

Section 3

Appointment

# Section 3.1

## Employment Status

A. All employees of the Jefferson County Board of DD shall be classified as full-time, part-time, temporary, seasonal, intermittent, interim, or contract employees.

**1. Full-Time Employee**

An employee who works a permanent schedule of forty (40) hours per week or the standard work week as established by the Superintendent

**2. Part-time Employee**

An employee who works a permanent schedule of less than forty (40) hours per week or less than the standard work week as established by the Superintendent.

**3. Temporary Employee**

An employee hired for a limited period of time, fixed by the Superintendent, for a period not to exceed six (6) months.

**4. Seasonal Employee**

An employee who works a certain regular season or period of the year performing some work or activity limited to that season or part of the year.

**5. Intermittent Employee**

An employee who works on an irregular schedule which is determined by fluctuating demands of the work and is not predictable and is generally characterized as requiring less than one thousand (1,000) hours per year.

**6. Interim Employee**

An employee hired to fill a vacancy created by the sickness, disability, or an approved leave of absence, of a regular employee for the period of sickness, disability, or an approved leave of absence.

**7. Contract Employee**

A management employee employed in one (1) of the following categories:

a. Continuing Contract

An employee who was hired into a classified management position prior to June 24, 1988, and had successfully completed the probationary period is deemed to have a continuing contract. A continuing contract employee will retain employment unless removed under any applicable provision of law, resignation, retirement, or layoff. A continuing contract employee who changes

management positions and accepts a position for which a “limited” contract is required will enjoy exclusively those rights set forth in the limited contract. However, 5126.20 (E) ORC grants employees continuing contract status “so long as they maintain employment with the Board,” provided their position still exists. Therefore, such employee who is unsuccessful in another position may return to the position from which he was moved, if a vacancy exists in that position. If no vacancy exists, the employee will be deemed to be in layoff status, or may accept another position if offered by the Employer.

b. Limited Contract

Employees hired into management, supervisory, or confidential positions (hereinafter referred to as “management”) on or after June 24, 1988, hold “limited” contract status. Limited contracts normally extend for a period of not less than one (1) year and not more than five (5) years. However, a management employee hired after the beginning of a program year may be employed under a limited contract expiring at the end of the program year. A management employee may receive a limited contract for a period of one (1) year at the sole discretion of the Superintendent.

## Section 3.2

### Medical Examination

- A. The Board, recognizing the value of protecting and promoting the health and welfare of personnel and consumers, secures employment of persons physically and emotionally fit, ensures effective performance, and protects the health and well-being of the consumers; therefore, all employees of the Jefferson County Board of DD, inclusive of part-time employees, shall be required to complete a physical examination, inclusive of a tuberculin screening, within thirty (30) days of date of hire.
  - 1. The employee will be provided a standard form from the administrative office.
  - 2. The financial responsibility shall be that of the employee.
  - 3. In order to maintain active employment, the medical examination must indicate the employee to be free of communicable disease and any physical and/or mental condition which might interfere with the needs and interests of the students/consumers served.
- B. The Superintendent or his/her designee may require an employee to have a physical, physical capacity, or psychological examination, tuberculin test, or similar screening, at any time after the initial examination if the Superintendent or his/her designee determines that it is necessary and reasonable in order to determine ability to perform the essential functions of the position.
  - 1. The Board shall pay for the cost of the medical examination if the Employer requires the completion of such through a Board-approved physician.
- C. Volunteers working directly with the children/adults shall present evidence of having undergone a tuberculin screening test BEFORE entering into volunteer activity with said consumers/students.
- D. Any employee absent for three (3) successive days shall furnish the Superintendent, prior to his return to service, a statement from a licensed physician indicating that his health is satisfactory for return to his/her duties.
- E. All medical records are considered to be confidential and are available only to the Superintendent and JCBDD, to be used only in the interest of the person concerned, or as his/her health relates to others in the program.
- F. All medical records will be maintained in the Human Resources office in a confidential file separate from the employee personnel file.

