or student assignment
- The frequency of exposure with reference to the Hepatitis B Occupational Risk Worksheet; Guidelines for School Employees, TDSHS program

1. Classification 1 includes jobs in which required tasks **regularly** involve a potential for mucus membrane or skin contact with blood, body fluids, tissues, such as but not limited to: cleaning up student's blood or body fluids that contain blood, nose bleeds, soiled tampons, saliva with blood, cleaning and dressing oozing or bloody wounds, medical procedures i.e., directly contacting insertion sites of tracheal or gastric tubes and handling sharps that are blood contaminated. Before being offered the hepatitis B vaccine series, all Classification 1 employees must complete training on BBP.

JOB TITLE	LOCATION
School nurses, substitute nurses, special assignment nurses, nurse case managers	All schools/camp clinics
Occupational health nurses	All locations
Plumbers and plumber aides	Facilities and/or assigned schools
Clinical nurse educators for students	Assigned hospital locations

2. Classification 2 includes jobs in which required tasks **normally do not** involve exposure to blood, body fluids or tissues but may require performing unplanned Classification 1 tasks a few times a year (less than 12.)

JOB TITLE	LOCATION
Special education teachers, bus drivers and/or aides working with severe/profound and/or medically fragile students	All special education designated classrooms; designated bus routes
Art, science, agriculture, shop and metalwork teachers	Assigned classrooms and/or labs
PPCD teachers and aides	Assigned classrooms
Speech therapists	Assigned student locations
Coaches, trainers	Assigned training sites
Administrators	Assigned duties at school sites
Emergency response teams	Assigned duties at school sites

3. Classification 3 includes jobs in which required tasks involve a **rare risk of exposure** to blood, body fluids, or tissues. The risk is no greater than would be

encountered by the general public such as a visitor.

JOB TITLE	LOCATION
All teachers not otherwise mentioned	Schools
Administration and staff	Administration building
Technology	Assigned locations
Food and nutritional department	Assigned school sites
Transportation	Transportation department/assigned bus
Facilities	Assigned clusters

4. Classification 4 includes any of the following district employees or volunteers who are accidentally exposed to blood or other body fluids while rendering assistance at the scene of a district emergency or during transport to the hospital. The district shall be responsible for paying the cost of the exposed person's testing for hepatitis B, hepatitis C and HIV – district policy DBB(Local) and Health and Safety Code 81.301-307 25 TAC 96. The hospital to which the patient is transported shall take reasonable steps to test the patient for hepatitis B and/or hepatitis C.

JOB TITLE	LOCATION
Peace officers/Firefighters	All sites
Certified emergency service personnel	All sites
PISD volunteers and/or first responders	All sites

5. Classification 5: All contracted employees in regards to BBP exposure are subject to the guidelines and care of their employer's BBP protocol and/or individual contractual agreements.

IV. INFORMATION AND TRAINING

- A. Training data is updated to current laws and current medically accepted occupational and school health practice as warranted.
- B. All employees who have contact with students have access to BBP training conducted via interactive web site, video, power point presentations and/or this document. All Plano ISD nurses are available for questions or discussions of all information contained in the presentations or in this document.

- C. Training for all employees who are assigned tasks identified as regular occupational exposure and/or Classification 1 occurs prior to initial assignment. These identified employees also receive annual refresher training. This training is to be conducted within one year of the employee's previous training.
- D. Plano ISD Board Policy DBB(LEGAL)
- E. Training records will be maintained for at least three (3) years from date of training by the site-based managers and/or their designees. The district designee has the ability and right to obtain reports and records from the on-line contracted BBP training.
- F. Contractors
 - 1. Employers providing contract labor, who may be involved in activities entailing exposure to BBP in Plano ISD work areas, will comply with the district BBP Exposure Control Plan.

V. METHODS OF COMPLIANCE

A. Universal Precautions

- 1. Universal precautions will be observed to prevent contact with blood or other potentially infectious materials. All blood and body fluids or other potentially infectious materials are considered infectious regardless of the perceived status of the source individual.

