OSHA’s Revised Bloodborne Pathogens Standard

Outreach and Education Effort 2001
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)
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
Methods of Compliance

- Universal Precautions
- Engineering and Work Practice Controls
- Personal protective equipment
- Housekeeping
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
Needlestick Safety and Prevention Act, P.L. 106-430
The Needlestick Safety and Prevention Act mandated...

OSHA clarify and revise 29 CFR 1910.1030, the Bloodborne Pathogens Standard
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
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)
Additional Definitions
1910.1030(b)

- **Engineering Controls** - includes additional definitions and examples:
  - *Sharps with Engineered Sharps Injury Protections* - [SESIP]
  - *Needleless Systems*
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.”
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
Non-needle sharp or a needle with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.
Hypodermic syringes with “Self-Sheathing” safety feature

Self-sheathed protected position
Hypodermic syringes with "Retractable Technology" safety feature

Retracted protected position
Phlebotomy needle with “Self-Blunting” safety feature

Blunted protected position
“Add-on” safety feature

Attached to syringe needle

Attached to blood tube holder
Retracting lancets with safety features

Before        During         After

Before    During     After

In use       After use

Before      During      After
Disposable scalpels with safety features

Retracted position

Protracted position
Additional Information About Safety Devices Available At…

www.med.virginia.edu/~epinet

www.tdict.org

Examples of two sources

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
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
Employers must select and implement appropriate engineering controls to reduce or eliminate employee exposure.
“Where engineering controls will reduce employee exposure either by removing, eliminating, or isolating the hazard, they **must** be used.”

CPL 2-2.44D
Selection of engineering and work practice controls is dependent on the employer’s exposure determination.
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
The employer must:
- Evaluate available engineering controls (safer medical devices)
- Train employees on safe use and disposal
- Implement appropriate engineering controls/devices
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
The employer must:

- Train employees to use new devices and/or procedures
- Document in ECP
Recordkeeping: 1910.1030(h)

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

- Additional definitions, paragraph (b)
- New 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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