

## **Definitions**

**Definitions** -For purposes of this section, the following shall apply:

**Assistant Secretary** - means the Assistant Secretary of Labor for Occupational Safety and Health, or designated representative.

**Blood** - means human blood, human blood components, and products made from human blood.

**Bloodborne Pathogens** - means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) hepatitis C (HCV) and human immunodeficiency virus (HIV).

**Clinical Laboratory** - means a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials.

**Contaminated** - means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

**Contaminated Laundry** - means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.

**Contaminated Sharps** - means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

**Decontamination** - means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

**Director** - means the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Services, or designated representative.

**Engineering Controls** - 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.

**Exposure Incident** - means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

**Hand-washing Facilities** - means a facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.

**Licensed Healthcare Professional** - is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up.

**HBV** - means Hepatitis B virus.

**HCV** – means Hepatitis C Virus

**HIV** - means Human Immunodeficiency Virus.

**Occupational Exposure** - means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

**Other Potentially Infectious Materials (OPIM)** - means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV, HCV or HBV containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV, HCV or HBV.

**Parenteral** - means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

**Personal Protective Equipment (PPE)** - is specialized clothing or equipment worn by an employee for protection against a hazard. These include gowns, gloves, masks, face shields, goggles, etc. General work clothes (e.g., uniforms, pants, shirts or blouses) that are not intended to function as protection against a hazard and will not be considered to function as personal protective equipment.

**Regulated Waste** - means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

**Sharps with engineered sharps injury protections** - means a sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.

**Source Individual** - means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

**Standard Precautions** – Standard Precautions combine the major features of Universal precautions (UP) and Body Substance Isolation (BSI) and are based on the principle that all blood, body fluids, secretions, excretions except sweat, non-intact skin, and mucous membranes may contain transmissible infectious agents. The use of Standard Precautions as an infection control practice, that if used, helps to minimize exposure to known or unknown infectious agents or organisms. These include hand hygiene, use of gloves, gown, mask, eye and face shields singly or a combination thereof.

**Sterilize** - means the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

**Work Practice Controls** - means controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

## *Section I.*

# **Exposure Control – General Program Management**

## *A. Purpose of Plan*

1. It is the goal of Independence, Inc. to comply with Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard. The purpose of this standard is to reduce occupational exposure to Hepatitis B virus (HBV) Hepatitis C virus (HCV) and Human Immunodeficiency Virus (HIV) and other bloodborne pathogens that employees may encounter in their workplace.
2. Independence, Inc. has implemented this Exposure Control Plan to meet the OSHA Bloodborne Pathogens Standard. The objective of this plan is two-fold:
  - a. to protect employees from health hazards associated with bloodborne pathogens;
  - b. to provide appropriate treatment and counseling should an employee be exposed to bloodborne pathogens.

## *B. Responsible Persons*

1. The Human Resource Department is responsible for the overall administration of the Exposure Control Plan, including writing, implementing, monitoring compliance, training, reviewing annually, updating and acting as a liaison during OSHA inspections.

## *C. Availability to Employees*

The Exposure Control Plan is available to employees at any time. A copy is kept in each ICF/MR, all supported living sites that have 24 hour staff, the administrative office and the Food Distribution Center.

## **D. Dates of Compliance, Review and Update**

- |    |   |                   |
|----|---|-------------------|
| 1. | Exposure Control Plan written<br>Rev. 08/08; 01/13  | January 4, 1993;  |
| 2. | Employee Training   | On-going          |
| 3. | The Exposure Control Plan is reviewed and updated annually on or before or when new or modified tasks are implemented which affect occupational exposure to employees | January each year |

## **E. Exposure Determination**

1. A potential occupational exposure is defined by OSHA as “reasonably anticipated” skin, eye, mucous membrane, non-intact skin or other parenteral contact with blood or other potentially infectious materials (OPIM= semen, vaginal secretions, cerebrospinal fluid, peritoneal fluid, amniotic fluid, saliva with blood and all body fluids where it is difficult or impossible to differentiate between body fluids).
2. All job classifications in which a potential occupational exposure is reasonably anticipated have been identified. Determination of potential exposure risk is made without regard to the use of personal protective equipment.
3. Because we consider ALL employees working within the homes to be potentially occupationally exposed, specific “at risk” tasks have not been listed within each job classification.

