EXPOSURE CONTROL PLAN
Temple University Health System

Name of responsible person in the department: _____
Department: _____
Building: _____

Prepared by: _____
Review on: _____
Annual Review on: _____

EXPOSURE CONTROL PLAN

Table of Contents

This exposure control plan has been prepared to minimize or eliminate employee exposure to bloodborne pathogens. This plan was developed in accordance with the ***OSHA "Occupational Exposure to Bloodborne Pathogens***; Final Rule" contained in 29 CFR Part 1910.1030.

A. POLICY

The **Temple University Health System** 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 ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

1. Determination of employee exposure
2. Implementation of various methods of exposure control, including:
    1) Universal Precautions
    2) Exposure Control Plan
    3) Engineering Controls and Work Practices
    4) Personal Protective Equipment (PPE)
    5) Housekeeping
    6) Laundry
    7) Labels
3. Hepatitis B vaccination
4. Post-exposure evaluation and follow-up
5. Administration of Post-Exposure Evaluation and Follow-up
6. Procedures for Evaluating the Circumstances Surrounding an Exposure Incident
7. Employee Training
8. Recordkeeping
9. Hepatitis B Vaccination Declination
10. Personnel Review Record of Exposure Control Plan
11. Safer Sharps Device Evaluation Form
12. Safety Device Review Record
13. Safety Device Plan

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B. PROGRAM ADMINISTRATION

1. _____ (Name of responsible person in the department) is responsible for implementation of the ECP. _____ (Name of responsible person in the department) will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact location/phone number: _____.

2. 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.

3. _____ (Name of responsible person in the department) will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. _____ (Name of responsible person in the department) will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes. Contact location/phone number: _____.

4. _____ (Name of responsible person in the 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. Contact location/phone number: _____.

5. _____ (Name of responsible person in the department) will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives. Contact location/phone number: _____.

6. Environmental Health and Radiation Safety Department (EHRS) provides the OSHA-mandated bloodborne pathogen information and training sessions at least annually to each supervisor and employee with occupational exposure. Please visit the EHRS webpage at https://www.temple.edu/ehrs/for training information.

C. EMPLOYEE EXPOSURE DETERMINATION

Occupational Exposure: Reasonably anticipated skin, eye, mucous membrane, or parental contact (i.e. needle stick) with blood or other potentially infectious materials (OPIM) that may result from the performance of an employee's duties.

The following is a list of all job classifications in our department which have occupational exposure. Tasks and procedures in which occupational exposure may occur for these individuals are included.

Example:

Job title	**Tasks/Procedures**	**Department Location**
Physicians	Patient Care	TUH Rock Pavilion
Nurses	Patient Care	TUH Rock Pavilion
Medical Assistants	Patient Care	TUH Rock Pavilion
Technicians	Patient Care	TUH Rock Pavilion
Medical Students/Allied Health Students	Patient Care	TUH Rock Pavilion

Please list all job classifications in the table below:

Job title	Tasks/Procedures	Department Location

Part-time, temporary, and contract employees are covered by the bloodborne pathogens standard.

Example:

Job title	Task/Procedure	Department Location
Housekeeping staff	Handling Regulated Waste	Housekeeping staff are University contractor and Temple Hospital Employees. They received annual bloodborne pathogens trainings by EHRS.

Please list part-time, temporary, and contract employees in the table below:

Job title	Tasks/Procedures	Department Location

D. METHODS OF IMPLEMENTATION AND CONTROL

1. Universal Precautions

All employees must utilize universal precautions.

Universal Precautions is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

2. Exposure Control Plan

1) Employees covered by the bloodborne pathogen 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 _____ (Name of responsible person in the department). If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

2) _____ (Name of responsible person in the 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.

3. Engineering Control and Work Practices

Engineering controls and work practices are to be used to prevent or minimize employee exposure to bloodborne pathogens.

