Sample Exposure Control Plan

This sample Exposure Control Plan is provided as a guide to help employers create their own plan.

**Policy**

*(Insert Facility/Company Name)* are committed to providing its employees with a safe and healthful working environment. To create such an environment, the following Exposure Control Plan (ECP) has been developed to eliminate or minimize occupational exposure to bloodborne pathogens according to OSHA standard 29 CFR 1910.1030, “Occupational Exposure to Bloodborne Pathogens.”

**Program Administration**

*(Insert name of Person or department responsible)* is the program administrator and it is their responsibility to maintain, and implement this ECP. The ECP must be annually or whenever necessary due to new or adapted tasks and procedures, be reviewed and updated to reflect any changes. Contact details: ______________________________

It is the responsibility of the program administrator to:

- Provide and maintain all required personal protective equipment (PPE), engineering controls, labels and waste bags as required by the standard
- Ensure there are adequate supply levels of the aforementioned equipment
- Ensure that all required medical actions are executed and maintaining all employee health and OSHA records
- Make the ECP available to all employees, OSHA and NIOSH representatives and ensure that all training and associated documentation is also available
- Annually review and update the program to ensure effectiveness

All employees that have occupational exposure to blood and other potentially infectious materials (OPIM) must always follow the procedures and work practices specified in the ECP.

The employees that are covered by the bloodborne pathogens standard will receive an explanation of the ECP during their first training and their annual refresher training. Employees can view the ECP at anytime by contacting the program administrator. A personal copy for those who request it, can be supplied free of charge to employees within 15 days of the request.

**Employee Exposure Determination**

The following is a list of all job classifications where all employees have occupational exposure:
The following is a list of all job classifications where *some* employees have occupational exposure. A list of tasks and procedures where occupational exposure could occur for these employees has been included:

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<th>JOB TITLE</th>
<th>DEPARTMENT/LOCATION</th>
<th>TASK PROCEDURE</th>
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This standard covers those employees who are part-time, temporary, contract and per diem. The ECP must describe how the provisions of this standard will be met for these employees.

**Methods of Implementation and Control**

Universal Precautions:
- Employees must use universal precautions. Regardless of what the employee thinks, all blood and other potentially infectious materials will be handled as if it were infectious

Engineering Controls and Work Practices:
- Engineering and Work Practice Controls will be used to minimize exposure to bloodborne pathogens. The specific Engineering and Work Practice Controls are listed below:

  **Engineering Controls**

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  **Work Practice Controls**

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Engineering and Work Practice Controls will be reviewed for changes by (Insert how changes will be reviewed, for example: employees, new safer products, updates to OSHA standards etc.)

All employees are involved in this process (Insert how employees will be involved in this process)

**Personal Protective Equipment (PPE)**

The PPE listed below will be provided to employees at no cost:

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<th>JOB TASKS</th>
<th>PPE NEEDED</th>
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It is the responsibility of the Program Administrator to ensure that the appropriate PPE is readily available to employees. For those employees that are allergic to the gloves normally provided will have similar alternatives readily available.

Employees who use PPE must observe the following precautions:
- Immediately after the removal of gloves or PPE must wash their hands as soon as possible
- PPE must be removed after it becomes contaminated and before leaving the work area
- If it is anticipated your hands may come in to contact with blood or OPIM the appropriate gloves must be worn. If the gloves become punctured or contaminated replace the gloves immediately
- Never wash or reuse contaminated gloves
- Wear face and eye protection if splashes or sprays of blood or OPIM are a hazard
- Remove any contaminated PPE as soon as possible in a way that avoids contact with the skin and the PPE's outer surface

It is the responsibility of the employer to launder, clean, dispose of or replace PPE, at no cost to the employee. Used PPE must be placed in its designated area.

**Housekeeping**

General Procedures:
- Areas that are contaminated must be decontaminated as soon as possible. The following materials will be used in decontamination:
  - ___________________________________________
Regulated Waste:
- Contaminated sharps must be disposed of in approved containers immediately after being used. Labelled, biohazard bags will be used for other regulated wastes. Should a container or bag containing regulated waste become contaminated on the outside, the contaminated container must be placed in another container.

Laundry:
- Laundry that has been contaminated with blood or OPIM should be handled as little as possible and must be placed in an appropriately marked bag at the location where it was being used. Always use PPE when handling contaminated laundry to avoid contact with blood or OPIM. Laundry will be cleaned at ________________

**Hepatitis B Vaccination**

Hepatitis B vaccinations are available to employees who have been identified in the exposure determination of the ECP at no cost after their first training or within 10 working days of the initial assignment. Vaccinations should be conducted unless:
- The employee presents documentation that they have already received the vaccine
- Antibody testing shows the employee is immune
- A medical evaluation reveals that vaccination is contraindicated

Employees can choose to decline the vaccination and must sign a declination form which must be maintained. The employees who decline vaccination can obtain the vaccination at a later date at no cost.

