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HEALTH, SAFETY AND ENVIRONMENTAL PROGRAM

Bloodborne Pathogens

[COMPANY NAME]	APPROVED BY	Safety Manager	VERSION	1.0

1. Purpose

This program is the written Exposure Control Plan for [COMPANY NAME]. Its goal is to eliminate or minimize employee exposure to blood and other potentially infectious materials, and so to bloodborne diseases such as hepatitis B (HBV), hepatitis C (HCV), and HIV. On a contractor's job site, exposure usually comes from giving first aid to an injured coworker or cleaning up after an injury, so this program focuses on doing those tasks safely.

29 CFR 1910.1030; 1915.1030

2. Scope

This program applies to all [COMPANY NAME] employees who have occupational exposure, meaning they can reasonably be expected to contact blood or other potentially infectious materials while doing their job, at our shop and at client and host facilities. It applies in general industry (29 CFR 1910.1030) and shipyards (29 CFR 1915.1030, which is identical). Employees who are not designated first aid responders are not expected to give first aid, but if anyone has an exposure while helping, [COMPANY NAME] offers the same post-exposure evaluation described in Section 11.

3. Definitions

Bloodborne Pathogens – Microorganisms in human blood that can cause disease in humans, including hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Other Potentially Infectious Materials (OPIM) – Human body fluids such as semen, vaginal secretions, cerebrospinal, synovial, pleural, pericardial, peritoneal, and amniotic fluid, saliva in dental procedures, any body fluid visibly contaminated with blood, and all body fluids where it is difficult or impossible to tell them apart; also unfixed human tissue or organs.

Occupational Exposure – Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or OPIM that may result from an employee's duties.

Exposure Incident – A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM that results from an employee's duties.

Parenteral – Piercing the skin or mucous membranes, for example through a needlestick, human bite, cut, or abrasion.

Universal Precautions – Treating all human blood and certain body fluids as if they are known to be infectious for HIV, HBV, and other bloodborne pathogens.

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4. Responsibilities

The Safety Manager maintains this Exposure Control Plan, arranges training, vaccinations, and post-exposure evaluations through a licensed healthcare professional, stocks PPE and Bloodborne Pathogens Kits, and keeps records. **Supervisors** make sure kits and hand cleaning supplies are on site, that designated first aid responders are trained, and that exposure incidents are reported and cleaned up correctly. **Employees** follow universal precautions, use the PPE provided, and report every exposure incident immediately.

5. Exposure Control Plan and Access

Employees have access to the Exposure Control Plan, and it is available to them at all times. A copy of the [COMPANY NAME] Exposure Control Plan (this program) is kept with the Safety Manager, in each job trailer or site office, and with the first aid supplies, and any employee may ask a Supervisor for a copy at no cost. Employees are told where to find the plan during training. This plan contains the elements required for an Exposure Control Plan:

- **Exposure determination**: who is exposed and during what tasks (Section 6).
- **Methods of compliance**: universal precautions, work practices, handwashing, PPE, and cleaning (Sections 7 to 10).
- **Hepatitis B vaccination and post-exposure evaluation and follow-up**, including how exposure incidents are evaluated (Section 11).
- **Communication of hazards**: labels, signs, and training (Sections 12 and 13), and **recordkeeping** (Section 14).

The plan is reviewed and updated at least annually, and whenever tasks, procedures, or job positions change in a way that affects exposure. Each review notes any new technology that reduces exposure and documents that safer, commercially available devices (such as needles with built-in sharps injury protection) were considered where any sharps are used.

29 CFR 1910.1030(c)(1)(i)-(iv); 1910.1020(e); 1915.1030

6. Exposure Determination and Types of Body Fluids

The types of body fluids and infectious materials employees may be exposed to, in addition to blood, are other potentially infectious materials (OPIM), such as saliva and mucous, vomit or any other body fluid visibly contaminated with blood, and any body fluid that cannot be identified. Example: a worker cuts a hand on sheet metal; the blood on the tool, the floor, and the used bandages are all infectious materials.

This exposure determination is made without regard to the use of PPE:

Job Classification	Exposure	Tasks and Procedures
Designated first aid / CPR responders	All employees in this job	Giving first aid or CPR; handling used first aid supplies
Supervisors	Some employees (those designated as first aid responders)	Responding to injuries; first aid; supervising cleanup
Employees assigned to clean up after an injury	Some employees	Cleaning blood from surfaces, tools, and equipment; bagging contaminated waste
Employees who may find discarded needles or sharps	Some employees	Removing found sharps with tools into a sharps container

29 CFR 1910.1030(a), (b), (c)(2); 1915.1030

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Appendix A — Bloodborne Pathogens Training Record

Date: _____

Trainer name and qualifications: _____

Summary of training content: _____

Employee Name	Job Title	Signature

Trainer signature / date: _____

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Appendix C — Exposure Incident Report and Follow-Up Checklist

Employee name / job title: _____

Date, time, and location: _____

Route of exposure (needlestick, cut, splash, other): _____

Describe what happened: _____

Source individual (if known and allowed by law): _____

☐ Exposed area washed or flushed; first aid given

☐ Supervisor and Safety Manager notified

☐ Confidential medical evaluation arranged immediately

☐ Healthcare professional given the standard, job duties, exposure details, and vaccination status

☐ Written opinion given to employee within 15 days of the evaluation

☐ Area, tools, and equipment cleaned and decontaminated; waste bagged and labeled

☐ Cause reviewed and corrective actions assigned

☐ Sharps injury log updated (if required)

Safety Manager signature / date: _____

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Appendix D — ISNetworld RAVS Crosswalk

Q#	Requirement	Section	Page
1	Employees are provided training on Bloodborne Pathogens	Sec. 13	6
2	Types of bodily fluids employees may be exposed to	Sec. 6	2
3	Universal precautions are used for all materials possibly infectious	Sec. 7	3
4	The Exposure Control Plan is readily available to employees	Sec. 5	2
5	Handwashing facilities or antiseptic hand cleansers/towelettes are available at the work site	Sec. 8	3
6	Personal protective equipment (PPE) is provided to employees	Sec. 9	3
7	Equipment and/or working surfaces are cleaned after contact with blood or other infectious material	Sec. 10	4
8	The Hepatitis B Vaccine is provided to all employees with occupational exposure	Sec. 11	5

Revision History

Rev.	Description of Change	Approved By
1.0	Initial issue	Safety Manager

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