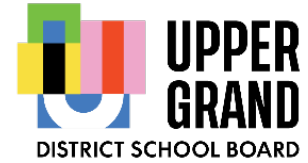


Students with Life-Threatening Medical Conditions Procedures Manual 518-A



Category:	Students
Administered by:	Appropriate Superintendent
First Adopted:	June 2018
Revision History:	
Next Review:	2022-2023 School Year or as required

1. General

It is the belief of the Upper Grand District School Board (UGDSB) that all students are entitled to a safe, healthy and inclusive learning environment in our schools. The UGDSB will support students with asthma, diabetes, epilepsy/seizure disorder, life-threatening allergies and other serious health conditions in managing their medical condition, and enable them to participate in school to their full potential.

These procedures are designed to ensure compliance with the relevant legislation while establishing consistent practices to respond to medical emergencies related to life-threatening medical conditions.

2. Definitions

Allergen

An allergen is a substance capable of causing an allergic reaction. Upon first exposure, the immune system treats the allergen as something to be rejected and not tolerated. This process is called sensitization. Re-exposure to the same allergen in the now-sensitized individual may result in an allergic reaction which, in its most severe form, is called anaphylaxis.

Anaphylaxis

Anaphylaxis is a serious allergic reaction that is rapid in onset and may cause death.

Asthma

Asthma is a very common chronic (long-term) lung disease that can make it hard to breathe. People with asthma have sensitive airways that when triggered can tighten up, become swollen, produce extra mucus, make it hard to breathe, and may cause death.

Diabetes

Diabetes is a chronic disease that occurs when the body is either unable to sufficiently produce or properly use insulin. Insulin is a hormone that helps the body control the level of glucose (sugar) in the blood. Uncontrolled diabetes can cause damage to blood vessels, nerves and organs, resulting in serious complications, including death.

Epilepsy

Epilepsy results from sudden bursts of hyperactivity in the brain. This hyperactivity causes seizures which vary in form, strength and frequency, depending on where in the brain abnormal activity is found, and may result in death.

Health Care Provider

For the purpose of this policy, a health care provider may be a physician, nurse practitioner, registered nurse, pharmacist, respiratory therapist, certified respiratory educator, or certified asthma educator.

Medication

For the purpose of this policy, medication refers to substances that are prescribed by a health care provider and, by necessity, may be administered to a student, or taken by the student during school hours or school related activities. Examples of medications prescribed to students with life-threatening medical conditions include an epinephrine auto-injector (EpiPen®), a reliever inhaler, and glucagon.

Plan of Care

Students with life-threatening medical conditions, such as asthma, diabetes, epilepsy/seizure disorder, severe allergies that may lead to anaphylaxis, or other serious health condition, who require support for their medical needs while at school, during school based activities, and/or while using school transportation services, require the development of an individualized Plan of Care.

3. Plans of Care

A Plan of Care shall be developed for every student with a life-threatening medical condition. The Plan of Care shall include:

- 3.1 identification of symptoms (emergency and other) and response
- 3.2 emergency contact information for the student

- 3.3 information on daily or routine management accommodation needs of the student (e.g., space, access to food)
- 3.4 identification of routine or daily management activities that will be performed by the student, parent(s)/guardian(s), staff or an individual authorized by the parent(s)/guardian(s)
- 3.5 details related to the storage and disposal of the student's prescribed medication(s) and medical supplies
- 3.6 a copy of any notes or instructions from the student's health care provider, where applicable
- 3.7 preventative strategies to be undertaken by the school to reduce the risk of medical incidents and exposure to triggers or causative agents in classrooms and common school areas
- 3.8 identification of school staff and others who will have access to the Plan of Care
- 3.9 information on how to support or accommodate the student to enable participation to their full potential in all school and school board activities (e.g., field trips, overnight excursions, board-sponsored sporting events)
- 3.10 requirements for communication between the parent(s)/guardian(s) and the principal and/or school staff, as appropriate, including format and frequency
- 3.11 parental consent to share information on signs and symptoms with school staff, other students, and other school community members as identified

A Plan of Care form for each medical condition is available in Appendix A – E The Annual Renewal form, which is to be used when there is no change to the Plan of Care upon review at the start of the school year, is available in Appendix F.

4. The Role and Responsibilities of Parent(s)/Guardian(s)

As primary caregivers, parent(s)/guardian(s) are expected to be active participants in supporting the management of their child's medical condition(s) while the child is in school. At a minimum, parents/guardians should:

- 4.1 educate their child about their medical condition(s) with support from their

- child's health care provider, as needed
- 4.2 guide and encourage their child to reach their full potential for self-management and self-advocacy
 - 4.3 inform the school principal and teacher(s) of their child's medical condition(s) within the first 30 days of the school year or as soon as possible during the school year, and help to create the student's Plan of Care
 - 4.4 review the Plan of Care and communicate any changes to the principal:
 - 4.4.1 at minimum, annually, during the first 30 days of each school year
 - 4.4.1.1 When there is no change to the Plan of Care, the Annual Renewal form (518-6) should be used (see Appendix F).
 - 4.4.2 immediately when there are changes to their child's medical condition(s)
 - 4.4.3 immediately when there are changes to their child's ability to manage the medical condition(s)
 - 4.5 supply their child and/or school with sufficient quantities of medication and supplies (e.g., testing strips, glucose tablets, etc.) in their original, clearly labelled containers, as directed by a health care provider and as outlined in the Plan of Care, and track the expiration dates
 - 4.6 ensure emergency contact numbers are kept current
 - 4.7 if possible, provide their child with Medicalert® jewellery to identify the medical condition (see No Child Without® program for students between the ages of 4 and 14)

