

STATEMENT OF PURPOSE:

School employees are responsible for the appropriate handling of first aid and emergency situations as they arise during the school day and during school sponsored activities.

AUTHORIZATION/LEGAL REFERENCE:

12 V.S.A. § 519 -Emergency Care

<http://legislature.vermont.gov/statutes/section/12/023/00519>

16 V.S. A. § 1387- Possession and self-administration of emergency medication

<http://legislature.vermont.gov/statutes/section/16/031/01387>

16 V.S.A. § 1388 - Stock supply and emergency administration of epinephrine auto-injectors

<http://legislature.vermont.gov/statutes/section/16/031/01388>

16 V.S.A. § 1431, Concussions and other head injuries

<http://legislature.vermont.gov/statutes/section/16/031/01431>

18 V.S.A. Chapter 17 – Emergency Medical Services

<http://legislature.vermont.gov/statutes/chapter/18/017>

Vermont Education Quality Standards, 2121.5-Tiered System of Support pg. 10

<http://education.vermont.gov/vermont-schools/education-quality/education-quality-standards>

Vermont Standards Board for Professional Educators - Rules Governing the Licensing of Educators and the Preparation of Educational Professionals, Rule Series 5100:

<http://education.vermont.gov/sites/aoe/files/documents/edu-educator-quality-licensing-rules-082217.pdf> (pg. 134-140)

REQUIRED SCHOOL NURSE/ASSOCIATE SCHOOL NURSE ROLES:

- Maintains current Vermont RN license and certification in CPR with AED
- Provide first aid to students as necessary.
- Document visits to the health room in the individual student's health record and/or visit sheet. (See documentation section)
- Support school administration in the development and review of the school's or LEA's incident report policy and procedures
- Support the process for ensuring that each school has adequate staff to provide first aid and CPR in the absence of a school nurse. Designated persons shall hold current certification in CPR and First Aid.
- Ensure that UAPs follow written procedures for safe care consistent with appropriate nursing delegation guidelines
- Participate in the Center for Disease Control and Prevention *Online Concussion Training for Health Care*

Providers <http://www.cdc.gov/concussion/HeadsUp/clinicians/index.html> and maintain current certificate as recommended.

- Ensure a system is in place that maintains current parent/care giver contact information at all times for the school nurse and first aid designee and to appropriate staff on a need to know basis.

SUGGESTED SCHOOL NURSE/ASSOCIATE SCHOOL NURSE ROLE:

- Maintain appropriate health office first aid supplies and portable first aid supplies.
- Educate staff, as appropriate, in use of Individual Healthcare Plans (IHP) and universal precautions.
- Maintain current phone number and emergency contact information for each student.
- Encourage ongoing communication between parent/guardian, medical home and school nurse regarding recuperative periods, details for re-admission to school and follow-up care.
- Create field trip healthcare plans for students with life threatening conditions, orient and train appropriate staff to these healthcare plans.

RESOURCES:

American Red Cross - <http://www.redcross.org/>

American Heart Association - <http://www.americanheart.org/presenter.jhtml?identifier=1200000>

American School Health Association <http://www.ashaweb.org>

Brain Injury Association of Vermont *resources*

Concussion Took Kit (including Return to Learn and Return to Play protocols and forms):

<http://www.biavt.org/index.php/component/content/article/1025-vermonts-student-athletes-and-concussion-return-to-learn-a-return-to-play-toolkit.html>

Center for Disease Control and Prevention

- *Online Concussion Program for Health Care Providers* (training- recommended)
<http://www.cdc.gov/concussion/HeadsUp/clinicians/index.html>

Defense and Veterans Brain Injury Center

- *A Parent's Guide to Returning Your Child to School, After a Concussion*
<http://dvbic.dcoe.mil/back-school-guide-academic-success-after-traumatic-brain-injury>

Dental Resources–

- Vermont Oral Health Coalition (VOHC) as a resource-
<http://www.vtoralhealthcoalition.com/resources.html>
- Dental First Aid Posters (English/Spanish) -- <http://www.latsa.com/dental-first-aid-poster-english>
- American Dental Association -- <http://www.mouthhealthy.org/en/az-topics/d/dental-emergencies>

