



Medical Emergency Readiness

Creating Your Medical Emergency Response Plan

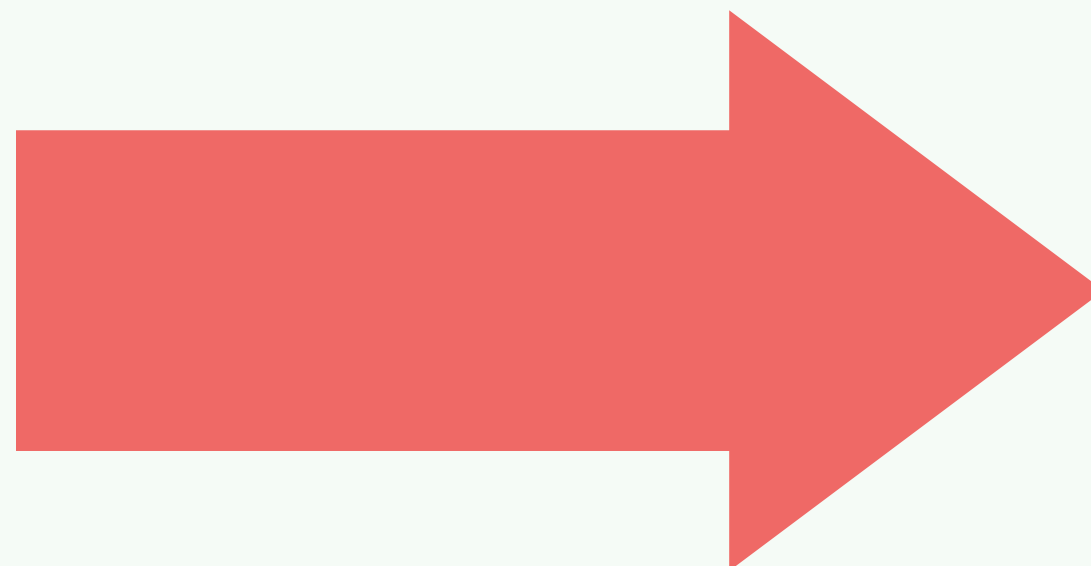
Presented by Alice Hoyt MD, Code Ana Executive Director

Allergist & Immunologist, Internist, and Pediatrician

&

Sarah Jane Lowery, Code Ana Program Director

**Before we begin, please
complete your school's
medical emergency
snapshot here!**



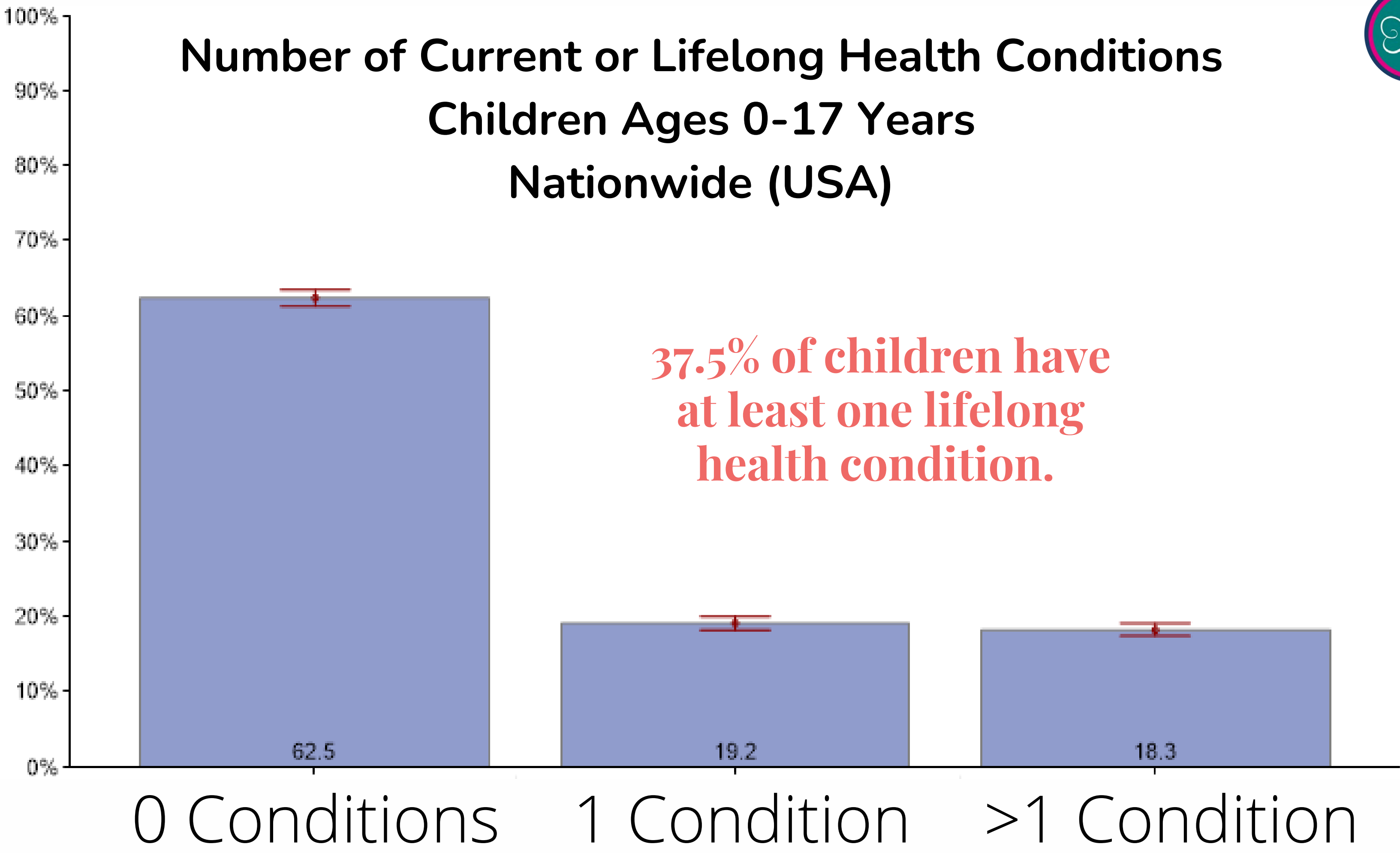


Disclosures

- None of the speakers have any relevant disclosures.



