PERSONNEL 5610C

Prevention of Disease Transmission

All District personnel shall be advised of routine procedures to follow in handling body fluids. These procedures shall provide simple and effective precautions against transmission of diseases to persons exposed to the blood or body fluids of another. These procedures shall be standard health and safety practices. No distinction shall be made between body fluids from individuals with a known disease or infection and from individuals without symptoms or with an undiagnosed disease.

The administration shall develop, in consultation with public health and medical personnel, procedures to be followed by all staff. The procedures for prevention of disease transmission shall be distributed to all staff, and training on the procedures shall occur on a regular basis. Training and appropriate supplies shall be available to all personnel, including those involved in transportation and custodial services.

Healthy Hand Hygiene Behavior

All staff will engage in hand hygiene at times including, but not limited to, the following:

- 1. Arrival to the facility and after breaks;
- 2. Before and after preparing, eating, or handling food and drinks;
- 3. Before and after administering medication or undergoing health screenings;
- 4. After coming in contact with bodily fluid;
- 5. After recess:
- 6. After handling garbage;
- 7. After use of the restroom; and
- 8. After assisting students with handwashing.

Hand hygiene includes but is not limited to washing hands with soap and water for at least 20 seconds. If hands are not visibly dirty, alcohol-based sanitizers containing at least 60% alcohol can be used if soap and water are not readily available.

Staff are encouraged to wear a facial covering while present in any school building. The District does not require the use of facial coverings and will not provide facial coverings except at the discretion of the administration. The Board's decision to not require facial coverings is based on a review of the circumstances in the community and consultation with local health officials on issues including but not limited to the possibility of exposure and availability of facial coverings.

Policy History:
Adopted on: February 22, 2017
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