



BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN- HEALTHCARE WORKERS (29CFR 1910.1030)

Note: The following model written program is provided as a guideline only.
Employers must develop written programs that are specific to their companies' needs.

MODEL EXPOSURE CONTROL PLAN

This model Exposure Control Plan for Bloodborne Pathogens is intended to serve as a guide to assist employers develop an Exposure Control Plan for their facility. **Each employer will need to adjust or adapt the model for their specific use.** The information contained in this guide is not a substitute for the OSH Act or any provisions of OSHA standards. It provides general guidance on a particular subject but should not be considered as the legal authority for compliance with OSHA requirements.

POLICY

The _____ (company name) _____ is committed to providing a safe and healthful work environment for our entire staff. The Exposure Control Plan is developed to eliminate or minimize occupational exposure to bloodborne pathogens and other potentially infectious material(OPIM) in accordance with OSHA standard 29 CFR 1910.1030 "Occupational Exposure to Bloodborne Pathogens."

The Exposure Control Plan was evaluated, reviewed, and revised as necessary on _____ (date) _____. The following employees were involved in this review. (Name employees involved). Documents showing employee involvement are maintained at _____ (location) _____.

PROGRAM ADMINISTRATION

- Name of responsible person or department is responsible for the implementation of the Exposure Control Plan, and will review and update the plan at least annually, and whenever necessary to include new or modified procedures. Name of responsible person is also responsible for ensuring **employee involvement** in the selection of engineering controls used at the facility.

- Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the ECP.
- Name of responsible person or department will maintain and provide all necessary personal protective equipment, engineering controls (ie. sharps containers, safer medical devices) labels, and red bags as required by the standard. Adequate supplies will be available in appropriate sizes.
- Name of responsible person or department will be responsible for the Sharps Injury Log..
- Name of responsible person or department will be responsible for training and recordkeeping.

EXPOSURE DETERMINATION

OSHA requires employers to perform an exposure determination concerning which employees may incur occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment (i.e. employees are considered to be exposed even if they wear personal protective equipment.)

- All employees who have exposure to bloodborne pathogens/OPIM:

Job Title

Department/location

In addition, OSHA requires a listing of job classifications in which some employees may have occupational exposure. Since not all the employees in these categories would be expected to incur exposure to blood or other potentially infectious materials, tasks or procedures that would cause these employees to have occupational exposure are also required to be listed in order to clearly understand which employees in these categories are considered to have occupational exposure.

Some employees have exposure to bloodborne pathogens during specific tasks:

Job Classification

Tasks/Procedures

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions

Universal precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material will be considered infectious regardless of the perceived status of the source individual.

Engineering controls

Engineering controls will be utilized to eliminate or minimize exposure to employees at this facility. Engineering controls are devices that isolate or remove the bloodborne pathogen hazard from the workplace.

- **Safer Medical Devices** will be used when they are appropriate, commercially available, and effective. The following Safer Medical Devices are used at this facility:

<u>Type of Device</u>	<u>Manufacturer/Model</u>	<u>Evaluated/Selected</u>
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Sharps Disposal Containers:

- Will be located as close as feasible to location where sharps are used;
- Will be removed and replaced as needed;
- Will not be allowed to overfill;
- Opening will be clearly visible and not obstructed.

Sharps containers are located at the following locations;

(list here locations)

Containers for Reusable Sharps:

- Contaminated sharps that are reusable are to be placed immediately, or as soon as possible, after use into appropriate sharps containers.
- Reusable sharps (suture needles, scalpels, saws) that are contaminated with blood or other potentially infectious materials shall not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.
- Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury.

Work Practice Controls

Work practice controls will be used to minimize exposure to bloodborne pathogens/OPIM:

Handwashing

- After removal of personal protective gloves, employees shall wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water.
- OSHA requires that handwashing facilities are readily accessible after incurring exposure. (If handwashing facilities are not feasible, the employer is required to provide either an antiseptic cleanser in conjunction with a clean cloth/paper towels or antiseptic towelettes. If these alternatives are used then the hands are to be washed with soap and running water as soon as feasible)
Employers who must provide alternatives to readily accessible and washing facilities should list the location, tasks, and responsibilities to ensure maintenance and accessibility of these alternatives:

Prohibit Recapping of Needles, Razors, Lancets and Sharps

- Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken.
- Used razors will not be recapped.
- OSHA allows an exception if the medical procedure requires that the contaminated needle be capped or removed and no alternative is feasible. If such action is required then the recapping or removal of the needle must be done by the use of a mechanical device or a one-handed technique. At this facility recapping or removal is only permitted for the following procedures: _____.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited

Work Area Restrictions

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

Specimens

Specimens of blood or other potentially infectious materials will be placed in a container which prevents leakage during the collection, handling, processing, storage, and transport of the specimens.