1) The specific engineering controls and work practice controls used are listed below:
Examples:
   a. Non-glass capillary tubes
   b. Sharps with engineered sharps injury protections (SESIPs)
   c. Needleless systems

   Please list the engineering controls and work practice controls below:
   a. _____
   b. _____
   c. _____

2) Sharps disposal containers are inspected and maintained or replaced by _____ (Name of responsible person in the department) every _____ (list frequency) or whenever necessary to prevent overfilling.
Examples:
   a. There are sharps containers and biohazard trash receptacles in all exam rooms and treatment rooms.
   b. All sharps containers are kept secured in exam rooms and treatment rooms.
   c. Sharps containers are replaced by certified vendor periodically.

   Please list below:
   a. _____
   b. _____
   c. _____

4) This facility identifies the need for changes in engineering controls and work practices through
Examples:
   a. Any issues can be discussed during monthly staff meetings.

b. Sharps injury incidents.
c. Staff recommendation.
d. The department has several committees that address many concerns. Those committees include: _____

Please list below:

a. _____
b. _____
c. _____
d. _____

4) The _____ (Name of responsible person in the department) evaluate new procedures and new products regularly by

Examples:

a. Literature reviewed
b. Supplier information
c. New procedures run in parallel with current procedures to assess accuracy.

Please list below:

a. _____
b. _____
c. _____

5) Both front-line workers and management officials are involved in this process in the following manner: _____(Describe employees' involvement) _____ (Name of responsible person in the department) is responsible for ensuring that these recommendations are implemented.

4. Personal Protective Equipment (PPE)

1) PPE is provided free of charge to all employees. Training in the use of the appropriate PPE for specific tasks or procedures is provided by_____ (Name of responsible person in the department).

2) The types of PPE available to employees are as follows: (gloves, eye protection, etc.)

_____

3) PPE is located _____ (List location) and may be obtained through _____ (Name of responsible person in the department).

4) Specify how employees will obtain PPE and who is responsible for ensuring that PPE is available.

Examples:

a. Boxes of gloves are located in every exam room, treatment room, and throughout the department.
b. The nurses are responsible for checking these boxes every morning and re-stocking them as needed.

Please list below:

a._____
b. _____

5) All employees using PPE must observe the following precautions:

Examples:

a. Wash hands or use alcohol rub immediately or as soon as feasible after removing gloves or other PPE.
b. Remove PPE after it becomes contaminated and before leaving the work area.
c. Used PPE may be disposed of in _____ (List appropriate containers for storage, laundering, decontamination, or disposal.)
d. 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.
e. Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
f. Never wash or decontaminate disposable gloves for reuse.
g. Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
h. 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.

Please list below:

a._____
b. _____
c. _____
d. _____
e. _____
f. _____
g. _____
h. _____

6) The procedure for handling used PPE is as follows (*include how and where to decontaminate face shields, eye protection, resuscitation equipment)*:

a. _____
b. _____

5. Housekeeping

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section "Labels"), and closed prior to removal to prevent spillage or protrusion of contents during handling.

1) The procedure for handling sharps disposal containers is:
   Examples:
   a. All sharps containers are kept secured in exam rooms and treatment rooms.
   b. Sharps containers are replaced by certified vendor periodically.

   Please list below:
   a. _____
   b. _____

2) The procedure for handling other regulated waste is:
   Examples:
   a. The solid regulated infectious waste is disposed in a red solid container lined with a red bag.
   b. The red bags are picked up by the housekeeping staff and to be transported by certified vendor as regulated medical waste to the treatment site.

   Please list below:
   a. _____
   b. _____

3) Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded. Sharps disposal containers are available at _____ (e.g. all exam rooms and treatment rooms.)

4) Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.
   Examples:
   a. The medical assistants wipe down each exam table and replaces bench paper after each patient use.
   b. The exam room and treatment room is inspected daily by nurse manager.

   Please list below:
   a. _____
   b. _____

5) Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

6. Laundry

1) The following contaminated articles will be laundered by _____ (name of the company):

a. _____
b. _____

2) Laundering will be performed by _____ (Name of responsible person in the department) at _____ (time and/or location).