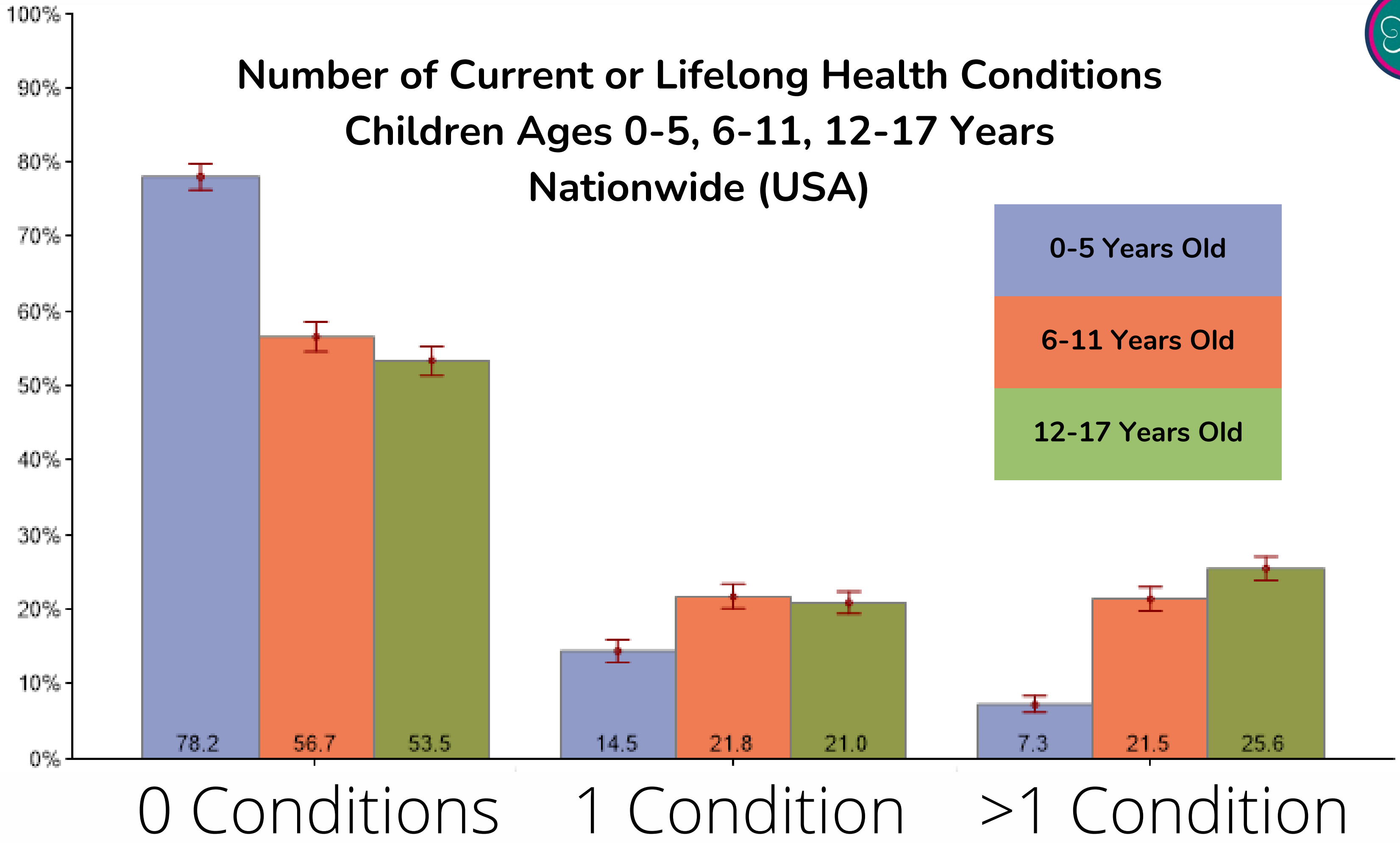
Number of Current or Lifelong Health Conditions Children Ages 0-17 Years Nationwide (USA)



**37.5% of children have
at least one lifelong
health condition.**

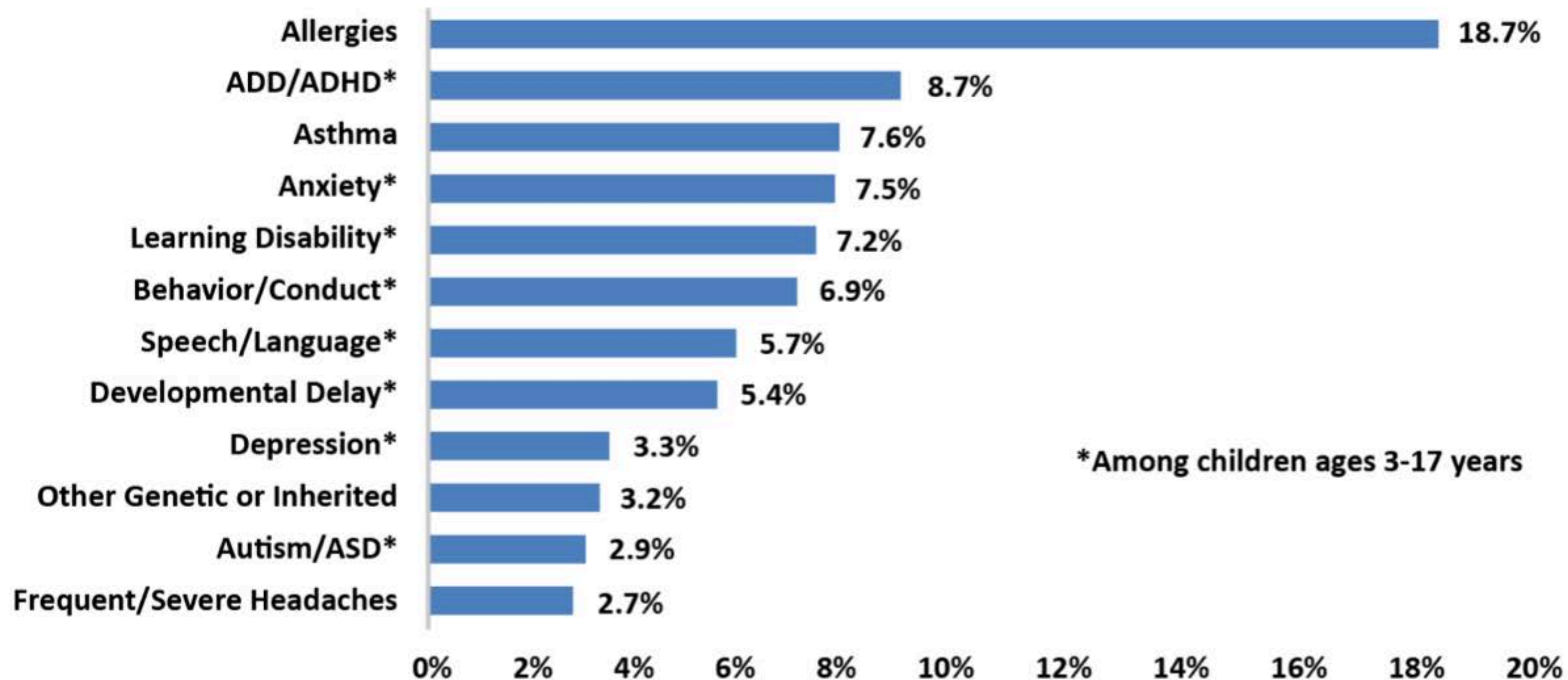


Number of Current or Lifelong Health Conditions Children Ages 0-5, 6-11, 12-17 Years Nationwide (USA)





