#### **EMERGENCY CARE PROCEDURES**

## A. Student Emergency Information

- 1) An emergency information form must be completed for each student upon his/her initial enrollment or attendance in school or his/her participation in any District-sponsored athletic activity for students. The form shall be completed regardless of the student's full-time status, enrollment status, or residency. At least annually, each school shall request that the student's parent or guardian provide any updates to the emergency information that is presently on file. The student's emergency information shall also be updated any time during the school year that a parent or guardian submits a change. The form shall include:
  - Emergency contact names and information in the event of an accident, injury, illness, or other emergency.
  - b) Information about any special health concerns or procedures relevant to the student.
- 2) Upon receipt of a new or amended emergency information form provided by a parent or guardian, the building principal or designee (Office secretary) shall ensure that the information is reviewed by an appropriate staff member or other representative of the school to determine whether the District may need to follow-up with a further response or inquiry. The District Nurse or contracted RN shall be consulted as necessary in connection with the review of emergency information forms.
- 3) Emergency health information shall be kept in the relevant school office, entered into JMC Student Record Management Software and shall be shared with school personnel and other school officials as deemed appropriate and necessary, consistent with legal requirements and with the District's student records policy and procedures.
- 4) When students are involved in school-sponsored activities away from school, student emergency information will be made available in order to enable activity supervisors to appropriately address any individualized health concerns or possible emergency situations. It is the joint responsibility of the building principal or designee and the staff who are planning/supervising the activity to ensure that this information is readily available.

### B. Individualized Health/Medical Plans

- The District develops individualized health/medical plans (IHP)for students (including allergy management plans) on as-needed basis and in a manner consistent with applicable law. In appropriate cases, individualized planning will occur in connection with the development of a Section 504 plan or individualized education program (IEP).
- 2) In most cases, a team-based approach will be used to develop any individualized plan, including consideration of relevant medical information and recommendations. The District Nurse or contracted RN will generally be involved in the process of establishing and monitoring any such plan.
- 3) As needed, the District Nurse or contracted RN will provide nursing-related supervision, including but not limited to providing or arranging for appropriate training of designated school personnel, in situations where a student's plan calls for the District to provide specialized health services.

# C. Planning for Possible Medical Emergencies in Connection with Activities Held Away from School

1) When students will be participating in a District-sponsored activity that is being held away from school, activity organizers/supervisors are expected to engage in both general and studentspecific planning for possible emergency care needs. General planning may involve tasks such as identifying unusual activity-specific risks (e.g., unusually hazardous areas, increased opportunities for student exposure to likely allergens, unusual physical demands), assessing the availability of medical and emergency services/facilities near the activity location(s), verifying that activity supervisors will have access to students' emergency information, and informing accompanying school personnel and volunteers about what to do in case of a medical or health-related emergency. Student-specific planning involves an assessment of needs related to any special health concerns of the individual students who will be participating in the activity.

- 2) The extent of emergency care planning for such away-from-school activities should generally be proportionate to the uniqueness of the location and type of activity. For example, general emergency planning can often be less extensive in connection with recurring activities (e.g., away contests for students participating in athletics) when participating staff, students, and students' parents and guardians can be expected to be reasonably familiar with the nature and location(s) of the activity.
- Activity organizers/supervisors shall consult with the building principal and the District Nurse
  or contracted RN on an as-needed basis to assist with emergency care planning for such
  away-from-school activities.

