Students

Administrative Procedure – Do Not Resuscitate Orders

Due to the complexity and severity of medically fragile students enrolled in ECHO educational programs, and in acknowledging that these students present with unique needs, ECHO will consider advance directives for medical management such as Do Not Resuscitate (DNR) orders. Request to withhold specific life sustaining procedures will be made by providing a DNR order to the ECHO Licensed School Nurse. The ECHO Licensed School Nurse will notify the Executive Director, Building Program Administrator, and Program Administrator of the DNR order. Authorized orders to withhold designated emergency treatment and/or palliative care orders will be reviewed on an individual basis by the student’s IEP team.

A DNR Order is a physician’s directive that cardiopulmonary resuscitation not be used in the event of a cardiac or respiratory arrest. This can include breathing and ventilation by any assistive or mechanical means, chest compressions, defibrillation, or other related life sustaining procedures.

A. Submission of the DNR Order

1. The parent/guardian is responsible for providing an Illinois Department of Public Health (IDPH) Uniform Do Not Resuscitate Advance Directive signed by the student’s physician to the ECHO Licensed School Nurse.

2. ECHO will request that the parent/guardian provide written consent to allow ECHO personnel to confer with the authorizing physician. ECHO may not honor the DNR order if the parent/guardian fails or refuses to provide such consent.

3. The parent/guardian must provide a written statement affirming the continuance of the DNR order and all its conditions annually at the beginning of each school year.

4. ECHO may accept a DNR order that has been signed by only one parent/legal guardian and is under no obligation to seek the signature or consent of the other parent/guardian. However, if ECHO is made aware that the parents/guardians disagree with the DNR order, ECHO will not honor the DNR order unless and until a court order is provided that authorizes the DNR order or affords one parent/legal guardian with sole authority to make medical decisions for the student.

5. The DNR order will be given to the ECHO Licensed School Nurse for verification.

B. Reviewing the DNR Order and Developing a Plan

1. The ECHO Licensed School Nurse will notify the Program Administrator responsible for arranging an IEP conference with the parent/guardian and sending a notice of conference to the parent/guardian.

2. Only with the written consent of the parent/guardian, the ECHO Licensed School Nurse will attempt to contact the student’s private physician(s) prior to or during the IEP conference and request that the physician(s):
   a. Validate the DNR order.
   b. Elaborate on medical conditions which predispose the initiation of the DNR order:
      • Cardiac arrest.
      • Respiratory arrest.
      • Pre-cardiac/respiratory arrest indicators.

3. The IEP team will review all available information, including any evaluations or reports from the student’s private physician(s), to determine the appropriate actions should the student
experience respiratory or cardiac arrest at school or school-related events or during transportation to/from school or school-related events. This includes, but is not limited to:

a. Determining whether school personnel will honor the DNR order at school and school-related activities, including but not limited to, transportation;
b. If the DNR will be honored, listing specific comfort-care measures to be provided if the student experiences respiratory or cardiac arrest; and
c. Specifying a location(s) in the building where the student should be taken in the case of a respiratory or cardiac arrest.

4. The IEP team will incorporate those actions into the student’s DNR Emergency Action Care Plan. The DNR Emergency Action Care Plan will be attached to the IEP and must include the following:

a. A summary of information reviewed by the IEP team;
b. A description of the student’s needs that require the plan;
c. The list of school personnel who will implement the plan;
d. The specific steps to be taken by school personnel if the student exhibits respiratory or cardiac distress;
e. The sequential order in which those specific actions will be taken by school personnel; and
f. The expiration date of the plan and/or when the plan will be reviewed by the team.

5. The IEP team will determine who will receive copies of the planned procedures in the DNR Emergency Action Care Plan. Appropriate individuals may include the building Program Administrator, program administrator, the student’s teacher and other personnel who work with the student, transportation personnel, and local EMS.

6. If the IEP team has determined that the DNR order will be honored, the parent/guardian will be advised that anyone who is not directly informed about the DNR order, or is unaware of its meaning, will initiate cardiopulmonary resuscitation.

C. Implementing the IEP/DNR Emergency Action Care Plan

1. The ECHO Licensed School Nurse will distribute the planned procedures in the DNR Emergency Action Care Plan to the individuals designated by the IEP team.

2. The ECHO Licensed School Nurse is responsible for ensuring that all individuals designated by the IEP team are instructed to follow and be trained on the planned procedures.

3. A copy of the planned procedures in the DNR Emergency Action Care Plan will be placed in the student’s health file and student’s backpack.

D. Procedures for School Death

The following procedures will be implemented if a student is not resuscitated at school or school-related events according to his/her DNR Emergency Action Care Plan:

1. Contact local EMS if not already at the school.
2. Notify the Building Program Administrator, Program Administrator and Executive Director.
3. Contact the parent/guardian and other persons as designated on the student’s IEP/DNR Emergency Action Care Plan, if any. Request the parent/guardian and other designated persons report to a specific location.
4. Seclude the student in the nursing office or designated room. Ensure privacy and support when the parent/guardian arrives.
5. EMS and local law enforcement agency will transport the student to the local hospital.
6. Secure the assistance of the school crisis team as soon as possible.

