

ADMINISTRATIVE REGULATION

APPROVED: December 12, 2017

REVISED:

# CENTENNIAL SCHOOL DISTRICT

## 314.1-AR-0. UNIVERSAL PRECAUTIONS

Universal precautions are procedures used to prevent the transmission of infections and bloodborne viruses in the school community and to decrease the risk of exposure to students and District staff.

Universal precautions apply to blood and other potentially infectious body fluids containing blood, but these procedures should be used to handle all body fluids and waste. Because it is impossible to know who may be infected with infectious diseases, universal precautions must be used in each individual situation by all District employees, volunteers, coaches and students.

All District schools will provide the following for personal and environmental cleanliness:

1. Training regarding universal precautions for all school staff, volunteers and coaches.
2. Sufficient time for hand washing after toilet use and before eating meals and snacks.
3. Ready access to hand washing supplies, including hot and cold running water, liquid soap in a dispenser, and paper towels or air dryers.
4. Supply of disposable gloves conveniently available.
5. Storage areas for linens, utensils, equipment, and disposable items separate from areas used for storing soiled articles.
6. Soiled, disposable articles kept in covered waste receptacles lined with disposable plastic bags that are sealed and discarded.
7. Puncture-resistant containers for disposal of needles and sharp objects located in the health room.
8. Information on universal precautions disseminated to all students and parents/guardians.

### Hand Washing

Hand washing is the most important technique for preventing the spread of disease and should be done frequently by students and staff. Hand washing should occur:

1. After going to the bathroom.

2. Before and after drinking and eating.
3. Before handling of clean utensils or equipment.
4. Before and after handling food.
5. Before and after assisting with feeding, and between students if assisting more than one (1) student.
6. Before and after assisting or training a student in toileting and feeding.
7. After contact with body secretions, such as blood; urine; feces; mucus; saliva; semen; tears; drainage from wounds; after handling of soiled pads, garments and equipment.
8. After caring for any students, especially those with mouth, eye, or ear discharge.
9. After removing disposable gloves.

Proper hand washing requires the use of soap and water with vigorous rubbing, including between fingers and under fingernails, under a stream of running water for at least ten (10) seconds; rinsing under running water; and thorough drying with paper towels or air dryer.

#### Cleaning Body Fluid Spills

These steps will be followed in all cases of body fluid spills:

1. Wear disposable gloves and avoid contact with body fluids, when possible. When gloves are not used, immediately wash hands and other affected areas.
2. Clean all hard surfaces and remove soil; apply a disinfectant of 1:10 household bleach solution or approved disinfectant.
3. Clean and disinfect soiled rugs and carpets by applying a sanitary absorbent agent or rug shampoo, let dry and vacuum.
4. Secure contaminated disposable items in plastic bags and place in trash.
5. Store items that can be laundered in secured plastic bags until washing in hot water in a washing machine.
6. Rinse non-disposable cleaning equipment in a disinfectant.

Post-Exposure Report

District staff will immediately report, using the District form, any incident of accidental exposure to body fluids or direct contact with blood to the building principal, who will inform the school nurse.

The school nurse will retain a copy of all body fluid exposure reports for the school year.

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## 314.1-AR-1. BODY FLUID EXPOSURE INCIDENT FORM

EXPOSED PERSON:

Date of this Report:

Position	Last Name	First Name	
Are You: Staff <input type="checkbox"/> Student <input type="checkbox"/> Contractor <input type="checkbox"/> Visitor/Other <input type="checkbox"/>		Male <input type="checkbox"/> Female <input type="checkbox"/>	DOB
Department/School	Home Address & ZIP		
Work Phone	Home Phone	Altern. Phone	

Date of Incident	Location of Incident: (be specific)
Time of Incident (indicate a.m. or p.m.)	

Exposure Type (blood, saliva, etc.)	Location of Exposure (area of body)	Protective equipment used, if any
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Describe Incident – Please attach any pertinent information on medical conditions and/or chronic medications  
(use additional pages if necessary and attach)


Action taken after exposure (clean-up, decontamination, etc.)	Did exposure require follow-up medical treatment? If so, please describe
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Signature of Exposed Person

Date