- This issue of *Brush Up on Oral Health* identifies supplies to include in a first aid kit for treating oral injuries. It also explains how to give first aid for the five most common oral injuries that happen to young children with primary (baby) teeth. (Oct 2014) <http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/oral-health/PDFs/brushup-news-201410.pdf>
- Dental Emergencies- from the Maryland Department of Health and Mental Hygiene – <https://phpa.health.maryland.gov/oralhealth/Documents/Dental%20first%20aid%20for%20children.pdf>
- Dental Injuries Guide: <http://www.deardocor.com/dental-injuries/dental-injuries-guide1.pdf>

National Association of School Nurses <http://www.nasn.org>

- *Emergency Preparedness and Response in the School Setting - The Role of the School Nurse* <https://schoolnursenet.nasn.org/blogs/nasn-profile/2017/03/13/emergency-preparedness-and-response-in-the-school-setting-the-role-of-the-school-nurse>
- *Members may use the Oral Health Forum:* <https://schoolnursenet.nasn.org/communities/community-home?communitykey=28fd105b-26fc-479d-89cb-4859efc175ac&tab=groupdetails>

Vermont Department of Health

- Emergency Medical Services - http://healthvermont.gov/hc/ems/ems_index.aspx
- First Aid: **2015 pdf of Vermont Statewide Emergency Medical Services Protocols:** http://www.healthvermont.gov/sites/default/files/EPRIP_2015ProtocolsLinkedLOCKED2015Oct1_000.pdf

Vermont State School Nurses Association -- <http://www.vssna.org/>

Vermont School Crisis Prevention Planning Team Resources

<http://schoolsafety.vermont.gov/about-us/contact/school-crisis-planning-team>

SAMPLE PRINTABLE FORMS, TOOLS, AND LINKS:

- SAMPLE - Incident Report Form (see as seen on next page)
- Acute Concussion Evaluation (Ace) physician/clinician office version - https://www.cdc.gov/headsup/pdfs/providers/ace_v2-a.pdf
- Concussion Recognition Tool – <http://bjism.bmj.com/content/early/2017/04/26/bjsports-2017-097508CRT5>
- SCAT5 - <http://bjism.bmj.com/content/early/2017/04/26/bjsports-2017-097506SCAT5>
- Child SCAT5 - <http://bjism.bmj.com/content/bjsports/early/2017/04/26/bjsports-2017-097492childscat5.full.pdf>
- Concussion Signs and Symptoms Checklist, Know Your Concussion ABC's - https://www.cdc.gov/headsup/pdfs/schools/tbi_schools_checklist_508-a.pdf
- Brain Injury Association of Vermont resources
Vermont Concussion Took Kit including Return to Learn protocol and SAMPLE -- School Nurse Communication Tools for Concussion For students currently participating in organized Sports; as well as the SAMPLE Tool for Concussion for students not currently participating in organized sports.
<http://www.biavt.org/index.php/component/content/article/1025-vermonts-student-athletes-and-concussion-return-to-learn-a-return-to-play-toolkit.html>

SAMPLE- Incident Report Form

School District: _____ School: _____

To be filled in at the time of the incident *in collaboration with* the person caring for the injured

Date: _____ Time: _____

Student/Employee name: _____ Grade: ____ Teacher: ____

Address: _____

Location of incident: _____

Activity student/employee was engaged in (be specific): _____

Staff on Duty: _____ Complete description of incident: _____

Assessment of injury (body, degree of injury, functional effect)

Initial Treatment of injury: _____

By Whom: _____ Disposition: _____

Was the injured transported to a medical facility? Yes No By EMS By whom _____ Please name facility: _____

Was school nurse present and/or notified? Yes No By whom _____

Were parents notified? Yes No Time _____ By whom _____

Follow up/outcome of the injury _____

Describe any safety hazards that may have precipitated the incident? _____

Potential hazard reported? Yes No. To whom _____ Date ____ Time ____

Signature of person preparing report: _____

Signature of School Nurse: _____

Principal's Signature _____ Date: _____

Notes: