

Bloodborne Pathogens Exposure Control Plan Checklist

This Exposure Control Program Checklist is a guide that may assist your agency in compliance with the Bloodborne Pathogens Standard. It is designed to enhance your infection control program. Please refer to the standard, 1910.1030 to determine which portions are applicable to your agency. It is available at www.OSHA.gov, the OSHA website.

The person in charge of implementing the Bloodborne Pathogens Standard may:

- 1) use the entire checklist
- 2) use only those items which are applicable, based on your activities

Nothing in checklist exempts the employer from the requirements of the Bloodborne Pathogens Standard itself, or from other applicable OSHA Standards or State of Oklahoma statutes. Your infection control plan must be site specific for your facility not just a copy of another organization's document.

Exposure Control Plan Checklist

REQUIREMENTS

1. Ensure your exposure control plan contains at least the following elements (without regard to the use of personal protective equipment):
 - A list of all job classifications in which *all* employees have an occupational exposure,
 - A list of job classification in which *some* employees have occupational exposure, and
 - A list of all tasks and procedures in which occupational exposure occurs.

2. Identify in your exposure control plan:
 - Universal Precautions and preferably Body Substance Isolation, and
 - Engineering and Work Practice Controls for:
 - Readily accessible handwashing/handcleaning facilities, and
 - Contaminated needles and other contaminated sharps handling and container requirements.

3. Include in your exposure control plan specific procedures for:
 - Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses,
 - Refrigerators, freezers, shelves, cabinets, countertops or benchtops where blood or other potentially infectious materials (OPIM) are present.
 - Minimizing splashing, spraying, spattering and generation of droplets, and
 - Specimens/evidence with blood or OPIM collection, handling, processing storage, transport or shipping.

Elements

PERSONAL PROTECTIVE EQUIPMENT

- Appropriately sized and fluid impervious Personal Protective Equipment must be listed in your plan and include providing PPE such as, but not limited to:
 - gloves,
 - gowns or suitable body protection,
 - face shields or masks and eye protection,
 - resuscitation bags,
 - pocket masks with one way valves , and
 - shoe and head coverings.

- Require the use of appropriate PPE, unless rare and extraordinary circumstances occur.
- Readily accessible fluid impervious PPE in the appropriate sizes must be available.
- Replacement, repair, cleaning, laundering and disposal must be discussed in the plan.
- PPE must be placed in appropriately designated area or container, not taken home.

HOUSEKEEPING

- Appropriate written schedule for cleaning and method of decontamination for all:
 - equipment,
 - work surfaces, and
 - sharps that are not disposable regulated waste.

REGULATED WASTE (involving sharps)

- Contaminated sharps shall be discarded immediately in containers that are:
 - closable,
 - puncture resistant,
 - leakproof on sides and bottom, and
 - correctly labeled or color coded.
- Containers for contaminated sharps shall be:
 - easily accessible,
 - maintained upright, and
 - replaced routinely and not allowed to overfill.
- When moving containers, close prior to moving (place in secondary container if leakage is possible)

OTHER REGULATED WASTE CONTAINMENT

- Waste must be placed in bags or containers which are:
 - closable,
 - able to contain all contents and prevent leakage of fluids,
 - properly labeled or color coded, and
 - closed prior to removal to prevent spillage.
- If outside contamination of container occurs, place contaminated container in second container that meets the requirements listed above.

REGULATED WASTE DISPOSAL (that does not contain contaminated sharps)

- If your department generates less than 65 pounds of regulated waste a month, it can currently be landfilled in Oklahoma. If you are reviewing your plan in the future, contact the Oklahoma Department of Environmental Quality, Waste Management Division for any changes to this regulation.
- Waste onsite must be appropriately contained.

If contaminated laundry, uniforms, street clothes are sent offsite.

- Handle as little as possible. Remember to:
 - bag or containerize on-scene in proper bag/container that will not leak, and
 - wear appropriate personal protective equipment.
- If you ship laundry off site to a second facility, you must place items in labeled bags or containers.
- Receiving facility employees must be trained in handling of BBP contamination.
- Decontamination procedures must be site specific.
- All decontamination areas are to be correctly identified.
- Carefully read the labels and package inserts with tuberculocidal products and follow instructions for use.
- Always wear gloves. Wear appropriate face, eye and body protection if splashing can be anticipated. Wear shoe coverings if large amount of blood or OPIM is present.
- Use EPA registered tuberculocidal or 10% solution of bleach in water mixed within last 24 hours.
- Wash linens, uniforms and laundry in normal laundry cycles according to manufacturers instructions.

