Exposure Control Plan

POLICY

ExpertCare is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, “Occupational Exposure to Bloodborne Pathogens.”

The Exposure Control Plan is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
  - Universal precautions
  - Engineering and work practice controls
  - Personal protective equipment
  - Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding exposure incidents

Implementation methods for these elements of the standard are discussed in the subsequent pages of this Exposure Control Plan (ECP).

PROGRAM ADMINISTRATION

The Training Department and Business Division Manager are responsible for implementation of the ECP. The Training Department will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact ExpertCare at (248) 643-8900.

Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

The training department will provide and maintain all necessary personal protective equipment (PPE) and universal precautions as required by the standard. The training department will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.
The training department will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.

The training department will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and other representatives.

**EMPLOYEE EXPOSURE DETERMINATION**

Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

<table>
<thead>
<tr>
<th>Job Title</th>
<th>Location</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregiver</td>
<td>At client’s home</td>
<td>Emergency FA or CPR</td>
</tr>
<tr>
<td>Caregiver</td>
<td>At Client’s home</td>
<td>Being bitten or scratched by a client who is a carrier of certain diseases</td>
</tr>
</tbody>
</table>

**METHODS OF IMPLEMENTATION AND CONTROL**

**Universal Precautions**

All employees will utilize universal precautions.

**Exposure Control Plan**

Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work shifts by contacting the Training department. If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

The Training Department is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

**Engineering Controls and Work Practices**

Engineering controls such as needleless systems, non-glass capillary tubes, sharps containers, etc. are not needed as ExpertCare Caregivers do not provide medical care and this section is not applicable to the scope of the work.

**Personal Protective Equipment (PPE)**

PPE is provided to our employees at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided by The Training Department. The types of PPE available to employees are as follows:

- Gloves
- CPR Barriers

PPE is located in the training department storage and may be obtained through The Training Department. PPE can be requested by phone and picked up in person the same day or it can be P:\ExpertCare\Training\BBP CPR FA Information\Blood Borne Pathogens\ExpertCare Exposure Control Plan
mailed out to the employee. Specialty items specific to a client case may need to be special ordered and could take up to 10 days to receive. The Training Department is responsible for ensuring an inventory of PPE most appropriate for our care giving staff is on our premises. Inventory is checked on a weekly basis.

All employees using PPE must observe 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.
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, 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.
- Never wash or decontaminate disposable gloves for reuse.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

The procedure for handling used PPE is as follows:
*Discard used PPE in garbage bag. Seal garbage bag.*

**Housekeeping**
ExpertCare does not have regulated waste. This section is not applicable.

**HEPATITIS B VACCINATION**
The Training Department will provide training to employees on hepatitis B vaccinations, addressing safety, methods of administration, and availability. The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this plan. Vaccination is suggested unless:

1) Documentation exists that the employee has previously received the series;
2) Antibody testing reveals that the employee is immune; or
3) Medical evaluation shows that vaccination is contraindicated.

Employees who decline may request and obtain the vaccination at a later date at no cost. Vaccination will be provided by Concentra or other facilities noted. Following the medical evaluation, a copy of the health care professional’s written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. It will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

**POST-EXPOSURE EVALUATION AND FOLLOW-UP**
Should an exposure incident occur, contact Beth DeRose at the following number 248-643-8900. An immediately available confidential medical evaluation and follow-up will be conducted by Concentra. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:
• Document the routes of exposure and how the exposure occurred.
• Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
• Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual’s test results were conveyed to the employee’s health care provider.
• If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
• Assure that the exposed employee is provided with the source individual’s test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
• After obtaining consent, collect exposed employee’s blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.
• If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

The Training Department ensures that health care professional(s) responsible for employee’s hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA’s bloodborne pathogens standard.

The Training Department ensures that the health care professional evaluating an employee after an exposure incident receives the following:
• A description of the employee’s job duties relevant to the exposure incident route(s) of exposure
• Circumstances of exposure
• If possible, results of the source individual’s blood test
• Relevant employee medical records, including vaccination status

The Training Department provides the employee with a copy of the evaluating health care professional’s written opinion within 15 days after completion of the evaluation.

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The Training Department will review the circumstances of all exposure incidents to determine:
• Engineering controls in use at the time work practices followed
• A description of the device being used (including type and brand)
• Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.) location of the incident (O.R., E.R., patient room, etc.)
• Procedure being performed when the incident occurred
• Employee’s training

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If revisions to this ECP are necessary, the Training Department will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.)

**EMPLOYEE TRAINING**

All employees who have occupational exposure to bloodborne pathogens receive initial and annual training conducted by the ExpertCare Training Department.

All employees who have occupational exposure to bloodborne pathogens receive training on the epidemiology and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- an explanation of our ECP and how to obtain a copy
- an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- an explanation of the use and limitations of engineering controls, work practices, and PPE
- an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- an explanation of the basis for PPE selection information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- an opportunity for interactive questions and answers with the person conducting the training session.

Training materials are available at ExpertCare.

**RECORDKEEPING**

**Training Records**

Training records are completed for each employee upon completion of training. These documents will be kept for at least three years at ExpertCare. The training records include:

- the dates of the training sessions
- the contents or a summary of the training sessions
- the names and qualifications of persons conducting the training
- the names and job titles of all persons attending the training sessions
- Employee training records are provided upon request to the employee or the employee’s authorized representative within 15 working days. Such requests should be addressed to The Training Department.

**Medical Records**

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Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020, “Access to Employee Exposure and Medical Records.” The HR Department is responsible for maintenance of the required medical records. These confidential records are kept in the HR office for at least the duration of employment plus 30 years. Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the HR Department.

**OSHA Recordkeeping**

An exposure incident is evaluated to determine if the case meets OSHA’s Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by the Business Division Manager.

**Sharps Injury Log**

Using sharps is not in the scope of the work done by the Caregivers. This section does not apply to the work being done.