





Qaitbay Private Language School American Division Medical & Emergency Procedure



QPLS Medical and Emergency Procedure

School vision:

Our vision is to empower well-rounded, long-life learners acquiring and demonstrating knowledge to encounter the journey of life.

School mission:

Our school fosters the students' self-esteem by ensuring a supportive community through technology and activities. We establish a safe, welcoming environment that fulfills the students' potentials, and needs.

(1) Building Plan and Organization

(I) Plan for Employee/Student Emergency Care and First Aid.

- (A) All school buildings have a definite plan of action to be followed in the event of an emergency to ensure the rapid provision of first aid or medical care to ill or injured students and school employees. The administration, in cooperation with all staff, are responsible for the development of the plan.
- (B) A plan for the immediate response to life-threatening or major emergencies is of primary importance.
- C) The administration shall inform the staff of the general emergency plan annually at the beginning of each school year before students attend.

(II) Trained Staff.

- (A) The school buildings are located within reasonable accessibility of a hospital where physicians and medical technicians can provide emergency care.
- (B) In addition, school staff can readily obtain emergency services from the fire, police department and nearby ambulance when an accident or health crises occurs.
- (C) There is a school doctor in the campus and there are several staff members qualified designated as first aid providers for students. The school assigns these persons the responsibility for the care of students and school employees in the event of accident or illness. The persons so assigned are made known to all employees in the building.



(III) Space for lit or Injured Persons (School clinic).

- (A) In the building, the clinic is designated to permit ill or injured persons to lie down.
- (B) The clinic cannot be used for any additional purposes, which would make it unavailable for immediate use in rendering prompt first aid.

(IV) First Aid Equipment and Supplies.

- (A) The building has first aid supplies as recommended. No other items are stored in the first aid container without responsible physician's approval.
- (B) Supplies are kept in a moisture dust-proof container clearly marked, readily accessible, and not locked. These supplies are kept in a central area as well as in potentially hazardous areas around the building, such as science labs, computer lab, library, staff room, and clinic.
- (C) The location of first-aid supplies are made known to building personnel, and the supplies are readily accessible to all.

(V) Emergency Telephone Numbers.

The telephone numbers are announced everywhere in the building:

- (A) Police
- (B) Ambulance
- (C) Fire
- **(VI)** Emergency Address. The address and location of the hospital, is maintained in several convenient and visible locations in the building. This information may be useful if a major disaster disrupts normal emergency response.

(VII) Medical Information.

- (A) Parents are asked to provide the school with medical information about their children, which may affect first aid treatment or emergency care to be given.
- (B) All such information are treated as confidential.

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(2) Building Procedures

(I) Medical Emergencies.

(A) 'Major Medical Emergency" is when a major body function, breathing, heart, or consciousness has perceptibly declined; or head, neck, or back injury is suspected; or core body temperature has declined or heat stroke is suspected, or there are major burns; or there is a fracture of a major bone or a compound fracture or fracture of a facial bone.

(II) Priority for Allocation of Resources:

- (I) Major Medical Emergency.
- (II) Other Medical Emergencies.
- (III) Behavioural Emergencies.
- (A) 'Behavioural Emergency" is a situation where the student is a threat to himself/herself or to other members of the school community. The cause of the emergency may be mental, drug, alcohol, or unknown.
- (B) In any behavioural emergency, the parent/family and principal are notified as quickly as possible, and the person should be kept under control/observation until they arrive. Monitor for deterioration of life signs and re-evaluate, if necessary, as a medical emergency.
- (C) School staffs are not to transport students in emergencies without advice and assistance from the school dean.

(III) The principal or his/her designee shall notify the parent or, if not available, the parent's designee as indicated on the student's school registration forms.

- (A) Talk with the physician and learn why there is a need to proceed before a parent can be contacted.
- (B) To the extent possible, and under the circumstances, the physician should inform the student of the condition, the proposed treatment, and that you may authorize treatment.
- (C) If the student objects to your authorizing treatment; do not do so unless the physician advises you that a delay could be adverse to the best interest of the student.
- (D) Students 15 years or older can provide medical authorization themselves.



(IV) Non-major Urgent Injuries and Illnesses (Cuts, minor bums, splinters, nausea, etc. which do not ordinarily require medical care.)

- (A) It is recommended that care of urgent injuries and illnesses not considered major medical emergencies be given according to instruction of first aid providers.
- (B) Parent are notified as required by the circumstances.

(V) Procedures for Sending a Student Home.

- (A) The principal or his/her designee is notified of the illness or injury.
- (B) The principal or his/her designee then notifies the parent of the child's condition; if the parent is not available, the principal/designee shall notify the parent's designee as indicated on the student's registration form.
- (C) The parent or parent's designee may call for the child or arrange for another responsible adult to take the child home. The school is informed as to whom the child is to be released.
- (D) The student is kept at school if the parent or parent's designee cannot be contacted.
- (E) The child is isolated if suspected of having a communicable disease.

(3) Accident Reports

- (a) All accidents in which injury occurs must be reported immediately to parents.
- (b) Accident reports must be completed and signed by the staff member witnessing the accident. The school principal shall sign all accident reports and forward them to the Dean.
- (c) The school will maintain an Accident Report File for five years following the accident year.