Prevalence of Current or Lifelong Health Conditions among Children ages 0-17, 2017-2018




Note: Conditions with prevalence rates near or below 1% are not presented here. These conditions include Blood Disorders, Intellectual Disability, Heart Condition, Epilepsy/Seizure, Brain/Head Injury, Diabetes, Arthritis, Cerebral Palsy, Cystic Fibrosis, Down Syndrome, and Tourette Syndrome.

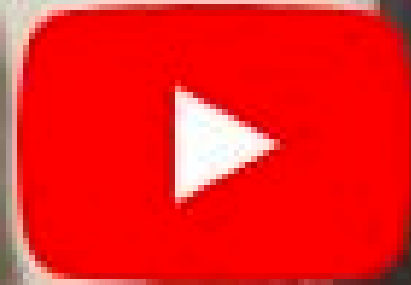


But why should schools be equipped to manage those less common medical conditions?



Teen Who Suffered Heart Attack During Volleyball Gam...


Share





OBJECTIVES

After today's session, you will be able to:

- 1. Identify and interpret medically relevant legislation that pertains to Louisiana schools.**
- 2. Identify gaps in your school's current medical emergency response plan.**
- 3. Create an evidence-based, school-specific, medical emergency response plan and team.**





EXISTING LEGISLATION

RS 17:436.1 - Epinephrine and naloxone usage

RS 17.440 - Sudden cardiac arrest education for school nurses

RS 17.81 - CPR training organization

R.S. 40:1137.3 - Requires 1 AED, training, and a cardiac response plan

R.S. 17:416.16 - Trauma training and kits



Key Sections of RS 17:436.1

Section J

"...each public elementary and secondary school shall **permit the self-administration of medications by a student** with asthma or the use of auto-injectable epinephrine by a student at risk of anaphylaxis..."
pending parent-provided documentation.

Section K

"...each public elementary and secondary school shall adopt a policy authorizing a school nurse or trained school employee to **administer auto-injectable epinephrine...** to a student who the school nurse or trained school employee, in good faith, professionally believes is having an anaphylactic reaction, **whether or not such student has a prescription for epinephrine.**"

"Each public elementary and secondary school may **maintain a supply of auto-injectable epinephrine...**"

Section M

"...each public and nonpublic elementary and secondary school may adopt a policy that authorizes a school to maintain a **supply of naloxone** or other opioid antagonists and authorizes a school nurse or other school employee to **administer naloxone or another opioid antagonist to any student or other person on school grounds in the event of an actual or perceived opioid emergency.**"



Key Sections of RS 17:440

440.2

"A. Each public school nurse, coach, athletic trainer, and athletic director, whether employed or serving as a volunteer, shall complete annually a sudden cardiac arrest education program developed by the state Department of Education.

B.(1) In developing the program, the department may use materials and resources created and offered free of charge by nonprofit organizations with missions related to cardiac health."





Key Sections of RS 17:81

Section X

"...each public school that enrolls students in grades nine through twelve shall provide **instruction relative to cardiopulmonary resuscitation and the use of an automated external defibrillator.**

Such instruction shall be integrated into the curriculum of an existing course, such as health education, physical education, or another **course that is required for graduation** and deemed appropriate by the school governing authority..."

Section AA

The governing authority of each public school *may* require that at least one member of the **coaching staff** for each extracurricular sport offered by the school is **certified in cardiopulmonary resuscitation**, first aid, and the use of an automated external defibrillator.





R.S. 40:1137.3

(2)(a) Each elementary, middle, and high school **shall** have an AED on its premises, if funding is available, subject to appropriation in an easily accessible location. Each high school shall have the authority to accept donations of AEDs or funds to acquire AEDs

(b) Any elementary, middle, or high school that sponsors an interscholastic athletic event **shall have an AED** and a **trained AED user** who is also trained in first-aid CPR at the event.

(c) Each elementary, middle, and high school shall have a **"cardiac emergency response plan"**.





R.S. 40:1137.3

For purposes of this Subparagraph, a "cardiac emergency response plan" means a written document that **establishes the specific steps** to reduce death from cardiac arrest at an athletic event.

(i) An institution's cardiac emergency response plan shall be prepared by each president or chancellor jointly with local emergency responders.

(ii) The plan, which shall focus on preventing the loss of life, shall integrate at a minimum the following guidelines:

- (aa) **Establishing a cardiac emergency response team.**
- (bb) **Activating the team in response to a sudden cardiac arrest.**
- (cc) **Implementing AED placement and routine maintenance within the institution.**
- (dd) **Maintaining ongoing staff training in CPR and AED use.**
- (ee) **Practicing using drills.**
- (ff) **Integrating local EMS with the plan.**
- (gg) **Annually reviewing and evaluating the plan.**





R.S. 40:1137.3

The Louisiana Department of Health shall promulgate all necessary rules and regulations to implement the provisions of Subsections D and E of this Section.

Such rules and regulations shall, at a minimum, provide for compliance,

- (1) Compliance, enforcement, and penalties.
- (2) Periodic maintenance and testing of each AED to ensure each AED is in working order.
- (3) Appropriate training for persons designated to use and maintain an AED.



R.S. 17:416.16



2)(a) **Bleeding control kits** shall be placed in easily accessible locations in each school.

(b) The principal shall **designate employees to be trained** in the proper use of a bleeding control kit and in traumatic injury response.



Key Sections of SB 207



SB 207:

".....(B)(3)The local school superintendent shall make an annual report to the public school governing authority on the status of the plan of each school under the governing authority's jurisdiction and **shall submit a copy of the report to the state Department of Education and the Center for Safe Schools** provided for in R.S.

