


SCOR

SAFETY COMPLIANCE FOR OSHA REGULATIONS

A Cottingham & Butler Program

Bloodborne Pathogens

WELCOME

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LEARNING OBJECTIVES

This class is designed to give you the knowledge to:

- Briefly describe the hazards associated with bloodborne pathogens
- Determine if the Bloodborne Standard is applicable to your business
- Develop a written program
- Provide training and equipment to employees

POLL #1

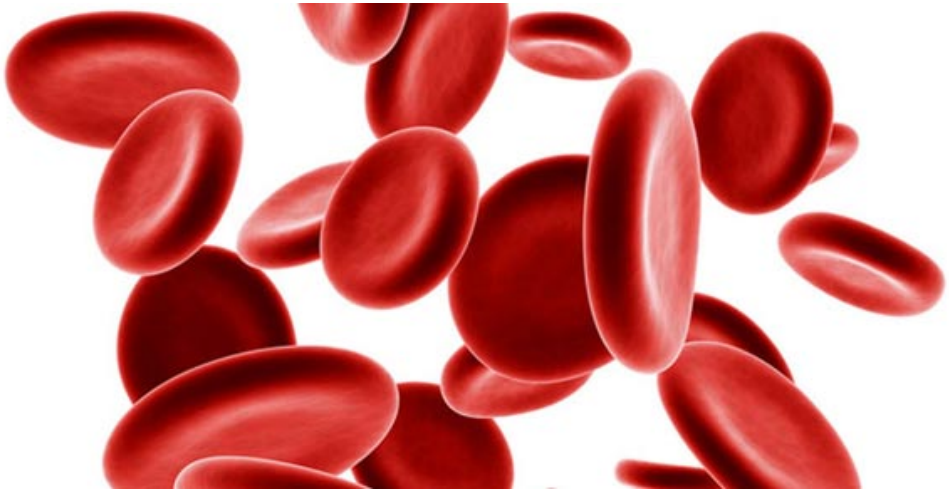
My company currently has:

a) Workers whose PRIMARY duty is healthcare
b) Designated and trained first-aid providers
c) Janitorial workers whose duties may expose them to bloodborne pathogens
d) B & C
e) Has no jobs that potentially exposes workers to bloodborne pathogens

WHAT ARE BLOODBORNE PATHOGENS?

Microorganisms present in human blood that cause diseases like:

- Human immunodeficiency virus (HIV)
- Hepatitis B virus (HBV)
- Hepatitis C virus (HCV)



HUMAN IMMUNODEFICIENCY VIRUS (HIV)

Probably the most recognized and stigmatized bloodborne illness is the Human Immunodeficiency Virus (HIV), the virus which causes AIDS.

- Virus dies quickly when exposed to air (less than 10 minutes)
- Symptoms may not occur for years
- 50,000 new cases of HIV in US annually
- 32,000 cases of AIDS annually

HEPATITIS B (HBV)

Estimated by the CDC to be 100 times more infectious than HIV, the Hepatitis B virus:

- Can survive at room temperature for months
- Can be present in all bodily fluids
- Approximately 18,800 new cases in US annually
- Approximately 1.4 million chronic carriers in US

HEPATITIS C (HCV)

More common than HBV, Hepatitis C:

- No vaccine is available for preventing infection
- Can be present in all bodily fluids
- Approximately 16,600 new cases in US annually
- Approximately 3.2 million chronic carriers in US

DETERMINING OCCUPATIONAL EXPOSURE

OSHA requires that all employers that who "reasonably anticipate exposure" of employees to infectious material must prepare and implement a written exposure control plan.

DETERMINING OCCUPATIONAL EXPOSURE

Occupational exposure is defined as reasonably anticipated skin, eye, mucous membrane, or contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

DETERMINING OCCUPATIONAL EXPOSURES

OSHA says… In the absence of an infirmary, clinic, or hospital in near proximity to the workplace… a person or persons shall be adequately trained to render first aid. Adequate first-aid supplies shall be readily available.

WHAT DOES “NEAR PROXIMITY” MEAN?

OSHA stated in a letter of interpretation dated January 16, 2007 to Mr. Charles F. Brogan:

- the term 'near proximity' to mean that emergency care must be available within no more than 3-4 minutes from the workplace.
- workplaces, such as offices, where the possibility of such serious work-related injuries is less likely, a longer response time of up to 15 minutes may be reasonable.

THIRD PARTY EMERGENCY RESPONDERS

An employer must take appropriate steps prior to any accident to ascertain that emergency medical assistance will be promptly available when an injury occurs.

- Often difficult to obtain a formal agreement
- Unreliable
- Often out of range

TRAINING FIRST AID RESPONDERS

Providing one or more employees who are trained and certified in first aid (including CPR) is for most employers a feasible and low-cost way to protect employees, as well putting the employer clearly in compliance with the standards.