3) The following laundering requirements must be met:
Examples:
   a. Handle contaminated laundry as little as possible, with minimal agitation
   b. Place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use _____ (specify either red bags or bags marked with the biohazard symbol) for this purpose.
   c. Wear the following PPE when handling and/or sorting contaminated laundry: _____ (List appropriate PPE).

Please list below:
a. _____
b. _____
c. _____

7. Labels

1) The following labeling methods are used in this facility:
Example:

Equipment to be labeled	Label Type (size, color)
Specimens, contaminated laundry	The red bag must have a biohazard symbol. The red bag must have either the markings of ASTM D 1709 for impact resistance and ASTM D 1922 for tear resistance or the certification letter from manufacturer for the standards.

Please list below:

Equipment to be labeled	Label Type (size, color)
_____	_____
_____	_____

2) _____ (Name of responsible person in the department) is responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify _____ (Name of responsible person in the department) if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

E. HEPATITIS B VACCINATION

1. _____ (Name of responsible person in the department) will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability.

2. 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 encouraged unless:
   1) documentation exists that the employee has previously received the series
   2) antibody testing reveals that the employee is immune
   3) medical evaluation shows that vaccination is contraindicated

3. However, if an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost.

4. Documentation of refusal of the vaccination is kept at HR/Benefits management, Temple Administrative Services Building (TASB), First floor, 2450 West Hunting Park Avenue, Philadelphia.

5. Vaccination will be provided by Employee Health Services at 1810 Liacouras Walk-4th floor, Philadelpha PA 19122.

6. 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.

F. POST-EXPOSURE EVALUATION AND FOLLOW-UP

1. Should an exposure incident occur, contact _____ (Name of responsible person in the department) at the following number _____

2. An immediately available confidential medical evaluation and follow-up will be conducted by
   1) Office hour: Occupational Health Department at Temple University Hospital Campus (3401 North Broad Street, Basement/Rock Pavilion. Phone Number is 215-707-4455. Hours are Monday-Friday 8 am-4:30 pm.
   2) After hours: Temple University Hospital Campus Emergency Department

3. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

    1) Document the routes of exposure and how the exposure occurred.
    2) Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
    3) 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.
    4) If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
    5) 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).
    6) After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status
    7) 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.

G. ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

1. _____ (Name of responsible person in the 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.

2. _____ (Name of responsible person in the department) ensures that the health care professional evaluating an employee after an exposure incident receives the following:
    1) a description of the employee's job duties relevant to the exposure incident
    2) route(s) of exposure
    3) circumstances of exposure
    4) if possible, results of the source individual's blood test
    5) relevant employee medical records, including vaccination status

3. _____ (Name of responsible person in the department) provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

H. PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

1. _____ (Name of responsible person in the department) will review the circumstances of all exposure incidents to determine:

    1) engineering controls in use at the time
    2) work practices followed
    3) a description of the device being used (including type and brand)
    4) protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
    5) location of the incident (O.R., E.R., patient room, etc.)
    6) procedure being performed when the incident occurred
    7) employee's training

    2. If revisions to this ECP are necessary _____ (Name of responsible person in the department) will ensure that appropriate changes are made. Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.

I. EMPLOYEE TRAINING

1. All employees who have occupational exposure to bloodborne pathogens receive initial in person and annual online refresher training provided at no cost to the employee by the EHRS.

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

    1) a copy and explanation of the OSHA bloodborne pathogen standard
    2) an explanation of the ECP and how to obtain a copy
    3) an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
    4) an explanation of the use and limitations of engineering controls, work practices, and PPE
    5) an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
    6) an explanation of the basis for PPE selection
    7) 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
    8) information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
    9) 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
    10) information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
    11) an explanation of the signs and labels and/or color coding required by the standard and used at this facility
    12) an opportunity for interactive questions and answers with the person conducting the training session.
    13) training materials for this facility are available in person by register the training with EHRS or online at https://campusoperations.temple.edu/ehrs/training.