29:276.5.1





NEW LEGISLATION

HB 456/ Act 378

- **UPDATES ON NALOXONE**

- “Training that addresses techniques on how to recognize signs of opioid-related overdose, standards and procedures for the storage and administration of naloxone or another opioid antagonist, and emergency follow-up procedures, including the requirement to summon emergency services either immediately before or immediately after administering the naloxone or other opioid antagonist.”
- Removes the 6-hour training requirement for school staff to use naloxone on those suspected of an overdose



NEW LEGISLATION

HB 456/Act 378

- **UPDATES ON OTHER EMERGENCIES**

- “The governing authority of a public or nonpublic school may authorize **school nurses and other trained school personnel to administer life-saving medication** to a student or other person on a school premises or during a school-affiliated activity whom they believe in good faith to be experiencing a medical emergency in accordance with a standing protocol of licensed health professionals authorized to prescribe medication, **regardless of whether the student or other person has a prescription for the medication**. Training for the administration of such medication may be provided by a medical emergency training organization, a registered nurse, or a licensed physician.”



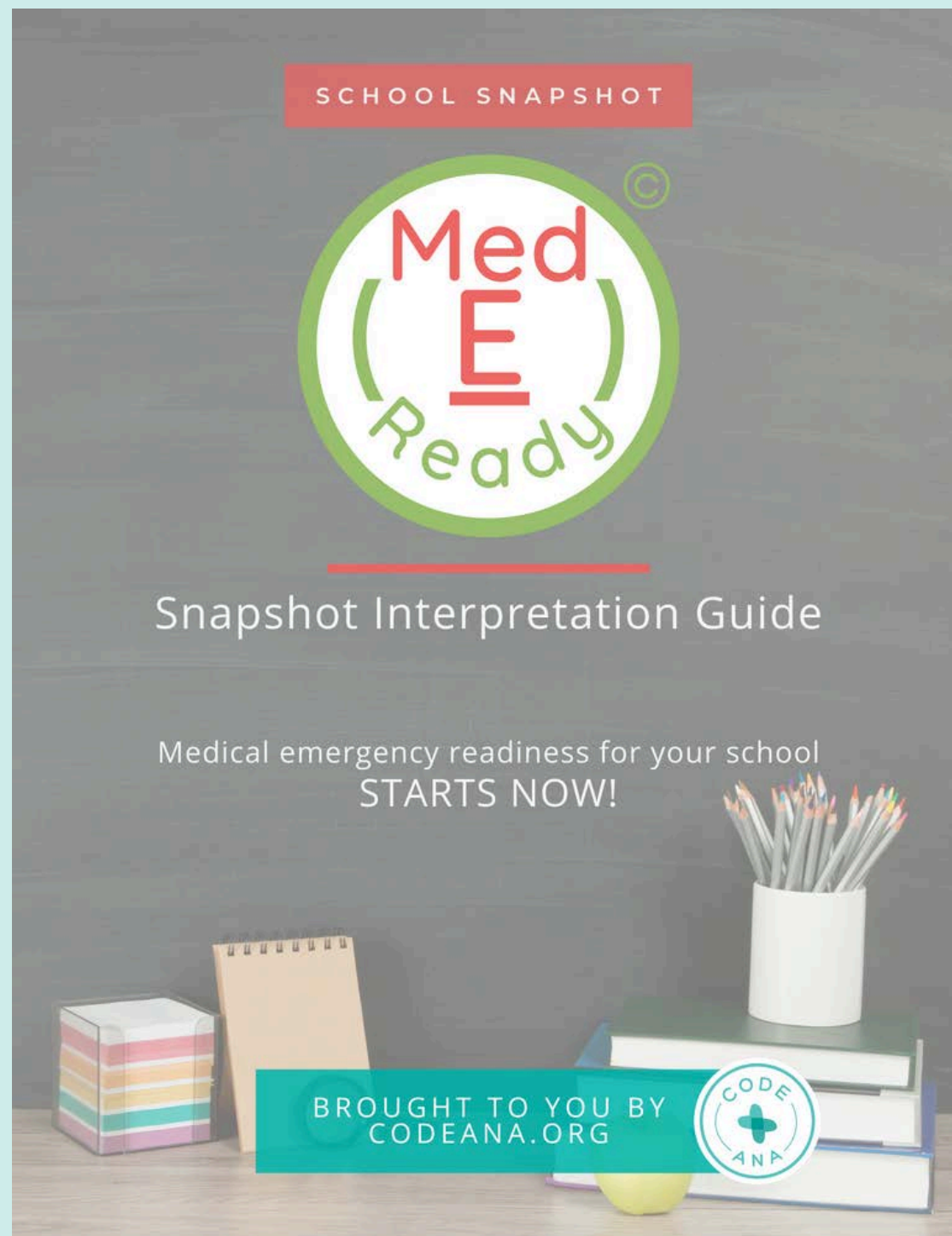
OBJECTIVES

After today's session, you will be able to:

1. Identify and interpret medically relevant legislation that pertains to Louisiana schools.
2. **Identify gaps in your school's current medical emergency response plan.**
3. Create an evidence-based, school specific, medical emergency response plan and team.



How can you efficiently and effectively begin to identify gaps in your school's medical readiness?



The Med-E Ready Snapshot

- Assessment tool with interpretation guide
- 5 questions, each worth 0-2 points
- Max score 10

Sample Med-E Ready Snapshot Results

| Question | Response (point value) | Score |
|--|---|-------|
| 1) Does our school have a school nurse? | Yes, we have a full-time school nurse. (2) Partial yes: we have a part-time school nurse. (1) No, we have no school nurse. (0) | 1 |
| 2) Excluding a full-time school nurse, are school personnel trained on how to prevent and recognize medical emergencies and then respond with necessary medications and devices? | Yes, all staff are trained on all medications and devices. (2) Partial yes, some staff are trained on medications and devices. (1) No, only our full-time school nurse is trained. (1) No, no one is trained, and we have no full-time school nurse. (0) | 1 |
| 3) Does our school have adequate stock medications and devices (including epinephrine auto-injector, albuterol, naloxone, AEDs)? | Yes, we have all stock medications and an adequate number of AEDs. (2) Partial yes, we have some of these things. (1) No, we have none of these things. (0) | 1 |
| 4) Does our school have a medical emergency prevention and response plan with a response team? | Yes, we have a plan and a team. (2) Partial yes, we have either a medical emergency prevention and response plan or a crisis team but not both. (1) No, we don't have any of these things. (0) | 1 |
| 5) Does our school practice responding to medical emergencies? | Yes, we practice quarterly. (2) Yes, we practice at least once per year but less than quarterly. (1) No, we don't regularly practice responding to medical emergencies. (0) | 0 |
| Total Score (Max = 10) | 4 | |



