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OSHA's Revised Bloodborne Pathogens Standard

Outreach and Education Effort 2015

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Learning Outcomes

- Define the seven methods of compliance
- Define bloodborne pathogens
- Discuss transmission of bloodborne pathogens in the workplace
- Review OSHA's Revised Bloodborne Pathogens standard
- Review needle stick occurrence and prevention

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METHODS OF OSHA BBP STANDARD COMPLIANCE

1. Written exposure control plan with annual review
2. Provide training and maintain records
   - Maintain records of vaccinations
   - Maintain records of exposure and medical monitoring after exposure
1. Emergency response plan for employees who do not come in contact with potentially infectious material as a regular part of their jobs

6

METHODS OF COMPLIANCE

3. Universal precautions-treat all blood and potentially infectious bodily fluids as if they are infected

4. Personal Protective Equipment-PPE:gloves, eye and face protection, and protective clothing

- Biohazard labels and signage for items, containers or work areas that contain blood, body fluids,or tissue

7

METHODS OF COMPLIANCE

5. Work practice controls to reduce the likelihood of exposure through alteration of manner in which tasks are performed (reviewed annually with employee input)

- Handwashing
- Procedures for handling sharps
- Regulated waste disposal procedures

8

METHODS OF COMPLIANCE

6. Engineering controls act on the source of the hazard to eliminate or reduce the hazard (reviewed annually with employee input)
    1. Puncture resistant sharps container
    2. Mechanical pipetting devices
    3. Needle devices

9

METHODS OF COMPLIANCE

7. Establish housekeeping procedures
    - protective barriers
    - Cleaning and decontaminating work sites
    - Appropriate disinfectants
    - Broken glass/sharps
    - Medical waste disposal
    - Marked, designated containers for contaminated laundry and equipment

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OSHA

- The Occupational Safety and Health Administration is a federal agency that guarantees your rights to a safe and healthful workplace.
- The Bloodborne Pathogens Standard was established to protect employees from exposure to blood diseases.

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Bloodborne Pathogens Standard

- 29 CFR 1910.1030, Occupational Exposure to Bloodborne Pathogens
- Published December 1991
- Effective March 1992
- Scope
  - ALL occupational exposure to blood and other potentially infectious material (OPIM)

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Bloodborne Pathogens Standard

Major Provisions by Paragraph

(b) Definitions
(c) Exposure Control Plan (ECP)
(d) Engineering and Work Practice Controls
  - Personal Protective Equipment (PPE)
(e) HIV and HBV Research Labs
(f) Vaccination, Post-Exposure Follow-up
(g) Labeling and Training
(h) Recordkeeping

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Source: Chiarello, 1992

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TRANSMISSION OF BBP

- Parenteral exposure-infected blood or OPIM introduced directly into your body through a break in your skin
- Mucous membrane exposure-infected blood or OPIM enters your body through contact with a mucous membrane found in your eye, nose or throat

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BBP may also be transmitted through:

- Sexual contact
- Infected women may expose their newborn children to BBPs through amniotic fluid, through blood during the birthing process, and through breast milk

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Blood and other potentially infectious materials (OPIMs)

- Blood products (plasma or serum)
- Semen
- Vaginal secretions
- Cerebrospinal fluid
- Pleural fluid
- Amniotic fluid
- Peritoneal fluid
- Synovial fluid
- Saliva in dental settings
- Any body fluid visibly contaminated with blood
- Any body fluid that you can't tell what it is

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Body fluids not expected to be source of BBP

- Urine
- Feces
- Vomit
- Sweat and tears
- Sputum
- Nasal secretions

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Methods of Compliance

- Universal Precautions
- Engineering and Work Practice Controls
- Personal protective equipment
- Housekeeping

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Since 1991…

- Advancements in medical technology
- September 1998, OSHA's Request for Information (RFI)
  - Findings of RFI
- Union and Congressional involvement
- November 1999, CPL 2-2.44D

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Segment 1 Wrap-Up:

- Recall the seven methods of compliance

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OSHA's Revised Bloodborne Pathogens Standard (Segment 2)

Outreach and Education Effort 2015

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Learning Outcomes

- Define the seven methods of compliance
- Define bloodborne pathogens
- Discuss transmission of bloodborne pathogens in the workplace
- Review OSHA's Revised Bloodborne Pathogens standard
- Review needle stick occurrence and prevention

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Needlestick Safety and Prevention Act, P.L. 106-430

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The Needlestick Safety and Prevention Act mandated…

OSHA clarify and revise
29 CFR 1910.1030, the Bloodborne Pathogens Standard

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Needlestick Safety and Prevention Act Timeline

