

POLICY TITLE: Emergency Treatment and Advance Directives

DEFINITIONS

“Emergency medical services personnel” means the personnel of a service engaged in providing initial emergency medical assistance and who have been properly certified by the Emergency Medical Services Bureau of the Idaho Department of Health and Welfare, including, but not limited to, first responders, emergency medical technicians (EMTs), advanced emergency medical technicians and paramedics.

“Advance Directive” [including: Living Will, Durable Power of Attorney for Health Care, or Do Not Resuscitate Order (DNR Order), or simply ‘Order’] means a documented directive from a licensed physician that emergency life-sustaining procedures should not be administered to a particular person.

“Minor (non-emergency) Injury” refers to cuts, scraps, bruises, irritations and/or pain that can be treated with the contents of the school’s first aid kits; including: band-aids, antiseptics, over-the-counter pain relievers [generally limited to aspirin, Tylenol, and ibuprofen], etc.

“Terminal condition” means an incurable or irreversible condition that will, in the opinion of a physician, without the administration of life-sustaining procedures, result in death within a relatively short time.

STUDENT FIRST AID and EMERGENCY TREATMENT

The Board recognizes that schools are responsible for providing first aid or emergency treatment in case of sudden illness or injury to a student, but that further medical attention is the responsibility of the parent/guardian.

The parent/guardian will provide an emergency telephone number where they can be reached. The Agency recommends that parents/guardians regularly check and update the emergency contact information they’ve provided to the Agency. They must also provide a completed Form 3500F indicating student health services to which they consent. If a student does not have a completed Form 3500F, the Agency shall presume there is no consent to provide any healthcare services.

The Agency may provide emergency treatment to the child if:

1. The parent/guardian already consented to such treatment via Form 3500F or some other means; or
2. District staff reasonably determines that a medical emergency exists and:

- a. Furnishing the health care service is necessary to prevent death or imminent, irreparable physical injury; or
- b. District staff can't contact the parent/guardian despite a reasonably diligent effort and the student's life or health would be seriously endangered by further delay in the furnishing of health care services.

When a student is injured or ill, the principal or designated staff member should immediately contact the parent/guardian so that the parent/guardian can arrange for care or treatment of the injured student and consent to providing treatment to the child if they have not already done so.

If a child develops symptoms of illness while at school, the responsible school officials shall do the following:

1. Isolate the child immediately from other children in a room or area segregated for that purpose;
2. Inform the parent/guardian as soon as possible about the illness and request that they pick up the child; and
3. Report each case of suspected communicable disease the same day by telephone to the local health authority, or as soon as possible thereafter if no contact can be made the same day.

In the event of any medical emergency posing a serious threat to life or health, Agency staff shall call the local emergency medical service provider.

In the event that the parent cannot be reached and in the judgment of the principal or person in charge immediate medical attention is required, the injured student may be taken directly to the hospital and treated by the physician on call. When the parent is located, he or she may elect to continue the treatment or make other arrangements.

When a student suffers a minor (non-emergency) injury, first aid will be rendered at the school to the best extent possible and with the school's available resources. The student's parent/guardian will be notified of the non-emergency injury. A student accident form will be completed. Whether the student remains in school or leaves with parent/guardian permission depends on several factors, including the wishes of the parent/guardian, level of pain of the student, whether follow-up care is recommended, etc.

If an injury is beyond minor first aid it automatically requires the attention of emergency medical services personnel. If there is any doubt that emergency medical care is necessary COSSA is going to err on the side of obtaining emergency medical care. The school will call 911 first and thereafter make an attempt to contact the parent/guardian of the injured student. The parent/guardian will be informed of the injury and the fact that emergency medical services personnel have been contacted to provide emergency care. A student accident form will be completed.

If the school has been previously provided an Advance Directive providing direction relating to the injured student, any school personnel present on the school's property at the time of the incident will make a reasonable effort to provide such documentation to the emergency medical services personnel. The school shall bear no liability associated with any medical treatment provided, the failure to provide medical treatment or the inability in the emergency situation to provide a copy of the Advanced Directive to any responding medical services personnel.

Upon arrival of emergency medical services personnel, the decisions regarding the care and treatment of the injured student will be left to the professional medical judgment of the responding emergency medical services personnel. Therefore, it is up to the emergency medical services personnel as to whether or not the student needs to be transported for additional medical care. The school will not be the entity making this decision but will rather leave it to the medical professionals. The emergency medical services personnel may or may not consult with the parents of the injured student. This consultation is left to the discretion of the emergency medical services personnel and is not the school's decision.

Any refusal of treatment for the medical care of the injured student is left to the personal discretion of the parent or legal guardian of the injured student. The school shall bear no liability associated with any parental or adult student's decision relating to their medical care or treatment or a decision to forgo medical treatment.

ADVANCE DIRECTIVES [LIVING WILL, DURABLE POWER OF ATTORNEY, OR DO NOT RESUSITATE ORDERS]

The Agency has a statutory duty to protect the health of all students enrolled in the agency. Based upon this statutory duty, this agency will not honor an Advance Directive presented by or on behalf of a student who has a terminal condition. Emergency medical services personnel will be contacted and the application of such directive will be left to the medical professions.

In the event an Advance Directive for a student enrolled in this agency is presented to agency personnel by the student or his or her parent/guardian, a copy of the order will be placed in the student's educational record. The individual presenting the order will be informed of this policy.

In the event emergency medical services personnel are called by this agency to assist a student who has an Advance Directive on file, agency personnel knowledgeable of an Advance Directive will make a reasonable effort to inform the medical services personnel of the order.

LEGAL REFERENCE:

IC § 32-1015

Parental Rights in Medical Decision-Making

**Idaho Code Sections: 33-512(4), 39-150 through 39-164.
Version 0708, General Idaho EMS Guideline**

CROSS References

3500 Student Health/Physical Screenings/Examinations

POLICY HISTORY:

**Original date unknown;
Revised and adopted 9/17/2012
Revised 4/21/2014**

Originally issued as Policy 406. Revised and Reissued as Policy 3540: September 16, 2019

**Reauthorized: February 17, 2021
Revised and Reissued: November 18, 2024**