PPS HEALTH CARE UNIT POLICY

2026-2027

Phoenix Private School, Doha – For Staff

Effective Date: August 2026

Approved By: Principal & Governing Body

Next Review Date: August 2027

1. Mission, Vision, and Values

Mission:
To develop future leaders who are able to make positive changes throughout the world. We challenge today to create a better tomorrow.
Vision:
To prepare a generation of Successful Learners, Confident Individuals, Responsible Citizens and Effective Contributors.
Values:

- Perseverance
- Honesty
- Originality
- Enrichment
- Nurturing
- Inspiration
- eXcited to learn

The School Nurse

The school nurse has a crucial role in the seamless provision of comprehensive health services to children and youth. Increasing numbers of students enter schools with chronic health conditions that require management during the school day. This policy statement describes for pediatricians the role of the school nurse in serving as a team member in providing preventive services, early identification of problems, interventions, and referrals to foster health and educational success. To optimally care for children, preparation, ongoing education, and appropriate staffing levels of school nurses are important factors for success. Recommendations are offered to facilitate the working relationship between the school nurse and the child's medical home.

School Nurse Definition

The National Association of School Nurses defines school nursing as:

A specialised practice of professional nursing that advances the well-being, academic success, and lifelong achievement of students. To that end, school nurses facilitate positive student responses to normal development; promote health and safety; intervene with actual and potential health problems; provide case management services; and actively collaborate with

others to build student and family capacity for adaptation, self-management, self-advocacy, and learning.

Roles and Responsibilities

1. The school nurse provides direct care to students. Responsibilities include assessment and treatment within the scope of professional nursing practice, communication with parents, referral to physicians, and provision or supervision of prescribed nursing care.

2. As a leader of the school health team, the school nurse must assess the student's health status, identify health problems that may create a barrier to educational progress, and develop a health care plan for management of the problems in the school setting.

3. The school nurse provides leadership for the provision of health services as the health care expert within the school, the school nurse assesses the overall system of care and develops a plan for ensuring that health needs are met. Responsibilities include development of plans for responding to emergencies and disasters and confidential communication and documentation of student health information.

4. The school nurse provides screening and referral for health conditions.

5. The school nurse promotes a healthy school environment. The school nurse provides for the physical and emotional safety of the school community.

6. The school nurse provides health education by providing health information to individual students and groups of students through health education, science, and other classes.

7. The school nurse serves in a leadership role for health policies and programs. As a health care expert the school system, the school nurse is a leader in the development and evaluation of school health policies.

SCHOOL NURSE ACTIVITIES

The following health services are the minimum that should be offered:

- Assessment of health complaints, medication administration, and care for students with special health care needs;
- A system for managing emergencies and urgent situations;
- Mandated health screening programs, verification of immunizations , and infectious disease reporting; and
- Identification and management of students' chronic health care needs that affect educational achievement.
- The Evaluate and put up the needs for the Medical Kit content requirement and other medical facility to management.
- To Ensure Proper Health Guidance has been provided to the individuals

FIRST AID ROOM

The first-aid room is the same location as the sick room.

1. Access to the first-aid room is available at all times when staff or pupils are on the premises. It has easy access to toilets and the entrance is wide enough for wheelchair and stretcher access.
2. The First Aid Room has the minimum Stock Level of Medicine for Emergency and normal usage.
3. Teacher can send the students to clinic with nurse slip.
4. All parents should submit the medical form to the nurse (if the students have any health issues).

EMERGENCY PROCEDURES FOR INJURY OR ILLNESS

IN CASE OF HEAD INJURY, MILD OR SEVERE, SUSPECTED CASES OF FRATURE OR INJURIES, CALL THE AMBULANCE IMMEDIATELY AND INFORM THE PARENTS.

If a child is taken ill during the school day, he/she will be made as comfortable as possible by the person in charge. Parents/Carers/Emergency Contacts will be informed and asked to come to collect the child. If Parents/Carers/Emergency Contacts are not available, the child will be looked after in school. If there's an emergency situation, the ambulance will be called.

