

Sample
Bloodborne Pathogen
Exposure Control Plan
For Child Care Facilities

Family and Social Services Administration
Division of Family and Children
Bureau of Child Development
Child Care Health Section
10/1/99

Compiled by:

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This facility is committed to providing a safe work environment for staff. In pursuing this endeavor, _____ (facility name) is providing a Bloodborne Pathogen Exposure Control Plan (ECP) which meets the requirements of Occupational Health and Safety Organization (OSHA)'s Bloodborne Pathogen Standard and Indiana State Department of Health's Universal Precautions regulation, and the Indiana Family and Social Services Child Care regulation.

- This ECP includes the following information:
- Employee exposure determination
- Procedures for evaluating the circumstances surrounding an exposure incident
- The schedule and methods for implementing specific requirements of the Bloodborne Pathogen Standard:
 - Methods of compliance
 - Hepatitis B vaccination and post-exposure follow-up
 - Training and communication of hazards to employees
 - Record keeping

Program Administration

Responsibility list:

_____ is responsible for the implementation of the ECP and reviewing
(name and position)
the plan at least annually and updating it as needed.

Those employees who are reasonably anticipated to have contact with or exposure to blood (or other potentially infectious materials (OPIM) as defined by OSHA) are required to comply with the procedures and work practices outlined in the plan.

_____ will assure that written house-keeping protocols are developed
(name and position)
and that an appropriate disinfectant is available and used.

_____ will be responsible for training, documentation of training, and
(name and position)
making the written ECP available to employees, OSHA, IOSHA, Division of Family and Children representatives.

_____ will maintain ongoing controls such as labeling biohazard bags
(name and position)
and solutions and provide all personal protective equipment (PPE), and other needed supplies, such as sharps containers and "spill kits". ("Spill Kits" refers to a kit made up of disposable medical gloves, resuscitation bags, eye protection or goggles, aprons, disinfectant, disposable towels, red/biohazard labeled bags. **Red/Biohazard bags are needed only for items which release blood when compressed**)

Employee Exposure Determination (complete sections that apply)

The following is a list of job classifications in which employees would be expected to handle blood and/or OPIM as a full time part of their job. (This would include only **full time** first aid and medical staff).

The following is a list of job classifications in which some employees would be expected to handle blood and/or OPIM. Included are a list of tasks and procedures in which occupational exposure may occur. (This will include persons trained in first aid and whose job requires rendering first aid as apart of job duties).

The following is a list of job classifications in which **NO** employees would be expected to handle blood and/or OPIM.

Note: All exposure determinations were made without regard to the use of personal protection.

Methods of Implementation and Control

Universal Precautions:

Universal Precautions procedures must be used by employees when handling blood or OPIM. Universal Precautions means an approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious with HIV, hepatitis B, and other bloodborne pathogens.

Exposure Control Plan

Employees covered by the OSHA Standard may request to review the Standard that shall be available at the facility. The ECP shall also be available to employees.

Work Practice Controls

Handwashing facilities shall be accessible.

No eating drinking, smoking, applying cosmetics or lip balm, and handling contact lenses when blood or OPIM is present.

No food or drink shall be kept in areas (such as on countertops) where blood or OPIM is present.

All surfaces contaminated with blood will be cleaned with either a 10% household bleach solution or a tuberculocidal solution.

Most items used in cleaning a blood spill (i.e. paper towels) will be placed in the regular trash unless saturated with blood. Items saturated with blood to the point that blood is released when compressed shall be placed in a leak-resistant bag labeled with the biohazard symbol.

Other (specify)

Engineering Controls

Mixing and labeling of solutions

Proper trash disposal and labeling of bags when compressible blood is present

Note: If the facility gives injectable medication, policies regarding the safe handling of needles will be needed.

- Containers for “sharps”
All needles and syringes will be discarded in container immediately after use. Needles must not be recapped.

Personal Protective Equipment

Personal protective equipment (PPE) shall be available to employees. The following PPE is available at this facility:

- Single use medical Gloves
- Mouthpieces for resuscitation (CPR)

Gloves shall be used when handling blood or OPIM and replaced if torn, punctured, contaminated, or if their ability to function as a barrier is compromised.