CURRENT CHALLENGES IN SCHOOLS

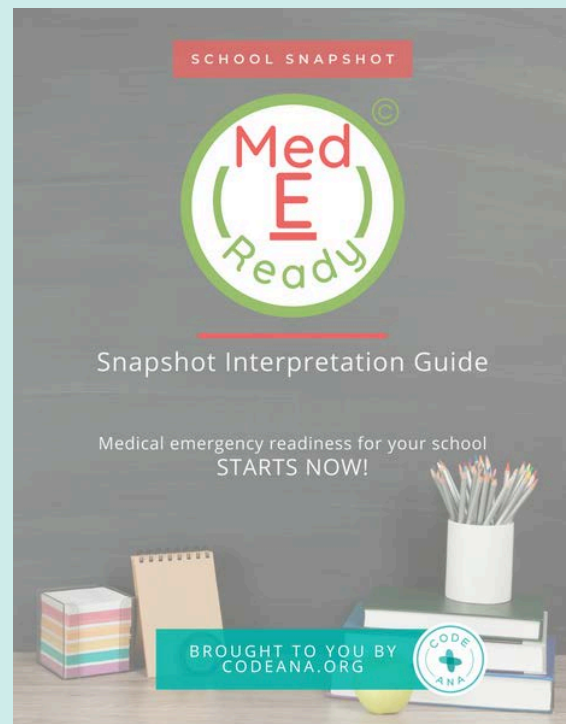
A gap in one area typically unearths gaps in other areas of preparedness.

| <u>Problem Layer</u> | <u>Problem</u> |
|----------------------|---|
| External | "Our school doesn't know how to use an EpiPen." |
| Internal | "Our school is unprepared for a medical emergency." |
| Philosophical | "All children should be safe at school." |

The ultimate villain of the story is the medical emergency itself.



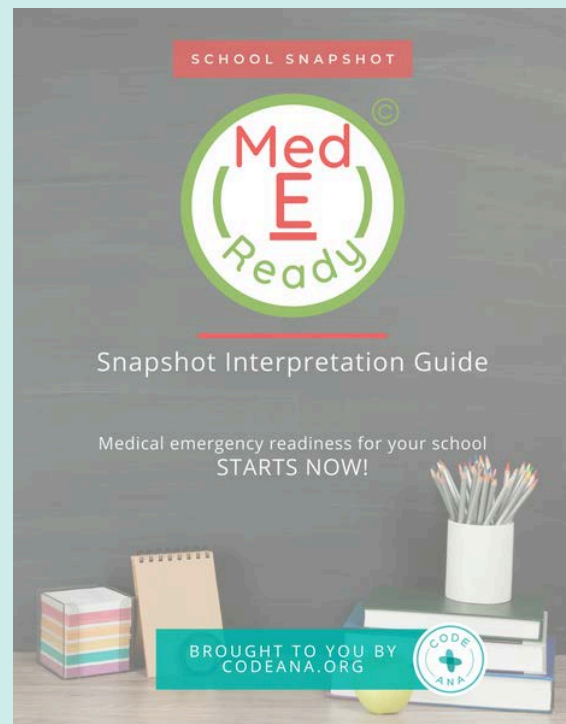
Does our school have a school nurse?



- While a school nurse is a great resource to have, not every school has the ability to have a full-time nurse
- With or without a nurse, you can be prepared and equipped for medical emergencies
 - Need a designated medical leader
 - Outside organizations will need to provide training



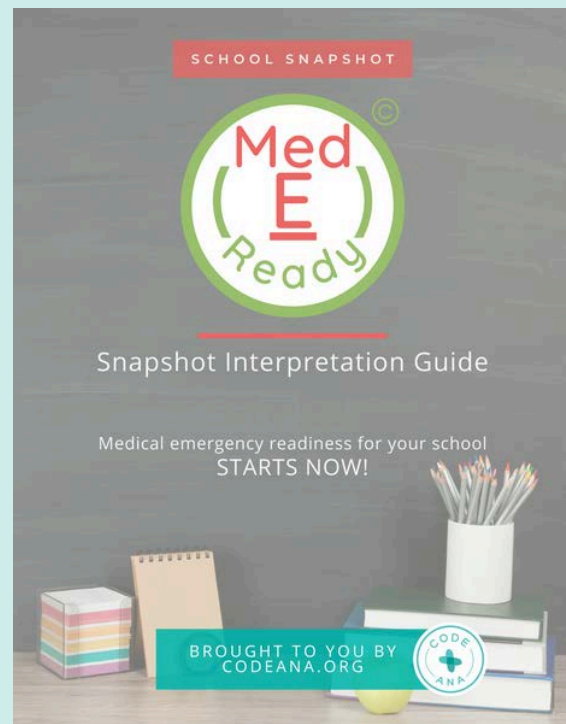
Are school employees trained on medical emergencies and how to use emergency devices?



- Nurse or not, a team of staff should be trained to respond to medical emergencies effectively
- Trainings can be for a small team or the full campus, there is no exact number as every campus is different



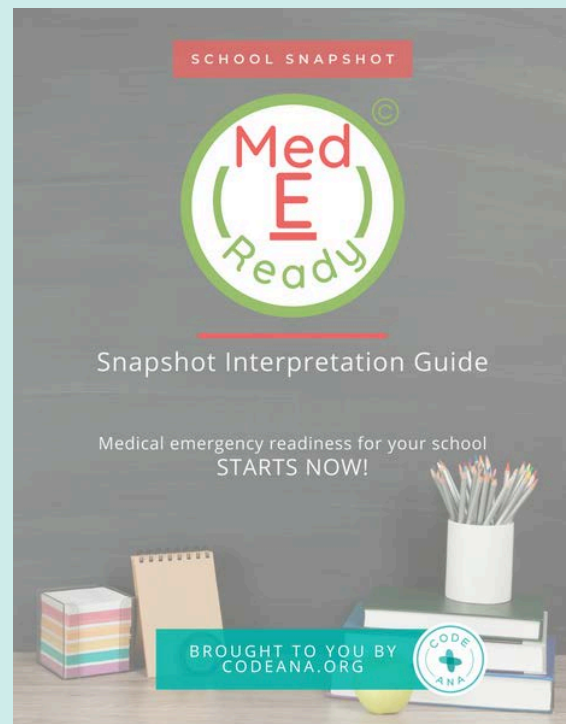
Do you have all of the available stock medications and devices?



- **AEDs**
 - Best practice is to be able to get from the spot of the incident to the AED and BACK within 3 minutes
- **Stock Epinephrine**
- **Naloxone**
 - Training can be a hurdle
- **Stop the Bleed kits**
 - While they vary, tourniquets and gauze are main factors



Do you have a medical emergency team & prevention protocols?

