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Britannica School Nurse Policy and Procedures

Definition of a School Nurse

A School Nurse combines professional clinical nursing practice with the promotion of health, well-being, academic achievement, and success of the students.

School Nursing Practices

The school nurse is often the only health care provider in the school setting; therefore, school nurses may be called upon to work closely with teachers, classroom assistants, office personnel, and other staff in order to carry out a wide range of school health activities.

Knowledge of the applicable practice laws and regulations is essential for the school nurse to practice within the scope of local Hungarian law.

What services does the school nurse provide?

- 1. Promotes and protects the optimal health status of children.
- 2. Develops guidelines for the management of illness and injury interventions.
- 3. Provides training to designated staff on recognition of signs and symptoms of illness and disease.
- 4. Performs health assessments and participates in IHP (Individual Health Plan) development.
- 5. Provides health assessments, which includes screening for various health factors
- 6. Provides health education. Maintains, evaluates, and interprets cumulative health data to accommodate individual needs of students.
- 7. Provides chronic disease management and education.
- 8. Plans and implements Individual Healthcare Plans (IHP) and services for children with disabilities and/or health conditions that interfere with learning, including medication administration and monitoring.
- 9. Participates as the health consultant on school teams.
- 10. Promotes and assists in the control of communicable diseases through immunization programs, early intervention, surveillance, reporting, and follow-up of contagious diseases.
- 11. Recommends provisions for a healthy school environment conducive to learning.
- 12. Provides health education, health resources, wellness programs, and curriculum recommendations to the school staff.
- 13. Provides first aid and assessment of injuries or illnesses on the school site.
- 14. Assists in the formation of health policies, goals, and objectives for the school.
- 15. Coordinates school/community health activities and serves as liaison between school, home, community, and health care providers.

Personnel

One English-speaking school nurse is located in the medical centre from 8.30am until 3.30pm every day, with the doctor on duty 1 morning per week.

Visits to the nurse in Primary

Children may visit the nurse only after requesting permission from the duty teacher or class teacher. Children should be accompanied to the medical centre. This may be by a teacher or a specially trained 'First responder' duty child. For minor injuries (bruise, tummy ache, small cuts, minor bumps with no other symptoms and grazes), they may be accompanied by a child, but would need to eb escorted by an adult for more serious complaints (a bump to the head including dizziness and nausea, suspected broken bone, having vomited).

The nurse will be called to the scene on (Extension 217 or mobile number 706220015) when:

- The child has lost consciousness
- Seizures
- Broken bone where child cannot be moved
- Serious cuts and bleeding
- The teacher/adult believes it would be detrimental to move the child

Calling home

The nurse will call parents on the school number

when:

- The child has a fever of over 37.5 degrees
- The child has vomited
- For any head injuries or bumps
- For serious bleeding (see emergency procedures)
- For injuries resulting in swelling or restricted movement
- For suspected broken bones
- When the child is in distress from feeling unwell
- Before giving any medications not sent in by parents.
- If the child has a medical condition discovered in a medical screening (verruca, head lice, hand foot and mouth etc).

This number will be communicated to parents at the start of each academic year. Parents should save the number on their mobile phone

Initially, the nurse will speak directly with parents. Unless specifically requested by the parents or at the discretion of the nurse, there will be no need for communication between the parents and the child at this point.

The nurse will not call home but will provide a note for:

- Any visit to the nurse throughout the day
- Bruises
- Minor bumps and grazes.

• Minor cuts treated with a plaster

When it is decided that the child will be going home, the nurse will:

- Inform the office by phonecall so that ISAMs will be updated.
- The office will notify the bus company, if relevant.
- Inform the class teacher/tutor by email (copying in Head of Primary/Secondary and Key Stage Coordinator)
- Provide a nurse's slip providing written notification to parents of the complaints and treatments, plus advice for further action (if required).
- Keep the child under observation either in the medical centre or on the bench outside until parents arrive. The child will not be sent back to class.

Calling an ambulance

If the Nurse and staff dealing with the incident think that it is in the best interests of the student to take them immediately to hospital; the student will be taken to hospital nominated on the medical form.

Parents will be notified by telephone as soon as possible if the child is going to be taken to hospital. In an emergency, if the parents cannot be contacted and it is thought appropriate, the child will be taken immediately to the nearest suitable hospital. Nurse or office staff will continue to attempt to contact parents.

Where an accident or serious illness occurs on a school trip, the child will be taken to the _best available hospital in the area and parents will be contacted as soon as possible.

