



Al Basma British School

FIRST AID POLICY

Purpose

This Policy and procedure establish guidelines regarding the most common symptoms seen in the School Health Clinic.

Policy Statement

The school nurses must have thorough knowledge in providing emergency care to the students in the school to meet their educational objectives.

Students seen at the school clinic must be stabilized before a transfer/referral is made.

School nurses need to develop the skill of providing first aid.

School nurse develops attitude of confidence to meet any emergency in the school.

The school nurse must periodically update the knowledge and educate other school staff to meet the emergency

Scope / Target Audience

This policy applies to all DOH registered nurses working in school clinics.

The school management and registered school nurses.

Responsibility

The school nurse has to comply within the policy and maintain a first aid checklist and DOH will audit and monitor for compliance.

Definitions

First Aid Management: can be defined as the emergency treatment of illness or injury to maintain Life, to ease pain and to prevent deterioration of the patient's condition until professional medical help can be obtained.

First Aid Procedure

- All First Aid is administered by the qualified DOH approved nurse or Health Care Assistant in the licensed clinic.
- In the case of any serious injury the nurse should be called to the site of the injury to administer emergency first aid.



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- Should the casualty be walking wounded they can head straight for the clinic where they will be seen.
- In the case of all serious injuries or medical emergencies the VP or Principal should be called to attend.
- They should decide with the nurse if an ambulance should be called.
- Records of all vital signs and medication administered should be maintained and handed to the paramedic, doctor or parent/next of kin on arrival.
- Reception should be informed to direct the paramedics.
- Parents should be called and informed that the ambulance has been called.
- A Nurse, family member or senior staff should travel with the injured party in the ambulance and stay with them until the parents or next of kin arrives.
- All incidents are recorded in the clinic log.
- First Aid kits eye baths and chemical showers are available in science rooms and should only be used by qualified first aiders or the nurse.
- If treatment is not urgent the injured party should stay under observation in the clinic until a parent or next of kin arrives to take them home or to the doctor.



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MEDICATION ADMINISTRATION POLICY

Purpose

To standardize the process of administration of both prescribed and non-prescribed medications to students at school.

To ensure safe and quality medication administration at schools.

To set out the specification for record keeping related to medications in accordance with laws and regulations of Abu Dhabi with DOH policies and standards.

To provide information about the available medications in the school clinic.

Policy Statement

This policy enables the nurses to administer medication safely in school.

Adequate consent will be taken prior to the medication administration.

The policy ensures the health care professionals to be aware of emergency medication and other medications.

Scope / Target Audience

This policy is applicable at the School Clinic for school health professionals for the administration of emergency medication and other medication safely to the students in accordance with laws and regulation of the Department of Health.

The school health care professionals

Responsibilities

The school health care professional (DOH Licensed) must adhere to the standards of DOH in administering emergency medications and other medication.

The health care professionals shall maintain confidentiality and consent from guardians prior to medication administration.

The health care professional must apply seven rights of drug administration which includes right patient, right drug, right dose, right route, right time, right reason, and right documentation.

The administration of medication at school clinics is a collaborative responsibility between the parents, School administration and the school nurse.

Parent Responsibility



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Medicine should be given at home unless the medicine should be given frequently in very close hours during the school hours.

Parents requested to provide the medicine with a prescription signed by the treating physician.

Parents need to deliver the prescribed medicine and ensure enough medicine and that medication is valid.

Parents should deliver medicine in its original container with a clear label of the child's name, dose of medicine, expiry date, medicine name and the doctor's order.

The medicine is not allowed to be handled by students or kept in their bags.

The medicine is given to and taken from the bus conductor only, if the student is not in the bus, medicine is given to and taken from the school nurse only.

School nurse (RN) responsibility:

Nurse is responsible for her own actions regardless of the licensed prescriber's written order; it is the nurse's responsibility to clarify any medication order which is deemed inappropriate or ambiguous.

The nurse is responsible for understanding the ways in which medications exert their therapeutic and adverse effects and be aware of the possibility of medication incompatibilities and interactions. Where there is doubt, clarification must be sought from the physician or pharmacist.

School nurses obtain parent consent to administer prescribed medication during school hours.

Whether the patient/student may have allergies to the medication.

Medications are limited to those required during school hours which are necessary to maintain the student's safety. In such instances, the nurse must notify the parent, or guardian, student's physician, and administrator.