All employee vaccinations will be provided by (Insert Healthcare Professional who will conduct the vaccinations) and in accordance with U.S. Public Health Service Guidelines.

After the medical evaluation has been conducted, the healthcare’s professional written opinion will be provided to the employee. The opinion will advise whether the employee needs the vaccine or if it has been administered.

**Post-Exposure Evaluation and Follow-Up**

When an exposure incident occurs immediately contact (Insert name of person) at (Insert phone number of person)

An immediate confidential medical evaluation and follow-up will be conducted by (Insert Healthcare Professional who will conduct this). After initial first aid has been administered, the following must be performed:
- Document how the exposure occurred and the routes of exposure
- Identify and document the source individual, unless identification is infeasible or prohibited by state laws
• Get consent from the source individual to have them tested unless they are already known to be HIV, HCV or HBV infected
• Test exposed employee’s blood as soon as possible after the exposure for HBV and HIV serological status. If employee consent is not given to this test, the baseline blood sample must be preserved for at least 90 days. Should the employee choose to have the baseline blood sample tested within this time, the test must be done as soon as possible.

**Administration of Post-Exposure Evaluation and Follow-Up**

The Program Administrator must ensure that those responsible for the employee’s Hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA’s bloodborne pathogens standard. They must receive the following:
- Description of employee’s duties that relate to exposure incidents
- Routes of exposure
- Circumstances of exposure
- If available, the results of the blood test of the source individual
- The relevant medical record of the employee (including vaccination status)

**Procedures for Evaluating the Circumstances Surrounding an Exposure Incident**

The Program Administrator must review all circumstances surrounding exposure incidents and record percutaneous injuries from contaminated sharps into the Sharps Injury Log. This review determines:
- What engineering controls were in use at the time
- What work practices were followed
- A description of the type/brand of device that was used
- What PPE or clothing was used at the time
- The location of the incident
- What procedure was being performed at the time of the incident
- What training the employee has received

**Employee Training**

Every employee that has occupational exposure to bloodborne pathogens must receive training on the epidemiology, symptoms, and transmission of bloodborne pathogens. Training shall be conducted by (Name of responsible person or department) who will have all necessary training materials available for review. The training must also cover:
- Copy and explanation of the standard
- Explanation of the ECP and how to get a copy of it
- Methods to recognize tasks that have the possibility of exposure incidents
- Explanation of the use and limitations of engineering and work practice controls and PPE
• Types, uses, location, removal, handling, decontamination and disposal of PPE
• Explanation for the basis for selection of PPE
• Information on Hepatitis B vaccine: its efficacy, safety, method of administration, benefits, and that the vaccination is offered free of charge
• Who to contact and what to do in an emergency involving potentially infectious materials
• Procedures to follow in case of exposure incident, method of reporting, and follow-up
• Employer required post-exposure evaluation and follow-up after exposure incident
• Explanation of sign and labels and/or color-coding required and used at your facility
• Opportunity for interactive questions and answers with conductor of training

Recordkeeping

Medical records:
• Medical records are maintained for each employee who has an occupational exposure to bloodborne pathogens.
• (Name of responsible person or department) is responsible for maintaining medical records. These confidential records are kept (List location) for the duration of employment plus 30 years beyond the duration of employment.
• Employee medical records can be provided upon the request of the employee or to anyone with written consent of the employee within 15 business days. (Name of responsible person or department and address) will make sure the appropriate employee health records are maintained as required.

Training Records:
• Upon completion of training, training records are completed for each employee. (Name of responsible person or location of records) will keep and maintain these records for a minimum of 3 years.
• Training records must include:
  o Dates of training
  o Content or summary of training
  o The names and qualifications of those conducting the training
  o The names and job titles of all persons attending the training
• Employee training records can be provided to the employee or to an authorized representative of the employee within 15 business days. (Name of responsible person or department) would respond to such requests and be responsible for them.

Sharps Injury Log:
• All percutaneous injuries from contaminated sharps are recorded in the Sharps Injury Log. This log must include at least:
  o Date of injury
  o Type and brand of the device involved
- Where the incident occurred (the department or work area)
- How the incident occurred

This log is reviewed at least once per year as part of the annual program evaluation and is kept for at least 5 years following the end of the calendar year that it covers. Copies that are provided upon request must have any personal identifiers removed.

(Name of responsible person or department) will maintain the Sharps Injury Log.