In all cases requiring the use of an ambulance, the child will be accompanied by a member of staff, usually the school nurse.

It is at the nurse's discretion if the child requires urgent medical attention. Due to the nature of such cases, it may not be possible for parent authorisation to be obtained in advance. Parents will be informed, as soon as possible, as to which hospital the child is being taken to and parents may be asked to meet the child at the hospital.

Allergies/Ongoing medical problems

Parents are asked to notify the school in writing about any new allergies (food or medication) that their child has, or any change in contact number or medical conditions. Each year we will ask parents to update the information we have by asking for a new form to be completed. This information will be stored on ISAMs.

The school catering company requires food allergies to have a medical certificate. These will be stored securely in the medical centre.

Sports fixtures and major events

Home sports fixtures should have a nurse in attendance. The nurse is expected to work overtime to cover such fixtures and events.

When the nurse is not present:

For the minor accidents and illness, the school has some items (medicine and medical equipment) and instructions to help non-medical staff with the appropriate first aid treatment. Only Members of staff who are first aid trained are allowed to deal with the injury. Staff will only send students to Reception if they cannot find a suitably trained member of staff to deal with the injury

Staff will fill out an incident report form if you are on duty during the time of the incident and file it in the student's file (Finance/Admissions office). For further details, please see the medical procedures infogram appendix 1).

Parents

To limit the chances of making other children ill, parents are asked not to bring send their child to school if the child has any of the following:

- Fever (37.5°C+)
- Diarrhoea
- Vomiting
- Contagious disease (chickenpox, HFMD hand, foot and mouth disease, mumps, diphtheria)
- Head lice

Epidemic control

Parents are asked to inform the school if their child has any infectious or contagious illness. _ The school may inform other parents of a possible outbreak via email, whilst maintaining the confidentiality of the child affected.

A child displaying symptoms of a contagious disease (a disease which can easily be <u>passed</u> on to other people) may be sent home.

The procedure is:

- Any child appearing ill or coughing or sneezing excessively will be sent by a member of staff to the nurse's office
- The Nurse will conduct a temperature check.
- A student with a temperature of 37.5°C will be kept in the nurse's area and checked again after 30 minutes.
- If the temperature remains 37.5°C, the parents will be contacted and asked to make arrangements for the student to go home,

They may come back to school when the risk of infecting other children has passed and this is certified by a doctor's note.

Medication

Children should not bring medication to school and take it without adult supervision. Parents must communicate with the class teacher and nurse if they are sending medication, by email or in person.

The Nurse will store medicines (in the original container) sent in with a child and will supervise the student taking them in the Medical Centre in the correct quantity at the proper time.

Medicines will only be given if there is a written and signed note from a <u>parent/guardian</u> (see appendix 2– should be available on website and editable so able to print or send in).

Medicines may not be stored in bags for any students. This includes vitamins and over-the-counter medications.

The school policy requires the Nurse only to give medicines where it is clear that they will help control pain or fever, with parental permission obtained first verbally by phone call.

When the nurse is not in her office

The nurse should eat lunch at 1.10pm to ensure she is available throughout Primary lunchtime which is when the majority of accidents happen with primary students.

When she is out of the medical centre, the nurse will put a note on the door of the medical centre, showing where she is and listing her phone number.

For non-emergencies, children can wait on the bench, wait in the office or visit a first-aider.

For emergencies, call/send an emergency card to office staff to call nurse on mobile.

Emergency cards should be kept in each classroom for children to take to the office to call for the nurse with the walkie talkies or a mobile phone. Extras for the playground for duty teachers which will be stored in the purple area corridor outside the Music Room.

If the nurse is not in school, a message should be sent out via the daily bulletin informing all staff. Children will then be sent to a first-aider (listed below) or the office for assessment.

Emergency Response Situation

Emergency Medical Situation	Urgent Medical Situation
Potential threat to life or function requiring immediate medical attention	Acute condition requiring medical intervention within 1 to 2 hours
 Examples: see below Anaphylactic reaction Bleeding (severe): massive external haemorrhage and internal haemorrhage Breathing difficulty (persistent): acute airway obstruction Head injury with any abnormal symptoms/signs Burns (chemical, electrical, third degree) Choking Electrical shock Head, neck, or back injury (severe) Poisoning 	Long bone deformity or fracture without circulatory or nerve compromise Lacerations requiring sutures without excessive blood loss Brief seizure, not first-time seizure or status epilepticus Wheezing, unresponsive to medication Any other urgent medical condition
 Seizure (if no history of seizures) Shock Unconsciousness Wound (deep /extensive) Any other life-threatening condition 	