The container used for this purpose will be labeled or color coded in accordance with the requirements of the OSHA standard.

(Employers should note that the standard provides for an exemption for specimens from the labeling/color coding requirements of the standard provided that the facility utilizes universal precautions in the handling of all specimens and the containers are recognizable as containing specimens. This exemption applies only while the specimens remain in the facility. If the employer chooses to use this exemption then it should be stated here. _____

Any specimens which could puncture a primary container will be placed within a secondary container which is puncture resistant. (List specific situations:

_____.

If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container which prevents leakage during the handling, processing, storage, transport, or shipping of the specimen.

Contaminated Equipment

Equipment which has become contaminated with blood or other potentially infectious materials shall be examined prior to serving or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible. List specific equipment and labeling:

PERSONAL PROTECTIVE EQUIPMENT

All personal protective equipment used at this facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment is appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

The types of Personal protective Equipment available to employees are:

Gloves
Lab Coat
Face Shield
Clinic Jacket
Protective Eyewear (with solid side shield)
Surgical Gown
Shoe Covers
Utility Gloves
Examination Gloves
Other PPE (list)_____

Personal protective equipment is located: _____

- Wash hands immediately or as soon as feasible after removal of gloves or other personal protective equipment, even if the gloves do not appear contaminated with blood or other infectious material.
- Remove all garments which are penetrated by blood immediately or as soon as feasible.
- Remove all personal protective equipment prior to leaving the work area.
- Gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood or other potentially infectious materials.
- Disposable gloves are not to be washed or decontaminated for re-use.
- Replace gloves as soon as practical when they become contaminated, or as soon as feasible if they are torn, punctured, or compromised.
- Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Discard utility gloves if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration.
- Masks in combination with eye protection devices, such as goggles or glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, spray, splatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

HOUSEKEEPING AND DISINFECTION

This facility will be cleaned and decontaminated according to the following schedule:

<u>Area</u>	<u>Disinfection Schedule</u>
_____	_____
_____	_____

Decontamination will be accomplished by utilizing the following materials: (list the materials which will be utilized, such as bleach solutions or EPA registered tuberculocides, sterilants or products registered against HIV/HBV). _____

- 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.
- Work surfaces will be disinfected at the end of the work shift if the surface may have become contaminated since the last cleaning.
- Protective equipment coverings will be used to protect equipment handles, lamp handles against contamination. Protective coverings will be replaced after each patient.
- All bins, pails, cans, and similar receptacles shall be inspected and decontaminated as soon as feasible after visible contamination.
- Broken glassware which may be contaminated will not be picked up directly with the hands.

Regulated Waste Disposal

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded, and closed prior to removal to prevent spillage or protrusion of contents during handling.

All contaminated sharps shall be discarded as soon as feasible in sharps disposal containers which are located in the facility. Sharps containers are located in (specify locations of sharps containers).

Regulated wastes other than sharps shall be placed in appropriate containers. Such containers are located in (specify locations of containers).

Laundry Procedures

Laundry contaminated with blood or other potentially infectious materials will be handled as little as possible. Such laundry will be placed in appropriately marked bags at the location where it was used. Such laundry will not be sorted or rinsed in the area of use.

All employees who handle contaminated laundry will utilize personal protective equipment to prevent contact with blood or other potentially infectious materials.

Laundry at this facility will be cleaned at _____.
(If blood-contaminated laundry is sent off site, then the laundry service is to be notified, in accordance with section (d) of the standard.)

Employee clothing that has become contaminated with blood or OPIM will be cleaned at no cost to the employee. The procedure for handling employee clothing or uniforms which have become contaminated with blood or other potentially infectious materials is _____.

