

**REGION I EMERGENCY MEDICAL SERVICES  
STANDING MEDICAL ORDERS  
EMT – Basic, EMT-Intermediate, EMT-Paramedic**

**SMO: School Bus Accident Response/ Alternative Transport Vehicle**

**Overview:** This policy was developed to assist in responding to handling of school bus incidents involving the presence of minors. It is the intent that this policy be implemented by Region 1 Providers, in conjunction with Region 1 policies governing Multiple Victim Incident. The goal of this policy is to maximize resources by reducing the number of confirmed uninjured children transported to the hospital.

This policy only applies to EMS Systems that have a pre-arranged agreement with their school board. If there is no pre-arranged agreement, the Provider must transport all patients.

**INFORMATION NEEDED**

It is recommended that each EMS provider within Region 1 will implement and develop a procedure for releasing uninjured children to a parent, legal guardian, or local school official who is willing and approved to take custody of the children.

- These procedures should be reviewed and accepted by Local EMS and School Officials.
- Once Medical Control confirms that minors are not injured, the custody and responsibility for these uninjured children will remain with the responding EMS provider until the children are transferred to parents, legal guardian, school officials or the hospital as outlined in their individual agency procedures.
- If no procedure exists, then the children would need to be transported to the hospital(s) designated by medical control.

**OBJECTIVE FINDINGS**

- mechanism of injury
- number of patients
- damage to school transport vehicle
- potential for more help needed

Once these objective findings have been determined, the patients may be assigned to one of the following levels:

**Level 1 Bus Incident:**

Significant injuries present in one or more children, or the existence of an obvious mechanism of injury that can be reasonably expected to cause significant injuries.

**Level 2 Bus Incident:**

Minor injuries present in one or more children with no obvious existence of a mechanism of injury that could reasonably be expected to cause significant injuries.

**Level 3 Bus Incident:**

No injuries present in any children and no mechanism that could be reasonably expected to cause injuries.

**Level 4 Bus Incident:**

If the patients have special healthcare needs and / or have communication difficulties, EMS must contact Medical Control for further directions.

\_\_\_ Once the Level has been determined, approval to implement this policy must be obtained from Medical Control. All children in a level 1 incident will be transported to hospital(s). All level 4 children will be transported per direction of Medical Control. Each provider should follow the Region 1 Multiple Victim Incident Procedure as applicable.

- If Medical Control approves implementation of this policy for a level 2 or 3 incident, an appropriate release of service form will be utilized for the children who will not be transported.
- The provider agency will then transfer the custody of the minor consistent with the Treatment of a Minor policy, to the parents, legal guardians or school officials.
- The school officials will follow their established procedure for informing parents and /or legal guardians of the crash / accident / incident.

\_\_\_ Once the decision to implement the uninjured children procedure is approved by Medical Control, it is the responsibility of the Local School Official with assistance from EMS to direct and confirm that the children are returned to their parents, legal guardians. EMS will complete all appropriate reports and release of services forms.

**Documentation of adherence to protocol:**

- \_\_\_ All contacts/ discussions with Medical Control
- \_\_\_ Criteria that designates patient as a Level 1, 2, 3, 4.
- \_\_\_ To whom care of child released (school official, parent, etc.)
- \_\_\_ Care rendered to minor patient

### Medical Control Contact Criteria

Contact Medical Control if any question exists as to the best option for the patient.  
\_\_\_ Approval to implement this policy must be obtained from Medical Control.

### PRECAUTIONS AND COMMENTS

- If EMS Personnel on the scene feel that any child should be offered medical care, need evaluation by a physician or confirmation of custody or responsibility cannot be verified, then the child should be transported to the hospital(s) designated by Medical Control.
- This policy and procedure only governs the disposition of *uninjured* children. Per Medical Control, all uninjured children will be discharged to the custody of the appropriate person as outlined in the agency procedure. It is required for the EMS Provider to list the names of the uninjured children with the description of the incident on the System approved patient care run report as well as complete an appropriate release of service form. These reports / forms must then be forwarded to the EMS System Office.
- All such incidents will be reviewed by the EMS System Medical Director, EMS System Coordinator, the EMS CQI Council and the provider agency or agencies involved for each implementation of this procedure.

**Region One Pre-Hospital School Bus Accident Response  
RELEASE OF SERVICE FORM**

Type of incident: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Location of incident: \_\_\_\_\_

Level of incident: \_\_\_\_ 2 minor injuries with no obvious mechanism of injury that could reasonably be expected to cause significant injuries  
\_\_\_\_ 3 no injuries present and no mechanism of injury that could be reasonably expected to cause injuries

Time of call \_\_\_\_ Arrival at scene \_\_\_\_ MC contact \_\_\_\_ Call completed \_\_\_\_

Medical control: Policy implementation approval per \_\_\_\_\_

**RELEASE FROM RISKS OF MEDICAL RESPONSIBILITY**

I, \_\_\_\_\_ hereby release the Hospital, EMS System and its physicians, nurses, and employees and the EMS agency and its' EMTs of any responsibility and liability for the worsening of medical condition of multiple victims involved in this incident. I acknowledge that I have been informed of the risks and I voluntarily assume all responsibility on the behalf of the school board in making this decision. I acknowledge that all refusals carry the inherent risks of deterioration of medical condition or death but am accepting custody, release and risk responsibility of the minor victims involved in this incident as per pre-arranged Region 1 SMO and School Board agreement.

\_\_\_\_\_  
Signature of authorized school designee Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of witness  
NAME DOB

\_\_\_\_\_  
Printed name of witness  
NAME DOB

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Signature of EMS crew leader

\_\_\_\_\_  
Signature of Incident Command

March 8, 2007

To Whom It May Concern:

We have enclosed a copy of the Illinois Region I EMS Standing Medical Orders for response in case of a school bus accident. This policy is the same for any ambulance provider and any school district within Region I.

The intention is to have a standard response to a school bus accident within your school district or any other area of Region I. It should clarify both the responder and the School District's role.

We are also sending you a form that should be filled out and returned, agreeing to the enclosed policy. In this way all Region I school districts and ambulance providers will be held accountable to the same standards and procedures.

Sincerely,

\_\_\_\_\_ EMS System  
\_\_\_\_\_  
\_\_\_\_\_

# Region One Prehospital School Bus Accident Response School District Agreement Form

\_\_\_\_\_ School District #

\_\_\_\_\_ agrees \_\_\_\_\_ does not agree to the Region One Prehospital School Bus Accident Response for any ambulance provider within Region I of the State of Illinois.

This covers the responsibility for and transport of students in the case of a bus incident resulting in injuries or resulting in no injuries as outlined in the Emergency Medical Services Standing Medical Order.

\_\_\_\_\_  
Signature and Title of School District Representative

\_\_\_\_\_  
Date

Please return completed form to:

\_\_\_\_\_ EMS System

\_\_\_\_\_  
\_\_\_\_\_