

Statement of Policy

Greater Saskatoon Catholic Schools is committed to supporting healthy and safe workplaces for all employees. The purpose of this policy is to ensure staff are aware of potential infectious materials or organisms they could potentially be exposed to in the workplace and what steps to take if they experience exposure.

Rationale

To ensure Greater Saskatoon Catholic Schools complies with current Occupational Health & Safety Regulations with regards to limiting and/or eliminating exposure to infectious materials or organisms.

Authority

- Occupational Health & Safety (OHS) Regulations – Section 6-22

Related Policy

- GBG – Employee Health and Safety

Procedures/Guidelines

Requirements for an Exposure Control Plan

An exposure control plan must contain the following as per regulations:

- Be in writing.
- Identify any workers at the place of employment who may be exposed.
- Identify categories of tasks and procedures that may put workers at risk of exposure.
- Describe the ways in which infectious material or organism can enter the body of a worker and the risks associated with that entry.
- Describe infection control measures to be used.
- Identify the limitations of the infection control measures described.
- Set out procedures to be followed in each of the following circumstances:
 - If there has been a spill or leak of an infectious material or organism.
 - If a worker has been exposed.
 - If a worker believes that he or she has been exposed.
- Set out the methods of cleaning, disinfecting or disposing of clothing, personal protective equipment or other equipment contaminated with an infectious material or organism that must be followed and indicate who is responsible for carrying out those activities.
- Describe the training to be provided to workers who may be exposed and the means by which this training will be provided.

- Require the investigation and documentation, in a manner that protects the confidentiality of the exposed worker, of any work-related exposure incident, including the route of exposure and the circumstances in which the exposure occurred; and (l) require the investigation of any occurrence of an occupationally transmitted infection or infectious disease to identify the route of exposure and implement measures to prevent further infection.

Modes of Transmission

Modes of transmission are ways that communicable diseases can spread from person to person, or from the environment to a person. Types of modes of transmission include:

Direct Transmission

- *Droplet Spread*
Droplet Spread is the potential exposure to microorganisms when droplets leave a person via their respiratory tract. Droplets are generated and leave the body during talking, coughing, or sneezing. Transmission is possible and can occur over a short distance before the droplets fall to the ground.
- *Direct Contact*
Direct contact occurs when an infected person comes in skin-to-skin contact with another person.
- *Contact with Blood or Bodily Fluids*
Transmission occurs when an uninfected person comes in contact with bodily fluids such as blood, saliva, vomit, urine, fecal matter, etc.

Indirect Transmission

- *Airborne Transmission*
Airborne transmission occurs in the air when droplets or aerosol particles are transmitted from person to person. Talking, coughing, sneezing, and breathing all contribute to particles being spread over distances and can be suspended in the air for a period of time. The particles then can be breathed in or absorbed through the skin of a non-infected person.
- *Surface Contact*
Occurs when a person touches a contaminated surface and then touches their eyes, mouth, or nose before properly washing/ sanitizing their hands.
- *Environmental Source*
Transmission occurs when a person comes in contact with a source of infection from the environment such as animals, insects, soil, food, or water.

Portals of Entry

Microorganisms can enter the human body through the following ways:

- Skin breaks or punctures being contaminated.
- Bites from insects or animals.
- Contact with mucous membranes (ears, eyes, nose, mouth)
- Ingesting contaminated food or water

Roles & Responsibilities

Employer (Board of Education)

Employers' responsibilities include:

- Ensuring there are written exposure control plans available as required.
- Ensuring that exposure control plans are reviewed and amended, as needed, at least every two (2) years or as necessary.