## a) Emergency Equipment and Supplies

- i) First aid supplies and equipment will be placed in the following accessible locations within each school building: designated health rooms/areas, the school office, physical education locker rooms, school science labs, school kitchens, school shop/technical education classrooms.
- ii) A copy of the District's first aid resource book: Pediatric First Aid For Caregivers And Teachers (Pedfacts) by American Academy of Pediatrics, applicable procedures and protocols and an American Heart Association Heartsaver First Aid CPR AED workbook will be maintained in each location, designated above, where first aid supplies and equipment are kept.
- iii) Mobile first aid kits shall be available for field trips and similar away-from-school activities involving students.
- iv) The District Nurse or contracted RN will maintain a regular inventory of the first aid supplies/equipment and order needed supplies/equipment. The principal or his/her designee will notify the registered nurse when additional supplies/equipment are needed.
- v) A copy of the Wisconsin Communicable Disease Chart from the Wisconsin Department of Health Services shall be maintained in each school's office.
- vi) An automated external defibrillator (AED) will be available in the following school building location(s) in the District: Elementary School -- outside the District Office by the gymnasium; Middle School -- outside the gymnasium entrance; High School -- outside the gymnasium entrance. The AED shall be used and maintained in accordance with legal requirements, the manufacturer's specifications, and established District procedures.

## b) Designation and Training of Emergency Care Providers

- ) Each building principal, in consultation with the District Nurse or contracted RNI, shall:
  - Designate an appropriate number of staff members, by building, to serve as site-based first responders in case of a medical/health care emergency occurring in the school. Including the building principal, a minimum of three staff members per school building shall be designated as site-based first responders.
  - Designate any staff members who, in addition to the site-based first
    responders, will receive role-appropriate training and be available to
    implement relevant emergency care procedures in particular situations (e.g.,
    in connection with school-sponsored activities that take place off school
    premises or outside of the normal school day, such as field trips, athletic
    events, and other co-curricular and extracurricular activities).

- ii) Each building principal, in consultation with the District Nurse or contracted RN, shall also monitor each school's implementation of a role-specific training schedule for the individuals who have been designated to implement elements of the District's emergency care procedures.
- iii) All individuals designated as site-based first responders shall receive broad training related to the District's emergency care procedures, including training in at least the following areas:
  - (1) the District's general first aid protocols (e.g., student injury/illness response protocols);
  - (2) cardiopulmonary resuscitation (CPR);
  - (3) the use of an automated external defibrillator (AED);
  - (4) the District's policies and procedures concerning the administration of medication to students:
  - (5) the District's bloodborne pathogens/exposure control plan; and
  - (6) the District's policy and procedures concerning communicable disease management.
- iv) The District Nurse or contracted RN shall provide, or assist in arranging for the provision of, first aid training and such other role-appropriate training for designated emergency care providers as may be required by law and/or under District policies/procedures.
- v) The District Nurse or contracted RN shall maintain records of who has been trained, the specific training provided, and the date of the training. No less often than annually, the nurse shall provide the District Administrator with a report of the training completed by school personnel since the last report and a list of any scheduled training that has not been successfully completed as scheduled.

## D. General Emergency Care Procedures

In case of an accidental injury or illness occurring on school premises or during a school-sponsored activity, these general procedures shall be followed:

# Serious Injury/Accident or Illness

- 1. Designated school personnel (site-based first responders whenever available) shall assess the situation and administer basic first aid as needed to:
  - restore and maintain open airway,
  - restore and maintain breathing,
  - promote adequate circulation,
  - stop severe bleeding, and/or
  - treat for shock.
- 2. As soon as it is determined to be necessary/appropriate, a call should be placed to 911 to summon professional emergency medical assistance (ambulance, rescue squad, etc.).
- 3. If a health care professional (e.g., a registered nurse or physician) or any professional emergency medical assistance personnel are present at the location of an incident, he/she should be immediately summoned to the scene or contacted for consultation if practical.
- 4. Based on the nature of the injury or other medical condition, and consulting with a health care professional or emergency response service when practical, school personnel responding to the emergency should (1) identify the first aid protocol(s) that provide further guidance and direction in the particular situation; (2) determine whether or not it is appropriate to attempt to move the individual; and (3) determine the extent to which school personnel should take responsibility for further implementing emergency assistance.
- No internal or external medication should be administered to the individual unless specifically prescribed or specifically authorized under the conditions outlined in state law and in the District's medication administration procedures (454.4-Rule).
- 6. If the emergency situation involves a student, the student's parent(s) or guardian(s) shall be contacted as soon as reasonably practical under the circumstances. If the parent or guardian cannot be reached, the emergency contact(s) as identified on the student's emergency information form on file with the District shall be called. A responsible adult

- should remain with the student until the parent(s) or guardian(s) assumes responsibility if possible.
- 7. The building principal or designee shall be informed immediately if the accident, injury, or illness occurs during the school day. If the accident, injury, or illness occurs outside of the school day or at an activity off school premises, the building principal or designee shall be informed as soon as possible, but no later than the next school day.