Students have the right to refuse medication, and in some instances may do so. In such instances, it is the nurse's responsibility to explain to the student as fully and clearly as possible the importance of taking the medication. If the student continues to refuse to comply, the parent or guardian, student's physician, and administrator must be notified.

Document the administered medicine on the student health file.

The RN school nurse is responsible for administering the medication if the doctor order is available or a standing order for OTC medication.

The school nurse reports any medical errors occurred during the school hours.

Non-emergency prescribed medication is given by the school nurse; the prescription is requested.



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Procedures

General Requirements

Medications are limited to those required during school hours which are necessary to maintain the student wellbeing in school and those needed in the event of an emergency.

The school nurse keeps all medication in a secure, clean, and locked cabinet/ medication fridge always. Keys to the medication cabinet are never to leave the school building.

Expiry of each medication should be checked before administering.

A student or parent has the right to refuse medication, and in some instances may do so. In such instances, it is the nurse's responsibility to explain to the student as fully and clearly as possible the importance of taking the medication. If the student continues to refuse to comply, the parent or guardian, student's physician, and administrator must be notified.

Unused medication/supplies are picked up by the last day of school.

Administration of Prescribed medication:

Only medication prescribed by a DOH licensed physician may be administered to children at school or school associated settings.

Prior to the administration of medication, DOH licensed school nurses or physicians employed by the school clinic must ensure that parents complete the parental consent form.

The parental consent form must be completed whether the child can self-administer the prescribed medication or a DOH licensed healthcare professional is required to administer it. Forms must be kept on record and updated according to changed information.

Medications must be in the original container and have clear and comprehensive instructions for administration and dosage.

School nurses must not accept medication that is provided in a different container or if changes have been made to the prescription instructions by a non-authorized physician.

For the safety of children, parents are required to provide the school clinic with a copy of the prescription and the prescribing physicians report

Procedure for expiry date management

The expiration dates are assigned by the manufacturers for all medicines. If the expiration date is in month year, that means it will expire on the last day of the given month.



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Any medicine with unknown expiry date shall be treated as expired medicine (material) and disposed of safely as per standards.

All medications are checked for expiry dates monthly. A log sheet is maintained and posted with Names of medications, the expiry dates of these products along with signature monthly:

Upon receiving any new medicines, the staff involved shall check the expiry date on the package of the product.

If any signs of deterioration or physical changes are seen on the product, it is discarded immediately.

All expired medicines shall be collected, labelled clearly as expired items, and kept in a separate place for proper disposal.

Administration procedure

Oral administration is the safest, most convenient, and least expensive method of administering in a conscious client. Special precautions to be taken while administering in children and older adults.

For Buccal administration, place the tablet in the buccal pouch between cheek and gum:

For sublingual administration place the tablet under the patient's tongue until it dissolves and advice not to smoke.

Topical medication is applied directly to the skin and usually provides a local effect. Avoid putting a patch on skin folds, scars, calluses or damaged skin and it should be replaced if it becomes wet, leaks, and falls off.

In teaching the patient to self-administer the inhalant administration carefully follow the direction.

Ophthalmic preparations are often refrigerated for storage but are given at room temperature.

Medication given in the ear should be warmed to body temperature to prevent activation of vestibular system possibly causing dizziness.

Procedure for medication storage

At the School Clinic, the school nurse is responsible for checking the validity of medicines.

At the School Clinic all medicines are stored as specified by the manufacturer and according with Storage Practice (WHO, World Health Organization) to maintain stability of the product which may be affected by environmental conditions.

Room temperature is maintained and checked daily a daily checklist for the room temperature.

Air conditioning working all day - never shut off.



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Medicines stored in the refrigerator are monitored for temperature by a medical fridge thermometer and checked daily by the school nurse using the log.

The medical fridge is provided with an alarm to maintain the required temperature all the time.

No food or drink is stored along with medicines in the medical fridge.

Epi-pens (Epinephrine) Administration of Epinephrine in acute allergic reactions (Anaphylactic shock):

What is anaphylaxis?

Anaphylaxis is a severe and sudden allergic reaction. It can occur when a susceptible person is exposed to an allergen (such as food or insect sting). Reactions usually begin within seconds to minutes of exposure and can progress rapidly over a period of up to two hours or more. Anaphylaxis is potentially life-threatening and always requires an emergency response.

