

# Bloodborne Pathogens Plan

## **SAMPLE Policy Statement**

This sample policy statement is provided only as a guide to assist in complying with 29 CFR 1910.1030, OSHA's Bloodborne Pathogens standard. It is not intended to supersede the requirements detailed in the standards. Review the standard for particular requirements which are applicable to your specific situation. Employers will need to delete or add information relevant to your particular facility in order to develop an effective, comprehensive exposure control plan. Note that the exposure control plan is expected to be reviewed at least on an annual basis and updated when necessary.

This sample covers situations [when an employee has been trained in first aid but has not been designated as a first aid responder](#). Employee would only render first aid treatment as a collateral duty, responding solely to injuries resulting from workplace incidents, generally at the location where the incident occurred. Under these conditions, the first aid providers who render assistance in any situation involving the presence of blood or other potentially infectious materials, regardless of whether or not a specific exposure incident occurs, must have the vaccine made available to them as soon as possible, but in no event later than 24 hours after the exposure incident. If an exposure incident has taken place, other post-exposure follow-up procedures must be initiated immediately.

This material and safety and health consultation services are provided at no cost to owners, proprietors, and managers of small businesses by the Illinois Onsite Safety & Health Consultation Program, Industrial Services Division, Department of Commerce and Community Affairs under a program funded largely by the Occupational Safety and Health Administration (OSHA), an agency of the U.S. Department of Labor.

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## **BLOODBORNE PATHOGENS PROGRAM COLLATERAL DUTY EMPLOYEES**

- A. POLICY.** Employees have been trained in first aid but are expected to render first aid treatment only as collateral duty. Equipment, training, vaccinations, medical treatment are provided to the employee at no cost. The following program has been put in place in order to eliminate or minimize employees occupational exposure to bloodborne pathogens. Each first aid provider will be trained in this program.
- B. EXPOSURE DETERMINATION.** Employees trained as first aid/CPR providers, may have occupational exposure when rendering emergency treatment; custodians who are required to clean up the emergency site may have occupational exposure. Employees are not designated as responsible for rendering first aid or medical assistance as part of their job duties. These tasks are performed only as a collateral duty, responding solely to injuries resulting from workplace incidents, generally at the location where the incident occurred.
- C. PERSONAL PROTECTIVE EQUIPMENT & WORK PRACTICES.** Employees will use gloves, eye and face protection and resuscitation mouthpieces when rendering first aid and CPR. Employees will wear gloves when doing cleanup of accident site. All equipment repair and/or replacement and maintenance of PPE will be at no cost to employees.

In addition, employees will be expected to wash hand and other skin surfaces immediately and thoroughly with water and antiseptic cleanser if contaminated with blood or other bodily fluids in the course of rendering emergency first aid treatment.

- D. REPORTING PROCEDURES.** Should an accident occur where the employee rendered emergency treatment, the employee is to contact the supervisor immediately and in all cases before the end of the shift.

The incident is to be documented on an accident report. The report will include:

- The names of all first aid providers
- A description of the circumstances of the accident, including date and time
- A determination of whether an “exposure incident” has occurred.

- E. HEPATITIS B VACCINATION.** Employees will be provided information on Hepatitis B vaccinations addressing its safety, benefits, methods of administration and availability. All employees who render assistance in any situation involving the presence of blood or other potentially infectious materials, regardless of whether or not a specific exposure incident occurs, will be offered the full immunization series (at no cost to the employee) -  
- as soon as possible but in no event later than 24 hours.