Human Resources/ Supervisor (Administration/Supervisors)

Human Resources, in conjunction with Administration/Supervisor's, have the following responsibilities:

- Ensuring exposure control plans are followed.
- Ensuring that a copy of the exposure control plan is available to all staff.
- Leading in the identification, evaluation, monitoring and elimination or control of exposure hazards at the workplace to ensure it fits operational needs.
- Applying exposure control measures such as job safety analysis, safe work practices and procedures, monitoring implementation for effectiveness and revising the measures as required.
- Providing employees with appropriate Personal Protective Equipment (PPE) and other equipment as required and ensuring correct use and maintenance.
- Educating and training employees so they may recognize and protect themselves and others from exposure.
- Monitoring and coaching staff for compliance with exposure control plans.

Staff Member (Teacher, Caretaker, Support Staff, etc.)

Staff member's responsibilities include:

- Following exposure control plans.
- Knowing how and when to report exposure incidents to their supervisor, including, but not limited to, any failure of hazard control with equipment or safe work procedures.
- Participating in the evaluation, monitoring, and/or control of exposure hazards.
- Following job safety analysis, safe work practices and procedures.
- Wearing and maintaining appropriate PPE and other equipment, as required.
- Participating in safety education and training

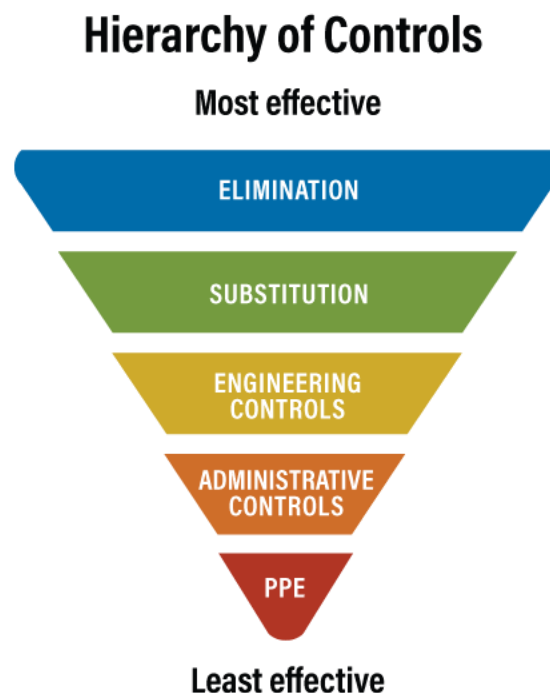
Occupational Health Committee/Representative

Occupational Health Committee's responsibilities include:

- Monitoring for effective hazard identification and risk assessment processes for infectious materials and organisms in the workplace.
- Providing consultation, review and recommendation(s) for the development and customization of the exposure control plan as designated by OHS legislation.

Hierarchy of Controls

The hierarchy of controls are used to eliminate or reduce hazards in the workplace. It is a stepped approach and ranks the most effective controls, or level of protection, to the least effective. For hazard assessments, elimination of the hazard would be the first control to be considered before moving on to substitution. This process is continued until the least effective control is reached and as many controls as possible have been identified to adequately protect staff members from the hazard. The hierarchy of controls is represented in the graphic below.



Elimination

Elimination refers to removing the hazard from the workplace. Elimination is the most effective way to manage hazards as the hazard is no longer present. It should be used whenever possible and is the preferred way of controlling workplace hazards. An example of elimination would be replacing noisy equipment with newer equipment that does not produce hazardous levels of noise, thus eliminating the risk of potential hearing loss due to repeated exposure.

Substitution

If a hazard cannot be eliminated from the workplace, substitution is the next control that should be considered. Substitution is when something hazardous in the workplace is replaced with something less hazardous. Thorough consideration must be taken when considering substitution to ensure that the new hazard is actually less dangerous than what it replaced. A good example of substitution would be replacing a lead-based paint with one that does not contain lead.

Engineering Controls

Engineering controls are methods that assist with controlling the hazard at its source before it is able to come in contact with staff. Engineering controls can be incorporated into equipment or a process to minimize the effect of the hazard.

