**Bloodborne Pathogen Exposure Control Plan (ECP) Template**

1. **Purpose**

University of Colorado Boulder’s Environmental Health and Safety (EHS) has developed this Exposure Control Plan (ECP) template to help research laboratories and departments outline their assessments of bloodborne pathogen risks to their employees. Its goal is to provide a safe and healthy work environment by striving to minimize or eliminate occupational exposure to bloodborne pathogens.

1. **Roles and Responsibilities**
	1. **Supervisor / Principal Investigator**
		1. The supervisor / principal investigator is responsible for identifying employees who need to be in the BBP program and has ultimate responsibility for ensuring that safety rules and requirements of the BBP Program are followed. They must complete the written ECP and train employees on it. They must provide hands-on site-specific training and ensure annual EHS BBP training is completed. They must also provide HBV vaccinations and personal protective equipment at no cost to the employee.
	2. **Employee**
		1. The employee is responsible for following this site-specific ECP. All practices must be adhered to, including wearing required PPE. The employee is responsible to ask questions if needed and to make suggestions to the PI/supervisor for safer work practices and procedures.
	3. **Environmental Health & Safety (EHS)**
		1. EHS provides oversight for the BBP Program and can assist with exposure determination. EHS also provides annual training on SciShield or in-person.
2. **Exposure Determination:**

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| Supervisor / Principal Investigator: |
| Date of Preparation: |
| Dates of Review / Revision: |

Designated employees that may come into contact with human/primate blood or other potentially infectious materials (OPIM):

**Job Classifications / Titles:**

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| --- |
| Job Classifications / Titles: |
| (e.g.) Research Assistant, Custodian, EHS Emergency Responder |
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|  |

**Tasks/Procedures with exposure potential:**

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| --- | --- |
| Job Classification: | Task / Procedure: |
| e.g. Research Assistant  | e.g. Handling, transporting, or disposing of blood, blood products, human cell lines, or tissue samples. |
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1. **Compliance Methods:**

Universal precautions will be observed at our laboratory/facility to prevent contact with blood or OPIM. All blood or OPIM will be considered infectious regardless of the perceived status of the source individual.

**Engineering and Work Practice Controls:**

Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees at this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be utilized. The following engineering controls will be utilized:

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| --- | --- |
| Task / Procedure: | Engineering Controls |
| e.g. Handling blood  | e.g. Biosafety Cabinet  |
|  |  |
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|  |  |

The following work practice controls will be utilized:

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| Work Practice Controls: |
| Hand hygiene requirements |
| Sharps safety |
| Transporting and shipping biohazardous materials  |
| Cleaning schedules |
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**Personal Protective Equipment:**

All bloodborne pathogens are presumed to be infectious and appropriate PPE, such as gloves, safety eyewear, and lab coats must be worn when handling blood or other potentially infectious materials as outlined in the OSHA Bloodborne Pathogen Standard. All PPE must be used, maintained, and disposed appropriately. To be effective, PPE must prevent blood or OPIM from soaking through to the user's clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membrane under normal conditions of use and for the duration of time for which the PPE will be used.

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| --- | --- |
| Task / Procedure: | Personal Protective Equipment  |
| e.g. handling blood  | e.g. lab coat, gloves, safety goggles  |
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**Housekeeping:**

Employees must decontaminate working surfaces and equipment with an appropriate disinfectant after completing procedures involving blood or OPIM. All equipment, environmental surfaces and work surfaces shall be decontaminated immediately or as soon as feasible after contamination.

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| --- | --- |
| Area/Surface/Equipment: | Approved Disinfectant: |
| e.g. lab bench | e.g. 10% bleach solution |
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**Disposal of Contaminated Items:**

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| --- | --- |
| Contaminated Item: | Decontamination/Disposal Method: |
| e.g. used containers from blood collection  | e.g. autoclave and picked up by EHS |
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**Labels and Signs:**

Biohazard labels are the most obvious warnings of possible exposure to bloodborne pathogens. Warning labels must be affixed to containers of biohazardous waste, refrigerators and freezers containing blood or OPIM, and other containers used to store, transport, mail, or ship blood or OPIM. CU Boulder additionally requires that laboratories post a Biohazard Lab entry sign on their lab doors when Risk Group 2 agents (including human blood and cell lines) are stored and used in the space. Some biohazard labels are available at EHS.

1. **Hepatitis B Vaccination**

All employees who have potential exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine should be offered within 10 working days of their initial assignment to work involving the potential for occupational exposure to blood or other potentially infectious materials. If an employee chooses not to get the vaccine, a declination can be signed (Appendix A of BBP Program).

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| --- | --- | --- | --- |
| Name | Date offered vaccine  | Vaccine dates: | Declination date: |
| name  | date  | dates | date |
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1. **Training:**

All employees identified as having potential for exposure to bloodborne pathogens or other potentially infectious materials must comply with the BBP program and complete annual BBP training. Supervisors are responsible for ensuring employees participate in the training program provided by EHS during working hours. Training on the ECP must be given by the supervisor upon initial assignment, and on an annual basis thereafter, or whenever modification of an existing job description may affect the employee’s potential for occupational exposure. The employee must be given the opportunity to ask questions.

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| --- | --- | --- | --- |
| Name | EHS Provided Training (annual) | Job Specific Training (annual) | Trainer |
| name  | date | date | name |
|  |  |  |  |
|  |  |  |  |
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1. **Post-Exposure Plan:**

Any CU employee exposed or potentially exposed to an infectious agent should seek guidance from a Designated Medical Provider (DMP) as soon as possible. Additionally, they should report this incident to their supervisor and to University Risk Management (URM) by filing an injury claim on the URM website: <https://www.cu.edu/risk>.

Incidents that occur in laboratories at University of Colorado Boulder that result in an exposure to any biohazardous agent must be reported to EHS.