J. RECORDKEEPING

1. Training Records

1) Training records are completed for each employee upon completion of training. These documents will be kept for at least three years at EHRS database (Location of records) for at least 3 years from the date on which the training occurred.

2) Function specific training is maintained by _____ (Name of responsible person in the department)

3) The training records include:
   a. the dates of the training sessions
   b. the contents or a summary of the training sessions
   c. the names and qualifications of persons conducting the training
   d. the names and job titles of all persons attending the training sessions

4) 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 _____(Name of responsible person in the department).

2. Medical Records

1) Medical records are maintained for each employee with occupational exposure in accordance with 29 *CFR* 1910.1020, "Access to Employee Exposure and Medical Records."

2) _____ (Name of responsible person in the department) is responsible for maintenance of the required medical records. These confidential records are kept in _____ (List location) for at least the duration of employment plus 30 years.

3) 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 _____ (Name of responsible person in the department and address).

K. HEPATITIS B VACCINE DECLINATION (MANDATORY)

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Name: _____
First MI Last

TU ID Number: _____-____-_____

Signature: _____

Date:_____

This record must send to Mr. Thomas Johnston, Director of HR/Benefits management, Temple Administrative Services Building (TASB), First floor, 2450 West Hunting Park Avenue, Philadelphia. Fax: 215-926-2274 or 215-926-2288, thomas.johnston@temple.edu

L. Personnel Review Record of the Exposure Control Plan

After reviewing the OSHA bloodborne pathogen exposure control plan and the annual update, please sign in.

Print Name	Signature	Unit	Date of ECP Review	Specific Task Classification

M. Safer Sharps Device Evaluation Form

Evaluator's Name	_____	**Job Title**	_____
Department	_____	**Date**	_____
Supervisor's Name	_____	**Telephone #**	_____

Name of Device	_____
Name of Manufacturer	_____
Applications of Device	_____
Number of times used	_____

Keep this form with your departmental records

Please circle the most appropriate answer for each question. A rating of one (1) indicates the highest level of agreement with the statement, five (5) the lowest. Not applicable (N/A) may be used if the question does not apply to this product.

Please explain all problems with the device in the comments section.		**Agree…….Disagree**					
		1	**2**	**3**	**4**	**5**	**N/A**
1	**The safety feature can be activated using one-handed technique**	__	__	__	__	___	__
2	**The user's hands remain behind the needle/sharp until activation of the safety mechanism is complete.**	__	__	__	__	___	__
3	**The safety feature does not interfere with normal use of this product.**	__	__	__	__	___	__
4	**Use of this product requires you to use the safety feature**	__	__	__	__	___	__
5	**A clear and unmistakable change (either audible or visible) occurs when the safety feature is activated.**	__	__	__	__	___	__
6	**The device is easy to handle while wearing gloves.**	__	__	__	__	___	__
7	**The device is easy to handle when wet.**	__	__	__	__	___	__
8	**This device does not require more time to use than a non-safety device.**	__	__	__	__	___	__
9	**The safety feature operates reliably.**	__	__	__	__	___	__
10	**The exposed sharp is blunted or covered after use and prior to disposal.**	__	__	__	__	___	__
11	**The safety feature works well with a wide variety of**	__	__	__	__	___	__

