MODEL POLICY - EMERGENCY PLAN FOR SCHOOL NURSES

MARYLAND STATE SCHOOL HEALTH SERVICES GUIDELINE

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Maryland School Health Services Guideline

Foreword

There is a strong relationship between academic achievement and a child’s physical, emotional and mental health. This link is the foundation for providing school health services as an important component of a school program. School health services provide primary prevention aimed at keeping students in schools through appropriate screenings, early identification of children at risk for physical, emotional and mental health concerns, and case management of students with chronic health concerns.

The Annotated Code of Maryland, Education Article, § 7-401 requires the Maryland State Department of Education (MSDE) and the Maryland Department of Health and Mental Hygiene (DHMH) to jointly develop public standards and guidelines for school health programs. The following guideline is developed in accordance with that requirement and is based on the expressed needs of the local school health services programs. These guidelines contain recommendations for minimum standards of care and current best practices for the health service topics addressed. It is intended that these guidelines will be used by the local school systems in developing local school health services policies and procedures as a means to assist local school health services programs in providing consistent and safe care to the students of Maryland. Specific laws and regulations that direct school nursing practice or other health services are identified in the guidelines.

The Maryland State School Health Council serves as an advisory council to both departments and as such, the council’s School Health Services Subcommittee serves as the committee that develops and reviews these guidelines along with the specialists from MSDE and DHMH. School Health Services Program supervisors/coordinators also review and participate in the guideline development process. To those dedicated school health services professionals and administrators, our thanks.
Introduction

Emergency preparedness takes on heightened significance as Maryland communities have responded to and recovered from weather-related emergencies, sniper attacks, and other emergency situations in recent years. As local school systems (LSSs) and schools in Maryland continue to review and revise their emergency plans, the absolute need to involve the larger community does not waiver. The Maryland State Department of Education published the *Emergency Planning Guideline for Local School Systems and Schools* (MSDE 2003) to assist LSSs and schools in their efforts to plan for and respond to emergencies. The guideline is divided into three sections: emergency management, plan development, and testing the plan. Please refer to this document to become familiar with the complete emergency management process.

School nurses are key members of the emergency management team at the LSS and school levels. There are many aspects of emergency preparedness that affect the school health services program. School nurses enhance the school’s emergency preparedness by participating in all phases (i.e., mitigation, planning, response, and recovery) related to the tasks and functions specific to school health services.

Purpose

This guideline provides school nurses with information specifically related to the school health services program that will assist in preparing for emergencies in and around the school. This document identifies and emphasizes the particular knowledge and skills school nurses must have about the health and safety needs of students and staff.

Definition

Emergency preparedness is a continuous process. The emergency planning done by school nurses is one facet of the whole school emergency preparedness process. “Emergency management is an organized process by which communities prepare for hazards that cannot fully be mitigated, respond to emergencies that occur, recover from emergencies to restore the community to its pre-emergency condition, and mitigate risks” (Federal Emergency Management Agency (FEMA), 2002). These guidelines present ways in which school nurses may plan for these four components of emergency management.

Role of the School Nurse

The unique perspective of school nurses influences every phase of emergency management, from the mitigation of potential risks to the planning, response, and recovery of actual events (New York State Department of Education, 2002 and Doyle, J. & Loyacono, T., 2002). School nurses participate in the schoolwide practice and testing of emergency plans. They also assist with developing, evaluating, and revising emergency plans.
FEMA conducts training for schools and school districts titled *Multi-Hazard Emergency Planning for Schools*. The four phases of the emergency management process are mitigation, planning, response, and recovery. The school nurse has a specific role in each of these phases. The nurse assists with mitigating risks in the health room, as well as in other areas of the building. School nurses assist in preparing and planning for hazards that cannot be fully mitigated, responding to emergencies that do occur, and recovering from those emergencies.

**Mitigation**

Mitigation is “an action or plan to reduce the loss of life, damage to property from all hazards, or trauma to people; it is a type of prevention” (MSDE 2003). Mitigation involves assessing the school environment for hazards and limiting or minimizing the risks of those hazards (FEMA 2002). School nurses join the rest of the emergency management team in mitigation activities. The school nurse is familiar with potential hazards in the health room, which is crucial knowledge for hazard analysis and mitigation. The school nurse can also assist with hazard analyses in classrooms, on playgrounds, on sports fields, and other areas. During the mitigation phase of the emergency preparedness process, the school nurse should:

- Obtain and store first aid kits in classrooms and other strategic locations in the school including the health room. The school nurse should document the locations of the first aid kits in the emergency response plan and in the health room substitute folder (e.g., a large first aid kit is stored in the gym and cafeteria).

