Regulatory Legislative

DRYCLEANING & LAUNDRY INSTITUTE BULLETIN

BLOODBORNE PATHOGENS STANDARD REQUIREMENTS

There are 10 basic parts to a written Bloodborne Pathogens written plan.

- 1. Creation and maintenance of an Exposure Control Plan (ECP) which details:
 - a) Determination of employee exposure
 - b) Implementation of exposure control methods
 - Universal precautions
 - Engineering and work practice controls
 - Personal protective equipment (PPE)
 - Housekeeping
 - c) Hepatitis B vaccination
 - d) Post-exposure evaluation and follow-up
 - e) Communication of hazards to employees and training
 - f) Recordkeeping
 - g) Procedures of evaluation circumstances surround exposure incidents
- 2. Program administration with includes:
 - a) The party responsible for implementation and maintenance of the ECP
 - b) A determination and list of employees with possible occupational exposure to blood or other potentially infectious materials by job title and department or location, tasks, and procedures
 - c) Provisions for and maintenance of all personal protective equipments, engineering controls, labels, red disposal bags, and an adequate quantity of supplies and equipment in appropriate sizes
- 3. ECP implementation and control methods to:
 - a) Ensure universal precautions are utilized at all times
 - b) That employees receive initial training and that training is updated yearly and/or when change in a procedure affect occupational exposure
 - c) Ensure availability of the ECP to any employee requesting it at any time during their work hours
 - d) Implementation and training for the use of disposal methods and equipment
 - e) Training in the use of personal protective equipment (PPE) for specific tasks or procedures observing the following precautions
 - Wash hands immediately or as soon as feasible after removing gloves or other PPE
 - Remove PPE after it becomes contaminated and before leaving the work area



- Used PPE disposed of in (create a list of appropriate containers)
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or other potential infectious materials, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration
- Never use or decontaminate disposable gloves for reuse
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or other potentially infectious materials pose a hazard to the eye, nose, or mouth
- Immediately remove or as soon as feasible any contaminated garment or covering in such a way as to avoid contact with the outer surface
- 4. Housekeeping refers to establishing specific procedures and securing receptacles for regulated wastes
- 5. A list, identification and handling procedures for items that will be decontaminated through the use of specific laundry procedures
- 6. Hepatitis B vaccination training, safety, benefits, efficacy, methods of administration, availability at no cost, and a declination form

- 7. Post-exposure evaluation and follow-up will
 - a) Document the routes of exposure and how the exposure occurred
 - b) Identify and document the source individual
 - c) Obtain consent and make arrangements to have the source individual tested to determine HIV, HCV, and HBV infectivity and document that the test results are conveyed to the employee's health provider
 - d) If consent is not given, maintain baseline blood sample for at least 90 days
- 8. Administration of post-exposure evaluation and followup ensures that the health care professional evaluating an employee after an exposure incident receives the following:
 - a) A description of the employee's job duties relevant to the exposure incident
 - b) Route(s) of exposure
 - c) Circumstances of exposure
 - d) If possible, results of the source individual's blood test
 - e) Relevant employee medial records including vaccination status
 - f) Engineering controls in use at the time
 - g) Work practices followed
 - h) A description of the device being used including type and brand
 - i) Protective equipment or clothing that was used at the time of the exposure incident
 - j) Location of the incident
 - k) Procedure being performed when the incident occurred
 - 1) Employee's training
- 9. Employee training which will include all of the following
 - a) A copy and explanation of the OSHA Bloodborne Pathogen Standard
 - b) An explanation of the ECP and how to obtain a copy
 - c) An explanation of methods to recognize tasks that may involve exposure including what constitutes an exposure incident

- d) An explanation of the use and limitations of engineering controls, work practices, and PPE
- e) An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- f) An explanation of the basis for PPE selection
- g) Information on the hepatitis B vaccine
- h) Information on the appropriate actions to take and persons to contact in an emergency
- i) An explanation of the procedure to following if an exposure incident occurs
- j) Information on post-exposure evaluation and follow-up
- k) An explanation of signs and labels and/or color coding required by the standards and onsite use
- l) An opportunity for interactive questions and answers
- 10. Training records are completed for each employee upon completion of initial and subsequent refresher training for a period of at least three years. These records will consist of
 - a) The dates of the training sessions
 - b) The contents or a summary of the training sessions
 - c) The names and qualifications of the persons conducting the training
 - d) The names and job titles of all persons attending the training sessions

This Bulletin is the second of three to provide general guidance regarding implementation of written plans required by OSHA standards. While DLI believes that the information is sufficient to meet all requirements at the time it is published, DLI does not accept responsibility for omissions, errors, or subsequent changes. The full text of these standards is available at www.osha.gov by using the alphabetical index. Click on 'H' for the Hazard Communication Standard; click on 'B' for the Bloodborne Pathogen Standard; click on 'L' for Lockout/Tagout.