B. Work Practice Controls

- 1. Work practice controls will be utilized to eliminate or minimize exposure to employees. Where occupational exposure remains after institution of these controls, PPE supplied by the district will be used. Examples may include but not be limited to latex or vinyl gloves, sharps containers, cardio pulmonary resuscitation barriers, etc.
- 2. Glove styles, types and sizes appropriate for the assigned job and individual health needs of the staff, are required to be worn when it is anticipated that an employee will have contact with blood or other potentially infectious materials, mucous membranes and non-intact skin.
- 3. Gloves will be used one time only, removed correctly and disposed of in a waste container. Utility gloves may be decontaminated for re-use if the glove is not torn or punctured or as long as the ability to function as a barrier is not compromised.
- 4. Masks, in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

C. Hand Hygiene

The district promotes hand washing as the number one defense against infectious and communicable disease. Health teaching and wellness endeavors using various communication means are practiced throughout the district.

- 1. Hand washing technique recommended: Wet hands with water, apply soap, and rub hands together for at least 20 seconds; rinse and dry with disposable towel; use towel to turn off the faucet.

2. Recommended hand washing times:
 - Upon arrival to school.
 - Immediately before and after eating.
 - After using the toilet, assisting a student in toileting or changing diapers.
 - After contacting any body fluids, including wet or soiled diapers, runny noses, spit or vomit.
 - After handling pets, pet cages or other pet objects.
 - Whenever hands are visibly dirty or after cleaning up a student, the room, bathroom items or toys.
 - After removing gloves used for any purpose.
 - Before giving or applying medication or ointment to a child or self.
 - Before going home.
3. Numerous hand washing facility locations are readily available throughout the district sites. When hand washing facilities are not feasible, either an appropriate antiseptic hand cleanser in conjunction with clean cloths, paper towels or antiseptic towelettes will be provided. The hand sanitizers will contain a minimum of 62% ethyl alcohol to be applied and rubbed on all surfaces of hands and fingers until dry.
4. Hand sanitizers are stored safely out of reach of all students. When used for students, it will be applied only under the supervision of staff and observed until student's hands are dry.
5. Employees shall wash hands and other contaminated skin with soap and water or flush mucous membranes with water immediately, or as soon as feasible, following contact of such body areas with blood or other potentially infectious materials.

D. Personal Habits

1. Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses are prohibited in work areas where there is potential for exposure to bloodborne pathogens.
2. Food and drink are not kept in refrigerators, freezers, on countertops or in other storage areas where blood or other potentially infectious materials are present.

E. Cleaning and Disinfecting

Plano ISD shall ensure that the worksite is maintained in a clean and sanitary condition. Site-based managers and or their designees shall determine and implement an appropriate written schedule for cleaning and a method of decontamination based upon the locations within the school, the type of surface to be cleaned, type of soil present and tasks or procedures being performed in the area.

1. Contaminated work surfaces shall be decontaminated with an Environmental Protection Agency (EPA) registered germicide to maintain an antiseptic clean environment at all times. All employees involved in decontamination of work surfaces or equipment or who handled contaminated laundry must wear gloves. All contaminated work surfaces are decontaminated after completion of procedures immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials and at the end of the work shift, if the surface may have become contaminated since the last cleaning.

2. Teachers and aides who use toys and manipulatives with their assigned students will be responsible to clean these items after use. District provided non-toxic disinfectant is made available. Appropriate items may also be sanitized in the district dishwashers.
3. Broken glass, which may be contaminated, must not be picked up directly with the hands. It will be cleaned up using mechanical means such as a brush and dustpan, forceps or tongs.
4. Regulated waste, other than sharps, must be placed in appropriate containers that are leak resistant and closed prior to removal. Biohazard (red) bags are not required for waste disposal in the public school setting but may be used in some instances. If outside contamination of the regulated waste container occurs, it is placed in a second container that is leak resistant and closed prior to removal.
5. All bins, pails, cans and similar receptacles intended for reuse, which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials, shall be inspected and decontaminated according to the cleaning schedule immediately or as soon as feasible upon visible contamination.