- Ensure emergency supplies are on hand for at least 24 hours in the event of a disaster that delays the response of emergency responders to the school. School nurses collaborate with other members of the school emergency preparedness team to determine water, food, and sanitation supplies that should be stored at the school (Doyle & Loyacono, 2002). It is essential that supplies for individual classrooms and the entire school are on hand before an emergency situation occurs.

- Identify staff who have first aid and cardio-pulmonary resuscitation (CPR) training (in accordance with the Code of Maryland Regulations (COMAR) 13A.05.05.09) to determine their availability to assist in an emergency. This information is especially necessary if the school nurse is not assigned fulltime to the school. If the school does not have staff other than the school nurse trained in first aid and CPR, mitigating risks would involve the school nurse collaborating with the school administrator and staff to identify potential trainees for first aid and CPR certification.

- Determine what medications must accompany students in the event of an emergency evacuation of the school building. A current list of students who require life-sustaining medications or medications/treatments that are crucial for management of chronic health conditions must be maintained. A safe and secure means of transporting required medications is maintained by the school nurse. Accompanying the first aid bag and crucial medications are the emergency care plans and medication/treatment orders of students who may need medication in the event of an emergency evacuation.
Planning

Emergency planning is “a proactive process to create a detailed scheme or program, including training and exercising, that enables schools to reduce the frequency and magnitude of an emergency” (MSDE 2003). The school nurse contributes to the planning component of emergency management in several ways. Planning for emergencies requires the school nurse to:

- Document the special health needs of students. This knowledge will assist the school nurse in planning for emergencies related to these students (National Association of School Nurses, 2001). School nurses have traditionally provided emergency plans, including evacuation plans for students with special health needs. It is imperative to know the location of all students with various physical disabilities and other health needs throughout the school day. This information along with specific emergency and evacuation plans is disseminated to appropriate school staff.

- Develop an evacuation plan & emergency procedure for students with disabilities.

- Provide training to school staff on the evacuation and emergency procedures for special needs students. Assistance from community first responders may be helpful as the school nurse determines the safest methods of evacuating students who may have physical challenges. They must also determine what students require life sustaining care or medications/treatments for a 24-hour period. If a school is in lockdown or shelter-in-place mode, depending on the community circumstances, there will need to be contingency plans in the event the emergency assistance to the school is delayed.

- Maintain information on student and staff experiencing temporary health conditions that may require special care in the event of an emergency, e.g., temporary use of crutches or a wheelchair.

- Collaborate with the entire emergency planning team as one of the trainers of the plan. Conducting training sessions for school staff, parents/guardians, school volunteers, and students in the health related aspects of the emergency plan is an essential role for school nurses. These training sessions provide an opportunity to give the rationale for the emergency planning health focus. It can also give the school nurse an indication of other health concerns that may require attention during an emergency. Training sessions can also demystify the process involved in responding in an emergency, thereby contributing to smoother operations in an actual emergency. There may also be increased confidence in the measures taken to prepare for health aspects of school emergencies.

- Collaborate with the entire emergency planning team to test the plan. Testing the plan presents the school nurse with an opportunity to put into practice the plan for health related aspects of the schoolwide emergency plan. As the school nurse practices the various drills and other exercises (e.g., tabletop exercises) that test the emergency plan, there is the opportunity to determine ways in which to adjust the processes in place. As drills and practice exercises related to the plan occur, essential medications and first aid
supplies must exit with the school nurse. Along with those items are signed medication authorization forms and emergency plans, list of students with chronic health problems, and student phone numbers. Additionally, food items that are essential to some students (e.g., students with diabetes will need quick acting sugar sources, glucose tabs, or glucose gel) will need to be placed in evacuation bags and taken out of the building even in drills. The school nurse must also make provision to have the supplies he or she needs to carry out necessary treatments, procedures, and other tasks. Prepack the essential items so that there are fewer last minute items to gather in the event of an evacuation.

- Assist the schools in identifying what procedures to follow in the event that there is no school nurse on site when an emergency occurs. If the school has ancillary school health services staff or no health services staff in the absence of the school nurse, the procedures written in the plan for that staff cannot require the expertise of a licensed nurse.

- Remain informed of specific preparations required for bioterrorism. School nurses are aware of specific geographical situations in the school community and that knowledge informs the emergency planning process. For example, if the school is located near a military base, base procedures in the event of a suspected bioterrorism incident may affect the ability of students who live on the base to get home. Contingency plans must be made, especially for students with health conditions that require special care. The school nurse coordinates with the student, family, and school in order to develop a plan that will meet the needs of the student in that situation. If the school is near a nuclear facility, the school nurse must be aware of the protocols for the administration of potassium iodide. School nurses continually add to their knowledge of signs and symptoms of bioterrorism. If students and staff report to health rooms with similar unexplained symptoms, more investigation is warranted to determine what is occurring.

