

## BLOODBORNE PATHOGENS STANDARD COMPLIANCE CHECKLIST

SCHOOL NAME:	REGION:	
SCHOOL ADDRESS:		
PHONE #:	FAX #:	DISTRICT:

PROGRAM ADMINISTRATION	YES	NO
1. A Site Administrator has been identified at the facility		
2. A written Exposure Control Plan is at the facility		
3. The Exposure Control Plan is completed		
4. At-risk employees have been identified		
5. At-risk employees who declined the Hepatitis B vaccine have signed declination forms		
6. These signed declinations are kept on file at the facility		

TRAINING	YES	NO
7. Training has been conducted prior to administration of vaccines		
8. Employees understand hazards associated with Bloodborne Pathogens		
9. Training is documented (kept on file for 3 years)		

EMPLOYEES ARE FAMILIAR WITH:	YES	NO
10. Name and location of the Site Administrator		
11. OSHA's Bloodborne Pathogens Standard		
12. The NYCDOE's Bloodborne Pathogens program		
13. The categories of employees who are entitled to the Hepatitis B vaccine		
14. The post-exposure plan for individuals exposed to Bloodborne Pathogens		
15. Procedures to report Bloodborne Pathogens exposure (Exposure Incident Report)		
16. Procedures to claim reimbursement for related medical tests		

PERSONAL PROTECTIVE EQUIPMENT	YES	NO
17. PPE is available to employees		
18. Employees are trained in the use, limitations, locations, handling, and disposal of PPE		

<b>REGULATED MEDICAL WASTE</b>	<b>YES</b>	<b>NO</b>
19. A regulated medical waste kit is at the site		
20. Regulated waste is disposed of in red biohazard bags, sharps containers, and box		
21. Regulated waste is stored in a secured area		

<b>RECORDKEEPING</b>	<b>YES</b>	<b>NO</b>
22. Training records are kept for 3 years		
23. Exposure incidents are reported on incident report forms		
24. Exposure incidents are recorded on exposure incident log		
25. Sharps injuries are recorded on the sharps injury logs		

<b>POSTING</b>	<b>YES</b>	<b>NO</b>
26. A bulletin board has been allocated for health and safety information		
27. A Bloodborne Pathogens poster is conspicuously displayed		
28. A Universal Precautions poster is conspicuously displayed		
29. The poster is current and accurate		

_____ Site Administrator (Print)	_____ Principal's Signature
_____ Site Administrator (Signature)	_____ Date

**Note:** For each no answer above, attach an explanation and forward Checklist to Regional Representative.

Please forward a copy to:

Office of Occupational Safety and Health (OOSH)  
 65 Court Street, Room 706 ▪ Brooklyn, NY 11201 ▪ Phone: 718-935-2319 ▪ Fax 718-935-4682