

First Aid and Emergency Medical Care

No treatment of injuries except first aid shall be permitted in the schools. First aid is immediate help given by the best qualified person at hand in case of accident or sudden illness.

Each school principal or designee shall maintain a First Aid Team including five (5) staff members with current first aid certification and two (2) members with current child/adult CPR certification. In addition, athletic coaches, as that term is defined by applicable rules of the Colorado State Board of Education, shall be certified in CPR and the use of automated external defibrillators (AEDs). A master first aid kit shall be kept and properly maintained in each school.

Any person who in good faith provides emergency care or assistance without compensation at the place of the emergency or accident shall not be liable for any civil damages for acts or omissions in good faith. State law also exempts from civil liability certain health care providers who render emergency assistance in good faith and without compensation to persons injured in a competitive sport activity.

Treatment of injuries occurring outside school jurisdiction is not the responsibility of school employees.

The school's obligation continues after the injury until the injured student has been placed in the care of the parent/guardian or emergency health personnel. Therefore, the parents/guardians of all students shall be asked to sign and submit an emergency medical authorization card which shall indicate the procedure they wish the school to follow in the event of a medical emergency involving their child.

In all cases where the nature of an illness or an injury appears serious, the parent/guardian shall be contacted if possible and the instructions on the student's emergency card followed. In extreme emergencies, where there is potential threat to life, limb or digit, school personnel shall immediately call emergency health personnel to arrange for transporting the student to an emergency facility on advice of emergency health personnel.

If a student's parent/guardian has provided the school with a written signed order not to resuscitate in the event of a medical emergency, school personnel nonetheless shall obtain emergency assistance. School personnel then shall attempt to notify the student's parent/guardian regarding the medical emergency. If staff trained in CPR are available, immediate resuscitation measures may be undertaken only by them pending the arrival of assistance. Where the parent/guardian has given written permission to release the order not to resuscitate to emergency response personnel, the order shall be provided to such personnel.

No elementary student who is ill or injured shall be sent home alone nor shall a secondary student be sent home alone unless the illness is minor and the parent/guardian has consented in advance.

Automated External Defibrillators (AEDs)

A standard, outlining the number of units per school, is defined as two units per high school and one unit per middle school. Placement of additional units will be evaluated by the district AED coordinator.

AEDs must be stored in an alarmed cabinet provided by the district. The units will be located near the main office of the building and, when applicable, near the gymnasium. Signage, provided by the district, will be located at the main entrance door and above each alarmed cabinet. AED units are to remain in the alarmed cabinets unless being used in an emergency. Units may not be transported outside of the building for outside or off-site activities unless it is for emergency use.

All donated and/or purchased units will be compatible with the school's local fire districts.

All AED units, whether donated or supplied by the district, will be maintained under the district AED maintenance program.

Pursuant to state law, school districts must accept the donation of an AED that meets standards established by the Federal Food and Drug Administration and is in compliance with the manufacturer's maintenance schedule. School districts must also accept gifts, grants and donations designated for obtaining AEDs and/or for the inspection, maintenance and training in the use of an AED. Schools receiving donated AEDs become a district asset to be distributed according to the standard set forth in this policy. Funds donated for the purpose of maintaining the units will be applied to the contracted AED maintenance program.

The superintendent or designee shall ensure that a quality assurance program is in place for donated AEDs. A written plan regarding the donation and use of AEDs including the acceptable brands and models, the appropriate sites, and the appropriate location(s) within the site, based on the American Heart Association guidelines and emergency medical response practices shall be in place and updated as needed. A quality assurance plan will also be established to monitor and evaluate training, maintenance and incident response.

All persons who are identified users will be trained in first aid, CPR and AED use, and will maintain required certifications. Annual AED refresher courses will be required for identified users in addition to required certifications.

Use of opiate antagonists in emergency situations

To the extent state funding and supplies are available, the district shall have a stock supply of opiate antagonists to assist a student, staff member, or other person on school grounds who is at risk of experiencing an opiate-related drug overdose event. For the purposes of this policy, an "opiate antagonist" means naloxone hydrochloride or any similarly acting drug that is not a controlled substance and that is approved by the federal Food and Drug Administration (FDA) for the treatment of a drug overdose. Administration of an opiate antagonist by a district employee to a student or any other person shall be in accordance with applicable state law.

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- LEGAL REFS.: C.R.S. 13-21-108 (civil immunity for persons rendering emergency assistance)
C.R.S. 13-21-108.5 (civil immunity for health care providers who assist in sports injuries)
C.R.S. 22-1-119 (no liability for adverse drug reactions/side effects)
C.R.S. 22-1-119.1 (board may adopt policy to acquire a stock supply of opiate antagonists) C.R.S. 25-53-102 (requirements concerning automated external defibrillators in schools)
C.R.S. 22-1-125.5 (athletic coaches must be certified in CPR and the use of AEDs)
C.R.S. 24-10-106.5 (public entity duty of care)
1 CCR 301-96 (State Board of Education rules for the Administration of the Instruction of Cardiopulmonary Resuscitation in Public Schools Grant Program)
6 CCR 1010-6 Chapter 9-102 (first aid certification requirement)
- CROSS REFS.: GBGAB*, First Aid Training
JLCD, Administering Medications to Students
JLIB, Student Dismissal Precautions

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