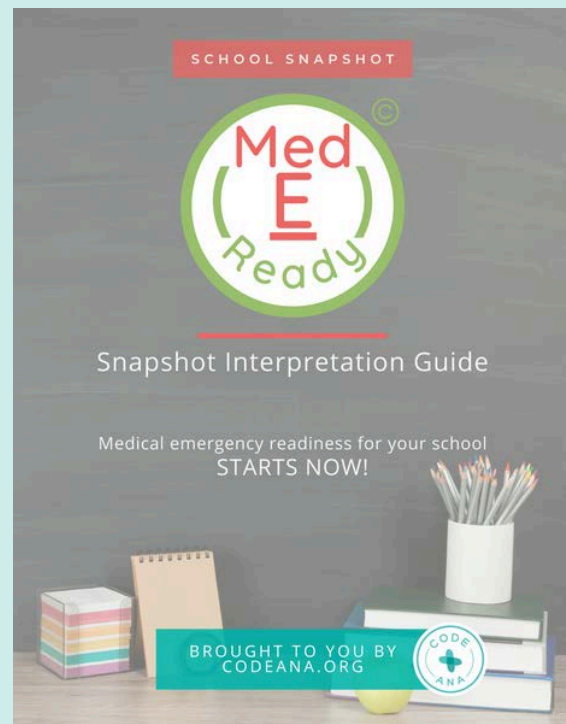


- Teamwork makes the dream work
 - Every emergency has multiple pieces that multiple people should manage
- Prevention protocols can follow best practices for:
 - Allergy
 - Asthma
 - Cardiac conditions
 - Facility safety



Do you have a plan that you practice?

- Practice makes perfect!
- Creating plans, protocols, and teams, and acquiring devices can be great, if the plan isn't practiced, you may get caught unprepared for emergencies
 - Get prepared for great outcomes!
 - Get prepared so you indemnify yourself!





OBJECTIVES

After today's session, you will be able to:

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2. Identify gaps in your school's current medical emergency response plan.
3. **Create an evidence-based, school specific, medical emergency response plan and team.**

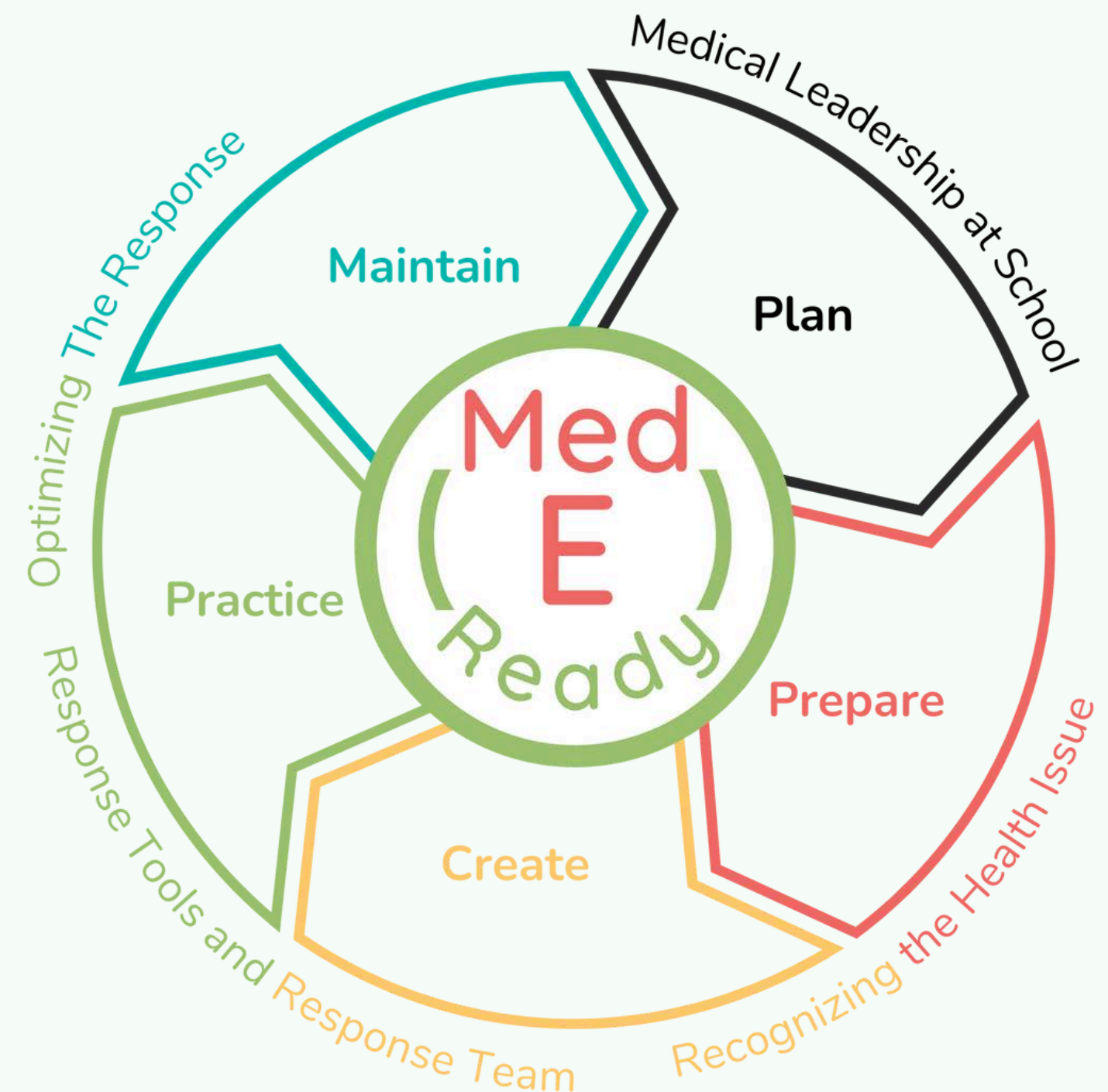




ADDRESS THE INTERNAL PROBLEM WITH CODE ANA'S MED-E READY PROGRAM

Upon program completion, each school has:

1. Identified and strategized solutions to **school-specific gaps** in medical emergency readiness.
2. Developed and practiced its medical emergency **response plan** with its medical emergency **response team**.
3. Implemented maintenance measures to continue identifying and achieving **continued preparedness goals**.





Med-E Ready guides your school to be ready for any medical emergency.

