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| Company Name: | Date of Plan: | Location(s): |
| \*\*Occupational Health Committee/ Representative must take part in all phases of the Exposure Control Planning\*\*Developed by: |
|  QUERY | RESPONSE TO QUERY | EXPLANATION |
| Who may be exposed? |  | This must include any workers or groups of workers who may be exposed (can be listed by department, job title, etc. as long as it is clear). |
| What tasks or procedures will put the Workers at risk? |  | This may be listed by general category, such as “garbage removal” or by specific task, such as “carrying trash bags to external bin” |
| How could they be exposed? What ways may an infectious material enter the body? |  | This could include (but is not limited to):* Breathing in respiratory droplets
* Close/ physical contact with positive case (member of public, co-worker)
* Contaminated surface contact
 |
| What are the signs & symptoms of diseases that may arise from exposure? |  | This should be descriptive enough that Workers and Supervisors know what to watch for. \*\*Check government website for updated symptoms |
| What types of infection control measures are provided or used? |  | Examples include:* Vaccination
* Contact surface sanitization
* Engineering controls (barriers between Worker and the hazard)
* Personal protective equipment (e.g. gloves, gowns, face shields)
* Safe work practices or procedures

Standard practices / universal precautions (e.g. proper hand washing)\*Public health orders, industry specific guidelines (Saskatchewan based) |
| Limitations of control methods |   | The Exposure Control Plan must also include the limitations of the above controls (e.g. latex gloves will not guard against needle pokes but may be sufficient when handling bedding exposed to bodily fluids). |
| What are the procedures for: * A leak/spill of infectious material?
* Worker exposure to infectious material?
* Worker believes he/she has been exposed?
 | \*\*Procedures should be developed, and then referenced here. All organizations will have different reporting chains and customized procedures should reflect that.\*\* | Ensure detailed procedures are in place for each. It does not matter if Worker exposure can be proven, if the Worker believes (reasonably) that they have been exposed – a procedure must be in place for them to follow. |
| What is the procedure for safe handling, cleaning, and disposal of contaminated PPE and equipment? |  | This must include any PPE that is available. (e.g. masks, respirators gloves, goggles, etc) |
| What training will Workers receive? |  | Training must be provided before work starts. Document all training provided; who, what, when. Training must include a demonstration component. Workers must be able to “show they know”Review training annually. |

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| What is the process/procedure for investigating & documenting exposure? |  | All spills, leaks, exposure, and possible exposure investigation’s must include:* Route of exposure: close contact skin contact, ingestion, etc.)
* Circumstances of exposure (where, when, etc.)

Corrective action to be implemented to prevent recurrence of event |

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| REVIEW (Include Printed Name, Signature & Date) |
| Management: Name:Signature:Date: | OHC Rep./Member: Name:Signature:Date: | Supervisor: Name:Signature:Date: |

Sask. OHS reg. 6-22(6) An employer, in consultation with the committee, shall review the adequacy of the exposure control plan, and amend the plan if necessary, at least every two years or as necessary to reflect advances in infection control measures, including engineering controls.

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| INDIVIDUAL EMPLOYEE REVIEW (Sub-Contractors put company name as well as signature in the signature box) **\*\*Signature is acknowledgement of understanding\*\*** |
| Name: | Signature: | Date of Review: |
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