Labels

The following labeling methods are used in this facility:

Equipment/item to be labeled	Label type (size, color, etc.)
_____	_____
_____	_____

HEPATITIS-B VACCINE

All employees 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 10 working days of their initial assignment to work involving the potential for occupational exposure to blood. Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune; or 3) medical evaluation shows that vaccination is contraindicated.

Employees who choose to decline the Hepatitis B vaccine must 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.

Hepatitis-B antibody testing

- **All workers who have on-going contact with patients, or who are at on-going risk for injury by needlestick or other contaminated sharps, should receive the Hepatitis-B antibody test within 4-8 weeks after the third dose of the vaccine.**

Vaccine Schedule

- The vaccine will be provided by: _____(provide facility name, address, phone #)
- The vaccine will be provided during the employees work hours.

EXPOSURE INCIDENT AND FOLLOW-UP

When the employee incurs an exposure incident, it should be reported to: _____

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A post-exposure evaluation will be provided immediately and at no cost, to all employees who experience an exposure incident:

First Shift: (Name of facility that will conduct follow-up)
Address
Phone #
Forms or other billing information

Second Shift: (Name of facility that will conduct follow-up)
Address
Phone #
Forms or other billing information

Third Shift: (Name of facility that will conduct follow-up)
Address
Phone #
Forms or other billing information

This follow-up will include the following:

- documentation of the route of exposure and the circumstances related to the incident
- if possible, the identification of the source individual and the status of the source individual. The blood of the source individual will be tested (after consents obtained) for HIV, HBV and HCV.
- 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 identity and infectivity of the source individual. (Employers may need to modify this provision in accordance with applicable local laws on this subject. Modifications should be listed here:
- The employee will be offered the option of having their blood collected for testing of the employees HIV/HBV/HCV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be

tested for HIV serological status.

- The employee will be offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service.
- 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.

Name here the person who will be responsible for being sure that the post-exposure evaluation is received by the employee.

Interactions with Health Care Professionals

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 the employee is sent to obtain the Hepatitis B Vaccine.
- 2) Whenever the employee is sent to a health care professional following an exposure incident.

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 results of the evaluation, and
- 3) That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials. (note that the written opinion to the employer is not to reference any personal medical information).

TRAINING

Training for all employees will be conducted prior to the initial assignment to tasks where occupational exposure may occur, and repeated at least annually. Training for employees will include the following:

- 1) The OSHA standard for bloodborne pathogens
- 2) Epidemiology and symptomatology of bloodborne diseases
- 3) Modes of transmission of bloodborne pathogens
- 4) Contents of the exposure control plan,
- 5) Procedures which might cause exposure to blood or OPIM at this facility

- 6) Control methods which will be used at the facility to minimize exposure to blood/OPIM
- 7) Personal protective equipment available at this facility, use and limitations
- 8) Post exposure evaluation and follow-up
- 9) Signs and labels used at the facility
- 10) Hepatitis B vaccine program at the facility

Indicate here who will provide the training.

RECORDKEEPING

Medical Records

Medical records are maintained for each employee in accordance with 20 CFR 1910.20 "Access to Employee Exposure and Medical Records". Medical records are confidential, and maintained by _____(name)_____ at ____ (list location)_____. Medical records are kept at least the duration of employment plus 30 years. Employee medical records are provided upon request to the employee to anyone having written consent of the employee within 15 working days.

Training Records

Training documents will be kept for at least three years by ____ (name) _____ at _____ location _____. Training records include: dates of training session; contents; name and qualifications of instructor; names and job title of all persons attending the training session.

Sharps Injury Log (*this log was added to standard in January 18, 2001 revision*)

A separate, sharps injury log will be maintained to record percutaneous injuries from contaminated sharps. The information in the sharps injury log shall be recorded and maintained to protect the confidentiality of the injured employees. The sharps injury log shall contain: type and brand of device involved in the incident; and the department or work area where the exposure incident occurred.

The Sharps Injury Log will be maintained by ____ (name)_____ at location.

Annual Review (*this requirement added to standard in January 18, 2001 revision*)

The Exposure Control Plan will be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. The review shall include:

- Document annually the evaluation and implementation of appropriate, commercially available and effective safer medical devices; and
- Document employee involvement in the evaluation and selection of safer medical devices.

The Annual Review and Employee Involvement documentation will be maintained by ____ (name) ____ at ____ (location) ____.