

# BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

LOCATION: \_\_\_\_\_

PLAN ADMINISTRATOR: \_\_\_\_\_

DATE OF PLAN: \_\_\_\_\_

APPLIES TO: ALL STAFF, STUDENTS, CONTRACTORS, VENDORS AND THIRD PARTIES  
VISITING THE LOCATION

## PURPOSE:

To establish basic procedures to be followed to minimize or prevent exposure to bloodborne pathogens (BBP) and other potentially infectious materials (OPIM) such as vomit or soiled clothing during incidents that might cause exposure.

The likeliest exposure incidents at the location are:

- Responding to illness and injury
- Providing first aid
- Carrying out cleaning duties following a spill of blood or OPIM.

This plan applies to all location staff, all contractors and vendors performing work at the location, and all other individuals who are visiting or have business with the location.

## RESPONSIBILITIES:

The person in charge is responsible for reviewing and enforcing this plan and is also responsible for appropriate staff training.

Staff are required to comply with all procedures outlined in this plan.

## CONTROL PROCEDURES:

- A. Engineering Controls: Because exposure to BBP and OPIM at the location arises from accidents, when people respond to an illness or injury, provide first aid, or are required to clean up, no engineering controls are available.
- B. Exposure Controls:
  1. Only designated staff members who are trained, authorized and equipped to respond to medical emergencies and/or bodily fluid spills may do so. All other staff shall avoid contact and notify the person in charge if they encounter a spill or potential exposure incident.
  2. While responding to bodily fluid spills, an appropriate level of personal protective equipment should be worn. For instance:
    - Safety glasses or face shield--Incidents with potential exposure to bodily fluids becoming airborne (e.g. a laceration with spurting, arterial bleeding).
    - Disposable liquid proof gloves--All incidents.



- Apron/disposable suit and shoe covers--Incidents when bodily fluids might become airborne or incidents in which response staff could walk through a spill or move against material contaminated with a spill.
- Barrier mask and/or Bag Valve Mask--Incidents requiring mouth to mouth or mouth to nose breathing.

Adequate supplies of personal protective equipment are kept in \_\_\_\_\_  
[identify specific location].

3. Regulated Waste such as contaminated dressings, bandages and other materials must be double bagged in red biohazard bags and disposed of as regulated waste using an approved disposal contractor.
4. Medical sharps such as insulin needles must be placed in a secured sharps container.
5. All potentially contaminated surfaces must be cleaned and sanitized with an approved sanitizing solution or must be disposed of as contaminated medical waste. Staff performing this duty will be trained in all aspects of this plan and will be required to wear appropriate Personal Protective Equipment (PPE) as outlined above.
6. After performing necessary duties staff must clean and sanitize any contaminated PPE, remove and discard it.
7. All staff are required to wash their hands with soap and warm water (waterless skin sanitizer is available to use when potable water is remote from the scene) immediately after removing PPE.
8. Any member of the staff (including both staff trained and authorized to respond to incidents and those that are not) should immediately do the following if an exposure is suspected:
  - Wash exposed skin surfaces with large amounts of soap and warm water. Exposed mucus membranes should be rinsed with large quantities of warm water.
  - Report any actual or suspected exposure incident to the person in charge or the plan administrator. The staff member exposed will be referred to a physician or other licensed health care provider for confidential follow-up care to be provided at no cost to the staff member.
9. Log the incident in the BBP incident record. If the exposure was extensive, inform the Archdiocesan Director of Communications and the Insurance Department.

