

MEDICAL PROTOCOL

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MEDICAL PROTOCOL

Introduction

School teachers are regularly confronted with students who complain about pain, such as a headache, a stomach ache, an ear ache or pain from an insect bite, which can usually be relieved with simple remedies.

In addition, the school management team increasingly receives requests from parents or guardians to administer medication prescribed by a doctor. (From now on, for the sake of readability, we will refer to 'parents' when we also mean 'parents and guardians'.)

On occasion, teachers are requested to perform real medical procedures such as providing tube feeding, administering a suppository or giving an injection. The school management team accepts a number of responsibilities when it provides such treatment. In such cases, teachers are entering into an area in which they are not qualified.

In order to safeguard children's health, it is very important that diligence is exercised in such situations. The necessary skills are also needed. Teachers and the school management team must realise that they can be held liable for their actions when they make errors. That is the purpose of this protocol: to provide schools with a guide on what to do in these situations.

Three situations can be distinguished:

- The child becomes ill at school
- Providing medication upon request
- Performing medical procedures

In the first situation, the school and the teacher have no choice. The student becomes ill or has an accident and the teacher immediately has to decide what to do. In the second and third situations, however, the school management team can decide whether it wishes to cooperate in providing medication or performing a medical procedure. The individual teacher may refuse to perform treatment if he does not consider himself qualified.

Each situation is described on the following pages. The annexes include the consent forms and/or declaration of competence.

We advise you to use them.

1. The child becomes ill at school

It regularly happens that a child arrives at school in the morning in good health but then develops a headache, stomach ache or earache during school hours. Or the child may be bitten by an insect. The teacher then often gives a paracetamol tablet or rubs a topical cream on the site of the insect bite without parental consent or knowledge.

Generally speaking, a teacher does not have the expertise to make a proper diagnosis. The greatest possible restraint should be shown here. The basic assumption should be that a child who is ill must go home. In the event of illness, the school management team will always contact the parents to consult on what should be done (if there is someone home to receive the child, will the child be picked up or does the child have to be brought home, does the child need to go to the GP, etc.?). Medication may only be given after the parents or a doctor has been consulted, even for simple remedies.

A problem arises when the parents or other representatives designated by the parents cannot be reached. The child cannot be sent home without any supervision there. Additionally, medication cannot be given without parental consent. When in doubt, always consult a doctor. For example, a seemingly simple headache may be a sign of a more serious illness. The important thing is to keep the child under constant observation. Every situation is different, so we cannot provide an exhaustive account of every possible situation that might arise.

Some things you should watch out for include:

- increased pain
- nausea
- change in posture (e.g. cringing)
- change in skin colour (e.g. very pale or bright red)
- change in behaviour (e.g. restlessness, reduced alertness)

Remember that you are not a doctor. When in doubt, always consult a GP or specialist. Of course this also applies when the pain persists or the situation worsens.

You should treat the child with the same care you would provide if he or she were your own.

¹ Consent form for: “The child becomes ill at school”, see Annex 1
Guidelines: “What should be done in the event of an emergency”, see Annex 5

2. Providing medication upon request

Sometimes, children are prescribed medication or other remedies that must be taken several times a day, i.e. during school hours as well. These include puffs for asthma, antibiotics, or suppositories for seizures. Parents then ask the school management team whether a teacher is willing to provide these remedies. In this situation, parental permission is given. In this case, it is important to have written consent.² Usually this not only involves simple remedies but remedies that can harm the health of the child in the event of improper use. Therefore, the name of the medication, frequency, quantity to be administered and method of administration should be documented in writing. The period in which the medication should be given, method of storage and how the expiration date should be monitored should also be documented. Parents thereby clearly indicate what they expect from the school management team and the teachers. In turn, the school management team and the teachers know exactly what they must do and where their responsibilities lie.

When it comes to providing medication for a longer duration, regular consultation about the illness and the required medication use at school is needed. A good time to consult with the parents is when they bring a new supply of medication.

Some practical advice:

- Only accept medication in its original packaging and prescribed in the child's name
- Read the instruction leaflet carefully so you are aware of any side effects of the medication
- Note on a checklist every time you give the child the medication

Should a situation arise when a child does not respond well to a drug or if an error is made in administering the drug for some reason, immediately call the GP or specialist in the hospital. In a serious situation, immediately call the national emergency number 112. In all cases, make sure you have all the relevant information on hand such as: name, date of birth, address, the child's GP and/or specialist, the drug that has been administered, the reactions the child has experienced (or if any error has been made).