VI. Handling of Sharps

A. Safety Practices for Sharps

1. When feasible and available for specific district needs, departments shall make every effort to promote needle-less systems and sharps with engineered sharps injury protection for the employees. The use of pre-filled syringes approved by the Federal Food and Drug Administration, when available and within budgetary constraints, shall be encouraged.
2. Contaminated needles and other contaminated sharps shall not be bent, recapped or removed.
3. Reusable sharps that are contaminated with blood or other potentially infectious materials shall be handled by using the appropriate work practice controls and/or personal protective equipment and cleaned with appropriate disinfectant. They are not to be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.
4. Reusable cleaned sharps shall be stored in neatly identified locked storage areas.
5. Contaminated sharps shall be discarded immediately, or as soon as feasible, in containers that are:
 - Closable.
 - Puncture resistant.
 - Leak proof on sides and bottom.
 - Labeled or color-coded with fluorescent orange or orange-red labels with lettering or symbols in a contrasting color affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents loss or unintentional removal or in red bags substituted for labels.
6. During use, containers for contaminated sharps shall be easily accessible to nursing staff, classroom teachers and other persons involved in said activity. They are to be

located as close as is feasible to the immediate area where sharps are used, or can be reasonably anticipated to be found, yet stored safely to protect students. They shall be maintained upright throughout use, replaced routinely and not allowed to overfill.

7. Containers for contaminants shall not be opened, emptied, cleaned manually or handled in any other manner which would expose employees to the risk of percutaneous injury.

B. Disposal of sharps containers from district sites:

Plano ISD disposes sharps containers according to: The Texas Register, Title 30 "Environmental Quality" Part 1. Texas Commission on Environmental Quality Chapter 326, Medical Waste Management, Subchapter C, Rule 326.31 adopted to be effective May 26, 2016.

- a. SQG transporter. A permit, registration, notification or other authorization is not required for a generator of less than 50 pounds per month of untreated medical waste that transport their own waste to an authorized waste storage or processing facility.
1. The district designee shall assure scheduled pickup of all district contaminated sharps at the designated pick up locations at least annually, or whenever the need arises.
2. The assigned staff will deliver the contaminated sharps to the locations signing their name, location and listing the number of sharps containers.
3. All medical waste boxes and liners provided by the contracted company will be used for storage of sharps at the designated pick up sites.
4. At the time of pick up, the vendor will document the amount of waste picked up at each location, and leave a copy of the pick up manifest.
5. The vendor will transport all medical waste picked up at district locations to an approved medical waste disposal facility for destruction.
6. Upon destruction, all manifests will be stamped received and destroyed. A copy of the manifest will be sent to the Plano ISD as proof of destruction.
7. It is the responsibility of nurses, teachers and other staff utilizing sharps to order district approved sharps containers, and provide safe storage to and from the district warehouse.

VII. HEPATITIS B VACCINATION

A. The Program

1. The district shall make available the hepatitis B vaccine series to all employees from the Classification 1 exposure determination occupations list, as well as post-exposure evaluation and follow up to all employees who have had an exposure incident.
2. The vaccine program consists of a series of three inoculations over a six-month period according to CDC guidelines.

- a. These shall be provided according to the most current recommendations of the U. S. Public Health Service at the time these evaluations and procedures take place.
- b. When applicable, routine booster doses will be made available at times recommended.
- c. All laboratory tests are conducted by an accredited laboratory at no cost to the employee.

B. Availability

- 1. The hepatitis B vaccine and vaccination series will be at the discretion of your healthcare provider.
 - a. At no cost to the employee
 - b. At a reasonable time and place
 - c. Exceptions
 - (1) The employee has previously received the complete hepatitis B series
 - (2) Antibody testing has revealed that the employee is immune.
 - Prescreening is available, but not required, at no cost to employee.
 - (3) The vaccine is contraindicated for medical reasons

C. Declinations

- 1. Declining employees must fill out the "Refusal for Hepatitis B Immunization Form", which will be a retained record, according to the district's retention schedule and/or as part of the employee's post-exposure incident within the workers' compensation record.
- 2. Declining employees may, at a later date, choose to accept the vaccination program.

VIII. POST-EXPOSURE EVALUATION AND FOLLOW-UP

Within the Plano ISD, all occupational BBP exposure incidents are reported to the Workers' Compensation Manager. The medical care of the exposed employee will be under the supervision and oversight of the district designee. Confidential records will be maintained according to the current Texas Department of Insurance regulations, utilizing the Health and Safety Code, Chapter 81 directives for BBP post exposure.

A Contaminated Sharps Injury Log of exposure incidents to contaminated sharps will be maintained by the Workers' Compensation Manager. The log shall meet the current requirements as specified by the TDSHS Infectious Disease Control Department.

The incidents will be reported by the district on a standardized Contaminated Sharps Injury Reporting Form or through electronic means established by the TDSHS to the Collin County Health Department, the local health authority for TDSHS.