Assess the situation. Be sure the situation is safe for you to approach. The following dangers will require caution: live electrical wires, gas leaks, building damage, fire or smoke, traffic, and/or violence.

- A responsible adult should stay at the scene and give help until the person designated to handle emergencies arrives.
- Send word to the person designated to handle emergencies. This person will take charge of the emergency, render any further first aid needed and call for additional resources as required.
- DO NOT give medications unless there has been prior approval by the parent or guardian.
- DO NOT move a severely injured or ill student or staff unless absolutely necessary for immediate safety. If moving is necessary, follow guidelines for "NECK AND BACK INJURIES."
- Under no circumstances should a sick or injured student be sent home without the knowledge and permission of the parent or legal guardian.
- In the presence of a life threatening emergency, call 999. The responsible school authority or a designated employee should then notify the parent or legal guardian of the emergency as soon as possible to determine the appropriate course of action.
- If the parent or legal guardian cannot be reached, notify a parent or legal guardian substitute and call either the physician or the hospital designated on the STUDENT EMERGENCY/ MEDICAL INFORMATION CARD, so they will know to expect the injured student. If necessary arrange for transportation of the injured student by Emergency Medical Services (EMS).
- A responsible individual should stay with the injured student.
- Fill out a report for all incidents requiring above procedures as required by school policy.

B. **<u>POLICY RELATING TO ILLNESS, ACCIDENTS AND FIRST AID REPORTING.</u>**

1. All staff should be aware and have read The Sick and Injured Children Procedure This is available in revised form in the medical room.

2. Qualified First Aiders are:

   Foundation: Ms. Maribeth, Ms. Marilyn

   Key Stage 1: Ms. Lanie, Mr. Michael

   Key Stage 2: Ms. Salma, Ms. Elisa, Ms. Pamela, Ms. Welma, Ms. Leny

   Key Stage 3: Mr. Hamza, Ms. Rowena, Ms. Lejaun, Mr. Benjamin, Mr. Jerickson, Ms. Ne

3. First Aid boxes are available in:
   - The First Aid Room
   - Each classes
   - Administration Office
   - Reception
   - HR Office
   - Accounts Office
   - Swimming Pool Area
   - Red Hall
   - Blue Hall
   - Library

   First Aid boxes are available in the school clinic and must be taken on school trips.

4. Should a child require First Aid, it is the responsibility of the member of staff working with that child to contact a qualified First Aider or appointed person for advice or to administer such treatment in more serious cases.

Playtime

If the accident happens during playtime, send the child to the medical room, where the school nurse will be on duty. All accidents should be recorded. An incident report must be filed by the staff on duty during the accident.

Lunchtime (Mid-day Staff)

If the accident occurs during lunchtime, the school nurse will attend to the child in the medical room or take advice from a qualified first aider (if the nurse is not available). It should be remembered that in the event of an accident occurring to one child in a group, the safety of the whole group is paramount.

5. Disposable plastic gloves should be worn, especially when dealing with nose bleeds, wounds etc. A supply of these is kept in the medical boxes.

6. Clean cold water only, applied with a Gauze to be used when dealing with cuts and grazes. Wounds containing grit should be cleaned with antiseptic Mediwipes. Plasters may be used, but children must first be asked if they are allergic to them and the list on the wall of the medical room should be checked.

7. Should injury prove serious it is essential to contact the parents of the child. In these cases, reference should always be made to the nurse as soon as possible. The class teacher should be informed.

8. Recording and Reporting Accidents and Injuries.

   Serious accidents must be notified to the Facilities Coordinator. If a child is injured due to a facilities-related accident, the Incident Form must be completed, and submitted to the pastoral coordinator.

   All injuries should be noted in the incident form.

   Where the school nurse/first aider or Principal considers that hospital treatment is required, the school should summon the emergency services for transport by ambulance. Parents/Carers will also be informed/contacted at this point.

   Please note that that they must be accompanied by an additional responsible adult to support the injured person. A member of staff should stay with the injured child until their parents/carers/guardians arrive at the hospital.