² Consent form for: "Providing medication upon request", see Annex 2
Guidelines: "What should be done in the event of an emergency", see Annex 5

3. Performing medical procedures

It is very important for a child with a chronic illness or a particular disability to simply go to school to the extent possible. This gives the child contact with peers and the opportunity to participate in the normal life of a school child without being constantly reminded of his or her disability or illness. Fortunately an increasing number of schools see the importance of going to school, if possible, for the psychosocial well-being of the chronically ill child.

Medical procedures

In highly exceptional cases, parents will ask the school management team and teachers to perform procedures that fall under medical treatment. This might include tube feeding or measuring blood sugar in diabetic patients by means of a finger prick. Generally speaking, these procedures are performed by the Thuiszorg [Home Care] or by the parents themselves at school. In very unusual circumstances, particularly for a situation that has existed for a longer period of time, parents may appeal to the school management team and teachers.

School boards should be aware that they are taking on certain responsibilities when a medical procedure is performed by a teacher. They do not have to be insurmountable but it is important to be aware of the potential consequences.

Clearly, parents have to give their consent for such invasive procedures. The school management team or teacher cannot take action with parental consent. Given the intensity of the procedures, the school management team must ask for parental consent in writing.

Statutory regulations

Legislative powers have a separate scheme for these medical treatments. The BIG Act (Individual Healthcare Professions Act) governs who can do what in healthcare. The BIG Act is intended for healthcare professionals and does not apply for teachers as such. However, that does not mean that this Act does not provide a number of guarantees for the proper performance of professional practice. School boards and teachers must comply with a number of rules for medical treatment specified in the BIG Act.

Certain medical treatments – the so-called reserved procedures – may only be performed by doctors. People who are not doctors can only provide medical treatment by order of a doctor. The doctor involved must ensure that the person who is not authorised is as yet competent to perform the procedures.

Liability

The same also applies when a teacher performs a medical procedure on a student. Technically speaking, teachers do not fall under the BIG Act. The BIG Act only applies to medical and paramedical professions; see page 5. However, sometimes teachers are involved in caring for a sick child, thereby making them partners in care. In such cases, teachers may be asked to perform a medical procedure on a child. This unusual position for the teacher must be taken seriously. Therefore, a teacher must receive thorough instructions on how to perform the procedure. The satisfactory performance of this procedure is documented in writing in a declaration of competence.³ In this way, optimal assurance is given to the child, parents, teacher and the school management team. It also provides clarity to the school insurer that the procedure has been handled as diligently as possible. This means that a teacher, on order from a doctor, must perform the actions for which he has been declared competent for performing the medical procedure.

It is customary within healthcare organisations for a doctor, or a representative he has designated and instructed, to provide a declaration of competence in view of potential liability.

Teachers without a declaration of competence can be sued for improper action for damage caused. In turn, the school board is responsible for what the teacher does. If the school board can present a declaration of competence from a doctor, it cannot be assumed that the school management team acted with negligence.

If the school board cannot prove that a teacher is qualified for a certain procedure, we advise not performing it. Teachers who have a declaration of competence but do not consider themselves competent – e.g. because they have not performed this procedure for quite some time – should also not perform this procedure. Teachers who are incompetent and/or do not have an order from a doctor to perform this procedure are not only civilly liable (payment of compensation), but also criminally liable (assault). As an employer, the school board in turn may also be civilly and criminally liable.

To ensure that civil liability is covered, it is advisable to contact the insurer of the school before proceeding to medical treatment. It is possible that the risks associated with this medical treatment are not insured under professional liability. This does not necessarily have to pose a problem since once it is informed, the insurer can co-insure these risks at a higher premium and under certain conditions, if necessary (e.g. a declaration of competence).

³ Consent form for: “Performing medical treatment”, see Annex 3

Declaration of competence: see Annex 4

Guidelines: “What should be done in the event of an emergency”, see Annex 5

Should an emergency arise unexpectedly as a result of a medical procedure, immediately contact the child's GP and/or specialist. In a serious situation, immediately call the national emergency number 112. Make sure you have all the child's relevant information on hand, such as: name, date of birth, address, and the child's GP and/or specialist. Also indicate the procedure performed that caused the emergency and the symptoms that are visible in the child.

Annex 1
The child becomes ill at school



CONSENT FORM

(Can also be used as an annex to the registration form from the school)

Your child may go to school in good health but during school hours become ill, or hurt himself/herself, due to an insect bite or the like. In such cases, the school always contacts the parents or guardians or another person they have designated. Occasionally, however, these people cannot be reached. If such a situation arises, the teacher will consult a doctor.

If you agree with the above, please complete this form.