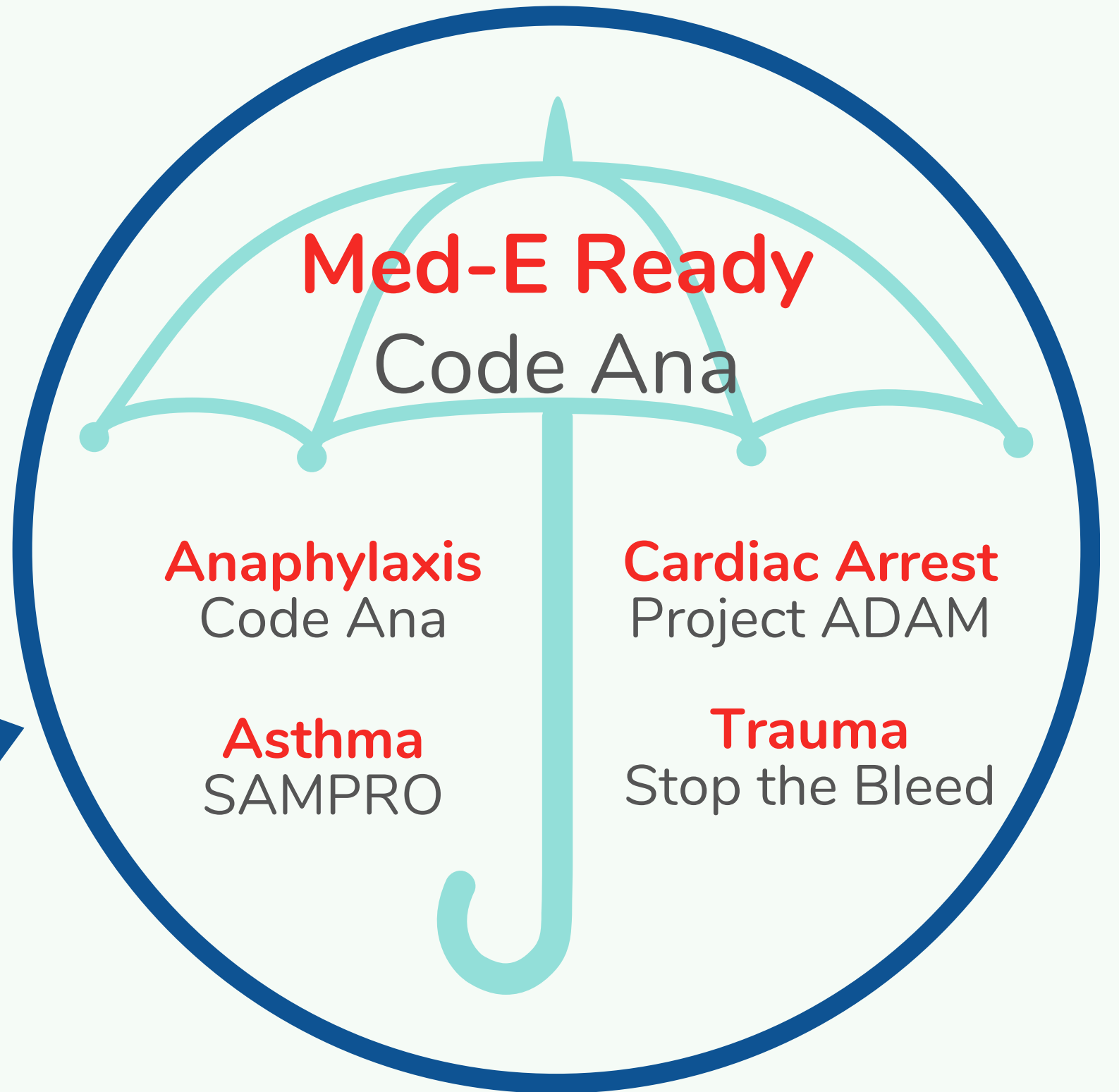
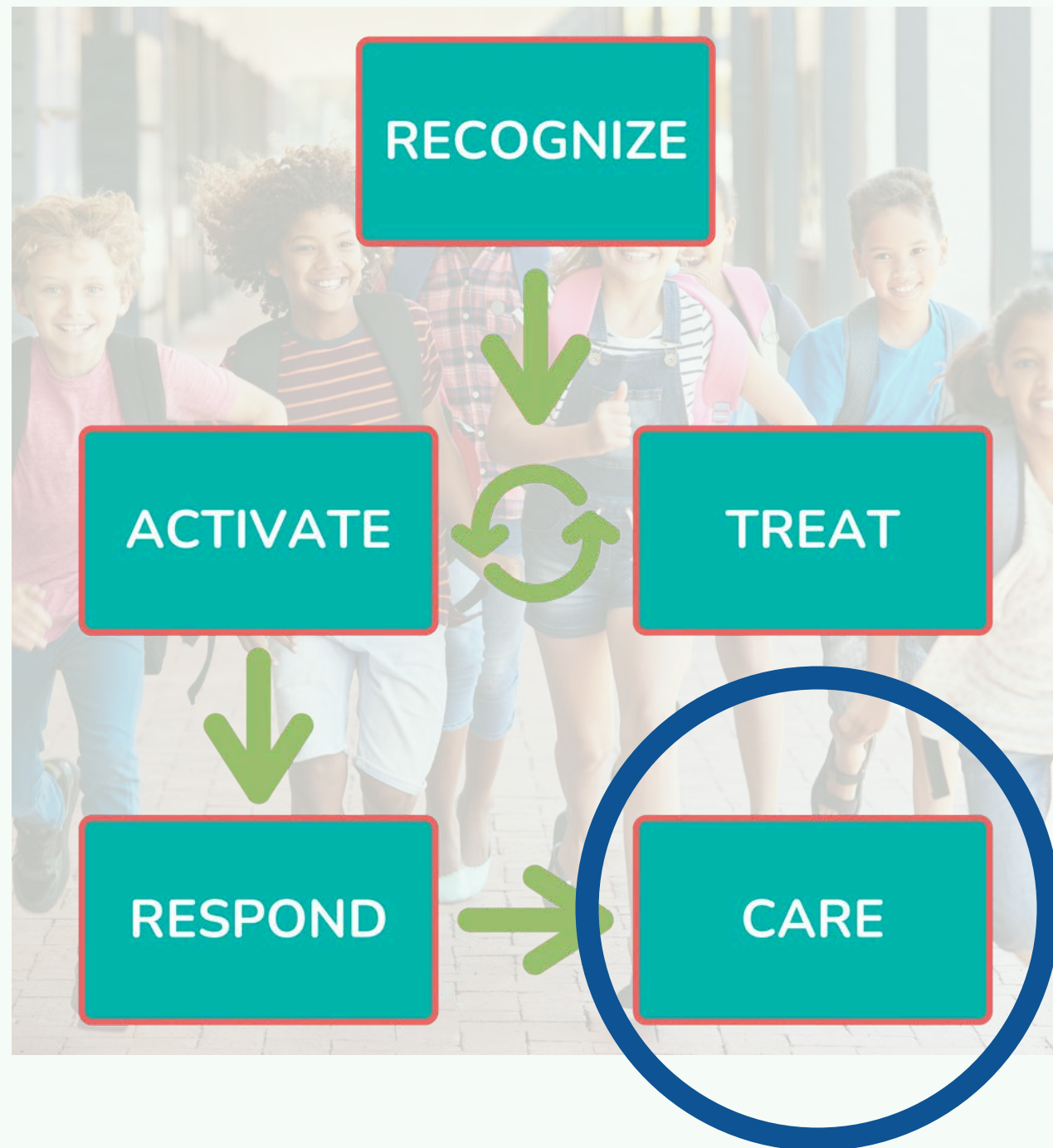


Code Ana's Med-E Ready Program gives your school a very practical, tactical plan.