Job Classification: Exposure determination job classification where all employees have potential occupational exposure and whose primary job is direct care:

1. Support Professional
2. Nursing Staff
3. On site Management

All other job classifications will be considered low risk, as the primary duties do not include direct care.

## *Section II.*

### **Methods of Compliance --**

**General:** Standard Precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

#### *A. Engineering and Work Practice Controls*

1. Engineering and work practice controls shall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.
2. Engineering controls shall be examined and maintained or replaced on a regular schedule to ensure their effectiveness. The following are examples of engineering controls: hand washing facilities, biohazard containers, sharps containers, brooms and dust pans, BBP kits, trash can liners, etc.
3. Independence shall provide hand washing facilities which are readily accessible to employees.
4. When provision of hand washing facilities is not feasible, the employer shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible if visible soiling has occurred.
5. Independence shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
6. Independence shall ensure that employees wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.
7. Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed except as noted in paragraphs below. Shearing or breaking of contaminated needles is prohibited.
8. Such bending, recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed technique.

9. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

10. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present.

11. All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.

12. Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.

13. The container for storage, transport, or shipping shall be labeled or color-coded and closed prior to being stored, transported, or shipped. When a facility utilizes Standard Precautions in the handling of all specimens, the labeling/color-coding of specimens is not necessary provided containers are recognizable as containing specimens. This exemption only applies while such specimens/containers remain within the facility. Labeling or color-coding in accordance with paragraph 1-Section V- C. is required when such specimens/containers leave the facility.

14. If outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and is labeled or color-coded according to the requirements of this standard.

15. If the specimen could puncture the primary container, the primary container shall be placed within a secondary container which is puncture-resistant in addition to the above characteristics.

16. Equipment which may become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless the employer can demonstrate that decontamination of such equipment or portions of such equipment is not feasible.

17. Independence shall ensure that this information is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, prior to handling, servicing, or shipping so that appropriate precautions will be taken.

## **B. Personal Protective Equipment (PPE)**

**1. Provision.** When there is occupational exposure, Independence shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

**2. Use.** Independence shall ensure that the employee uses appropriate personal protective equipment unless the employer shows that the employee temporarily and briefly declined to use personal protective equipment when, under rare and extraordinary circumstances, it was the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety services or would have posed an increased hazard to the safety of the worker or co-worker. When the employee makes this judgment, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

**3. Accessibility.** Independence shall ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees.

**4. Cleaning, Laundering, and Disposal.** Independence shall clean, launder, and dispose of personal protective equipment as required by this standard, at no cost to the employee.

**5. Repair and Replacement.** Independence shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.

**a.** If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately or as soon as feasible.

**b.** All personal protective equipment shall be removed prior to leaving the work area.

**c.** When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

**6. Gloves.** Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin, and when handling or touching contaminated items or surfaces.

**a.** Disposable (single use) gloves such as surgical or examination gloves shall be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

**b.** Disposable (single use) gloves shall not be washed or decontaminated for re-use.

**c.** Employees do not wear the same pair of gloves when caring for more than one client.

**d.** Glove selection should be chosen for fit and durability for the task at hand.

**7. Masks, Eye Protection, and Face Shields.** Masks in combination with eye protection devices, such as goggles, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

**8. Gowns, Aprons, and Other Protective Body Clothing.** Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn where the potential for exposure may occur. The type and characteristics will depend upon the task and degree of exposure anticipated.

## **Section III.**

### **A. Housekeeping**

**General.** Independence shall ensure that the worksite is maintained in a clean and sanitary condition. The employer shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.

1. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

2. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning.
3. Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, shall be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the work shift if they may have become contaminated during the shift.
4. All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.
5. Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps.

## **B. Regulated Waste/ Contaminated Sharps** **Discarding and Containment**

1. Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are: closable; puncture resistant; leak proof on sides and bottom; and labeled or color-coded in accordance with the labels section of this standard.
  - a) For home use purposes, a plastic impermeable container such as a laundry bottle or bleach bottle will suffice for sharps disposal. It should be labeled and kept in a designated location within the home. When  $\frac{3}{4}$  full, the container lid should be secured with tape and placed into a bag and discarded in the trash.
2. During use, containers for contaminated sharps shall be: easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found (e.g., laundries); maintained upright throughout use; and replaced routinely when  $\frac{3}{4}$  full.

3. When moving containers of contaminated sharps from the area of use, the containers shall be: closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping; placed in a secondary container if leakage is possible. The second container shall be: closable; constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping; and labeled or color-coded according to the labels paragraph of this standard.

4. Reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which could expose employees to the risk of injury.

### **C. Other Regulated Waste Containment**

1. Regulated waste shall be placed in containers which are: closable; constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping; labeled or color-coded in accordance with the labels paragraph in this standard; and closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

2. If outside contamination of the regulated waste container occurs, it shall be placed in a second container. The second container shall be: closable; constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping; labeled or color-coded in accordance with the labels paragraph of this standard; and closed prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.

3. Disposal of all regulated waste shall be in accordance with applicable regulations of the United States, States and Territories, and political subdivisions of States and Territories.

### **D. Laundry**

1. Contaminated laundry shall be handled as little as possible with a minimum of agitation to avoid contamination of air, surfaces, and persons.

2. Contaminated laundry shall be bagged or containerized at the location where it was used and shall not be sorted or rinsed in the location of use.

3. Contaminated laundry shall be placed and transported in bags or containers labeled or color-coded in accordance with the labels paragraph of this standard. When a facility utilizes Standard Precautions in the handling of all soiled laundry, alternative labeling or color-coding is sufficient if it permits all employees to recognize the containers as requiring compliance with Standard Precautions.

4. Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through or leakage from the bag or container, the laundry shall be placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.

5. Independence shall ensure that employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment.

## **SECTION IV.**

### **Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up**

#### **General.**

1. Independence shall make available the Hepatitis B vaccine and vaccination series to all employees who have been identified as having the potential for occupational exposure, and post-exposure evaluation and follow-up to all employees who have had an exposure incident.

2. Independence shall ensure that all medical evaluations and procedures including the Hepatitis B vaccine and vaccination series and post-exposure evaluation and follow-up, including prophylaxis, are:

a. Made available at no cost to the employee;

b. Made available to the employee at a reasonable time and place;

c. Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and

d. Provided according to recommendations of the U.S. Public Health Service current at the time these evaluations and procedures take place, except as specified by this paragraph below.

3. Independence shall ensure that all laboratory tests are conducted by an accredited laboratory at no cost to the employee.

## **A. Hepatitis B Vaccination**

1. Hepatitis B vaccination shall be made available after the employee has received the required training and within 10 working days of initial assignment to all employees who have the potential for occupational exposure unless the employee has previously received the complete Hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.
2. Independence shall not make participation in a prescreening program a prerequisite for receiving Hepatitis B vaccination.
3. If the employee initially declines Hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, the employer shall make available the Hepatitis B vaccination at that time.
4. The employer shall assure that employees who decline to accept the Hepatitis B vaccination offered by the employer sign the consent form electing to decline the vaccination (see Hepatitis B declination form).
5. If a routine booster dose(s) of Hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) shall be made available to the employee.

## **B. Post-exposure Evaluation and Follow-up.**

Following a report of an exposure incident, the employer shall make immediately available to the exposed employee a confidential medical evaluation and follow-up, including at least the following elements:

1. Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;
2. Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law;
3. The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV, HCV and HIV infectivity. If consent is not obtained, the employer shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.

4. When the source individual is already known to be infected with HBV, HCV or HIV, testing for the source individual's known HBV, HCV or HIV status need not be repeated.
5. Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
6. Collection and testing of blood for HBV, HCV and HIV serological status;
7. The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained.
8. If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.
9. Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service;
10. Counseling; and
11. Evaluation of reported illnesses.
12. A national hotline for post-exposure information is available in the state of Ohio by dialing 1-888-448-4911. The physicians who answer the calls can assist with providing information about post-exposure prophylaxis (PEP).

### **C. Information Provided to the Healthcare Professional**

1. Independence shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided a copy of this regulation.
2. Independence shall ensure that the healthcare professional evaluating an employee after an exposure incident is provided the following information:
  - a. A copy of this regulation;
  - b. A description of the exposed employee's duties as they relate to the exposure incident;
  - c. Documentation of the route(s) of exposure and circumstances under which exposure occurred;

- d. Results of the source individual's blood testing, if available; and
3. All medical records relevant to the appropriate treatment of the employee including vaccination status which are the employer's responsibility to maintain.

### **D. Healthcare Professional's Written Opinion**

Independence shall obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.

1. The healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.
2. The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:
  - a. That the employee has been informed of the results of the evaluation; and
  - b. That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
3. All other findings or diagnoses shall remain confidential and shall not be included in the written report.

