

Summary Exposure Control Plan For _____

Family Child Care Homes:

OSHA does not have a rule specific for Family Child care homes. However, if there is an employee /employer relationship and there is potential workplace exposure to blood or OPIM, the employer is required to have a bloodborne pathogens program and implement OSHA Rule 1019.1030. In the event of an exposure to a bloodborne pathogen, it is Best Practice for Family Child Care Homes to follow the instructions in the Standard Precautions Training regarding cleaning the affected area and to promptly document what happened. The FCCH provider should then call their health care provider right away for evaluation and treatment if required. Remember to keep the incident confidential. Please refer to the plan below for more information.

In accordance with the Occupational Health and Safety Administration (OSHA), Bloodborne Pathogens standard 29 CFR 1910.1030, the following exposure control plan has been developed by _____.

Exposure Determination

At _____, specified child care staff and director are designated first aid providers and carry a valid First Aid and CPR card. Provision of first aid is a collateral duty. A complete list of designated first aid providers is kept _____.

Incidents where exposure may occur:

- ❖ direct pressure to a bleeding wound, cleaning or bandaging a wound
- ❖ assisting someone who is bleeding
- ❖ cleaning spills of blood or other potentially infectious materials
- ❖ rescue breathing or CPR
- ❖ skin puncture due to a human bite

Compliance: _____ *requires the use of Standard Precautions*

Standard Precautions An approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, Hepatitis B, Hepatitis C and other bloodborne pathogens.

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Work Practice Controls

- Handwashing: Use running water and soap. The use of an appropriate hand cleanser (such as Purell) is acceptable if running water is not available. Wash hands after removing gloves.
- No eating, drinking, smoking, applying makeup, or handling contact lenses in areas where first aid is provided.
- First Aid kits are available in the _____.
- Disposable gloves will be available in _____. Gloves will be used as needed to prevent contact with employee skin, mucous membranes, etc. Gloves *must* be worn when providing first aid or whenever blood is present. Gloves are also to be worn when changing soiled clothing. Non-latex gloves will be provided to any staff member or for children with a latex allergy.
- CPR resuscitation masks are available _____.
- Spill control kits are available and are kept _____.
- Contaminated laundry will be cleaned at no cost to the employee. Laundry will be properly handled at the location of use, sent to a commercial laundry or safely discarded and replaced. The commercial laundry facility will be informed of the presence of blood.
- Contaminated sharps (needles, glass) are placed in appropriate labeled containers and disposed of properly.

- Based on Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards. Retrieved January 23, 2017 from <https://www.osha.gov/Publications/osh3186.pdf>

- Cleaning and disinfecting (always wear gloves)
 - ❖ Clean using water to remove contamination; followed by a general cleaning using soap and water. When appropriate flush this solution down the drain.

Summary Exposure Plan for _____

- ❖ Disinfect surface using a solution of 1 part bleach to 10-100 parts water. (a solution of ¼ cup of bleach to a gallon is sufficient). This solution must be made daily.
- ❖ Dispose of all towels/tissues and gloves properly.

Hepatitis B Vaccination and Post Exposure Follow-up

- Hepatitis B vaccination will be offered to an employee within 24 hours following a first aid incident in which blood or other body fluids were present.
Note: If an employee refuses the vaccination, then the employee will sign a form declining the offer of the Hepatitis B vaccination.
- All first aid incidents involving the presence of blood or other body fluids must be reported and documented immediately to the person in charge. *Refer to the Accident or Incident Report.*
- Post exposure follow-up will be made available to all employees who have had an exposure incident. Situations will be evaluated after every first aid incident to determine if an exposure has occurred.

An exposure incident means a specific eye, mouth, other mucous membrane, nonintact skin, or parental (needle or other sharp object) with blood or other potentially infectious material that results from the performance of an employee's duties.

- All medical evals/procedures, vaccine series, post exposure evaluation and follow-up will be made available to the employee at no cost at a reasonable time and place.

Document and report any first aid incidents or exposures to the Center Director or Designated Person in Charge.

Post Exposure Evaluation and Follow-up

- Following a report of an exposure incident, the exposed employee will have a confidential medical evaluation and follow-up made available immediately.
 - ❖ Documentation of the route of exposure & evaluation of circumstances
 - ❖ Identify and document the source individual
 - ❖ Post exposure prophylaxis
 - ❖ Provide the healthcare professional with information
 - ❖ Health care professional's written opinion
- The employee who has an exposure incident will document the circumstances, including an evaluation of the policies being followed and "failures of controls" at the time of the incident. The written evaluation will be reviewed by the Center Director and passed onto the center's registered nurse (RN) consultant for a second review.
- Confidentiality will be maintained; Medical Records will be kept confidential.
- A training program will be provided to all employees who are assigned any responsibility for providing first aid and at least annually.

For more information, please refer to the detailed Exposure Control Plan kept _____.

Employee Signature _____

Date: _____

• Based on Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards. Retrieved January 23, 2017 from <https://www.osha.gov/Publications/OSHA3186.pdf>