WORKPLACE EXPOSURE

- Most common: needle sticks
- Cuts from other contaminated sharps (scalpels, broken glass, etc.)
- Contact of mucous membranes (for example, the eye, nose, mouth) or broken (cut or abraded) skin with contaminated blood

DEVELOPING AN EXPOSURE CONTROL PLAN

A written Exposure Control Plan contains

- Identification of job classifications w/ exposure
- Methods of implementation and control
- Employee training
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Recordkeeping

METHODS OF IMPLEMENTATION AND CONTROL

- Universal Precautions
- Engineering Controls and Work Practices
- PPE

UNIVERSAL PRECAUTIONS

- Treat all human blood and certain body fluids as if they are infectious
- Must be observed in all situations where there is a potential for contact with blood or other potentially infectious materials

ENGINEERING CONTROLS AND WORK PRACTICES

The primary methods used to control transmission of BBP's

- Wash hands after removing gloves and as soon as possible after exposure
- Cleaning incident scene
- Disposal of contaminated materials
- Laundering contaminated clothing

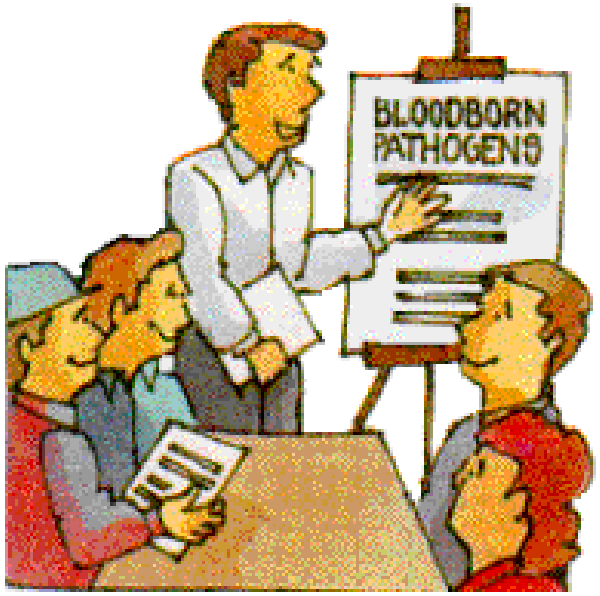
PERSONAL PROTECTIVE EQUIPMENT

When occupational exposure remains after engineering and work practice controls are put in place, personal protective equipment (PPE) must be used

EMPLOYEE TRAINING

Employers must train each employee with occupational exposure:

- At the time of initial assignment
- Annually thereafter



EMPLOYEE TRAINING

The training program shall contain at a minimum the following elements (12):

- A copy of the BBP standard
- A general explanation of the epidemiology and symptoms of bloodborne diseases
- An explanation of the modes of transmission of bloodborne pathogens
- All remaining elements of the Exposure Control Plan

EMPLOYEE TRAINING

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.

INTERNAL TRAINERS VS. OUTSIDE TRAINERS

OSHA says: “possible trainers include a variety of healthcare professionals… Non-healthcare professionals… may conduct the training provided they are knowledgeable in the subject matter... One way, but not the only way, knowledge can be demonstrated is the fact that the person received specialized training.”

EMPLOYEE TRAINING

Training records must be kept for three years. Training records must include:

- Training dates
- Contents of the training
- Name and qualifications of trainer
- Name of job titles of trainee

HEPATITIS B VACCINATION

Must be made available free of charge at a reasonable time and place to all employees at risk of exposure within 10 working days of initial assignment.

Employers must assure that employees who decline to accept the Hepatitis B vaccination offered by the employer sign the statement in Appendix A.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Following a report of an exposure incident, the employer must establish procedures that:

- Provide for a confidential medical evaluation and follow-up
- Documents how the exposure occurred
- Identifies and tests the source individual, if possible
- Tests the exposed employee's blood, if consent is obtained
- Provide counseling and other assistance

BIOHAZARD WARNING LABELS

Warning labels required on:

- Containers of regulated waste
- Refrigerators and freezers containing blood and other potentially infectious materials
- Other containers used to store, transport, or ship blood or other potentially infectious materials

Red bags or containers may be substituted for labels

RECORDKEEPING

The employer shall establish and maintain confidential medical records for each employee with occupational exposure. This record:

- Must be made available to employees upon request
- Include a copy of healthcare professional's opinion
- Include a copy of information provided to healthcare professional
- Cannot be released without employee's written consent, or if required by law
- Must be maintained for the period of employment plus 30 years

POLL #2

According to OSHA, what does “near proximity” mean (expressed in medical care response time) when determining the need for onsite trained first-aid providers in a non-office environment?:

a) 10 minutes

b) 3-4 minutes

c) 30 minutes

d) 20 minutes

SUMMARY

Most employees will be required to have first aid responders, and in turn will need to develop a BBP control plan. Remember:

- Assume all blood or bodily fluids are contaminated
- Train your employees
- Provide more than one (1) first-aid responder per shift
- Document HBV Vaccination Declination
- Review your plan annually

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