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## Section 3.2.1

### Communicable Disease Policy—Employee

- A. Every employee will be required to have a physical prior to employment. Tuberculin skin-testing upon employment is mandatory. In the initial testing, the intradermal Mantoux test should be used. Follow-up skin testing should be conducted on a three (3) year basis, with the exception of residential employees, who shall have it done on a yearly basis, utilizing the one-step test. Persons found to be tuberculin-positive should have a chest radiograph to rule out active TB at the time interval recommended by their physician. A record of the physical will be kept in the employee's personnel file. A record of the tuberculin testing will be on file in the nurse's office.
- B. Colds, flu, and other viral infections are common and easily transmitted in the work place. It is difficult to effectively contain the spread of these diseases because the individual has spread the disease for several days while in the early stages. Physician's sanction to return to work is usually not necessary for these infections.
- C. If an employee is suspected of having a communicable disease, the department supervisor will request that the employee seek medical attention. The department supervisor shall notify the Superintendent when they request such medical attention. The employee can return to work when the employee's attending physician states that continued presence at work will not pose a threat to the employee, co-workers, or consumers. The Superintendent reserves the right to require an examination by a medical doctor appointed by the agency.
- D. An employee who has been diagnosed as having an infectious disease must inform his/her supervisor of the condition. An employee's health condition is personal and confidential. Precautions shall be followed to protect information regarding an employee's health condition.
- E. An employee may have or be a carrier of an infectious disease which is of life-long duration and he/she will not be symptom-free. If there is evidence that the disease cannot be transmitted by normal, casual contact in the work environment, and the condition is not a threat to self or others, the employee will continue to work in a regular manner. The employee is expected to meet acceptable performance standards and will be treated in a manner consistent with other employees.
- F. No special consideration will be given beyond normal transfer requests for employees who feel threatened by a co-worker's life-threatening disease.

- G. The Superintendent will determine the admissibility to the work place of an individual whose condition is in question. The Superintendent will convene a meeting of the employee, department supervisor, the employee's physician, and others as the Superintendent deems necessary. Based on evidence presented at the meeting, the Superintendent may decide:
1. To return the employee to his/her usual place of employment unconditionally.
  2. To place the employee on a work assignment under restrictive conditions.
  3. Seek to have the employee utilize sick leave and be placed on leave of absence.

In making a recommendation, the Superintendent will consider:

1. The nature of the risk and how the disease is transmitted
  2. The duration of the risk and how long the carrier is infectious
  3. The severity of the risk and the potential harm to others
  4. The individual's physical condition
- H. In cases of diagnosed long-term communicable disease, the decision of informing others of the infection will be made by the Superintendent. The primary program person(s) should know the diagnosis. The sharing of data on infections should be done after careful consideration of other's need to know. The participant maintains a right to privacy. The sharing of information is not a prerequisite for program attendance.
- I. How to serve persons with specific communicable diseases/conditions will be considered on an individual basis. In these individual cases, the interdisciplinary team shall make the decision of service delivery. This team will be composed of the Superintendent/designee, department supervisor, parent(s), guardian(s), participant's physician, and participants primary program person(s), as well as other appropriate members of the interdisciplinary team. The recommendation may include:
1. Attending program unconditionally
  2. Attending under restrictive conditions
  3. Receiving services in the home

The decision will be based upon a consideration of:

1. The nature of the risk and how the disease is transmitted
2. The duration of the risk and how long the carrier is infectious
3. The severity of the risk and the potential harm to others
4. The individual's physical condition

In cases where there is not consensus concerning a decision, the Superintendent makes the final decision. Due process procedures may be followed if there is disagreement with this decision.

- J. No special consideration will be given beyond normal transfer requests for an employee who feels threatened by working with a participant who has a life-threatening disease.

## Section 3.2.2

# Universal Precautions

### **I. Universal Precautions**

Universal precautions is a system of protection which was developed by the Centers for Disease Control to protect employees and students/consumers from infections that are carried mainly in the blood and certain body substances. Universal precautions are to be used for ALL students/consumers and staff to decrease the risk of transmission of bloodborne agents, either from student/consumers to staff or staff to students/consumers.