- Based on hospital, evidence-based emergency response practices
- Adapted to meet the needs and cultures of local schools



Med-E Ready incorporates emergency-specific medical education.





Acquiring Medication & Devices

- **AEDs**
 - Online distributors
 - Grant programs
- **Stock Epinephrine**
 - EpiPen4Schools
 - Medical Purchasing
- **Stock Albuterol**
 - Online distributors
- **Stop the Bleed kits**
 - Stop the Bleed
 - Online distributors
 - Amazon
- **Naloxone**
 - Pharmacies
 - Online distributors
 - Community organizations



Getting Educated

- Training should cover:
 - How to recognize the emergency
 - How to utilize the medication or devices
 - How to store the medication or device
 - Calling emergency responders



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EMERGENCY RESPONSE NETWORK



Creating Your Team

| Task | |
|---|--|
| Activate/Announce Code Ana to mobilize Code Ana Response Team members to the site | |
| Call 911 to request EMS | |
| Escort EMS to site | |
| Assess and care for the sick student | |
| Carry medication(s) and device(s) to site | |
| Administer needed medication(s) and/or device(s) | |
| Document medical care | |
| Notify family | |
| Manage mass movement within the school | |
| Manage nearby students | |
| Support the team leader | |
| Communicate with remote team members | |

Time of Emergency _____ Time of Activation _____ Time

- **Tasks that every response needs certain tasks**
 - **Your campus can do this with 3 people or 11**
- **This group should have a clear and defined mode of communication in case of emergencies**
- **There are non-medical tasks so anyone and everyone can be involved**



Activating The Team

| Task | |
|---|--|
| Activate/Announce Code Ana to mobilize Code Ana Response Team members to the site | |
| Call 911 to request EMS | |
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| Support the team leader | |
| Communicate with remote team members | |

Time of Emergency _____ Time of Activation _____ Time _____

- Activating the medical emergency response team effectively
- Everyone on campus should know how to activate the team
- Like a fire alarm or AED box alarm, there should be a way to signal a medical emergency
 - Apps like RAVE Panic Button
 - Texts
 - Walkie Talkies



Calling & Facilitating EMS

| Task | |
|---|--|
| Activate/Announce Code Ana to mobilize Code Ana Response Team members to the site | |
| Call 911 to request EMS | |
| Escort EMS to site | |
| Assess and care for the sick student | |
| Carry medication(s) and device(s) to site | |
| Administer needed medication(s) and/or device(s) | |
| Document medical care | |
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| Manage mass movement within the school | |
| Manage nearby students | |
| Support the team leader | |
| Communicate with remote team members | |

Time of Emergency _____ Time of Activation _____ Time

- Any medical emergency should have EMS called for it
 - A false alarm is much better than no alarm or a late alarm
- Responders will need to have assistance navigating the campus
 - Have someone at the communicated entrance
 - Depending on the location, EMS should be escorted to the site



Caring for the Student

| Task | |
|---|--|
| Activate/Announce Code Ana to mobilize Code Ana Response Team members to the site | |
| Call 911 to request EMS | |
| Escort EMS to site | |
| Assess and care for the sick student | |
| Carry medication(s) and device(s) to site | |
| Administer needed medication(s) and/or device(s) | |
| Document medical care | |
| Notify family | |
| Manage mass movement within the school | |
| Manage nearby students | |
| Support the team leader | |
| Communicate with remote team members | |

Time of Emergency _____ Time of Activation _____ Time

- Your medically educated and trained staff should be the people providing the care
 - Only trained employees can administer medications
- If the devices are not at the location, define who should grab the devices or medication
 - Can vary by campus location
 - Devices and medication should be accessible at any time



Documentation & Support

| Task | |
|---|--|
| Activate/Announce Code Ana to mobilize Code Ana Response Team members to the site | |
| Call 911 to request EMS | |
| Escort EMS to site | |
| Assess and care for the sick student | |
| Carry medication(s) and device(s) to site | |
| Administer needed medication(s) and/or device(s) | |
| Document medical care | |
| Notify family | |
| Manage mass movement within the school | |
| Manage nearby students | |
| Support the team leader | |
| Communicate with remote team members | |

Time of Emergency _____ Time of Activation _____ Time

- Emergency responders will need to know when care was started and when devices were used
- The person providing care should focus on care so another person should be documenting and supporting that person



Communication

| Task | |
|---|--|
| Activate/Announce Code Ana to mobilize Code Ana Response Team members to the site | |
| Call 911 to request EMS | |
| Escort EMS to site | |
| Assess and care for the sick student | |
| Carry medication(s) and device(s) to site | |
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| Manage mass movement within the school | |
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| Support the team leader | |
| Communicate with remote team members | |

Time of Emergency _____ Time of Activation _____ Time

- Parents and guardians need to be contacted and if the student is being transported
- Other communication should also be managed so that external communication can be available



Managing Students

| Task | |
|---|--|
| Activate/Announce Code Ana to mobilize Code Ana Response Team members to the site | |
| Call 911 to request EMS | |
| Escort EMS to site | |
| Assess and care for the sick student | |
| Carry medication(s) and device(s) to site | |
| Administer needed medication(s) and/or device(s) | |
| Document medical care | |
| Notify family | |
| Manage mass movement within the school | |
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| Communicate with remote team members | |

Time of Emergency _____ Time of Activation _____ Time

- **Students near the emergency need a defined way to be cared for and removed from the emergency**
- **Things like the bell or dismissal should be adjusted**



OBJECTIVES

You are now able to:

- 1. Identify and interpret medically relevant legislation that pertains to Louisiana schools.**
- 2. Identify gaps in your school's current medical emergency response plan.**
- 3. Create an evidence-based, school specific, medical emergency response plan and team.**

Thank you to the Louisiana Department of Education and to our collaborators, partners, and supporters!



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Access links to resources!



Proverbs 31:10-31



STATE OF LOUISIANA
GOVERNOR'S OFFICE OF HOMELAND SECURITY AND EMERGENCY PREPAREDNESS

Louisiana is a State as a Model Employer for People with Disabilities