They should be designed, used, and maintained properly to ensure they are effectively and reliably controlling staff exposure. Examples would include guards or shields on machinery with moving parts or installing guardrails to prevent a fall.

Process Control

Process control reduces risk by changing the way a process or task is carried out. Monitoring is recommended and should be carried out before and after a change is made to ensure the change did control the hazard. Examples of process control include using automation so less staff have to handle or use materials, thus reducing potential for exposure, or using mechanical transportation rather than manual methods.

Administrative Controls

Administrative controls reduce exposure to hazards by developing procedures to minimize risk. Examples include creating or improving training and education, developing or changing policies related to the work being done, or changing work practices and procedures.

Administrative controls are ranked the lowest in the hierarchy because these controls do not typically remove or reduce the hazard in the workplace. Examples include preventative maintenance programs to ensure that equipment is kept in good working condition, using signs to warn or alert staff of a workplace hazard (i.e. wet floor sign) or restricting access to specific work areas.

Personal Protective Equipment (PPE)

PPE refers to anything that workers may wear that is intended to protect them from hazards in the workplace.

PPE and its use as the main method of exposure control should be limited where possible and only considered if other methods of control are not possible. PPE limits potential exposure to a hazard and its harmful effects. However, PPE must be worn and used correctly to be effective. Examples of PPE include gloves, foot protection, hearing protection (i.e., earplugs), or eye protection (i.e., safety glasses).

Exposure and Clean Up Guidelines for Blood and Bodily Fluids (BBF)

1. Administration shall ensure that first aid materials and appropriate PPE are available and stored in an easily accessible location known to all staff members who are exposed to infectious material or organisms.
2. Protective gloves shall be worn when cleaning up bodily fluids.
3. Use dressings and tissues found in first aid kit to minimize direct contact with blood, other bodily fluids, and wounds.
4. If any part of the skin comes in contact with bodily fluids, the staff member is to immediately wash and disinfect the affected area with a disinfectant or hot soapy water.
5. Exposure of eye, mouth, ear and nose areas, and open skin wounds shall be avoided.
6. Staff responsible for cleaning are to first use disposable materials such as paper towels, as well as chemical for solidifying bodily fluids when possible. If cleaning tools such as a mop is used, it shall be cleaned with disinfectant.
7. All disposable articles soiled with bodily fluids shall be placed in a plastic container (i.e., garbage bag) that shall be sealed and disposed of immediately.
8. Non-disposable articles (i.e. clothing and linens that are visibly soiled with bodily fluids) are to be bagged or rinsed in water and then properly washed and sanitized. The staff member responsible for rinsing non-disposable articles is to wear protective coverings.
9. If the exposure occurred because of a student incident that may or may not have resulted in an injury, it shall be reported using the appropriate online reporting tool.
10. If staff are exposed to blood and bodily fluids (BBF), i.e. fluid contacts eyes, mouth, or open wound, during the cleanup process, they are to seek medical attention.

Documents/Forms

- Appendix A: Exposure Control Plan for Blood and Bodily Fluids
- Appendix B: Exposure Control Plan for Communicable Diseases

References

Canadian Centre for Occupational Health and Safety. (2022, June 3). *Hazard and risk – Hierarchy of controls*.

https://www.ccohs.ca/oshanswers/hsprograms/hazard/hierarchy_controls.html

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<https://taskroom.saskatchewan.ca/-/media/project/taskroom/documents/guide/exposurecontrolplanguidelines.pdf>

Government of Saskatchewan. (2020). *The Occupational Health and Safety Regulations, 2020*, S-15.1 Reg 10, s. 6-22.