## Minor Accidents/Injuries/Illness

- Designated school personnel (i.e., on-site nurses, health assistants, or other designated site-based first responders, whenever available) will provide the appropriate intervention/response to any minor injury or illness occurring on school premises or during a school-sponsored activity as deemed necessary for the situation. This may include, for example, administering general first aid, cleaning wounds, applying sterile dressings or cold compresses, or seeking further medical attention.
- 2. If a student becomes ill during the school day, school personnel should send him/her\_to the school office to rest or for attention. Office personnel will provide care for the student or make a parent or guardian contact to determine whether the student needs to be sent home. If the parent or guardian is unavailable, the emergency contact person identified on the student's emergency information form will be notified. In making a determination whether to send a student home from school, school personnel shall consider protocols outlined in the District's emergency services and communicable disease management procedures. If it is determined the student is to be sent home, arrangements will be made for the student to leave the school premises. If all contact attempts fail and the student's parent or guardian or emergency contact person are not available, the student is to remain in school, segregated from other students if necessary, and continued attempts will be made to reach the parent or guardian or emergency contact person.

## E. Accident Reporting and Recordkeeping

- The person(s) administering emergency care or assistance under these procedures is responsible for ensuring that the first aid or other emergency care administered in relation to accidents, injuries, or illnesses are properly documented within the designated "First Aid/Emergency Care Log." This log of emergency nursing services performed shall be maintained in each school building in the District.
- 2. In addition to completing the "First Aid/Emergency Care Log," the relevant class/activity supervisor(s) and the school employee(s) who assumed primary responsibility for responding to a specific accident/incident have joint responsibility for ensuring that they promptly (i.e., usually on the same day as the incident) notify the building principal and complete a written Accident/Injury Report for any accident/incident involving an injury, or possible injury, to a student that occurs:
  - a. in school or on school grounds during the school day;
  - b. on school premises, but outside of the school day; or
  - c. at a school-sponsored activity that is held outside of the school day and/or off school premises.

Accident/Injury Report forms are available in the school office.

3. School personnel shall be made aware of and are expected to adhere to relevant confidentiality standards regarding student records and patient health care records as established pursuant to applicable laws, regulations, and District procedures.

## F. Annual Review of Emergency Nursing Services

The District shall conduct an annual review of the District's emergency nursing services program and related policies/procedures, including medication administration policies/procedures, at the end of each school year.

#### School District of Rib Lake

- 1. The review shall be conducted with the involvement of the District Nurse or contracted RN and in consultation with appropriate school personnel.
- Completed Accident/Injury Report forms and First Aid/Emergency Care Logs shall be reviewed during the annual process to help evaluate the emergency protocols utilized, the adequacy of the services provided, and the accuracy and completeness of data recorded.
- 3. On an as needed basis, and maintaining appropriate confidentiality standards, the review team may consult with the District's medical advisor and/or representatives of community health agencies.
- 4. The findings of the review shall include the identification of any recommended changes to the program that would improve quality, efficiency, or safety. The administration shall ensure that any new or substantive revisions to first aid, injury, illness, or medication administration protocols are reviewed and approved by the District Nurse or contracted RN and by the District's medical advisor as deemed appropriate prior to being presented for adoption by the School Board.
- 5. The Board shall normally be informed of the findings of the annual review of the District's emergency nursing services program, related policies/procedures, and any recommended changes at one of the summer Board meetings.

ADOPTED: November 9, 2000

**REVISED:** July 12, 2012; March 15, 2018