IS Your School Prepared to Handle Emergency Care?

James F. McKenzie

A self-evaluation instrument for school emergency care programs has been developed so that school districts can evaluate the status of their programs and make necessary changes where possible.

Seldom does a school day go by in most school buildings in the United States without at least one student reporting to either the principal's office or the nurse's office for treatment of a sudden illness or injury. The National Safety Council statistics indicate that 57% of the accidents involving children of school age which require the attention of a doctor or cause absence from school of one-half day or more occur on the school grounds, in the building or going to and from school.1 With the knowledge that there is a good chance of an injury, accident or illness occurring at school, one must ask how well prepared are school personnel to handle these emergency (sometimes life-threatening) situations? The answer is frightening! Evidence 24 indicates that few schools are adequately prepared for emergency care situations.

In order to determine the status of your school's emergency care program, the self-evaluation instrument on the following pages has been prepared after a thorough review of the literature⁵⁻²¹ in the areas of school health services and school emergency care.

Since this self-evaluation instrument has not been standardized, there is no set passing score. One could even say that though there are written policies out lining an emergency care program, they may not be implemented in an effective manner; but if school personnel have taken the time to prepare written emergency care policies, they have at least recognized the importance of an emergency care program and the need for advanced preparation.

How well prepared is your school district?

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A Self-Evaluation Instrument for a School Emergency Care Program

- 1. The school district has clearly defined written emergency care policies.
 - The policies have been approved by a school physician, local health department, local medical society.
 - The written policies are distributed to school employees and students.
 - The written policies are reviewed and updated on a regular basis.
- 2. There is a written policy defining the duties of school employees in the emergency care program.
 - Someone is the designated coordinator of the emergency care program.
 - The school nurse is expected to provide emergency care.
 - The school physician is expected to provide emergency care.
 - There is at least one individual in each school building with current first aid certification.
 - All teachers working in high risk areas (labs, shops, gym, etc.) are to have current first aid training.
 - All school employees at the emergency site are expected to give immediate care and seek additional help if needed.
 - It is designated that an adult employee remain with the ill or injured child until the parent/guardian assumes responsibility.
 - The school district provides periodic in-service training for employees to maintain/improve first aid skills and knowledge.
- 3. There is a written policy regarding the responsibility for financial charges incurred during the emergency care process (ie, transportation fees, hospital charges, etc.).
 - The district makes health-accident insurance available to students.
 - District employees are urged to carry personal liability insurance.
 - The district retains liability insurance for injuries or accidents occurring on school grounds.
- 4. There is a written policy regarding the use of the emergency care room/health clinic.
 - Emergency care supplies and equipment are selected after a study of needs and recommendations of the school health service personnel.
 - The emergency care supplies and equipment are checked regularly and replenished when needed.
 - First aid kits are available in the health clinic, main office, high risk areas and transportation vehicles.
 - First aid kits are available for use by extra-curricular activity groups (included are coins for phone calls).

No	Comment
	No

- 5. There is a written policy outlining standing orders for common emergency problems (ie: abdominal pain; allergic conditions; bites; bleeding; burns, choking and rescue breathing; cuts, abrasions and puncture wounds; diabetic comma/shock; electric shock; fainting and unconsciousness; frostbite; head injuries; heart stoppage; heat stroke and heat exhaustion; injuries to ears, eyes, nose, mouth and teeth; menstrual difficulties; poisoning; seizure or convulsion; shock; splinters, bruises and blisters; and stings).
 - The standing orders are posted in the health clinic, main office, high risk areas and transportation vehicles.
- 6. There is a written policy providing for the notification of personnel needed in an emergency situation.
 - The telephone numbers of the school physician, hospitals, ambulances and others to be called in case of emergency situation are located by all phones.
 - School employees are urged to carry emergency telephone numbers with them.
 - Emergency information (preferred hospital, physician, dentist; parent/guardian phone number(s) and address; who to contact if parent/guardian is not home) for each student is available in a central location.
 - A designated school employee makes every reasonable attempt to notify the parent/guardian of an injured or ill student.
- 7. There is a written policy regarding the responsibility for transportation of an injured/ill student.
 - An ill/injured pupil who needs further care is transported to the appropriate medical facility or home by a parent/guardian or a school employee designated for this purpose.
 - The emergency medical transportation system of the community is available for use by the school district.
- 8. There is a written policy covering the completion and filing of accident reports.
 - Written records are kept on all school jurisdictional accidents, including the emergency care provided.
 - There is an individual who is designated to complete the form.
 - Yearly data on accidents is summarized and used for changing and developing policies.
- 9. There is a written policy describing a follow-up inquiry into the postemergency condition of a student.
 - There is a contact by an authorized school employee with the family of an ill/injured student following the emergency.
 - The follow-up is made within 24 hours after the emergency.
- 10. There is a written policy regarding the re-admission of an injured/ill student to school attendance.
 - The student needs a note from either his parent/guardian or his physician for re-admission to school following a serious illness/injury.

Yes	No	Comment