The Epi-Pen must be stored at room temperature and protected from heat and light. It should be kept in the original labelled box. Expiry dates and discoloration of contents must be checked by the school nurse monthly.

The Epi-Pen should be replaced by the school at the request of the school nurse in private schools, and by Ambulatory Healthcare Services-School Health Services in public schools.

The used Epi-Pen should be given to the ambulance crew so that they will know what medication the student has received.

The student is allowed to keep and self-administer Epi-Pen provided the parental consent form is completed and signed by the physician and parent/guardian.

In the absence of an Epi-pen, a DOH licensed nurse or physician can administer Epinephrine in accordance with the product manufacturer's instructions.

The Epinephrine must be readily accessible for use in an emergency.

The use of the Epinephrine must be recorded on the student's medication administration record, with time, date and full signature of the person who administered the Epinephrine.

Once the Epinephrine is administered, an ambulance/ emergency room must be called for follow up and transfer.

Administration of metered-dose inhaler (Salbutamol):

Children with asthma need to have immediate access to their rescue inhalers when they need them. Children who can use their inhalers themselves should be allowed to carry them with them. If the child is too young or too immature to take personal responsibility for the inhaler, staff should make sure that it is stored in a safe, but accessible place, and clearly marked with the child's name.



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For children with asthma, the child's pediatrician/ treating physician must prescribe a spare inhaler to be kept at the school. When a child has an asthma attack, they should be treated according to their individual healthcare plan, treating physician's instructions or asthma card.

An ambulance should be called if any warning signs are identified.

In an emergency, administration of metered-dose inhaler must be conducted in accordance with duties specified under Section 5 of this Standard and must follow the instructions and dose specified on the product's information sheet and evidence-based guidelines.

An appropriate inhaler can be provided if the child forgets his own inhaler or runs out of his own inhaler. A spacer device should be available along with the inhaler. Expiry dates of the inhaler should be checked by the school nurses monthly. The spacer device needs to be cleaned at least once a month.

Administration of Paracetamol

Paracetamol is a pain reliever and a fever reducer.

Paracetamol is used to treat many conditions such as headache, muscle aches, backache, toothaches, colds, and fevers.

Take a comprehensive history to understand how much Paracetamol has been taken and the times taken in the last 24 hours to prevent overdose and to manage future administration accordingly.

Use a pediatric form of Paracetamol with the special dose-measuring dropper or oral syringe that comes with the specific pediatric form.

Follow the directions on the medicine label.

Do not exceed recommended dosage. An overdose can damage the liver or cause death.

Administration of antihistamine cream

Antihistamines block histamine, a symptom-causing chemical released by the immune system during an allergic reaction. It can reduce swelling and soothe insect bites and stings. Do not use this cream for more than three days at a time.

If the symptoms do not improve, stop using the cream and refer the child to a healthcare Centre or physician.

Check the label on the medicine for exact dosing instructions.

MEDICATION

Return or disposal of Prescribed Medication

Medication should be returned to the student's parents/guardians when:



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The course of treatment is complete.

Medication labels become detached or unreadable.

Prescription instructions are changed.

The expiry date has been reached.

End of school term/year. Returning medications to parents:

Send parents a request to come and pick up the medication.

Medications returned to parents must be documented on the student medical record, including name of medication and return date.

Obtain the signature from parents/guardian receiving the medication as well as the school staff member returning the medication.

Disposal of medication:

Medications that cannot be returned to parents/ guardians must be disposed of by the end of the school year.

The following is the procedure for disposal of medication:

The School Clinic and healthcare professionals employed by it must dispose of medication in accordance with the DOH Policy on Medical Waste Management.

The date the medication is disposed of including the name of medication should be documented in student medical records.

The signature of the person disposing of the medication and the method of disposal should be documented in the student medical record.

Medication storage

School Nurses must only store, supervise and administer medications that are registered with the Department of Health (DOH).

All medications must be stored in the designated medication storage area (cupboard in the nurse's office or medication fridge).

Storage areas must be kept always locked. Keys remain the responsibility of the nurse with special access arrangements when she is not available.

Emergency medication should be quickly available when needed.



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Medications must be stored strictly in accordance with product instructions (paying note to temperature) and in the original container in which it was dispensed.

Large volumes of medications must not be stored.

Access to medication

The medications are only accessible by the nurse.

All emergency medications must be readily available for children and should not be locked away but kept in a safe, secure, accessible place.

The school administration and nurse must make special access arrangements for emergency medications

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