HEPATITIS B VACCINATION

- General requirements include:
 - provided no cost to employee,
 - given at a reasonable time and place,
 - performed under supervision of licensed healthcare professional,
 - all lab tests are accredited and at no cost to employee,
 - procedures are according to the current recommendations of U.S. Public Health Service,
 - made available after employee receives training,
 - provided within 10 days of assignment,
 - Follow OSHA algorithm for hepatitis B vaccination.
- Declination of vaccination
 - Employee may decline Hepatitis B vaccination and receive vaccination at later date at no charge.
 - If employee declines vaccination, he/she must sign mandatory form.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

- The employer shall immediately assist the employee in completing an occupational exposure incident report, Oklahoma State Department of Health Form 207 (confidential), which is used by all emergency response and public safety facilities.
- Site Specific information is to be provided to the healthcare professional and facility identified in your exposure control plan.
- The OSHA algorithm for post-exposure evaluation and follow up is to be used.
- The healthcare professional's written opinion shall remain confidential to protect the employee and source individual.

COMMUNICATION OF HAZARDS TO EMPLOYEES THROUGH LABELS WITH THE BIOHAZARD SYMBOL

- The labels shall be affixed or be an integral part of all containers (bags, boxes, evidence, sharps, refrigerators, cabinets...) of regulated waste used to store, ship, or transport waste.
- Red bags or red containers may be substituted for labels.
- Place individual containers in a labeled container during storage, transport, shipment or disposal.
- Regulated waste that has been decontaminated need not be labeled or color-coded.

INFORMATION AND TRAINING

- Shall be provided
 - at no cost and during working hours,
 - at the time of initial assignment, and
 - Annually or when changes are made such as modifications of tasks or procedures.
- Material utilized shall be appropriate in content and vocabulary or educational level, literacy, and language of employees.

The training program shall contain at a minimum the following elements:

- An accessible copy of the regulatory text of this standard and an explanation of its contents,
- A general explanation of the epidemiology and symptoms of bloodborne diseases,
- An explanation of the modes of transmission of bloodborne pathogens,
- An explanation of the employer's exposure control plan and the means by which the employee can obtain a copy of the written plan,
- An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials,
- An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment,
- Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment,
- An explanation of the basis for selection of personal protective equipment,
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge,
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials,
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available,
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident,
- An explanation of the signs and labels and/or color coding required by paragraph,
- An opportunity for interactive questions and answers with the person conducting the training session,
- A requirement that the person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.

MEDICAL RECORDKEEPING

- Recordkeeping shall comply with 29 CFR 1910.20
- The record shall include:
 - name and social security number,
 - a copy of employee hepatitis B vaccination status,
 - a copy of results of examinations, testing and follow-up,
 - a copy of healthcare professional's written opinion, and
 - a copy of all information provided to healthcare professional.
- The record shall be maintained for the duration of employment plus 30 years.

EXPOSURE AND RECORD CONFIDENTIALITY

- Employee records shall be kept confidential.
- Information from employee records shall not be disclosed without the employee's express written consent.

