

OSHA' S BLOODBORNE PATHOGEN

Presented by
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Disclaimer

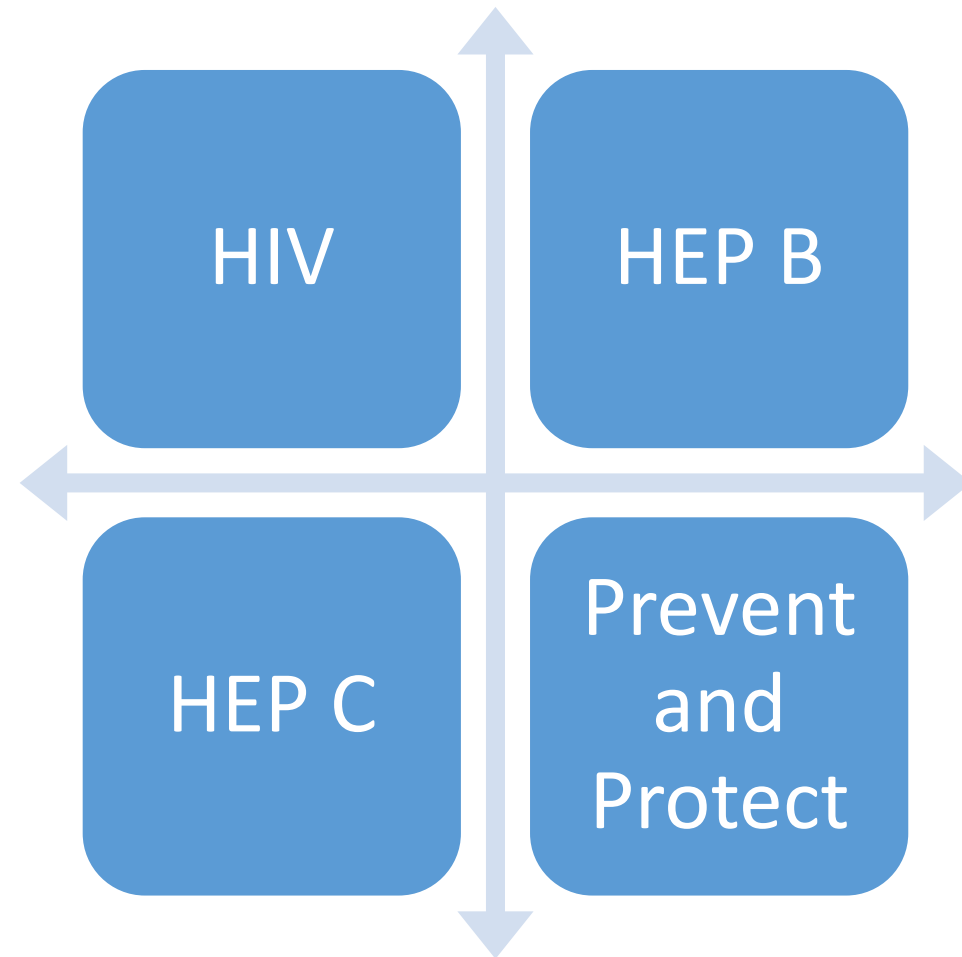
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Bloodborne Pathogen Standard - 1991

- Enacted to protect employees from serious illness or death as a result of exposure to infectious material in the blood, especially HIV, hepatitis B, and hepatitis C
- Specifically defines what employers must do to protect employees at risk of exposure through job functions

Bloodborne Pathogen Standard



Requirements of the Standard

- Written Exposure Control Plan – updated annually
- Hep B vaccination at no cost to the employee
- Personal protective equipment (PPE)
- Post exposure follow-up
- Employee Medical Records
- Training Records

