

# INFECTION CONTROL SELF ASSESSMENT

## Bloodborne Pathogens (OSHA Regulations Standards - 29 CFR - 1910.1030)

- There is a written exposure control plan.
- The written exposure control plan is updated yearly.
- Employees follow universal precautions to prevent contact with blood or other potentially infectious materials.
- Hand washing facilities are readily accessible (cleanser and clean cloth, paper towels, or antiseptic towelettes may be substituted. When antiseptic hand cleansers or towelettes are used, wash hands with soap and running water as soon as possible).
- Hand washing signs are posted in appropriate areas.
- Employees wash their hands between patients, and immediately after removing gloves or other personal protective equipment.
- Personal protective equipment of appropriate sizes is readily accessible or issued to all employees.
- Employees follow universal precautions to prevent contact with blood or other potentially infectious materials.
- All equipment and working surfaces are cleaned and decontaminated immediately, or as soon as feasible, after contact with blood or other potentially infectious materials.
- Spills are cleaned up immediately and according to procedures.
- Containers used for sharps disposal are replaced routinely and not allowed to overfill.
- Containers of regulated waste are labeled with a biohazard warning label.
- Individuals who have contact with blood or other potentially infectious materials in the course of their work are provided training on bloodborne pathogens.
- Bloodborne pathogen training is provided annually.
- The individual(s) conducting the bloodborne pathogen training is knowledgeable in the subject matter.
- Records are maintained of training, indicating the dates of the training sessions, the contents of the training session, the names and qualifications of the person conducting the training, and the names of the persons attending the training sessions.
- Training records are maintained for at least 3 years.

## Cleaning

- All restrooms are clean and sanitary.
- Trash from offices and other areas are removed and stored in a covered container or sealed plastic bags daily.
- For practices that treat children: toys are sanitized on a daily basis.
- There is a schedule for general cleaning.
- There is a designated treatment room that can be used to isolate a patient with a suspected communicable disease.
- Treatment items (i.e. paper gowns, masks, treatment table covers) are readily available and well stocked.
- Cleansing products are readily available for hand washing by employees and patients.
- Patient treatment rooms are cleaned and disinfected according to CDC guidelines.

## Personnel & General Prevention

- The Exposure Control Plan is maintained and reviewed annually for effectiveness in reaching infection control goals.
- Employees have annual TB tests.
- Employee immunizations are up to date.
- A log is maintained tracking occurrences of employees and physicians/dentists for infections acquired on the job.
- An individual(s) is assigned the responsibility to assure the practice has up to date information regarding infection control practices, regulations, and public health information.
- There is a pre-pandemic and pandemic plan and checklist to appropriately respond to Department of Health and CDC advisories.
- Notification is given to public health authorities of communicable diseases as required by the State Department of Health.

## CDC Infection Prevention Checklist

To augment the above check list on infection control, the practice can also follow the CDC's recently (July 2011) released Infection Prevention Checklist which can be found at

<http://www.cdc.gov/HAI/pdfs/guidelines/ambulatory-care-checklist-07-2011.pdf>.