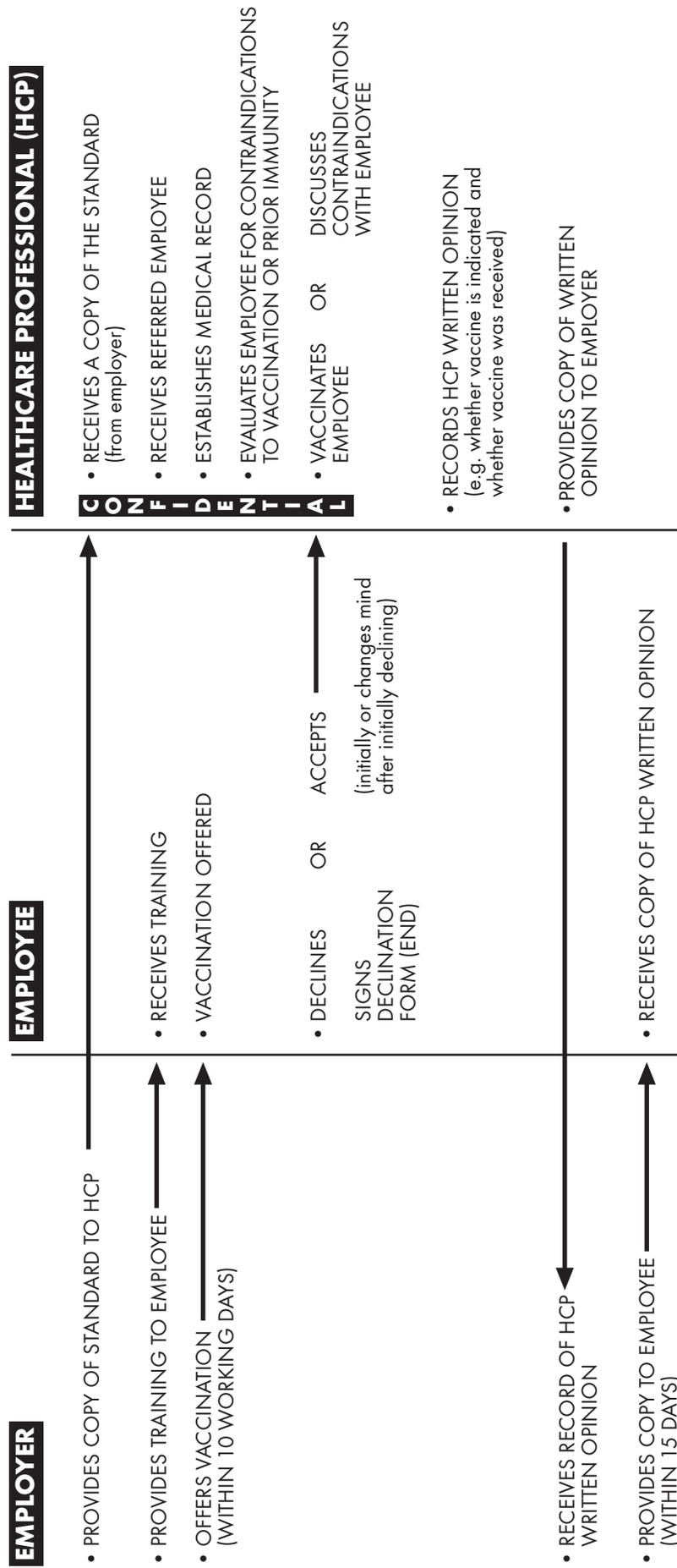
TRAINING RECORDS

- Training records shall include:
 - dates of training,
 - contents/summary of training session,
 - names and qualifications of trainer(s), and
 - names and job titles of all persons attending the training.
- Records must be maintained for 3 years.

All medical and training records are to be provided upon request for examination and copying to the subject employee or anyone having written consent of subject employee.

ALGORITHM FOR HEPATITIS B VACCINATION

(U.S. DEPARTMENT OF LABOR/OSHA, 1992b)



ALGORITHM FOR POST EXPOSURE EVALUATION AND FOLLOWUP

(U.S. DEPARTMENT OF LABOR/OSHA, 1992b)

EXPOSURE INCIDENT OCCURS

EMPLOYEE

- REPORTS INCIDENT TO EMPLOYER →

EMPLOYER

- DIRECTS EMPLOYEE TO HCP
- SENDS TO HCP
COPY OF STANDARD
JOB DESCRIPTION OF EMPLOYEE
INCIDENT REPORT
(Route, circumstances, etc.)
SOURCE INDIVIDUAL'S IDENTITY AND HBV/HIV
STATUS (if known)
EMPLOYEE'S HBV STATUS AND OTHER RELEVANT
MEDICAL INFORMATION
- DOCUMENTS EVENTS ON OK 200 AND OKLA
WORKER COMP FORM 2 (if applicable)

HEALTHCARE PROFESSIONAL (HCP)

- EVALUATES EXPOSURE INCIDENT
- ARRANGES FOR TESTING OF EMPLOYEE AND
SOURCE INDIVIDUAL (if not already known)
- NOTIFIES EMPLOYEE OF RESULTS OF ALL TESTING
- PROVIDES COUNSELING
- PROVIDES POST-EXPOSURE PROPHYLAXIS
- EVALUATES REPORTED ILLNESSES

CONFIDENTIAL

- RECEIVES COPY OF HCP'S WRITTEN OPINION ←

- RECEIVES HCP'S WRITTEN OPINION →
- PROVIDES COPY OF HCP'S WRITTEN OPINION TO
EMPLOYEE (within 15 days of completed evaluation)

- SENDS (ONLY) THE HCP WRITTEN OPINION TO
EMPLOYER:
 - Documentation that employee was informed of test results
and the need for any further follow-up
- AND
- Whether HBV vaccine is indicated and if vaccine was
received