Hands and any exposed skin shall be washed immediately or as soon as feasible after removal of gloves. Unless saturated with blood, gloves may be placed in the regular trash. Gloves saturated with blood shall be placed in a leak-resistant bag labeled with the biohazard symbol.

Single Use Disposable medical gloves are not washed or decontaminated. They are discarded after use.

Training

This facility provides an annual bloodborne pathogen training program that covers at a minimum, the following elements:

- A copy and explanation of the OSHA standard.
- Epidemiology and symptoms of bloodborne pathogen
- Modes of transmission
- Information about the facility's bloodborne pathogen plan. And where the plan can be reviewed.
- Methods to recognize exposure tasks and other activities that may involve exposure to blood.
- Use and limitations of engineering controls, work practices and PPE.
- PPE-types, use, location, removal, handling, decontamination, and disposal
- PPE-selection and basis
- Hepatitis B vaccine (stated to employee that vaccine is free of charge prior to offering vaccine).
- Use of "spill kits" and location of kits with Quick access.
- Procedures for limiting exposure to blood or OPIM
- Post-exposure evaluation and follow-up
- Signs and labels
- Question and Answer session

Training records shall be maintained for three years. Training records include:

- Date of training
- Content or summary of the training
- The name and qualifications of the trainer
- The names and job titles of all persons attending the session

Note: "spill kits" include:

- Disposable medical gloves
- Aprons
- Eye protection
- Resuscitation bags
- Disinfectant
- Disposable towels
- Red Bags/Biohazard Bags

Hepatitis B Vaccine and First Aid Providers

This section applies to employees who are designated to render first aid assistance but this assistance is not their primary work assignment. The names of first aid providers at this facility are listed below (and in the Exposure Determination Section):

Provide training which includes:

- Information emphasizing the safety, benefits, effectiveness, method of administration and availability of vaccine
- Knowledge of Appendix A and the Declination statement

This facility has decided to (must check one):

_____ offer **free of charge*** hepatitis B vaccination to the first aid provider after involvement with blood.

_____ offer **free of charge*** pre-exposure vaccination to employees

*Note: Employee will be informed that vaccine is free prior to offering vaccine.

In the event of a first aid incident where blood or OPIM are present, the employee must report to _____ (specify name) and review the circumstances. If PPE (i.e. gloves) are used and blood or OPIM not touched, no exposure occurred. If gloves are not used and a true exposure occurred (blood or OPIM gets inside the body by means such as blood touching an open sore or skin with dermatitis or a puncture wound by a sharp object that has blood on it), then a report with the name of the first aider, date, time, and description of the incident should be filled out.

This facility will ensure that any first aider that desires the vaccine series after **involvement** with blood will receive it within 24 hours.

This facility provides training to first aid providers about reporting involvement with blood and exposure incidents.

Post Exposure Evaluation

Should an exposure incident occur, contact _____ (responsible person at the facility) and a medical evaluation will be provided by _____ (list medical provider or clinic). The facility will see that the following elements are performed:

- Documentation of the route of exposure and how the exposure occurred
- Identification of the Source (person's blood that employee was exposed)
- Obtain consent and test source individual for HIV and/or Hepatitis B antibody ASAP.
- If source does not give consent, **document** that consent could not be obtained.

Source testing will be done by: _____ (list medical provider or clinic i.e. Source's physician)

The facility will ensure that the medical care provider is given the following information:

- A description of the employee's job duties relevant to the exposure incident.
- Route and circumstances of the exposure.
- If possible, the results of the Source antibody testing.
- Relevant employee medical records, including hepatitis B vaccination status.
- Copy of regulation

The medical provider will be requested to provide the facility with the following:

- If Hepatitis B is indicated and if employee has received vaccine.
- Whether or not the employee has been informed of the results of medical and any medical condition that may require further evaluation and treatment.

Medical Records

Any employee medical record will be kept at the facility for employment plus 30 years.

Appendices

Appendix A: The OSHA Bloodborne Pathogen Standard

Appendix B: ISDH Communicable Disease Law and Universal Precautions Rule

Appendix C: Attach list of employees listed in the ECP