

# Region IX EMS Plan

## SCHOOL BUS INCIDENT

Approved: 6/4/99  
Rev. 3/9/10

Effective Date: 3/9/10

Supersedes: 6/4/99

Page No. 1 of 2

### I. PURPOSE

- A. This policy governs the handling of school bus accidents/incidents involving the presence of minors. It is meant to be implemented by EMS personnel in conjunction with System's policies including mass casualties. The goal of this policy is to eliminate the transport of uninjured children/students to the hospital and to reduce EMS scene time and utilization of resources.
- B. Each ambulance service provider within the System is required to design and implement a procedure for discharging uninjured children/students to their parents/legal guardians or to local school officials. Such procedures will facilitate transferring custody of uninjured children/students to the parents/legal guardians or school officials consistent with System and Regional policies. It is recommended that these policies be developed in coordination with school officials and provider's legal counsel.

### II. PROCEDURE

- A. Determine the category of the accident/incident
  - 1. **Category I bus accident/incident** - significant injuries present in one or more children/students or there is a documented mechanism of injury that could reasonably be expected to cause significant injuries.
  - 2. **Category II bus accident/incident** - minor injuries only, present in one or more children/students and no documented mechanism of injury that could reasonably be expected to cause significant injuries. Uninjured children/students also present.
  - 3. **Category III bus accident/incident** - no injuries present in any children/students and no significant mechanism of injury present.
- B. Determine if implementation of this policy is appropriate. *Implement this policy if the accident/incident is a Category II or III bus accident/incident. Do not implement this policy if the accident/incident is a Category I accident/incident* - follow multiple patient incidents and mass casualty incidents/disaster policies for all Category I bus accidents/incidents, and transport all children/students to the hospital.
- C. Contact medical control, advise of the existence of a Category II or III bus accident/ incident and determine if a scene discharge of uninjured children/students by the emergency department physician in charge of the call is appropriate.
- D. Injured children/students by exam and/or complaint are treated and transported as deemed necessary and appropriate by EMS personnel or at the request of the child/student.
- E. Implement provider procedures for contacting school officials or parents/legal guardians to receive custody of the uninjured children/students consistent with Region IX policy. Procedure may include option of ambulance service provider escorting bus, if operable, back to school of origin or other appropriate destination.
- F. Medical Control, after consulting with scene personnel, will discharge the uninjured children/students to the custody of the ambulance service provider who then will transfer the custody of the children/students, consistent with appropriate department and regional policies and procedures, to parents/legal guardians or school officials.
- G. Authorized school representatives will sign the log sheet indicating acceptance of responsibility for the children/students after medical clearance by the EMS personnel finding **NO** evidence of injury. The school representative will then follow their own policies to include informing the parent(s)/legal guardians as regards the accident/incident.

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**Page No.** 2 of 2

- H. Any child/student having reached the age of 18 or older and any adult non-student present on the bus will initial the log sheet adjacent to their name and address when in agreement that they have suffered no injury and are not requesting medical care and/or transport to the hospital.
- I. Complete one Prehospital Care Report Form in addition to the School Bus Incident Form.
- J. This policy addresses discharge disposition of uninjured children/students only. Thus, no release/AMA signatures are necessary. An isolated abrasion/superficial wound can be regarded as uninjured should the EMS personnel, medical control, and the child/student all concur.
- K. This policy is also applicable for school/student incidents not involving a bus if deemed appropriate by the responding EMS Agency and evaluated and executed in a like manner.

Attachment: School Bus Incident Log

**Region IX EMS Plan**  
**SCHOOL BUS INCIDENT Log**

All individuals on the bus age 18 and older should initial in the indicated space adjacent to their name when uninjured. Parent/legal guardian should initial in the indicated space adjacent to their child's name when uninjured. Initials indicate agreement that no injury has been suffered and no transportation is required to the hospital.

<b>Date:</b>	<b>Location:</b>	<b>District name:</b>	<b>Bus number:</b>
<b>Time of incident:</b>			

<b>Run report #:</b>	<b>Dept. alarm #:</b>	<b>Total # of persons:</b>	<b># transported:</b>	<b># not transported:</b>

<b>Adult name (Non-student)</b>	<b>Function</b>	<b>Address and Telephone</b>	<b>Initials</b>
	<b>Driver</b>		

<b>Child/student name</b>	<b>Age</b>	<b>Address and Telephone</b>	<b>Initials if age ≥ 18 or parent/guardian</b>

The children/students listed above have been determined to be uninjured. Medical control has been contacted and approved release to the custody of school officials (or parent/legal guardian) or to self if age 18 or older.

\_\_\_\_\_  
 Name of (EMS) Ambulance Service Provider

\_\_\_\_\_  
 Name of School authorized representative

Signature

Date

Signature

Date

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<b>Adult name (Non-student)</b>	<b>Function</b>	<b>Address and Telephone</b>	<b>Initials</b>
	<b>Driver</b>		

<b>Child/student name</b>	<b>Age</b>	<b>Address and Telephone</b>	<b>Initials if age ≥ 18 or parent/guardian</b>

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\_\_\_\_\_  
 Name of (EMS) Ambulance Service Provider

\_\_\_\_\_  
 Name of School authorized representative

\_\_\_\_\_  
 Signature

Date

\_\_\_\_\_  
 Signature

Date

School District Representative

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<b>Child/student name</b>	<b>Age</b>	<b>Address and Telephone</b>	<b>Initials if age ≥ 18 or parent/guardian</b>

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 Name of (EMS) Ambulance Service Provider

\_\_\_\_\_  
 Name of School authorized representative

\_\_\_\_\_  
 Signature

Date

\_\_\_\_\_  
 Signature

Date







# Notice of Emergency Medical Services Response to a Minor

DATE:

FROM: (Chief or President of Provider Agency)  
(Provider Agency)  
(Address)  
(Phone number to contact)

CHILD's NAME:

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Members of our Emergency Medical Services agency were called to evaluate your son/daughter/ward today as a result of a bus collision/incident.

After responding to the above incident, we evaluated the child. Based on our assessment and statements made by the child, it was determined that he or she did not require emergency care and/or transportation to an emergency department at that time.

Whereas your child is a minor, it is our duty to inform you of this incident so that an informed decision can be made as to whether follow-up evaluation with a physician is desired.

The child was released to a designated school representative who accepted further responsibility for him or her.

**If you wish additional information, please contact our agency at the above phone number.**