Emergency Procedure

- ▶ Do not move the patient and call for a nurse immediately school designated first aider on site will give CPR if required and other necessary first aid care to patient
- ▶ If required, staff member to call 112 for the ambulance
- ► The Nurse and school doctor take **the Critical Incident Kit** to the site and provide necessary first aid care to stabilize the patient until ambulance arrives
- ► The Principal will be informed immediately by teacher
- ▶ Parents will be informed by Principal or class teacher immediately
- ► School office will direct the ambulance to the site
- ► School nurse decide on the appropriate hospital and escort the patient in ambulance
- ► Complete the incident report form by nurse and teachers.

First aid kits

These are located in the following areas:

- Nurse's room
- Reception Desk
- Staff room
- Science lab
- Swimming pool
- PE office (by gym)
- Playground corridor
- Room 1 and 4
- Room 7 and 10
- Room 22 and 25



First Aiders list

Name	Title	Telephone Extension	Mobile Phone Number
Nurse : Eva Torok	School Nurse		
Doctor: Agnes	School doctor		
Reception: Klaudia Kavalecz	School Secretary		
Security guard: Tibor			
KS1: Rosie Wolland	KS Coordinator, Y1 Teacher		
KS1: Krisztina Zubak-Dobos	Y1 TA		
KS1: Vilma Kamaras	Y2 teacher		
KS1: Julia Pek	LSA		
LKS2: Andrea Pankotai	Y3 Teacher		
LKS2: Alex Garrow	Y4 Teacher		
LKS2: Bogi Toth	Y3 TA, Drama Teacher		
UKS2: Nick Bateman	Y5 Teacher, English Coordinator		
UKS2 Aggie Lastofka	Lead TA, Y5 TA		
UKS2: Ryan Phillips	Assistant Head, Y6 Teacher		
Science: Richard Roberts	KS4 Coordinator		
Science: Betty Nagy	Science Teacher		
Science: Viki Naserghodsi	Science Teacher		
DofE: Lauren Rickerby	Humanities teacher		
DofE: Jamie Jones	Humanities teacher		
DofE: Charlotte ward	Humanities teacher		
PE: Agi Tron	PE and Swimming teacher		
PE: Lewis Turnbull	Head of PE		
Hungarian: Imola Bartha	Hungarian teacher		



Britannica International School

Budapest

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Emergency Contact Information

School Community	Medical Service		
Name	Office and Cell phone	Name	Office and Cell
Nurse : Eva		Emergency Num	ber 112
Doctor: Agnes		Hospital 1	
Principal: Neil	06309506576	Hospital 2	
Head of Primary: Marie	703555172	FirstMed clinic	2249090
Head of Secondary: Greg		Clinic 2	
Director of Business Admin: Balazs			
Reception	14669794		
Security guard:			

Routine Health Assessments and Checks

There may be situations where the school nurse is required to screen for illnesses and conditions such as hand, foot and mouth disease, head lice or verrucae.

Teachers are not permitted to undertake these checks, but may aid in organising them by alerting the nurse and organising small groups to attend the nurse's office for these checks.

Parents will be informed, usually in advance, if their child will undertake a check. They may receive a standard letter informing them after the fact in some circumstances.

If the child is found to have the illness or condition, the parents will be informed by phone immediately (for illnesses) or by email, following procedures as outlined above.

The nurse and doctor may undertake some medical assessments as required by Hungarian law. These may involve measuring height and weight and for some checks, may involve the child undressing to their underwear. In these instances, parents will be informed in advance and 2 adults will be present at any time for safeguarding purposes



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Personal Medication form

Dear Parents,

To ensure that all children are given any medication that they may need correctly, please fill in the form below completely and return in a sealable bag along with the medication (original pharmacy or manufacture —labelled container) clearly marked with the child's name and class.

Please note that all medication including; prescribed medication, inhalers and vitamins need to be included as the children will not be allowed these in their bags (with the exception of inhalers).

Child's name	-	Class	
Name of medication			
Expiration Date & storage			
Reason for medication /in what condition to administer Med			
Amount to be given on each occasion .(dosage)			



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At what times is the medication to be given (please state all times precisely)					
On what days will the medication be needed to be given? (please tick)	Mon	Tues	Wed	Thurs	Fri
How many days it is required to be given	Date	Date	Date	Date	Date
Any other information					
I give permission for the staff of Britannia to administer the above medication to my child.					
Cianad		Data			