Body substances commonly present that are considered hazardous for spreading bloodborne infections include:

1. Blood
2. Semen
3. Vaginal secretions
4. Body tissues (ex. Open wound)
5. Urine—if contains blood
6. Feces—if contains blood
7. Saliva—if contains blood

All individuals working in program facilities will:

- A. Wash their hands:
  1. Before and after any direct on-hands care of a student/consumer
  2. If contaminated with blood or other body fluids
  3. After handling any contaminated object
  4. After coming in contact with any contaminated surface
  5. After removing gloves
- B. Place disposable articles contaminated with body substances (other than sharp items) in plastic lined trash containers. Soiled dressings will be contained by wrapping in a used glove or plastic bag then placing it in a covered trash container.
- C. Wear gloves for contact with:
  1. Any body substances
  2. Non-intact skin or mucous membranes
  3. Incontinent care
  4. Handling items or surfaces soiled with blood or body substances

5. For performing venipuncture and other vascular access procedures such as finger sticks
6. For potential contact with any body substances

Always change gloves and wash hands before contact with another student/consumer.

- D. Wear a gown or apron during any procedure that is likely to soil clothing with body substances.
- E. Wear a mask and protective eye wear during any procedure that is likely to cause the splashing or generation of droplets of blood or other body substances, or if the procedure is likely to produce an aerosol. This is to prevent exposure of mucous membranes of the mouth, nose, and eyes.
- F. All health care workers should take precautions to prevent injuries caused by needles and other sharp objects. To prevent needle stick injuries:
  1. Needles should not be recapped, bent, or broken or removed from disposable syringes, or otherwise manipulated by hand
  2. After use, disposable syringes and needles and other sharp items should be placed in puncture resistant containers for disposal; puncture resistant containers should be located as close as practical to the use area. Containers must be transported off the premises only by companies who are registered as transporters (ORC Section 3734.022).
- G. Although saliva has not been implicated in the transmission of bloodborne agents, to minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces are available for use.
- H. Health care workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling student/consumer care equipment until seen by the program nurse for further instructions, which may include but not be limited to the wearing of latex or vinyl gloves.
- I. Pregnant workers are not known to be at greater risk of contracting bloodborne infection than other workers who are not pregnant. However, due to the risk of the fetus in utero, the pregnant worker should be especially familiar with and strictly adhere to universal precautions.
- J. Respiratory isolation will be used if a student/consumer has a known or suspected infectious disease that is spread over short distances through the air by droplets.

- K. Clean up of blood spills or any contaminated areas will be done wearing housekeeping gloves and using 1:10 bleach and water solution. Soiled materials will be placed in a plastic bag then placed in a covered trash container. Housekeeping gloves are then to be washed with hands in them with soap and water, then cleaned with 1:10 bleach and water solution.
- L. Staff performing any of the following tasks and procedures must adhere to universal precautions in the event any exposure to blood or other potentially infectious materials may occur.
1. Caring for clients during illness and vomiting; staff will adhere to universal precautions policy and wear personal protective equipment appropriate to the situation (i.e., mask, eye shields, disposable gloves, and gowns) during any probability of exposure. Clean up will be done according to Item “K” of this policy.
  2. Administration of first aid for any injuries, seizure activity, and/or accidents, staff will adhere to universal precautions during administration of first aid where possibility of exposure exists. Depending on severity of injury, the staff may be required to wear other personal protective equipment. Any clean up necessary will be done following Item “K” of this policy.
  3. While providing any hands-on hygiene assistance, staff will adhere to universal precautions using personal protective equipment appropriate to the situation.
  4. If pulmonary resuscitation would become necessary, staff will use universal precautions as well as mouth-to-mouth barriers. Clean up will be done according to Item “K” of this policy.
  5. Staff will adhere to universal precautions policy while handling laundry. Staff will wear housekeeping gloves if suspected contamination of laundry. Laundry department of JeffCo Inc. will follow proper laundry procedures. Any necessary clean up will be done according to Item “K” of this policy.
  6. Staff will intervene using universal precautions if possible if aggressions/biting occurs. If an exposure occurs, first aid will be administered and exposure procedures will be followed. If clean up is necessary, it will be done according to Item “K” of this policy.

In addition to the tasks and procedures listed above, the RN’s in these facilities could also risk exposure performing the following tasks and procedures:

1. Dressing Changes—Nurses will adhere to universal precautions wearing protective gloves and dispose of soiled dressings and

gloves in covered trash receptacles. If clean up is necessary, follow Item “K” of this policy.

