



UNIVERSAL PRECAUTIONS AND INDIANA INFECTIOUS WASTE ON-SITE REVIEW – COMMUNICABLE DISEASE

State Form 49807 (R / 1-11)
INDIANA STATE DEPARTMENT OF HEALTH

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| Office of: | | Date of visit (month, day, year) |
| Telephone number () | Fax number () | E-mail address |
| Name(s) of Indiana State Department of Health representative(s) | | |
| Name(s) of individual(s) present | | |

The following questions represent important requirements of the Indiana Universal Precautions (410 IAC 1-4) and Infectious Waste (410 IAC 1-3) rules and I-OSHA.

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| Question 1: Does the facility/office have written policies addressing the requirements of the Indiana Universal Precautions and Infectious Waste rules available for review by the investigator? |
| Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable |
| Observations / comments: |
| Citation(s): <i>410 IAC 1-4-7: A facility operator shall develop written policy in compliance with this rule and the requirements of the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030), that: (1) requires the use of universal precautions when performing those professional, employment, training, or volunteer activities or duties that include any reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials, (2) provides sanctions, including discipline and dismissal, if warranted, for failure to use universal precautions, and (3) proscribes the facility operator, or any covered individual acting at or on behalf of the facility, from retaliating against any person, including any professional, employee, trainee, volunteer, or patient, for filing a complaint with the department in good faith under this rule.</i> <i>410 IAC 1-3-23-1A-B: All persons and facilities subject to this rule shall: (1) have a written policy and procedures that, at a minimum, contain: (A) the requirements contained in this rule, and (B) the sanctions, including disciplines and dismissal of persons, if warranted, for failure to follow the requirements set forth in this rule.</i> |
| Question 2: Does the facility/office provide training regarding universal precautions and infectious waste management and documentation of the training? |
| Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable |
| Observations / comments: |
| Citation(s): <i>410 IAC 1-4-6 (3-4): An individual or entity that is a facility operator shall comply with the following: (3) ensure that the training described in the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030) is provided to all covered individuals whose professional, employment, training, or volunteer activities or duties are performed at or on behalf of the facility; (4) ensure that a record of training, as required under the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030), of an individual's participation in the training that is provided. The record shall be made available to the department for inspection upon request.</i> <i>410 IAC 1-3-23 (2-3-4): All persons and facilities subject to this rule shall: (2) provide necessary instruction and materials, including protective garments, to implement this rule prior to giving a person an assignment where contact with infectious waste is likely, (3) maintain a record of such instruction, including an attendee record of a person's participation in the instruction, and (4) make all records available to the state board for inspection under IC 16-1-9.5-10.</i> |
| Question 3: Does the facility/office display or have available Universal Precautions and Patients' Rights information as required by 410 IAC 1-4? |
| Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable |
| Observations / comments: |
| Citation(s): <i>410 IAC 1-4-6-c: The operator of a facility, if providing services to patients or the public in which there is risk of skin, eye, mucous membrane, or parenteral contact to human blood or other potentially infectious materials, shall display, or make available to the public, written materials prepared or approved by the department explaining universal precautions and patients' rights under this rule. These materials shall include information regarding the department's duties to investigate.</i> |

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| Question 4: Does the facility/office require handwashing after contact with blood or other potentially infectious materials (OPIM) and after removing personal protective equipment? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): <i>410 IAC 1-4-8 (a): All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030).</i> <i>29 CFR 1910.1030 (d-2-v, vi): (v) Employers shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment; (vi) Employers shall ensure that employees wash hands and other skin with soap and water, or flush mucous membranes, with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.</i> | | | |
| Question 5: Is eating, drinking, applying lip balm, and/or handling contact lenses allowed in work areas where there is a reasonable anticipated risk for contact with blood or OPIM? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): <i>410 IAC 1-4-8 (a): All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030).</i> <i>29 CFR 1910.1030 (d-2-ix): Eating, drinking, smoking, applying cosmetic or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.</i> | | | |
| Question 6: Is food and drink allowed in refrigerators, on countertops, and other areas where blood or OPIM is present? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): <i>410 IAC 1-4-8 (a): All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030),</i> <i>29 CFR 1910.1030 (d-2-x): Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets, or on countertops or benchtops where blood or other potentially infectious materials are present.</i> | | | |
| Question 7: Is appropriate personal protective equipment (i.e. gloves, gowns, laboratory coats, face shields, or masks and eye protection) required when contact with blood or OPIM is anticipated? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): <i>410 IAC 1-4-8 (a): All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030).</i> <i>29 CFR 1910.1030 (d-3-i): When there is occupational exposure, the employer shall provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields, or masks and eye protection and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through or reach the employee's work clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for duration of time for which the protective equipment will be used.</i> | | | |