Exposure Control Plan

- Written plan on how employer will provide protection for employees:
 - Exposure determination of employees.
 - Engineering controls
 - Work practice controls
 - PPE
 - Post exposure follow-up
- Must be accessible to employees.
- Must be updated annually to reflect:
 - Any change in processes
 - Annual consideration and implementation of safer medical devices designed to eliminate or minimize occupational exposure

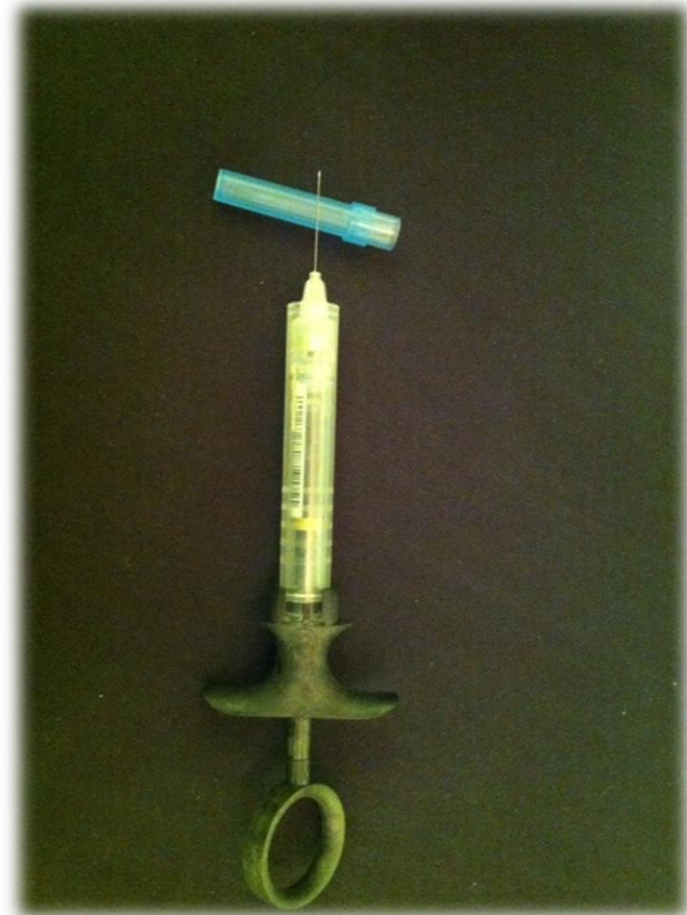
Exposure Determination

- List of job classifications in which all or some employees have occupational exposure.
- List of all tasks and/or procedures in which occupational exposure occur.
- Exposure determination made without regard to the use of PPE.



Engineering Controls – Safety Devices

- Devices or equipment controls that eliminate, isolate or remove the bloodborne pathogens hazard from the workplace.
- Engineering controls protect the workers permanently.
- If available must utilize safety devices.



Needlestick Safety and Prevention Act

- Safety devices to be evaluated by the employees' utilizing the devices
- If using safety devices always activate the safety mechanism
- Feedback or work practice



Must Use Safety Devices Unless...

Three accepted reasons why safety devices are not used:

- ☒ No product on the market
- ☒ It would jeopardize safety of patient or employee or the success of the procedure
- ☒ Is not more effective in preventing exposure incidents



