

Ensuring workplace safety for those who may come into contact with an Ebola patient or with the patient's body fluids

Workplace safety is a key consideration under any circumstance and it is of particular importance when employees in the course of their work could come into contact with those suffering from a potentially deadly and communicable disease such as Ebola. The [Minnesota Department of Health](#) continues to work with other state agencies and health care organizations to share the latest safety recommendations from the [U.S. Centers for Disease Control and Prevention \(CDC\)](#) as such information becomes available.

Additionally, Minnesota nurses and other workers who could potentially come into contact with Ebola-infected people or their body fluids in the workplace are protected under the Occupational Safety and Health Administration's (OSHA) [Bloodborne Pathogens \(BBP\) Standard, 29 CFR 1910.1030](#). Minnesota OSHA's expectation is that employers will comply with this standard, including as follows.

Screening and planning

Minnesota OSHA expects hospitals and other employers to safely and effectively identify appropriate exposure history and signs or symptoms compatible with Ebola virus disease. Guidance is available from the CDC's [Emergency Department Evaluation and Management of Patients with Possible Ebola Virus Disease](#).

A facility's "exposure control plan," which is required by the BBP standard, must identify employees who have occupational exposure to bloodborne pathogens, such as Ebola, and include a list of tasks and procedures where occupational exposure occurs. This plan should be part of the employer's overall safety and health program.

Engineering controls

Employers are required to use engineering and work-practice controls to eliminate or minimize employee exposure. Examples of engineering or work-practice controls include:

- isolating the patient in a private room or enclosed area;
- minimizing the number of health care workers exposed to the patient; and
- transporting the patient to a different care center as circumstances warrant.

Personal protective equipment (PPE)

When engineering and work-practice controls are not sufficient to eliminate the risk of exposure to a bloodborne pathogen, the use of PPE is required for employees.

PPE will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the skin or street clothes of the employee. The type and characteristics of PPE depend on the task and degree of exposure anticipated.

Minnesota OSHA Compliance expects appropriate PPE use to follow the CDC's [Guidance on Personal Protective Equipment to be Used by Health Care Workers During Management of Patients with Ebola Virus Disease in U.S. Hospitals, Including Procedures for Putting on \(Donning\) and Removing \(Doffing\)](#) and PPE information in the CDC's [Interim Guidance for Emergency Medical Services \(EMS\) Systems and 9-1-1 Public Safety Answering Points \(PSAPs\) for Management of Patients with Known or Suspected Ebola Virus Disease in the United States](#).

Appropriate, adequate PPE

The BBP standard requires “appropriate PPE in appropriate sizes be available in the worksite.” If appropriate PPE is not available to protect employees, the employer should not expose employees to the hazard. This may create a need to transport a patient to a different facility where adequate PPE is available. The standard also requires post-exposure follow-up and evaluation of an exposure incident.

Training

The BBP standard and the CDC guidance links above require employers to train employees who may have occupational exposure. The training must include an explanation of and information about:

- epidemiology and symptoms of bloodborne diseases;
- modes of transmission of bloodborne pathogens;
- appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
- use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices and personal protective equipment;
- types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment;
- basis for selection of personal protective equipment;
- appropriate actions to take and people to contact in an emergency involving blood or other potentially infectious materials;
- procedures to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available; and
- post-exposure evaluation and follow-up the employer is required to provide for the employee after an exposure incident.

The above items are a summary; see [29 CFR 1910.1030](#) to review the entire BBP standard.

Assistance from Minnesota OSHA

Employers in need of assistance may contact or request a free consultation visit from Minnesota OSHA [Workplace Safety Consultation](#). Employees who believe there is a safety hazard at their worksite may file a complaint with [Minnesota OSHA Compliance](#) and have their concern evaluated through an on-site inspection or a nonformal complaint process.

Resources

- [29 CFR 1910.1030 Bloodborne Pathogens](#)
- [Emergency Department Evaluation and Management of Patients with Possible Ebola Virus Disease](#)
- [Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus](#)
- [Checklist for Patients Being Evaluated for Ebola Virus Disease \(EVD\) in the United States](#)
- [Guidance on Personal Protective Equipment to be Used by Health Care Workers During Management of Patients with Ebola Virus Disease in U.S. Hospitals, Including Procedures for Putting on \(Donning\) and Removing \(Doffing\)](#)
- [Interim Guidance for Emergency Medical Services \(EMS\) Systems and 9-1-1 Public Safety Answering Points \(PSAPs\) for Management of Patients with Known or Suspected Ebola Virus Disease in the United States.](#)

Nov. 6, 2014