In Maryland, school nurses are primarily employees of school systems or health departments. As part of the planning process they need to know their agency responsibilities in the event of emergencies in the school and larger community. All Maryland public schools are required to plan for emergencies using a team approach. The school nurse is a critical member of that team.

**Response**

Response is “the act of determining who will make critical decisions, how to get necessary resources, how to handle a crime scene, and tasks to be completed immediately and by whom” (MSDE 2003). During the time of a disaster or emergency incident, the school nurse activates the part of the emergency plan assigned to him or her. School nurses function within the organizational structure chosen by the local school system. The MSDE *Emergency Planning for Local School Systems and Schools* (MSDE, 2003) presents the Incident Command System as a viable method for managing emergencies. During the response phase of the emergency preparedness process, the school nurse should:
Direct the triage of health emergencies until the local emergency management services arrives. Maloney, Fitzgerald, Elam, & Doyle (2000) provide specific information on triage methods in emergency management. School nurses also provide emergency treatment for school staff and students until community emergency medical services arrive. First aid care is rendered by the nurse and other identified staff who are certified in first aid. Safety of those involved in rescue efforts during this response phase is of utmost importance. School nurses provide reminders to all team members to practice universal precautions.

Document events and care rendered throughout the emergency incident. While the school nurse is familiar with documentation as a job responsibility, care must be given during emergency incidents to maintain communication through accurate documentation. The schoolwide emergency plan may utilize forms that are very different from those used in routine school health services. School nurses will use the forms specified in the emergency plan.

**Recovery**

Recovery is the process of returning the school to its normal operations as quickly and completely as possible (MSDE 2003). The entire school and greater community is involved with the recovery process after an emergency incident at school. Recovery includes people and the physical plant and surroundings. The school nurse during the recovery phase should:

- Assess potential health and safety hazards arising from the emergency that may affect school staff and students. Once the school is reopened after the incident, school nurses observe any lingering physical and psychological responses by students and staff to the emergency event. They can make referrals to the crisis response teams who will assist staff and students with psychological health concerns. School nurses support students by developing or updating health information as necessary. They are alert to potential alterations in functioning that may require accommodations for students to participate in their educational process. In collaboration with families, students, and appropriate school staff, school nurses develop individualized health plans for the students.

- Join the school emergency preparedness team to evaluate the emergency response. The school nurse will also evaluate the response from the health services perspective. Evaluation of all aspects of the plan, including supplies, triage, first aid, documentation, and general effectiveness is the role of the school nurse. The first aid portion of the emergency plan is then revised, ideally with input from community emergency medical services responders.
Summary

The school nurse is an integral part of the school system and individual school emergency planning team. The perspective from the school health professional adds to the completeness of the overall school emergency plan. School nurses must also make specific plans for mitigation, planning, response, and recovery in the areas that pertain to health considerations. Emergency planning in schools is a continual process. Funding for supplies is a topic to explore with central office and school health services administrative staff.

The skill of school nurses in application of the nursing process aids emergency planning. As they assess, develop nursing diagnoses, identify outcomes, plan, implement, and evaluate throughout the emergency planning process, school nurses contribute to preparedness in the school community. Collaboration and coordination with other members of the emergency planning team enhances the effectiveness of the emergency planning process.
Drills: Testing aspects of a response; practicing and perfecting a single emergency response.

Emergency Management: A proactive process to create a detailed scheme or program, including training and exercising, that enables schools to reduce the frequency and magnitude of an emergency.

Emergency Planning: A proactive process to create a detailed scheme or program, including training and exercising, that enables schools to reduce the frequency and magnitude of an emergency.

Emergency Preparedness: Process by which schools and community officials develop a plan that tells how they will respond to an emergency and what steps they will take to recover from the emergency.

Hazard: Natural, manmade, or technological disasters.

Hazard Analysis: The process of looking for hazards or potential hazards around the community, neighborhood, and school.

Mitigation: An action or plan to reduce the loss of life, damage to property from all hazards, or trauma to people; a type of prevention.

Recovery: The long-range actions to return the school to its normal operations; restore normal operations as quickly and completely as possible.

Response: The act of determining who will make critical decisions, how to get necessary resources, how to handle a crime scene, tasks to be completed immediately and by whom.

Tabletop Exercises: Exercises that enable staff members to walk through an emergency scenario and make decisions similar to those made in an actual emergency; lend themselves to low stress discussion of plans, policies, and procedures; provide an opportunity to resolve questions of coordination and responsibility.
REFERENCES


New York State Department of Education (2002). School Health Professionals: Their role in emergency preparedness: Author.

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