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| Question 8: Are gloves required to be worn when there is reasonably anticipated risk for contact with blood and/or OPIM? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): 410 IAC 1-4-8(a): All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030). 29 CFR 1910.1030 (d-3-ix): Gloves shall be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin, when performing vascular access procedures, except as specified in paragraph (d) (3) (ix) (D) and when handling or touching contaminated items or surfaces. | | | |
| Question 9: Are surfaces contaminated with blood or OPIM cleaned with either a 10% household bleach solution or an EPA approved hospital grade tuberculocidal solution? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): 410 IAC 1-4-8 (b-1): The operator and all covered individuals whose professional, employment, training, or volunteer activities or duties are performed at or on behalf of a facility providing services to patients or other members of the public in which there is a reasonably anticipated risk of skin, eye, mucous membrane, or parenteral contact with human blood or other potentially infectious materials shall also comply with the following requirements: (1) All equipment and environmental surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials. (3) Environmental surfaces and equipment not requiring sterilization which have been contaminated by blood or other potentially infectious materials shall be cleaned and decontaminated. Disinfectant solutions shall: (A) be a hospital-grade, tuberculocidal Environmental Protection Agency (EPA) registered disinfectant, or (B) be sodium hypochlorite, five-tenth percent (0.5%) concentration, by volume (common household bleach in ten percent (10%) concentration in water). The solution shall be dated and shall not be used if it is more than twenty-four (24) hours old. | | | |
| Question 10: Are heat procedures used for sterilizing heat stable equipment and sterilization records available for review (including monthly equipment inspections and use of biological indicators)? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): 410 IAC 1-4-8 (b-2): The operator and all covered individuals whose professional, employment, training, or volunteer activities or duties are performed at or on behalf of a facility providing services to patients or other members of the public in which there is a reasonably anticipated risk of skin, eye, mucous membrane, or parenteral contact with human blood or other potentially infectious materials shall also comply with the following requirements: (2) Heating procedures capable of sterilization must be used when heat stable, nondisposable equipment is sterilized. Heat labile, reusable equipment requiring sterilization must be sterilized by chemical means. Records must be maintained to document the following: (A) duration of sterilization technique, (B) mechanisms for determining sterility, (C) routine monthly equipment maintenance inspections. | | | |
| Question 11: Is the requirement that needles are not bent, recapped, or removed (except when there is no feasible alternative) followed? | | | |
| Compliance | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Observations / comments: | | | |
| Citation(s): 410 IAC 1-4-8 (a): All covered individuals and health care workers under this rule shall comply with the requirements imposed under the Indiana occupational safety and health administration's bloodborne pathogen standards (as found in 29 CFR 1910.1030). 29 CFR 1910.1030 (d-2-vii-A -B): Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed except as noted in paragraphs (d) (2) (vii) (A) and (d) (2) (vii) (B) below. (A) Contaminated needles shall not be recapped or removed unless the employer can demonstrate that no alternative is feasible or that such action is required by a specified medical procedure. (B) Such recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed- technique. | | | |

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| Question 12: Are contaminated needles or other contaminated sharps placed in leak-proof, puncture-resistant containers that can be tightly sealed, not overfilled before replaced, and labeled with the biohazard symbol? | |
| Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Observations / comments: | |
| Citation(s): <i>410 IAC 1-3-24 (b): All persons and facilities subject to this rule shall place contaminated sharps or contaminated items that could potentially become contaminated sharps, infectious biological cultures, infectious associated biologicals, and infectious agent stock in containers that are: (1) leak-proof, rigid, puncture-resistant, (2) tightly sealed to prevent expulsion, (3) labeled with the biohazard symbol, and effectively treated in accordance with this rule prior to being stored in an unsecured area and sent for final disposal.</i> <i>29 CFR 1910.1030 (d-4-iii) (A-2-iii): During use, containers for contaminated sharps shall be: (iii) replaced routinely and not allowed to overfill.</i> | |
| Question 13: Is infectious waste contained in a manner consistent with 410 IAC 1-3-24? | |
| Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Observations / comments: | |
| Citation(s): <i>410 IAC 1-3-24 (c): All persons and facilities subject to this rule shall place pathological waste, laboratory animal carcasses, laboratory animal blood and bodyfluids, and laboratory animal bedding, human blood, human blood products in liquid or semiliquid form, and human body fluids that are visibly contaminated with blood in containers that are: (1) impervious to moisture, (2) of sufficient strength and thickness to prevent expulsion, (3) secured to prevent leakage or expulsion, (4) labeled with the biohazard symbol, (5) effectively treated in accordance with this rule prior to being placed in an unsecured area and sent for final disposal.</i> | |
| Question 14: Is infectious waste stored in a secure area that is either locked or has no public access and labeled with the biohazard symbol? | |
| Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Observations / comments: | |
| Citation(s): <i>410 IAC 1-3-25 (1-A-B-C): If infectious waste is stored prior to final disposal, all persons subject to this rule shall: (1) store infectious waste in a secure area that: (A) is locked or otherwise secured to eliminate access by or exposure to the general public, (B) affords protection from adverse environmental conditions and vermin, (C) has a prominently displayed biohazard symbol.</i> | |
| Question 15: Is infectious waste treated properly on-site or properly disposed of by a commercial waste vendor? | |
| Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| Treated on site? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, specify method |
| Commercial vendor? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, please list |
| Observations / comments: | |
| Citation(s): <i>410 IAC 1-3-26: (a) All persons and facilities subject to this rule shall either effectively treat infectious waste in accordance with this rule or transport infectious waste off-site for effective treatment in accordance with this rule. (b) A treatment is effective if it reduces the pathogenic qualities of infectious waste for safe handling; is designed for the specific infectious waste involved, and is carried out in a manner consistent with this rule. Effective treatment may include: (1) incineration, (2) steam sterilization, (3) chemical disinfection, (4) thermal inactivation, (5) irradiation. or (6) discharge in a sanitary sewer or septic system that is properly installed and operating in accordance with state and local laws, (c) Except as provided in section 28 of this rule, all persons and facilities subject to this rule may store, transport, and dispose of infectious waste that has been effectively treated in accordance with this rule in the usual manner for waste that is noninfectious.</i> | |