- P. L. 106-430 signed: November 6, 2000
- Revised standard published in Federal Register: Jan. 18, 2001
- Effective date: April 18, 2001
- Enforcement of new provisions: July 17, 2001
- Adoption in OSHA state-plan states: October 18, 2001

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Revisions to Standard

- Additional definitions, paragraph (b)
- New requirements in the Exposure Control Plan, paragraph (c)
- Solicitation of input from non-managerial employees, paragraph (c)
- Sharps injury log, paragraph (h)

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Additional Definitions 1910.1030(b)

- *Engineering Controls* - includes additional definitions and examples:
  - *Sharps with Engineered Sharps Injury Protections* - [SESIP]
  - *Needleless Systems*

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Engineering Controls
New Definition

"… means controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace."

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Needleless Systems
New Definition

- Device that does not use a needle for:
  - Collection of bodily fluids
  - Administration of medication/fluids
  - Any other procedure with potential percutaneous exposure to a contaminated sharp

30

Handle Sharps correctly!

- Use whatever means possible to reduce the direct handling of sharps!

31

Cleaning Decontamination, Disposal of Waste

- Dispose of sharps in the proper containers!

32

Broken glass or sharps!

- Never use unprotected hands to pick up broken glass or sharps.
- Do not pick up broken glass - use brush or broom & dustpan

33

The consequences are great!

- Cuts occur when mishandling sharps!

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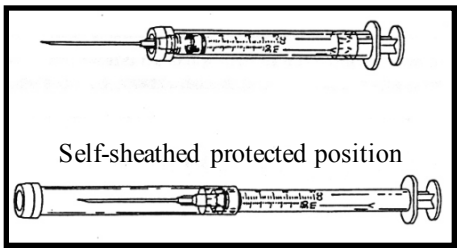
"SESIP"
New Definition

Non-needle sharp or a needle with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.

35

Hypodermic syringes with "Self-Sheathing" safety feature



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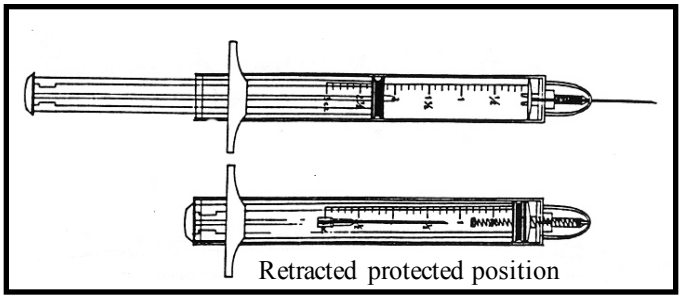
Hypodermic syringes with “Retractable Technology” safety feature



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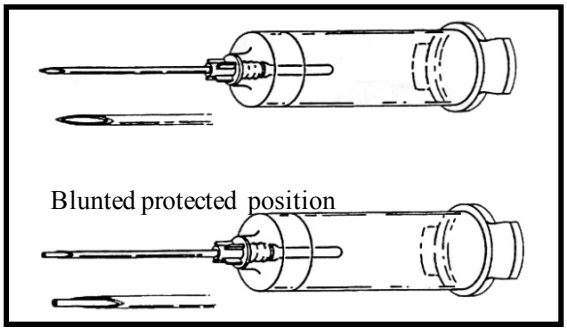
Phlebotomy needle with “Self-Blunting” safety feature



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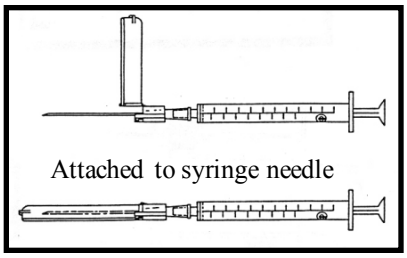
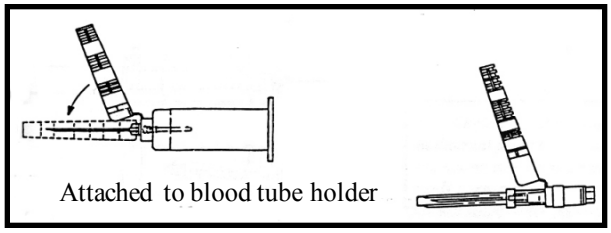
"Add-on" safety feature





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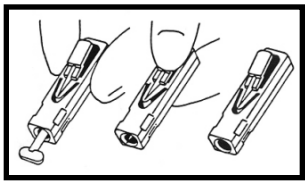
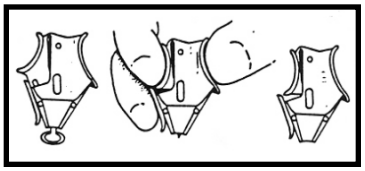
Retracting lancets with safety features