	hand sizes and with a left-handed person as easily as with a right-handed person.						_
12	**Use of this product does not increase the number of sticks**	___	___	___	___	____	___
13	**Sterilization (if applicable) of this device is as easy as a standard device.**	___	___	___	___	____	___
14	**The product stops the flow of blood after the needle is removed from the catheter (or after the butterfly is inserted) and just prior to line connections or hep-lock capping.**	___	___	___	___	____	___
15	**The product does not require extensive training to be operated correctly.**	___	___	___	___	____	___
16	**The device can be used without causing more patient discomfort than a conventional device.**	___	___	___	___	____	___
Additional questions for I.V. Connectors		**Agree…….Disagree**					
		1	**2**	**3**	**4**	**5**	**N/A**
17	**Use of this connector eliminates the need for exposed needles in connections.**	___	___	___	___	____	____
18	**The safety feature allows you to collect blood directly into a vacuum tubes, eliminating the need for needles.**	___	___	___	___	____	____
19	**The connector can be secured (locked) to Y-sites, hep-locks, and central lines.**	___	___	___	___	____	____
Additional questions for Vacuum Tube Blood Collection Systems		**Agree…….Disagree**					
		1	**2**	**3**	**4**	**5**	**N/A**
20	**The safety feature works with a butterfly.**	___	___	___	___	____	___
21	**The inner vacuum tube needle (rubber sleeved needle) does not present a danger of exposure.**	___	___	___	___	____	___
Please rate the quality of the in-service training (if provided):		**Exc.**	**Good**	**Fair**	**Poor**		
		___	___	___	___		
Comments	_____ _____						

N. Safety Device Review Record

Safety Device	Is it safe engineered? Any recall or malfunction	Evaluation Date	Reason of use	Manufacturer
Example: needles (22-25 gauge)	It is safe, no recall.	1/1/2012	Use for flu shot	Kimberly Clark
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

O. Safety Device Plan

1. Identifying and Selecting Appropriate and Currently Available Engineering Control Devices

Our policy is to select appropriate and effective engineering controls to prevent or minimize exposure incidents. Engineering controls means controls (e.g., sharps disposal containers, needleless systems and sharps with engineered sharps injury protection) that isolate or remove the bloodborne pathogens hazard from the workplace.

2. _____ (Name of responsible person in the department) first evaluate products that eliminate the use of sharps (e.g., needleless systems), if available. If these devices are not selected, we then evaluate devices equipped with engineered sharps injury protection (ESIP). ESIP means either (1) a physical attribute built into a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, which effectively reduces the risk of an exposure incident by a mechanism such as barrier creation, blunting, encapsulation, withdrawal, or other effective mechanisms; or (2) a physical attribute built into any other type of needle device or into a non-needle sharp, which effectively reduces the risk of an exposure incident.

3. _____ (Name of responsible person in the department) establish and maintain procedures for identifying and selecting appropriate and effective engineering controls, which may include the following steps:

    1) Set up a Process
    2) Define Needs
    3) Gather Information
    4) Test and Select Products
    5) Use New Products
    6) Conduct Follow-up

4. _____ (Name of responsible person in the department) modify the steps outlined above to fit the requirements as follows:

    1) Set up a Process

        a. _____ (Name of responsible person in the department) use a systematic process to identify and select appropriate and effective engineering controls. The process may include committees, subcommittees, working groups, a lead person, or other responsible employees. The same groups or individuals are responsible for all the steps in the process of identifying and selecting engineering controls. In our organization the setup is: _____

        c. _____ (Name of responsible person in the department) actively involve managers and employees from departments, units, or floors where engineering controls are (or will be) used. _____ (Name of responsible person in the department) choose individuals with expertise and experience in particular professions or

specialties to evaluate new products that will be used in their area(s) of practice. Individuals involved in our process include: staff, nurse manager, and medical assistant.

2) Define Needs

   a. _____ (Name of responsible person in the department) address each potential exposure of the tasks and procedures performed in various departments, units, floors, or dental operatories. We solicit input from frontline employees, supervisors, and managers. We also collect occupational exposure and injury data. We then identify our needs and establish our priorities on the basis of an analysis of all the available information.

   b. Priority Potential Exposures to Be Addressed Work Area

      i. Needle stick- safe needle use is in place.

3) Gather Information

   a. _____ (Name of responsible person in the department) gather information on currently available engineering controls that are designed to reduce occupational exposure to blood or OPIM. Because new technology is continually entering the marketplace, we also periodically search for information on new products.

4) Test and Select Products

   Each potential exposure is addressed by applying screening criteria to the engineering controls under consideration. When available, multiple devices are screened for each potential exposure being addressed.