After an exposure incident, a confidential medical evaluation and follow-up shall be made immediately available to the exposed employee including:

- 1. Documentation of the route(s) of exposure and the circumstances under which the exposure incident occurred.

2. Identification and documentation of the source individual (unless it can be established that identification is not feasible or is prohibited by federal, state or local law).
- A. All medical evaluations and procedures performed as part of post-exposure evaluation and follow-up, including prophylactics, are:
 1. Provided at no cost to the employee.
 2. Made available to the employee at a reasonable time and place.
 3. Performed by, or under the supervision of, a licensed physician or another licensed health care professional.
 4. Provided according to recommendations of the U.S. Public Health Service, are conducted by an accredited laboratory, at no cost to the employee
All laboratory tests are conducted by an accredited laboratory, at no cost to the employee.
 - B. The district designee responsible for overseeing the employee's care shall work in collaboration with the assigned health professional. The health professional will have knowledge of the BBP rule, a description of the exposed employee's duties as they relate to the exposure incident, documentation of the route(s) of exposure and circumstances under which exposure occurred, results of the source individual's blood testing, if available, and all medical records relevant to the appropriate treatment of the employee, including vaccination status, which are the employer's responsibility to maintain.
 - C. The healthcare professional's opinion for hepatitis B vaccination shall be limited to whether hepatitis B vaccination is indicated and if the employee has received such vaccination. The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to documenting that the employee has been informed of the results of the evaluation and has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials, which require further evaluation or treatment. All other findings of diagnosis shall remain confidential and shall not be included in the written report.
 - D. Based upon the recommendation of the healthcare professional providing the post-exposure evaluation, the source individual's blood shall be tested to determine HBV and HIV infectivity as soon as feasible, and after consent is obtained. If consent is not obtained, it shall be established that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented. When the source individual is already known to be infected with HBV, HCV or HIV, testing for the source individual's known HBV, HCV or HIV status need not be repeated. Results of the source individual's testing shall be made available to the exposed employee and to the licensed physician or licensed healthcare official performing the required post-exposure medical evaluation and follow-up of the exposed employee. The employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
 - E. Based upon the recommendation of the healthcare professional providing the post-exposure evaluation, the exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained. If the employee consents to baseline blood collection, but does not give consent at the time for HIV serologic testing, the sample shall be preserved for at least 90 days. If within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.
 - F. Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service, shall be given by, or under the supervision of, the licensed physician or other licensed healthcare professional performing the post-exposure medical evaluation of the exposed employee. This may include counseling and evaluation of reported illnesses as needed and indicated.

Plano Independent School District

Documentation of Initial Education

The Plano ISD provides initial training to all staff who meets the criteria for Classification 1, which includes jobs in which required tasks **regularly** involve a potential for mucus membrane or skin contact with blood, body fluids, tissues and any employee who has had an exposure incident. Education is routinely supplied by the Bloodborne Pathogen Control on-line course and/or video. The following information is included but not limited to:

- transmission of bloodborne pathogens
- methods for recognizing activities with exposure to bloodborne pathogens
- explanation of methods to prevent or reduce exposure including engineering
- controls (trash and sharp containers), work practice controls, protective equipment
- the types, use, location, handling, decontamination, and disposal of sharps
- hepatitis B vaccination
- appropriate procedures for exposure incidents
- labeling of sharp containers
- changes in exposures or exposure control methods

Name	Job title	Training Date	Signature

Plano Independent School District

Documentation of Annual Education

The Plano ISD provides initial training to all staff who meets the criteria for Classification 1, which includes jobs in which required tasks **regularly** involve a potential for mucus membrane or skin contact with blood, body fluids, tissues and any employee who has had an exposure incident. Education is routinely supplied by the Bloodborne Pathogen Control on-line course and/or video. The following information is included but not limited to:

- transmission of blood borne pathogens
- methods for recognizing activities with exposure to bloodborne pathogens
- explanation of methods to prevent or reduce exposure including engineering
- controls (trash and sharp containers), work practice controls, protective equipment
- the types, use, location, handling, decontamination, and disposal of sharps
- hepatitis B vaccination
- appropriate procedures for exposure incidents
- labeling of sharp containers
- changes in exposures or exposure control methods

Name	Job title	Training Date	Signature

These records shall be maintained for at least 3 years from training date and shall be made available upon examination and copying to employees, employee representatives, and the Director or Assistant Secretary in accordance with 29 CFR 1910.20.