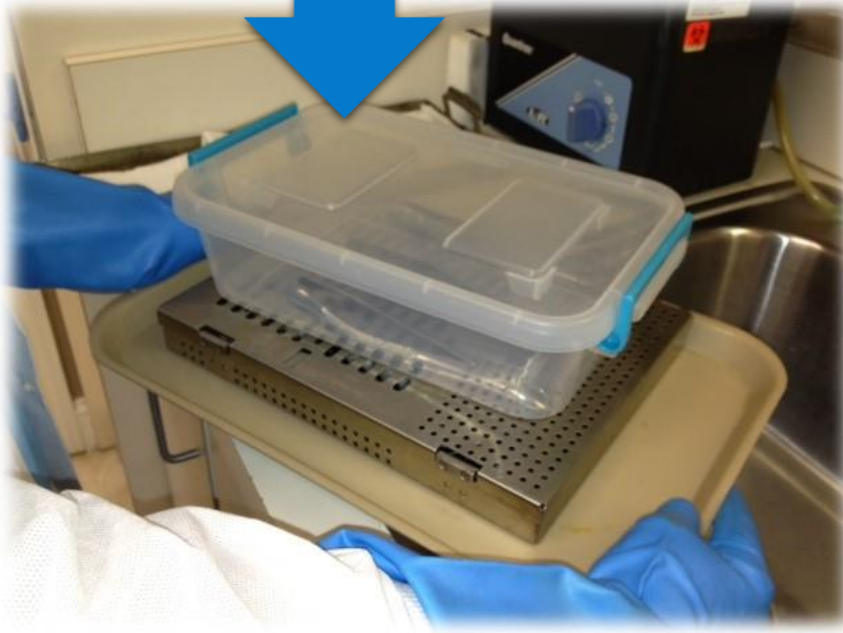
Transport of Contaminated Reusable Sharps



- Bloodborne Pathogens Standard 1910.1030 (3)
- When **moving containers of contaminated sharps from the area of use**, the containers shall be:
 - (i) **Closed** immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport or shipping;

Identify These Work Practices Controls

Safe transport of sharps



Eliminate reaching into a container of sharps

Hepatitis B Vaccination

- Employer must make Hepatitis B vaccination available to employees who are occupationally exposed:
 - Free of charge at a reasonable time and place
 - Within 10 working days of initial assignment
- If providing the vaccine, titers are now required 1-2 months after vaccination series ends.
- Must have proof of series or declination on file.
- **Exception:**
 - Employee has been vaccinated
 - Antibody testing reveals immunity



Personal Protective Equipment



Appropriate Use of PPE

- Training must occur on initial assignment and reviewed on an annual basis
- Use based on task being performed which are outlined on the Hazard Assessment tool
- Accessible, properly cleaned, laundered, repaired, and disposed of at no cost to employees



An Exposure Has Occurred



How Do Exposures Occur?

- Stick with contaminated needle
- Cuts from sharp objects that are contaminated with blood or OPIM
- Splash to mucous membranes of the eyes, nose, mouth or to non-intact skin



Items to Consider

- Who will manage the post exposure process
 - Employee Health
 - Occupational Medicine
 - Emergency Departments/Urgent Care
- Establish the relationship in advance
 - Payment of services
 - Wait times to be evaluated
 - Rapid HIV testing for source patient
 - Availability of post exposure medication
 - Current with most recent guidance on bloodborne exposures

Post Exposure Process

- Clean and flush
 - Where is the closest eyewash for a splash to the face?
- Report
 - Every employee must know to WHOM to report the incident.
- Employees must be offered baseline testing and counseling
 - Not required to move forward, but should be asked to sign a declination of care.
- Source patient will have testing for Hepatitis B and C, and HIV
 - Test results will be shared with the healthcare provider for the exposed worker.

Medical Record

- Required for all employees at risk of exposure to BBP.
- Confidential file which should not be stored with HR file.
- Employee name and social security number.
- Copy of HBV vaccination status.
- All incident reports.
- Copy of information provided to healthcare provider for exposure evaluation.
- Copy of results of examinations, medical testing, follow-up procedures.
- Employer's copy of healthcare professional's written opinion.
- Retained for duration of employment plus 30 years.

Provide Employee Training

- At no cost to the employee and during work hours
- At the time of initial assignment to tasks where exposure may occur and annually thereafter
- An opportunity for interactive questions and answers with the person conducting the training

Training Records

- The dates of the training sessions
- The contents or summary of the training sessions
- The names & qualifications of persons conducting the training
- The names & job titles of all persons attending the session
- Training records shall be maintained for 3 years from the date on which the training occurred

Thank you!

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