The undersigned agrees with the above-mentioned policy on behalf of:

_____ (name of student)

date of birth: _____

If the information below has already been provided on the registration form, please proceed to the reverse side.

address: _____

postal code: _____ city/town: _____

Name of parent(s) / guardian(s): _____

telephone (home): _____ telephone (work): _____

name of GP: _____ telephone: _____

Person to alert if parent(s) / guardian(s) cannot be reached:

name: _____

telephone (home): _____ telephone (work): _____

Form 1 accompanying the protocol: The child becomes ill at school

Please also complete reserve side



My child is allergic/highly sensitive to the following:

- Medication:

name: _____

- Disinfectants:

name: _____

- Ointments, e.g. for insect bites:

name: _____

- Plasters:

name / type: _____

- Other:

name: _____

Space for items not listed above:

Please pass on any changes to management as soon as possible. It is very important that this information is kept up-to-date.

The undersigned:

name: _____

parent: _____ guardian: _____

date: _____ city/town: _____

Signature:

ANNEX 2
Providing medication upon request



CONSENT FORM

for administering the medication described below to:

_____ (name of student)

date of birth: _____

address: _____

postal code: _____ city/town: _____

son / daughter / pupil of:

_____ (name of parent(s) / guardian(s))

telephone (home): _____ telephone (work): _____

name of GP: _____ telephone: _____

name of specialist: _____ telephone: _____

The medication is needed for the following illness:

Name of the medication: _____

The medication should be administered daily at the following times:

_____ o'clock _____ o'clock

_____ o'clock _____ o'clock

Medication should only be administered in the following situation(s):

Form 2 accompanying the protocol: Providing medication upon request

Please also complete the reverse side



Dose of the medication: _____

Method of administration: _____

Method of storage: _____

Expiry date monitored by: _____ position: _____

The undersigned, parent / guardian of the above-mentioned student, hereby gives the school or teacher mentioned below who has had instructions on how to administer the medication, permission to administer the above-mentioned medication:

Name: _____

City/town: _____ Date: _____

Signature:

=====

MEDICATION INSTRUCTIONS

Instructions on administering medication were provided on: _____ (date)

by: _____ name: _____

position: _____

from: _____ (institution)

to: _____

position (s): _____

from: _____ (name of school + location)

ANNEX 3
Performing medical procedures



CONSENT FORM

The undersigned gives permission to perform the so-called 'medical procedure' at school on:

_____ (name of student)

date of birth: _____

address: _____

postal code: _____ city/town: _____

son / daughter / pupil of:

_____ (name parent(s) / guardian(s))

telephone (home): _____ telephone (work): _____

name of GP: _____ telephone: _____

name of specialist: _____ telephone: _____

name of contact person (in hospital or elsewhere) _____ telephone: _____

Description of the illness for which the 'medical procedure' is needed for the student at school:

Description of the 'medical procedure' to be performed:

Form 3 accompanying the protocol: Performing medical procedures

Please also complete the reverse side

ANNEX 4

Declaration of competence for performing medical procedures



DECLARATION OF COMPETENCE

for performing a so-called 'medical procedure'.

The undersigned, authorised to perform the procedure described below

declares that,

_____ (name of
employee)

position: _____

employed at / with: _____

after instructions by the undersigned, is competent to perform the above-mentioned
procedure. The procedure needs to be performed on:

name: _____

date of birth: _____

The student needs the above-mentioned procedure due to:

The procedure described above may only be performed at the times the student is at
school.

The above-mentioned procedure must be performed during the period:

The undersigned:

position: _____

employed at / with: _____

City/town: _____ Date: _____

Signature: _____

ANNEX 5

**Guidelines on what should be done in the event of
an emergency due to:**

- administering medication to a child
- performing a medical procedure

Guidelines on what should be done in the event of an emergency due to:

- administering medication to a child
 - performing a medical procedure
-
- Do not leave the child alone. Try to remain calm. Keep a close eye on the child and try to reassure him or her
 - Warn an adult (or have one of the children fetch an adult, clearly instructing the child on what he or she should tell the adult)
 - Immediately call the child's GP and/or specialist
 - In the event of a serious situation, immediately call the national emergency number 112
 - Explain how the emergency occurred: following which medication or medical procedure
 - Make sure you have all the child's relevant data on hand (or have someone immediately look them up), such as:
 - ◆ Name of the child
 - ◆ Date of birth
 - ◆ Address
 - ◆ Telephone number of parents and/or another person designated by the parents
 - ◆ Name + telephone number of the GP / specialist
 - ◆ Illness for which medication or a medical procedure is needed
 - Call the parents (in case of absence, another person designated by the parents):
 - ◆ Clearly explain what happened.
 - ◆ If known, say what the doctor has done / said.
 - ◆ In the event of hospital admission, indicate the hospital where the child was admitted.