PLANO INDEPENDENT SCHOOL DISTRICT

REFUSAL FOR HEPATITIS B IMMUNIZATION

My signature below certifies that due to my occupational exposure to blood or other potentially infectious materials, I understand I may be at risk of acquiring hepatitis B virus (HBV) infection. Although I have been given the opportunity to be vaccinated with hepatitis B vaccine at no charge to myself, I decline 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 may request the vaccination series.

Signature of Employee

Printed Name of Employee

Signature of Witness

Date of Signatures



Human Resources Division
Benefits and Risk Management
Workers' Compensation

**PLANO ISD BLOODBORNE PATHOGEN CONSENT
FOR BLOOD TESTING AND RELEASE OF MEDICAL INFORMATION ("CONSENT")
Of Employee**

Due to an exposure to blood and/or other potentially infectious materials, I and/or other individuals may be at risk for acquiring Hepatitis B virus (HBV), Hepatitis C virus (HCV), and /or Human Immunodeficiency virus (HIV). By my signature below, I consent to blood collection/testing for HBV, HCV, and HIV. I _____ understand the need to present to a Health care facility that accepts WC benefits or to Concentra Medical Center (that we know accepts WC benefits) at 1300 N. Central Expressway, Plano within twenty-four (24) hours of the date and time of execution of this Consent for the testing. (Hours of operation - 8am-5pm M-F, Sat. 9am-4pm) at the District's expense. Further, I understand the failure to present for testing within this timeframe may affect the ability to detect the identified viruses and/or the treatment plan for any exposed individuals. I agree to complete any and all consent forms required by the blood collection / testing facility.

Following completion of the blood collection/testing identified herein, I, _____, hereby authorize agencies/persons listed below to release and/or exchange any and all information regarding the testing results for the blood collection due to the incident/injury that occurred at PISD on _____ as outlined herein. I understand that after this information is disclosed, the District does not have the ability to regulate the disclosure of the information identified herein. I understand that I am entitled to receive a copy of this Consent. If you already know that you have already been diagnosed with one of the medical conditions identified herein, and would be willing to provide supporting medical documentation, please contact:

Healthcare Provider to be contacted: _____

Health Care Provider of employee (performing the blood collection/testing to release results of testing) WC to fill out

Name: _____ Agency/Person: _____
Address: _____ Phone: _____

Health Care Provider for Student (to receive results of blood collection/testing). WC and/or Principal will receive information from parent and fill out

Name: _____ Agency/Person: _____
Address: _____ Phone: _____

If needed Other Health Care Provider for employee (to release results of blood collection/testing) Employee Fills out

Name: _____ Agency/Person: _____
Address: _____ Phone: _____

This Consent expires and is void one year from the date of signature(s) below. I understand that I have the right to revoke this Consent at any time by sending written notification of revocation to the District and/or any of the listed agencies / persons designated at the addresses listed above.

In consideration of the District paying for the blood collection / testing, and other good and valuable consideration, the receipt of which is hereby acknowledged, I release and waive all claims that I may have against the Plano Independent School District, its Board of Trustees, employees, agents, and representatives resulting, in whole or part, from the blood collection / testing and subsequent disclosure, including but not limited to claims of negligence, whether sole, joint, contributory or otherwise, against the District or claims against the District arising under the Texas Torts Claims Liability Act. The release and waiver will be binding on my heirs, legatees, administrators, and assigns.

Signature Individual	_____	Date	_____
Signature Parent / Legal Guardian	_____	Date	_____
Signature of Witness	_____	Date	_____



Human Resources Division
Benefits and Risk Management
Workers' Compensation

**PLANO ISD BLOODBORNE PATHOGEN CONSENT
FOR BLOOD TESTING AND RELEASE OF MEDICAL INFORMATION ("CONSENT")
PISD Student**

Due to an exposure to blood and/or other potentially infectious materials, individuals may be at risk for acquiring Hepatitis B virus (HBV), Hepatitis C virus (HCV), and /or Human Immunodeficiency virus (HIV). By my signature below, I (**name of parent/legal guardian**) _____ consent for my child (**name of child**) _____ to blood collection/testing for HBV, HCV, and HIV. I (**name of parent/legal guardian**) _____ understand the need to present to a Health care facility that accepts WC benefits or to Concentra Medical Center (that we know accepts WC benefits) at 1300 N. Central Expressway, Plano within twenty-four (24) hours of the date and time of execution of this Consent for the testing. (Hours of operation - 8am-5pm M-F, Sat. 9am-4pm) at the District's expense. Further, I (**name of parent/legal guardian**) _____ understand the failure to present for testing within this timeframe may affect the ability to detect the identified viruses and/or the treatment plan for any exposed individuals. I agree to complete any and all consent forms required by the blood collection / testing facility.

