## SCHOOL DISTRICT OF NEW LONDON

## **BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN**

- A. In accordance with the OSHA Bloodborne Pathogens Standards, 29 CFR 1910.1030 Appendices A and B, the following exposure control plan has been developed for the School District of New London. Pursuant to Statute 101.055, DILHR is required to adopt and enforce health and safety standards equal to those offered private employees as administered by the Occupational Safety and Health Administration (OSHA).
  - 1. Significant exposure refers to an exposure which carries the potential for transmission of HBV (Hepatitis B virus) and HIV (AIDS virus). Since other infectious diseases can also be transmitted by significant exposure to blood or body fluids, this policy may be used to document any such exposure.
  - 2. Under Wis. Stats. Sec. 146.025(1)(em), "significantly exposed" means a sustained contact which carries a potential for transmission of HBV and/or HIV, by one or more of the following:
    - a. Transmission, into a body orifice or onto mucous membrane of blood, semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial or amniotic fluid, or other body fluid that is visibly contaminated with blood.
    - b. Exchange during the accidental or intentional infliction of a penetrating wound, including a needle puncture of blood, semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial or amniotic fluid, or other body fluid that is visibly contaminated with blood.
    - c. Exchange, into an eye, an open wound, an oozing lesion, or where a significant breakdown in the epidermal barrier has occurred, of blood, semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, pericardial or amniotic fluid, or other body fluid that is visibly contaminated with blood.
- B. The School District of New London's Exposure Control Plan is designed to eliminate or minimize employee exposure to blood or other potentially infectious materials (OPIM). This plan includes an exposure determination for this workplace, the schedule and methods of implementation, and the procedure for the evaluation of circumstances surrounding exposure incidents.
- C. School personnel who are most at risk for occupational exposure include those employed in the following categories:

- 1. School health personnel (nurses, health aides).
- 2. Secretaries/aides who provide first aid on a regular basis.
- 3. Playground supervisors.
- 4. Special education staff (CD/ED/EC).
- 5. Coaches.
- 6. Custodial staff.
- 7. Transportation staff.
- 8. Other staff whose job description may include first aid duties on a regular basis.
- D. A list of tasks and procedures performed by employees in the above job classifications in which exposure to bloodborne pathogens may occur has been developed below. This exposure determination shall be made without regard to the use of personal protective equipment.
  - 1. Care of minor injuries that occur within a school setting, i.e., bloody nose, scrape, minor cut;
  - 2. Initial care of injuries that require medical or dental assistance, i.e., damaged teeth, broken bone protruding through the skin, severe laceration;
  - 3. Care of students with medical needs, i.e., catheterizations, tracheotomy, colostomy, injections;
  - 4. Care of students who need assistance in daily living skills, i.e., toileting, dressing, handwashing, feeding, and menstrual needs;
  - 5. Care of students who exhibit behaviors that may injure themselves or others, i.e., biting, hitting, scratching;
  - 6. Care of an injured person in laboratory setting, vocational education setting, or art class;
  - 7. Care of injured person during a sport activity;
  - 8. Care of students who receive training or therapy in a home-based setting; and,
  - 9. Cleaning tasks associated with body fluid spills.
- E. The biology curriculum does not currently include blood-typing, whereby students and instructors lance the skin to produce a drop of blood for analysis under a microscope. These affected employees will be included under this plan should the biology curriculum change to include blood-typing.

ADOPTION DATE:	May 8, 2000
REVISION DATE(S):	February 12, 2018; August 12, 2024
REVIEW DATE(S):	June 24, 2024
CROSS-REFERENCE:	Administrative Guideline
LEGAL REFERENCE:	