E. Discontinuation or Revocation of a DNR Order

1. If a DNR order is rescinded, the parent/guardian must inform the ECHO Licensed School Nurse in writing.

2. The DNR order may be revoked at any time by the parent/guardian by:
   a. Informing the ECHO Licensed School Nurse in writing; or
   b. An oral statement made directly to the ECHO Licensed School Nurse or other trained school personnel to initiate resuscitation during an emergency situation.

3. The ECHO Licensed School Nurse will be responsible for informing appropriate school personnel that the DNR order has been discontinued or revoked by the parent/guardian.

4. The ECHO Licensed School Nurse will contact the Program Administrator to convene an IEP conference or complete a written amendment to modify the student’s IEP and DNR Emergency Action Care Plan to reflect the discontinuation or revocation of the DNR order.

DNR EMERGENCY ACTION CARE PLAN

Student Name__________________________________________ Date ________________________

Student Date of Birth______________________________

[ ] A copy of the original IDPH Do Not Resuscitate Advance Directive is attached.
[ ] Student is enrolled in hospice/palliative care services.

A. Summary of Information reviewed by the IEP team:
_________________________________________________________________________________
_________________________________________________________________________________

B. A description of the student’s needs that require this plan:
_________________________________________________________________________________
_________________________________________________________________________________

C. School personnel who will implement this plan:
_________________________________________________________________________________
_________________________________________________________________________________

D. The specific steps in sequential order to be taken by school personnel if the student exhibits respiratory or cardiac distress:
1.______________________________________________________
2.______________________________________________________
3.______________________________________________________
4.______________________________________________________
5.______________________________________________________

E. Cardiopulmonary Resuscitation (CPR) [ ] WILL [ ] WILL NOT be initiated by school personnel.

F. Expiration date of the plan: _________________________

G. Date the plan will be reviewed by the IEP team (prior to the start of the following school year): ______________________
H. School staff to be informed of this plan:

- ECHO Licensed School Nurse
- Program Administrator
- Classroom teacher(s)
- Physical therapist(s)
- Classroom aide(s)
- Lunch supervisor(s)
- Bus/transportation aide
- Building Program Administrator
- School district representative:
- Occupational therapist(s)
- Speech and language pathologist(s)
- Individual aide(s)
- Bus/transportation driver
- Other: ______________________

I. Identify training to be provided to the identified school staff (if no training is needed, state “None”):

____________________________________________________________________________
____________________________________________________________________________

J. Contact the following persons in the order listed for emergencies:

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship</th>
<th>Telephone</th>
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Parent Signature: ____________________________ Date: __________________

Reviewed by (ECHO Licensed School Nurse): __________________ Date: __________________

To be signed by parent:
I authorize this procedure to be shared with ECHO personnel, building nursing services, transportation services, and the local EMS

Parent Signature: ____________________________ Date: __________________
BUS TRANSPORTATION EMERGENCY PROTOCOL

In the event of any emergency, Bus Transportation will follow the protocol listed below. Note: this protocol does not apply to a student who is an Epi-Pen carrier.

BUS TRANSPORTATION DRIVERS/AIDES CANNOT TOUCH STUDENT OR PERFORM MEDICAL TREATMENT/LIFE SAVING TECHNIQUES.

Upon notification of an emergency:

Driver will notify Bus Transportation Base via 2-way radio of emergency, and pull over to safest area.

(Side of road/parking lot).

Bus Transportation base will contact 9-1-1 and advise of such emergency and driver location.

(Base will also pull up driver’s location on GPS)

Bus Transportation base will make contact with ECHO to advise them of emergency.

ECHO will contact District Coordinator/ECHO Coordinator/School/Executive Director.

ECHO will contact the student’s parent/guardian or other individuals provided on the student’s emergency contact card.

Driver will remain with student(s) and update Bus Transportation base with any changes.

Driver will notify Bus Transportation base when police/paramedics arrive.

If student has a DNR order on file, driver will provide the DNR order to police/paramedics.

Bus Transportation base will contact parents/school of students on the bus to notify them that there will be a delay in pickup or drop off.

Bus Transportation driver will complete an incident report and send into ECHO.

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>DOB:</th>
<th>Home District:</th>
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<tbody>
<tr>
<td>Medical Condition:</td>
<td></td>
<td></td>
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<tr>
<td>Signs to look for that indicate a medical emergency is to occur:</td>
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<tr>
<td>Measures to take to provide comfort/safe area for student:</td>
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<tr>
<td>Allergies:</td>
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<tr>
<td>DNR:</td>
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<tr>
<td>Yes ☐ No ☐ If yes, see attached DNR Emergency Action Care Plan.</td>
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<td>Program Administrator:</td>
<td>Date:</td>
<td></td>
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<td>Additional signatures:</td>
<td>Date:</td>
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ADOPTED: January 12, 2016