Prairie Spirit School Division. (2023). *AP-410 physical safety* (Administrative procedure). <https://www.spiritsd.ca/files/app/410-Physical-Safety.pdf>

Saskatchewan Health Authority. (2023, October). *Primary health care communicable disease guidelines* (Table). <https://www.saskhealthauthority.ca/sites/default/files/2023-10/Table-PHC-CDGuidelines.pdf>

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Revision History: Record of Review, Policy Institution, and Revision

Original Review Date	Original Date of Policy Institution
March 16, 2026	August 11, 2026

Date(s) Reviewed	Date(s) Amended:	Date(s) Posted to Website:
March 16, 2026		August 11, 2026

Appendix A

Exposure Control Plan Blood and Bodily Fluids (saliva, vomit, urine, fecal matter)	
Staff members who may be exposed.	
- All staff	
Tasks or Procedures that may put staff members at risk of exposure	
- addressing violent student incident (i.e. spitting, biting, scratching). - assisting special needs students with bathroom functions. - assisting student experiencing bathroom related accident. - assisting student who threw up as a result of acute illness. - performing first aid on injured student or staff member. - clean up and disposal of items and equipment that come in contact with blood and bodily fluids.	
Ways in which an infectious material or organism can enter the body of staff member and risks associated with entry.	
– Eyes, mouth, nose, open wounds through direct contact with bodily fluids. – Risk of bacterial, viral, or parasitic infection (i.e. Norovirus, Hepatitis A). – Risk of blood borne infection (i.e. Hepatitis B, and Hepatitis C).	
Describe the signs and symptoms of any disease that may arise for a staff member exposed.	
– Refer to Saskatchewan Health Authority’s (SHA’s) Communicable Disease Guidelines (link) for signs and symptoms.	
Describe infection control measures to be used such as: vaccination, engineering controls, personal protective equipment, safe work practices and procedures, standard practices that incorporate universal precautions	
Vaccination – Hepatitis A and B vaccine Engineering Controls – Clean all potentially contaminated surfaces with soap and disinfectant Personal protective equipment – latex gloves – eye protection (i.e. face shields) – face masks Safe Work Practices and Procedures – Exposure and Clean Up Guidelines for Blood and Bodily Fluids (BBF)	
Identify limitations of the infection control measures	
– Can encourage staff and students to receive vaccines as per SHA guidelines but cannot mandate vaccine requirement. – Latex gloves only protect hands from exposure. – Eye protection and face masks only protect face from exposure. – Incorrect usage and handling of PPE. – Safe work practices and standard practices not always followed by staff.	

Set out procedures to be followed in each of the following circumstances: - if there has been a spill or leak of an infectious material or organism - if a staff member has been exposed - if a worker believes that he or she has been exposed
– If staff member has been exposed or believe that he or she has been exposed, they are to: • Report it to their Administrator/Supervisor and fill out either an online injury or incident report if appropriate. • Follow the guidelines in the Exposure Control Plan Policy and seek medical attention as needed. • Contact Healthline 811 for additional info. • If staff member shows symptoms and has been diagnosed, they are to follow exclusion guidelines and remain away from work as per SHA’s Communicable Disease Guidelines as needed (link).
Develop and implement methods of cleaning, disinfecting, or disposing of clothing, personal protective equipment or other equipment contaminated with an infectious material or organism. Indicate who is responsible for carrying out these activities
Exposure and Clean Up Guidelines for Blood and Bodily Fluids (BBF). – Caretakers are responsible for performing cleaning activities related to BBF. – Teaching and support staff may be responsible if applying first aid to a student or other staff member.
Describe the training that will be provided to staff members that may be exposed and how this training will be provided.
– Staff will review Exposure Control Plan Policy and supporting documentation.
Require the investigation and documentation, in a manner that protects the confidentiality of the exposed staff member, of any work-related exposure incident, including: the route of exposure and; the circumstances in which the exposure occurred.
Violent incidents (i.e. spitting, scratching, biting) are reported and investigated using online incident report system. – Violent incidents are investigated by Superintendent and Coordinator from Student Services team to ensure future incidents are prevented. – Follow Saskatchewan Health Authority’s (SHA) Communicable Disease Guidelines (link) for exclusion and reporting requirements.
Require the investigation of any occurrence of an occupationally transmitted infection or infectious disease to identify the route of exposure and implement measures to prevent further infection.
– Collaborate with the City of Saskatoon’s Emergency Management Organization and partner agencies, as required. – Liaise with the Medical Health Officer (MHO) regarding potential disease outbreaks. – Participate in quarterly meetings with the MHO and partner organizations to receive and share updates.