Before During After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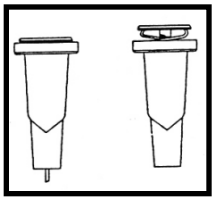
In use After use

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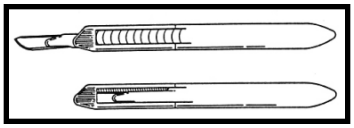
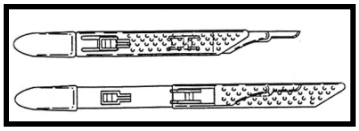
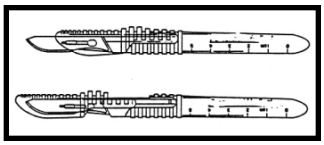
Disposable scalpels with safety features



Retracted position



Protracted position



Protracted position

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Segment 2 Wrap-Up:

Recall the Safe Needle Devices

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OSHA's Revised Bloodborne Pathogens Standard (Segment 3)

Outreach and Education Effort 2015

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Learning Outcomes

- Define the seven methods of compliance
- Define bloodborne pathogens
- Discuss transmission of bloodborne pathogens in the workplace
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- Review needle stick occurrence and prevention

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On the Job Safety
Protect Yourself

- Universal Precautions !

45

TREAT ALL BLOOD AND BODY FLUIDS AS POTENTIALLY INFECTIOUS.

- After contact, flush eyes and face with fresh water for several minutes
- OR…

46

On the Job Safety In the areas where sinks are not available!

- Make sure all personnel know where and how the eye wash station works.

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Exposure Control Plan: 1910.1030(c)

The ECP must be updated to include:

- changes in technology that reduce/eliminate exposure
- annual documentation of consideration and implementation of safer medical devices
- solicitation of input from non-managerial employees

48

Solicitation of Non-Managerial Employees New Provision

- Identification, evaluation, and selection of engineering controls
- Must select employees that are:
  - Responsible for direct patient care
  - Representative sample of those with potential exposure

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Engineering and Work Practice Controls: 1910.1030(d)

Employers must <u>select</u> and <u>implement</u> appropriate engineering controls to reduce or eliminate employee exposure.

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"Where engineering controls will reduce employee exposure either by removing, eliminating, or isolating the hazard, they must be used."

CPL 2-2.44D

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Engineering and Work Practice Controls

Selection of engineering and work practice controls is dependent on the employer's exposure determination.

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Exposure Determination

- The employer must:
  - Identify worker exposures to blood or OPIM
  - Review all processes and procedures with exposure potential
  - Re-evaluate when new processes or procedures are used

53

Engineering and Work Practice Controls (con't)

- The employer must:
  - Evaluate available engineering controls (safer medical devices)
  - Train employees on safe use and disposal
  - Implement appropriate engineering controls/devices

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Engineering and Work Practice Controls (con't)

- The employer must:
  - Document evaluation and implementation in ECP
  - Review, update ECP at least annually
  - Review new devices and technologies annually
  - Implement *new* device use, as appropriate and available

55

Engineering and Work Practice Controls (con't)

- The employer must:
  - Train employees to use new devices and/or procedures
  - Document in ECP

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Recordkeeping: 1910.1030(h)

- Sharps Injury Log
  - Only mandatory for those keeping records under 29 CFR 1904
  - Confidentiality
  - Maintained independently from OSHA 200

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Sharps Injury Log

At a minimum, the log must contain, for each incident:

- Type and brand of device involved
- Department or area of incident
- Description of incident

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Summary of Provisions

- Additional definitions, paragraph (b)
- Requirements in the Exposure Control Plan, paragraph (c)
- Non-managerial employees involved in selection of controls, paragraph (c)
- Sharps injury log, paragraph (h)

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Segment 3 Wrap-Up

- REVIEW the methods of compliance in your workplace!

60

Common Sense Rules

- Wash hands & remove protective clothing before eating, drinking, smoking, handling contact lenses, applying lip balm or cosmetics!

61

Do Your Part

- Clean surfaces can still have potentially contaminated infectious substances not apparent to the naked eye!

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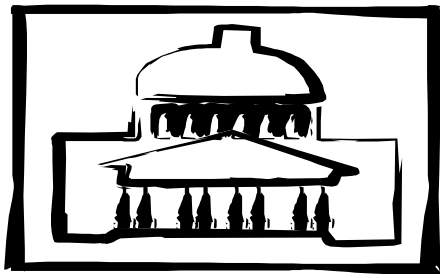

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