   For minor head injury, the child's class teacher must be informed of the injury so that she can monitor the child. Parents should also be informed.

9. IT IS IMPORTANT TO RETAIN A CALM AND REASSURING ATTITUDE TO CHILDREN WHO HAVE SUFFERED ACCIDENTS. Talk of hospital, stitches, X Rays etc. is not helpful.

Wherever possible, children should be attended to in the Medical Room, without other children in attendance. It is equally important to reassure other children who may be upset by the accident.

10. In the event of a child stopped breathing, the Nurse must be informed immediately.

11. **Asthmatics** - Children requiring inhalers should not be denied access, whatever the time of day. Preventative inhalers are kept in the first aid room. All inhalers are marked with the child's name. A list of asthmatics and their medication is pinned on the medicine Medical Room wall. If a child has an attack, a quiet, calm environment is essential. Keeping an upright position, sitting on a chair, leaning forward with elbows on a table or back of another chair, gentle breathing in through the nose and out of the mouth will ease the air flow.

    Asthmatics who require their inhalers before exercise should take them before beginning any sport related activity. If a child has a severe attack, the inhaler becomes more effective through a bubble tube. This may be prescribed to some children. Children should know how to use this and it is the parents'/carers' responsibility to make sure of this. Parents/Carers are informed of this.

    School nurse ***has responsibility for checking all inhalers in school are "in date". School nurse will ensure all lists are kept up to date.***

12. **<u>Anaphylaxis</u>**

    Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. All First Aiders have been trained how to use an epi-pen and pens should be available in school. Should a severe allergic reaction occur, an ambulance must always be called.

13. **<u>Prescribed Medicine in School.</u>**

    If a child needs to take any form of medication which has been prescribed by their doctor, the parents/carers must fill in a medication permission form. A register of all children requiring medicine is kept in school. Except for inhalers and medicine which is required every day, no medicine will be given to children by staff unless the doctor has prescribed medication which must be given 4 times a day. Parents/carers <u>must</u>

take responsibility for bringing the medicine to school and collecting it at the end of the day. If bringing medicine to school is unavoidable parents/carers must bring it to the office to be locked in the cupboard. Except for inhalers, medicines are not allowed in classrooms.

The School Nurse will supervise the administration of all medicine before lunch.

Non Prescribed Medicine

School nurse should NEVER give a non-prescribed medicine to a child. A child under 16 should never be given aspirin or medicine containing ibuprofen unless prescribed by a doctor.

14. **Dental Injuries.**

Injuries such as fractures or chips to second teeth which are less than 2mm should be reported to parents/carers. They should be advised to attend their own dental practitioner.

With injuries over 2mm time is all important. Contact the parent/carer and if unavailable the child should be taken to the hospital. If the child does not have a dentist, contact the local practice and ask for emergency treatment.

15. **Disposal of Clinical Waste.**

Under the new laws, clinical waste which includes swabs, bandages or tissues used to clean wounds and mop up any body fluids must be disposed of properly. One clinical waste bin is provided and is kept in the medical room. This container is emptied periodically.

16. **Children who Soil Their Clothing**

If a child has an 'accident' and soils their clothing they will be taken to the toilet. Children will be encouraged to clean themselves as much as possible. The children will be given clean underwear and clothes. Soiled clothing will be put in a plastic bag for the child to take home. Parents/carers will be notified and asked to pick the child up if the soiling was due to an upset stomach or if the child is distressed. If the

parent/carer is not contactable, the staff will ensure that the child is cleaned properly. Staff must wear gloves when handling the dirty clothes.

If a child has ongoing continence issues, a Health care plan will be written by the school nurse with the help of professionals.

The above system will also be used for children who are sick.

17. **Analysis of Accidents.**

Children's accidents will be analysed by the Facilities Coordinator monthly to ascertain if there is a pattern of types of accident or areas when safety is of concern. This report will then be given to the Principal to enable him, to make a decision if any action is required.

18. **Staff Accidents**

All staff accidents should be recorded in the incident form. For more serious accidents where a visit to the hospital is necessary an Accident at school form must be completed.