

## JLCE/EBBC - EMERGENCY CARE AND FIRST AID

(Download policy)

*Category: Priority/Required by Law*

All School personnel have responsibilities in connection with injuries and emergencies occurring in school and at school-sponsored events, which may be classified as follows: (1) administering first aid; (2) summoning medical assistance; (3) notifying administration; (4) notifying parents; and (5) filing accident/injury reports.

School personnel must use reasonable judgment in handling injuries and emergencies. Caution should be exercised not to minimize or maximize any injury or illness. All personnel will understand the proper steps to be taken in the event of an injury or emergency.

The Superintendent will ensure that at least one other person on staff, aside from the school nurse, has current first aid and cardiopulmonary certification (CPR). If the school nurse or licensed practical nurse is not available, the person(s) who have current first aid and CPR certification is authorized to administer first aid and CPR as needed.

The school will obtain at the start of each school year emergency contact information of parents or legal guardian for each student and staff member. See appendix JLCE-R for a sample form.

The school physician, school nurse, or specially trained staff members shall assist in the treatment of injuries or emergency situations. Such individuals have the authority to administer oxygen in case of a medical emergency, if available and if appropriate. This authorization extends to administering oxygen to students without prior notification to parents/guardians.

The school nurse or other designated personnel may administer other medications to students in emergency situations, provided such personnel has all training as is required by law. Such medication may also be administered in emergency situations if a student's medical action plan has been filed and updated with the school district to the extent required by law. The district will maintain all necessary records relative to the emergency administration of medication and will file all such reports as may be required.

Additionally, the school physician, school nurse, or specially trained staff members may also administer epinephrine to any student in case of a medical emergency, if appropriate. This authorization extends to administering epinephrine without prior notification to parents/guardians.

For significant injuries, the staff person witnessing the event must fill out an accident report, which must be submitted to administration so that he/she is informed and a basis is established for the proper processing of insurance claims and remediation if necessary.

The District makes it possible for parents to subscribe to student accident insurance at low rates. This program is offered each year during September. The District does not provide student accident insurance.

### **Naloxone/Narcan and Opioid Antagonists:**

The Board authorizes the District to obtain, store and administer naloxone/Narcan and/or other opioid antagonists for emergency use in schools.

The school nurse or other properly trained staff member may administer such medication in emergency situations. Opioid antagonists will be available during the regularly scheduled school day. They may be available at other times at the discretion of the Superintendent.

The Superintendent is authorized to procure such medication on behalf of the District.

All such medication will be clearly marked and stored in a secure space in the school nurse's office or other appropriate location. Such medication will be locked at all times except when needed for administration. The school nurse is responsible for storing the medication consistent with the manufacturer's instructions.

Local law enforcement and emergency medical service personnel will be notified if such medication is administered by the District.

Records related to the administration of such medication shall be made and maintained by the school nurse. The school nurse will follow other first aid reporting protocols, as may be determined by other Board policy or administrative directive.

**NHSBA Note, September 2016:** Amendments to this Sample Policy are necessary due to the passage of SB 25, which adds a new statute, RSA 200:44-a, relative to pupil use of epinephrine; and SB 322, which amends RSA 200 by adding RS 200:53, :54, :55, :56 and :57, relative to the use of bronchodilators, spacers and nebulizers in school. Paragraph 6 of this Sample Policy is added to the requirements of new legislation. RSA 200:44-a and RSA 200:57 are added to the Legal References.

**NHSBA Note, April 2016:** Amendments to this policy include a new section relative to the obtaining and administration of naloxone/Narcan and other opioid antagonists by the District. These amendments are in response to significant NHSBA member feedback and request for policy guidance on this subject.

Please note this policy is required by law. However, the provisions relative to naloxone/Narcan are not required by law and are provided as guidance only. NHSBA recommends these provisions be reviewed by necessary school district staff and, if necessary, by local legal counsel prior to adoption.

**Legal References:**

*RSA 200:40, Emergency Care*

*RSA 200:40-a, Administration of Oxygen by School Nurse*

*RSA 200:44-a, Anaphylaxis Training Required*

*RSA 200:54, Supply of Bronchodilators, Spacers or Nebulizers*

*RSA 200:55, Administration of Bronchodilator, Space or Nebulizer*

*Ed 306.04(a)(21), Emergency Care For Students And School Personnel*

*Ed 306.12, School Health Services*

*Appendix: JLCE-R*

Revised: September 2016

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