2. Injections—Nurses will adhere to universal precautions wearing protective gloves for all injections. After injections, needles will be placed directly into sharps container. Needles will not be bent, recapped, removed, sheared, or purposely broken. Other contaminated materials will be disposed of in a covered trash receptacle. If clean up is necessary, it will be done according to Item “K” of this policy.
  3. Suctioning—Nurses will adhere to universal precautions as well as wear other personal protective equipment, using gown and mask with eye shields. All used materials will be disposed of in covered trash receptacles. If clean up is necessary, it will be done according to Item “K” of this policy.
  4. Aerosol Nebulization—Nurses will adhere to universal precautions as well as wear other protective equipment, using gown and mask with eye shields if necessary. All used materials will be disposed of in covered trash receptacles. If clean up is necessary, it will be done according to Item “K” of this policy.
- M. Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at these facilities. If any occupational exposure remains after institution of these controls, personal protective equipment shall be utilized. The following engineering controls are used in these facilities.
1. Sharps Containers—which are checked on a monthly basis by nursing staff.
  2. Personal Protective Equipment—which is replaced as used.
  3. 1:10 Clorox/H<sub>2</sub>O solution and/or an approved disinfectant or cleaning solution which will be checked and filled on a daily basis by janitorial department.
- N. Handwashing facilities are also available to the employees. Handwashing facilities are located:
1. School
    - a. In both locker rooms of gymnasium
    - b. In kitchen area of cafeteria
    - c. In family living department
    - d. In early intervention room
    - e. In each of the eighteen (18) restroom areas
  2. Workshop
    - a. First aid room
    - b. Cafeteria area

- c. In each of four (4) restroom areas
  - d. On production floor/general labor #2
  - e. In general labor #1
3. Training Center
- a. In first aid room restroom
  - b. In home economics room
  - c. In each of the eight (8) restroom areas
  - d. In laundry department
  - e. In cafeteria
- O. Personal protective equipment used at these facilities as mentioned in Item “D”—“E” of this policy will be provided without cost to employees. This equipment is chosen based on the anticipated exposure to blood or other potentially infectious materials. All personal protective equipment is disposable and will be placed in covered trash receptacles when used and disposed of properly. All personal protective equipment will be removed prior to leaving the work areas. Any personal garments which are penetrated by blood shall be removed immediately or as soon as feasible placed in a plastic bag.
- P. The facility will be cleaned and decontaminated according to the following schedule:
- 1. All carpeted areas are vacuumed daily
  - 2. All tiled floors are mopped daily and as needed
  - 3. All bathroom area are cleaned twice daily and/or as needed
  - 4. All trash receptacles are emptied daily

Decontamination is accomplished by utilizing a 1:10 bleach and water solution and/or an approved disinfectant cleaning solution. All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or other potentially infectious materials as well as the end of the work shift if the surface may have become contaminated since the last cleaning.

Any broken glassware which may be contaminated will not be picked up directly with the hands. It will be swept up with a broom into a dust pan and placed in a puncture proof container.

Q. Hepatitis “B” Vaccine

All employees, inclusive of substitutes, intermittent, summer help, part-time, and volunteers, who have been identified as having exposure to blood or other potentially infectious materials will be offered the Hepatitis “B” vaccine at no cost to the employee. The vaccine will be offered within ten (10) working days of the initial assignment to work

involving the potential for occupational exposure to blood or other potentially infectious materials, unless the employee has previously had the vaccine or wishes to submit to proof of antibody testing which shows the employee to have sufficient immunity. Employees who decline the Hepatitis "B" vaccine will sign a waiver which uses the wording in Appendix "A" of the OSHA standard.

Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided at no cost. The program nurse is responsible for assuring the vaccine is offered and waivers are signed. The Hepatitis "B" vaccine will be administered by the Steubenville Health Department.

## **II. Post-Exposure Evaluation and Follow Up**

When an employee incurs an exposure incident, it should be reported immediately to the supervisor of the department the exposure occurred in. All employees who incur an exposure incident will be offered post-exposure evaluation and follow up in accordance with the OSHA standard. This follow up will include the following:

- A. Documentation of the route of exposure and the circumstances related to the incident.
- B. If possible, the identification of the source individual, and if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infectivity.
- C. Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identify and infectivity of the source individual at this facility.
- D. The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.
- E. If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least ninety (90) days. If within ninety (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. The employee will be offered post-exposure prophylaxis in accordance with current recommendations of the US Public Health Service. These recommendations are currently as follows:
  1. The employee will be given appropriate counseling concerning precautions to take during the period after the exposure incident. The

- employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.
2. The following persons have been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to the policy:
    - a. Department Supervisor
    - b. Human Resource Manager
    - c. Program Nurse

### **III. Interactions with Health Care Professionals**

- A. A written opinion shall be obtained from the health care professional who evaluates employees of this facility. Written opinions will be obtained in the following instances:
  1. When an employee is sent to obtain the Hepatitis "B" vaccine
  2. Whenever the employee is sent to a health care professional following an exposure incident.
- B. Health care professionals shall be instructed to limit their opinions to:
  1. Whether the Hepatitis "B" vaccine is indicated and if the employee has received the vaccine, or for evaluation following an incident
  2. That the employee has been informed of the evaluation
  3. That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials; the written opinion to the Employer is not to reference any personal medical information.

### **IV. Training**

- A. Training for all employees will be conducted prior to initial assignments to tasks where occupational exposure may occur. Training will be conducted by a program nurse who will in-service annually on the universal precautions policy using lecture, video tapes, and written material.
- B. Training for employees will include an explanation of the following:
  1. The OSHA standard for blood borne pathogens
  2. Epidemiology and symptomatology of blood borne diseases
  3. Modes of transmission of blood borne pathogens
  4. This exposure control plan, i.e., points of the plan, times, responsibility, how the plan will be implemented, etc.
  5. Procedures which might cause exposure to blood or other potentially infectious materials at this facility

6. Control methods which will be used at the facility to control exposure to blood or other potentially infectious materials
7. Personal protective equipment available at this facility and who should be contacted concerning such equipment
8. Post-exposure evaluation and follow-up
9. Any signs and labels used at this facility
10. Hepatitis "B" vaccine program at the facility
11. Hazard communications

## **V. Recordkeeping**

- A. All records required by the OSHA standard will be maintained by the Human Resource Manager and the program nurse
- B. A program nurse is responsible for conducting the training, using lectures, video tapes, and written material.

## **VI. Dates**

- A. All employees will receive annual refresher training within one (1) year of the employee's previous training.
- B. The outline for the training material is located in a file and kept by the department supervisor.

## **VII. Definitions**

For the purpose of this policy, the following definitions shall apply:

- A. Blood—human blood, human blood components, and products made from human blood.
- B. Blood borne 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) and Human Immunodeficiency Virus (HIV).
- C. Contaminated—Presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.
- D. Decontamination—Use of physical or chemical means to remove, inactivate, or destroy blood borne pathogens
- E. Exposure Incident—Specifically eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of any employee's duties.
- F. Hand washing Facilities—Facility providing an adequate supply of running water, soap, and single use towels or hot air drying machines.

- G. Occupational Exposure—Reasonably anticipated skin, eye, mucous membrane or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.
- H. Parenteral—Piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.
- I. Source Individual—Any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.
- J. 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).

## Section 3.3

### Seniority

- A. Seniority is defined, for the purposes of Jefferson County Board of DD, as the uninterrupted length of continuous service with the agency, county, a general health district, or the State of Ohio. An authorized leave of absence does not constitute a break in service and seniority time continues to accumulate during the term of the leave, provided that the employee complies with rules and regulations governing his/her leave of absence, and that the employee is reinstated from leave.
- B. For the purposes of layoff, seniority is defined as continuous service with the agency, county, general health district, or the State of Ohio. Service may be transferred from one (1) agency to another without loss of seniority as long as no break in service of more than thirty (30) days occur. A break in service occurs if any employee is terminated for any reason other than layoff, and is not reinstated within one (1) year of the termination date. If an employee is reinstated within one (1) year of the termination date, continuous service will not be broken and prior service will be credited to the employee for purposes of determining seniority. Employees who are reinstated or reemployed from layoff within one (1) year of the layoff date will retain all previously accumulated seniority, but will not be credited with seniority for time spent on layoff.
- C. Seniority for purposes of vacation is calculated according to the number of years of service with the agency, county, or any political subdivision of the State of Ohio. The service need not be continuous; however, completion of a total of one (1) year of service as defined in Section 9.44 of the ORC is required before eligibility for any vacation leave is established.
- D. Seniority for the purposes of determining retirement benefits is defined by the provisions of the retirement system in which the employee participates.
- E. For all other purposes, other than those specified above, seniority shall be defined as set forth in the provisions of the Ohio Revised Code.