Following completion of the blood collection/testing identified herein, I (**name of parent/legal guardian**) _____, hereby authorize agencies/persons listed below to release and/or exchange any and all information regarding the testing results for the blood collection due to the **incident/injury** that occurred at PISD on _____ as outlined herein. I understand that after this information is disclosed, the District does not have the ability to regulate the disclosure of the information identified herein and the information may be disclosed to any exposed employee or medical provider of an exposed employee. I understand that I am entitled to receive a copy of this Consent.

Health Care Provider performing the blood collection/ testing of Student – (to release results of blood collection/testing)

Parent to fill out the provider doing the testing

Name: _____ Agency/Person: _____
Address: _____ Phone: _____

Health Care Provider for Employee – (who will receive results of the blood collection/testing)

WC to fill out of the provider employee is utilizing

Name: _____ Agency/Person: _____
Address: _____ Phone: _____

If needed – Other Health Care Provider for Student - (receiving results of the blood collection/ testing)

Parent to fill out of the provider receiving the result of the testing

Name: _____ Agency/Person: _____
Address: _____ Phone: _____

This Consent expires and is void one year from the date of signature(s) below. I understand that I have the right to revoke this Consent at any time by sending written notification of revocation to the District and/or any of the listed agencies / persons designated at the addresses listed above.

In consideration of the District paying for the blood collection / testing, and other good and valuable consideration, the receipt of which is hereby acknowledged, **I release and waive all claims that I and/or my student may have against the Plano Independent School District, its Board of Trustees, employees, agents, and representatives resulting, in whole or part, from the blood collection / testing and subsequent disclosure, including but not limited to claims of negligence, whether sole, joint, contributory or otherwise, against the District or claims against the District arising under the Texas Torts Claims Liability Act.**

The release and waiver will be binding on my heirs, legatees, administrator, and assigns.

Signature Individual	_____	Date	_____
Signature Parent / Legal Guardian	_____	Date	_____
Signature of Witness	_____	Date	_____

GLOSSARY OF TERMS

Blood - human blood, human blood components, and products made from human blood.

Bloodborne Pathogen Control - a district that employs employees who provide services in a public or private facility providing health care-related services, including a home health-care organization, or who otherwise have a risk of exposure to blood or other material potentially containing bloodborne pathogens in connection with exposure to sharps shall comply with the minimum standards set by the Texas Department of State Health Services (TDSHS). This includes a district that operates a public school health clinic.

BBP (Bloodborne Pathogens) - pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).

Clinic Laboratory - a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.

Contaminated - the presence or reasonably anticipated presence of blood or other potentially infectious material on an item or surface.

Contaminated equipment - any equipment used in the workplace that has been soiled with blood or other potentially infectious materials on an item or surface.

Contaminated laundry – laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

Contaminated Sharps - any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes and exposed ends of dental wires.

Contaminated Sharps Injury - any sharps injury that occurs with a sharp used or encountered in a health care setting that is contaminated with human blood or body fluids.

Decontamination - use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles, and the surface of item is rendered safe for handling, use, or disposal.

Device – An instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including any component, part or accessory that is: (a) recognized in the official United States Pharmacopoeia National Formulary or any supplement to it; (b) intended for use in the diagnosis of disease or other condition, or in the cure, mitigation, treatment, or prevention of disease in man or other animals; or (c) intended to affect the structure or any function of the body of man or other animals and that does not achieve any of its principal intended purposes through chemical action within or on the body of man or other animals and is not dependent on metabolization for the achievement of any of its principal intended purposes.

Director – the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

Engineering Controls - controls (e.g., sharps disposal containers, self-sheathing needles) that isolate or remove the bloodborne pathogens hazard from the workplace.

Engineered Sharps Injury Protection – a physical attribute that: (a) is built into a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids and that effectively reduces the risk of

an exposure incident by a mechanism, such as barrier creation, blunting, encapsulation, withdrawal, retraction, destruction, or another effective mechanism; or (b) is built into any other type of needle device, into a non-needle sharp, or into a non-needle infusion safety securement device that effectively reduces the risk of an exposure incident.