   This helps ensure that more than one product is selected for testing for a given task or procedure. Screening criteria are applied to products in order to eliminate those with readily identifiable problems (e.g., ineffective devices, safety issues, visual obstructions). Only devices meeting an acceptable number of screening criteria are then tested in actual patient or product trials. For each exposure being addressed, _____ (Name of responsible person in the department) document the new products that meet an acceptable number of screening criteria and will be included in the testing.

   a. Testing Products

      Testing can help evaluate whether products are actually effective at reducing or eliminating workplace exposure incidents. Frontline employees who perform the tasks and procedures associated with the exposures being addressed are involved in the testing. If available, multiple products from a single category of devices are tested for each potential exposure being addressed. The testing of new products is suspended immediately if there is any evidence that a device is causing injuries to employees or patients.

To help ensure that devices are handled safely and evaluations are objective, _____ (Name of responsible person in the department) provide training on the safe and proper use of devices before testing begins. This training is given to the groups or individuals responsible for product selection, all participants involved in the testing, and their supervisors. Participants in the testing are also given the opportunity to practice using the new devices. These practice sessions simulate, as closely as possible, the tasks and procedures involved under "real-life" conditions. Representatives of manufacturers and distributors are requested to demonstrate the intended use of their products, answer questions, and train employees in the safe operation of each device.

b. Tools

Checklists, evaluation forms, or other types of standardized "tools" are used in the testing of new products. The tools are tailored to the specific category of product under consideration. To provide a standard basis for comparison among products, we use the same checklist or evaluation form when testing multiple products within a given type or category of device.

c. Protocols

_____ (Name of responsible person in the department) may use protocols in our testing process to make the evaluation of new products more systematic. Protocols also help us document the details of each item involved in our testing process.

d. Selecting Products

After the testing is completed, all the information, including checklists and evaluation forms, is reviewed. Input from frontline employees involved in the testing is documented and considered when it is time to select products for purchase. Based on the analysis of all the available information, consensual decisions are made regarding whether to purchase particular products. If two or more products are found to be satisfactory in a given category, we consider purchasing them. _____ (Name of responsible person in the department) document how devices ranked and which products we have decided to purchase. _____ (Name of responsible person in the department) provide feedback to employees on the ranking and selection of products.

5) Use New Products

a. _____ (Name of responsible person in the department) may introduce new products on a limited basis in a pilot implementation or trial phase. During this trial period, issues associated with the day-to-day use of the new products may arise. Employees may need time to develop new skills, establish new work practices, and break old habits. Employees are strongly encouraged to report any problems to their supervisors during the trial period. If problems appear to be serious or widespread, they are reported to the decision makers. Problems with new products are addressed as they arise and are resolved before the new product is used throughout our organization.

b. All staff members (and supervisors) using the new products or devices are thoroughly trained. This training is a mix of the knowledge and skills needed to work safely. For each new device, representatives of manufacturers and distributors are requested to:

   i. Demonstrate its proper use and application
   ii. Answer questions
   iii. Provide training on its safe operation
   iv. Provide follow-up

c. Training also includes practice sessions to simulate the tasks and procedures that individuals will be performing with the new devices. Multiple devices may have been selected for a given task or procedure. If this is the case, individuals are trained on all the selected devices.

6) Conduct Follow-up

a. Follow-up helps ensure that new products are effective and appropriate and are replaced over time by newer, more effective technology. As newer products become available, they are screened, tested, and selected according to the process described previously.

b. Our follow-up process systematically reevaluates devices and incorporates the input of frontline employees who have been using the products. Decisions on the appropriateness and effectiveness of new devices are not made until employees have had enough time to adjust to using the products.

c. Follow-up evaluations of products and the associated work practices are conducted six months after the implementation and quarterly, semiannually, or annually thereafter. Findings are used to improve product selection and training.

d. Staff members receive periodic feedback on how new products are working and what other products have become available. Follow-up training is provided if problems are discovered with work practices or currently used devices. If newer devices are selected to replace those currently being used, all individuals (and their supervisors) using the newer devices are thoroughly trained.