Tips for Fine Tuning Your Exposure Control Plan
This is a reprint of a 2007 factsheet

An exposure control plan (ECP) is a document that is intended to facilitate the elimination or minimization of occupational exposure to bloodborne pathogens. The ECP is a requirement of the OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens" and may also be required by some state regulations.

According to the OSHA requirements the following elements must be covered in the ECP[1]:

- Determination of employee exposure by job classification and tasks and procedures
- Schedules and methods for implementation of methods of exposure control, including methods of compliance, Hepatitis B vaccination, post-exposure evaluation and follow up, communication of hazards to employees and record keeping.
- Procedure for evaluation of circumstances surrounding exposure incidents
- Routine review and update of the ECP, annually, or whenever necessary to reflect:
  - new or modified tasks and procedures which affect occupational exposure or new,
  - revised employee positions with occupational exposure, or
  - changes in technology that eliminate or reduce occupational exposure to bloodborne pathogens
- Annual documentation of consideration and implementation of safer medical devices designed to eliminate or minimize occupational exposure.
- Solicitation and documentation of input from non-managerial employees responsible for direct patient care in the identification, evaluation and selection of effective engineering and work practice controls.

It is also important to note that the ECP must be readily accessible to employees. According to OSHA[2]: "The location of the plan may be adapted to the circumstances of a particular workplace, provided that the employee can access a copy at the workplace, during the workshift (e.g., if the plan is maintained solely on computer, employees must be trained to operate the computer)."

Common issues that hospitals have found with their ECPs include:

- Hard copy ECPs were not in their designated locations in various departments
- Hard copy ECPs were not the most up-to-date version
- Online ECPs were difficult to locate, often requiring one to click through a series of less-than-obvious links before getting to the ECP
- Sections of the ECPs referenced other documents that were not routinely available

Here are a few tips.

Make sure your ECP and all copies are up-to-date
Some ideas:

- Each time you revise the ECP, print copies on a different shade of pastel paper. If this year's color is yellow, for example, non-yellow editions will be readily recognizable.
- Include an expiration date 1 year out in the upper right header: "Expires: 01/30/16".
- Assign each ECP copy a unique number, and keep a master list of I.D. numbers and locations. This will allow you to trade a new ECP for an old one in a controlled manner, and to identify locations of the remaining ECPs needing replacement. Record the receipt of obsolete ECPs, then shred them.

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[1] Reference: OSHA Bloodborne Pathogen Standard (29 CFR 1910.1030); see document for detailed requirements.
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10051 (accessed 2/5/15)

[2] Reference: Directives CPL 02-02-069 - CPL 2-2.69 - Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens;
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=DIRECTIVES&p_id=2570 (accessed 2/5/15)

Make sure your ECP is readily accessible
Our work with hospitals has shown that ECPs were often difficult for employees to locate. Even if the ECP had a designated location, sometimes it wasn't there. For the ECP to be useful, your staff must be able to find it! Make sure that all staff members can find the ECP in a hurry or without guidance, including on the off shift or by staff that don't routinely access it, such as housekeepers or facilities staff.

- Do a periodic assessment in which you ask employees in different job categories to locate the ECP for you. If they can't find it, seek their input on how to best control the ECP's placement.

For ECPs available in hard copy:

- Consider purchasing or constructing racks or book stands that secure and display the ECP. Attach the ECP with a cord or lightweight chain so that it cannot be removed. (If you do this, make sure there is a shelf or flat surface on which the ECP can be placed for reading.)

For ECPs available on the hospital intranet:

- Don't rely on the user to know how to navigate through various links for access to the ECP.
- Have the ECP accessible using an icon or wide variety of search terms, such as "sharps injury", "blood exposure", "needle stick", "stick". To help identify search terms, go around and ask employees how they would search for the ECP (what search terms) if they were injured.
- For workers who may not routinely use computers, make sure they can identify multiple readily available "buddies" who can assist them in getting any information needed from the ECP.

Resource

Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards
This publication includes a model exposure control plan to meet the requirements of the OSHA bloodborne pathogens standard. Available online at: http://www.osha.gov/Publications/osha3186.pdf (accessed 5/22/15)