ECP (Exposure Control Plan) – document designed to eliminate or minimize employee exposure to bloodborne pathogens (BBP).

Exposure Incident - a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material that results from the performance of an employee's duties.

Governmental Unit - this state and any agency of the state, including a division, section, unit, branch, department, bureau, board, commission or office and includes: (a) a political subdivision of this state, including any municipality, county or special district; or (b) any other institution of government, including an institution of higher education.

Hand Washing Facilities - a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

HBV (Hepatitis B Virus) - a virus that may be contracted through exposure to blood and/or body fluids and can result in chronic liver infections and cirrhosis.

HCV (Hepatitis C Virus) - a virus that may be contracted through exposure to blood and/or body fluids and may result in chronic liver disease.

HIV (Human Immunodeficiency Virus) – a virus that may be contracted through blood and/or body fluids resulting in Acquired Immune Deficiency Syndrome (AIDS), a condition in which the body is unable to fight infections.

Licensed Healthcare Professional - a person who's legally permitted scope of practice allows him or her to independently determine the appropriate interventions after an exposure incident including performing the activities related to hepatitis B vaccination and post-exposure evaluation and follow-up.

Needleless System – a device that does not use a needle and that is used: (a) to withdraw body fluids after initial venous or arterial access is established; (b) to administer medication or fluids; or (c) for any other procedure involving the potential for an exposure incident.

Occupational Exposure – a reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of any employee's duties.

Other Potentially Infectious Materials – includes: (a) the following human body fluids: 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 or impossible to differentiate between body fluids; (b) Any unfixed tissue or other (other than intact skin) from a human (living or dead); and (c) HIV-containing cell or tissue cultures, organ cultures, and HIV or HBV containing culture medium or other solutions: and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Parenteral - piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

PPE (Personal Protective Equipment) - specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard, are not considered to be personal protective equipment.

Production Facility – a facility engaged in industrial-scale, large-volume or high concentration production of HIV or HBV.

Regulated Waste - liquid or semi-liquid blood or other potentially infectious material in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing

these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials. Solid waste which if improperly treated or handled may serve to transmit an infectious disease(s) and which is composed of the following: (a) animal waste; (b) bulk blood, bulk human blood products or bulk human body fluids; (c) microbiological waste; (d) pathological waste; or (e) sharps.

Research Laboratory – a laboratory producing or using research laboratory scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV, but not in the volume found in production facilities.

Sharps - an object used or encountered in a health care setting that can be reasonably anticipated to penetrate the skin or any other part of the body and to result in an exposure incident and includes: (a) needle devices; (b) scalpels; (c) lancets; (d) a piece of broken glass; (e) a broken capillary tube; (f) an exposed end of a dental wire; or (g) a dental knife, drill or bur.

Sharps Injury - any injury caused by a sharp, including a cut, abrasion or needle stick.

Source Individual - any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to an employee. Examples include, but are not limited to, hospital and clinic patients, clients in institutions for the developmentally disabled, trauma victims, clients of drug and alcohol treatment facilities, residents of hospices and nursing homes, human remains, and individuals who donate or sell blood or blood components.

Sterilize – the use of a physical or chemical procedure to destroy all microbial life, including highly resistant bacterial pathogens.

Universal Precautions/Standard Precautions - approaches to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV and other bloodborne pathogens.

Work Practice Controls - controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by two-handed techniques).

PLANO INDEPENDENT SCHOOL DISTRICT

EXPOSURE CONTROL PLAN FOR BLOODBORNE PATHOGENS

REVIEW

Signature: WC, District Health, Benefits and Risk Management Date: Reviewed and updated 2012-2013
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed 2013-2014
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed 2014-2015
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed 2015-2016
Department: Benefits and Risk Management

Signature: WC, Benefit and Risk Management Date: Reviewed and updated 2016- 2017
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed and updated 2017-2018
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed and updated 2018-2019
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed and updated 2020-2021
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed and updated 2021-2022
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed and updated 2022-2023 Department:
Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed and updated 2023-2024
Department: Benefits and Risk Management

Signature: WC, Benefits and Risk Management Date: Reviewed and updated 2024-2025
Department: Benefits and Risk Management