### **E. Medical Record keeping**

Independence shall maintain the records required for at least the duration of employment plus 30 years.

### **F. Communication of Hazards to Employees**

#### **Labels and Signs --**

##### **Labels**

1. Warning labels shall be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials.

2. Labels required by this section shall include the following legend:



3. These labels shall be fluorescent orange or orange-red or predominantly so, with lettering and symbols in a contrasting color.

4. Labels shall be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal.

5. Red bags or red containers may be substituted for labels.

6. Individual containers of blood or other potentially infectious materials that are placed in a labeled container during storage, transport, shipment or disposal are exempted from the labeling requirement.

7. Labels required for contaminated equipment shall be in accordance with this paragraph and shall also state which portions of the equipment remain contaminated.

## *Section V*

### **Information and Training**

1. Independence shall ensure that all employees with the potential for occupational exposure participate in a training program which must be provided at no cost to the employee and during working hours.

2. Training shall be provided as follows: At the time of initial assignment to tasks where occupational exposure may take place and at least annually thereafter.

3. Annual training for all employees shall be provided within one year of their previous training or conducted on a 1:1 basis as needed, when additional educational needs have been identified.
4. Independence shall provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the employee's occupational exposure. The additional training may be limited to addressing the new exposures created.
5. Material appropriate in content and vocabulary to educational level, literacy, and language of employees shall be used.
6. The training program shall contain at a minimum the following elements:
  - a. An accessible copy of the regulatory text of this standard and an explanation of its contents;
  - b. A general explanation of the epidemiology and symptoms of bloodborne diseases;
  - c. An explanation of the modes of transmission of bloodborne pathogens;
  - d. An explanation of the Independence's exposure control plan and the means by which the employee can obtain a copy of the written plan;
  - e. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
  - f. An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment;
  - g. Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
  - h. An explanation of the basis for selection of personal protective equipment; information on the Hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge; information on the appropriate actions to take and persons to contact in an emergency involving exposure to blood or other potentially infectious materials; 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

explanation of the signs and labels and/or color coding requirements and; an opportunity for interactive questions and answers with the person conducting the training session.

7. The person conducting the training shall be knowledgeable in the subject matter contained within the training program as it relates to the workplace.

## **SECTION VI.**

### **Recordkeeping**

#### **A. Medical Records**

1. Independence shall establish and maintain an accurate record for each employee with an occupational exposure, in accordance with regulations.

2. This record shall include: The name and social security number of the employee; A copy of the employee's hepatitis B vaccination status including the dates of all the hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination as required; A copy of all results of examinations, medical testing, and follow-up procedures. The employer's copy of the healthcare professional's written opinion; and a copy of the information provided to the healthcare professional.

3. Confidentiality: Independence shall ensure that employee medical records are; kept confidential; and not disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by this section or as may be required by law.

4. Independence shall maintain the records required for at least the duration of employment plus 30 years.

#### **B. Training Records**

1. Training records shall include the following information: dates of the training sessions; contents or a summary of the training sessions; names and qualifications of persons conducting the training and; names and job titles of all persons attending the training sessions.

2. Training records shall be maintained for 3 years from the date on which the training occurred.

### **C. Availability**

1. Independence shall ensure that all records required to be maintained by this section shall be made available upon request to the Assistant Secretary and the Director for examination and copying.
2. Employee training records shall be provided upon request for examination and copying to employees, to employee representatives, to the Director, and to the Assistant Secretary.
3. Employee medical records shall be provided upon request for examination and copying to the subject employee, to anyone having written consent of the subject employee, to the Director, and to the Assistant Secretary.

### **D. Transfer of Records**

1. Independence shall comply with the requirements involving transfer of records.
2. If Independence ceases to do business and there is no successor employer to receive and retain the records for the prescribed period, the employer shall notify the Director, at least three months prior to their disposal and transmit them to the Director, if required by the Director to do so, within that three month period.

### **E. Sharps Injury Log**

1. The employer shall establish and maintain a sharps injury log for the recording of injuries from contaminated sharps. The information in the sharps injury log shall be recorded and maintained in such manner as to protect the confidentiality of the injured employee. The sharps injury log shall contain, at a minimum: The type and brand of device involved in the incident; department or work area where the exposure incident occurred and; an explanation of how the incident occurred.
2. The requirement to establish and maintain a sharps injury log shall apply to any employer who is required to maintain a log of occupational injuries and illnesses and will be maintained for the period required.