Appendix B

Exposure Control Plan Communicable Diseases	
Staff members who may be exposed.	
– All staff.	
Tasks or Procedures that may put staff members at risk of exposure	
– All roles in a school environment involve contact and face to face interactions with students or other staff members.	
Ways in which an infectious material or organism can enter the body of staff member and risks associated with entry.	
– Eyes, mouth, nose through droplet, airborne, and direct contact. – Risk of bacterial or viral infection such as Chicken Pox, COVID, Influenza, Measles, and Whooping Cough.	
Describe the signs and symptoms of any disease that may arise for a staff member exposed.	
– Refer to SHA's Communicable Disease Guidelines (link) for signs and symptoms.	
Describe infection control measures to be used such as: vaccination, engineering controls, personal protective equipment, safe work practices and procedures, standard practices that incorporate universal precautions	
Vaccination – COVID Vaccine – Influenza Vaccine – MMR vaccine (Measles, Mumps, Rubella) – Tdap vaccine (Diphtheria, Tetanus, acellular Pertussis) – Varicella vaccine (Chicken Pox) Personal Protective Equipment – PPE such as masks and gloves available to staff. Safe Work Practices and Procedures – Exposure Control Plan Policy procedures/ guidelines.	
Identify limitations of the infection control measures	
– Can encourage staff and students to receive vaccines as per SHA guidelines but cannot mandate vaccine requirement. – Latex gloves only protect hands. – Eye protection and face masks only protect face from exposure. – Incorrect usage and handling of PPE. – Safe work practices and standard practices not always followed by staff.	

Set out procedures to be followed in each of the following circumstances: - if there has been a spill or leak of an infectious material or organism - if a staff member has been exposed - if a worker believes that he or she has been exposed
– If staff member has been exposed or believe that he or she has been exposed, they are to: • Report it to their Administrator/Supervisor and fill out either an online injury or incident report if appropriate. • Follow the guidelines in the Exposure Control Plan Policy and seek medical attention as needed. • Contact Healthline 811 for additional info. • If staff member shows symptoms and has been diagnosed, they are to follow exclusion guidelines and remain away from work as per SHA’s Communicable Disease Guidelines as needed (link).
Develop and implement methods of cleaning, disinfecting or disposing of clothing, personal protective equipment or other equipment contaminated with an infectious material or organism. Indicate who is responsible for carrying out these activities
– See Exposure Control Plan Policy. – Caretakers are responsible for performing cleaning activities. – Teaching and support staff may be responsible if applying first aid to a student or other staff member.
Describe the training that will be provided to staff members that may be exposed and how this training will be provided.
– Staff will review Exposure Control Plan Policy and supporting documentation.
Require the investigation and documentation, in a manner that protects the confidentiality of the exposed staff member, of any work-related exposure incident, including: the route of exposure and; the circumstances in which the exposure occurred.
– Violent incidents (i.e. spitting, scratching, biting) are reported and investigated using online incident report system. – Violent incidents are investigated by Superintendent and Coordinator from Student Services team to ensure future incidents are prevented. – Follow Saskatchewan Health Authority’s (SHA) Communicable Disease Guidelines (link) for exclusion and reporting requirements.
Require the investigation of any occurrence of an occupationally transmitted infection or infectious disease to identify the route of exposure and implement measures to prevent further infection.
– Collaborate with the City of Saskatoon’s Emergency Management Organization and partner agencies, as required. – Liaise with the MHO regarding potential disease outbreaks. – Participate in quarterly meetings with MHO and partner organizations to receive and share updates.