5. The Role and Responsibilities of the Student

Depending on their capacity for self-management, students are expected to actively support the development and implementation of their Plan of Care. Students should:

- 5.1 take responsibility for advocating for their personal safety and well-being
- 5.2 participate in the development of their Plan of Care

- 5.3 participate in meetings to review their Plan of Care
- 5.4 carry out daily or routine self-management of their medical condition to their full potential, as described in their Plan of Care
 - 5.4.1 carry medication and medical supplies
 - 5.4.2 if capable, self-administer medication when needed
 - 5.4.3 follow school's direction on disposal of medication and medical supplies
- 5.5 self-identify as a student with a life-threatening medical condition to occasional personnel associated with the school (i.e., occasional teachers, educational assistants, co-op student, parent volunteer, or board-approved transportation driver) in instances where there is potential for an adverse medical reaction (e.g., presence of triggers or causative agents, strenuous physical exercise)
- 5.6 ensure that teachers, principals and friends know where to find their medication that they carry with them, in the event they have difficulty getting to the medication
- 5.7 set goals on an ongoing basis for self-management of their medical condition in conjunction with their parent(s)/guardian(s) and health care provider(s)
- 5.8 communicate with their parent(s)/guardian(s) and school staff if they are facing challenges related to their medical condition(s) at school
- 5.9 wear medical alert identification that they and/or their parent(s)/guardian(s) deem appropriate
- 5.10 if possible, inform school staff and/or their peers if a medical incident or a medical emergency occurs

6. The Role and Responsibilities of the Principal

To support students with a life-threatening medical condition, the principal or designate will:

- 6.1 clearly communicate to parent(s)/guardian(s) and students about the need to inform the school about any life-threatening medical condition the

- student has as soon as possible, and the expectation for parent(s)/guardian(s) or adult student to develop a Plan of Care specific to the student's condition and their needs
- 6.2 work with parent(s)/guardian(s) and the student, if appropriate, to develop a Plan of Care
 - 6.2.1 The Plan of Care will be reviewed annually or at any time that there are changes to the status of the student's medical condition, management of their condition and/or needs, or their learning environment (e.g., CELP Program, change in courses, etc.).
 - 6.3 communicate with parent(s)/guardian(s) in medical emergencies, as outlined in the Plan of Care
 - 6.4 designate a secure, accessible and appropriate place to store emergency medication and supplies
 - 6.5 communicate proper disposal of medication and medical supplies with all staff, and students who have a Plan of Care, and provide necessary disposal supplies (e.g., sharps kit)
 - 6.6 maintain a file with the Plan of Care and supporting documentation for each student with a life-threatening medical condition
 - 6.7 encourage the identification of staff that can support the daily or routine management needs of students in the school with life-threatening medical conditions, while honouring the provisions within their collective agreements
 - 6.8 provide relevant information from the student's Plan of Care (e.g., signs and symptoms of a medical incident and emergency, triggers or causative agents related to life-threatening medical conditions) to school staff and others who are identified in the Plan of Care and authorized by the student's parent(s)/guardian(s) and principal (e.g., other students, food service providers, transportation providers, volunteers, occasional staff who will be in direct contact with the student)
 - 6.8.1 The Plan of Care, or an abbreviated version thereof, may be posted in designated locations within the school for emergency access by designated persons.

- 6.9 ensure that all staff and others who are in direct contact with students who have a life-threatening medical condition, and who have been authorized by parent(s)/guardian(s), have access to the Plan of Care and receive sufficient training and resources, at minimum annually
- 6.10 develop and implement strategies to reduce the risk of student exposure to triggers or causative agents in classrooms, common school areas, and extra-curricular activities, in accordance with students' Plans of Care
- 6.11 communicate with the school council regarding management strategies for students with a life-threatening medical condition as they relate to all school activities
- 6.12 provide a copy of the Plan of Care for any students who are transported to and from school on the bus, to Wellington-Dufferin Student Transportation Services
- 6.13 ensure staff going on field trips and off-site activities carry a copy of the Plan of Care for any student with a life-threatening medical condition who will be on the trip
- 6.14 communicate to the school community that bullying of students regarding medical conditions will not be tolerated

7. The Role and Responsibilities of School Staff

School staff have the responsibility to:

- 7.1 review and follow the Plan of Care for each student who has a life-threatening medical condition with whom they have direct contact
- 7.2 participate in regular training, at minimum annually, on dealing with students with a life-threatening medical condition
- 7.3 support students with a life-threatening medical condition by allowing them to perform daily or routine management activities in a school location (e.g., classroom), as outlined in their Plan of Care, while being aware of confidentiality and the dignity of the student
- 7.4 be aware that students with a life-threatening medical condition are able to responsibly choose, without penalty, not to participate in an activity that may pose a risk to themselves based on their medical condition

- 7.5 respond to medical incidents and medical emergencies as needed
- 7.6 follow direction from the principal for the dissemination of information on a life-threatening medical condition (e.g., signs and symptoms of a medical incident and emergency, triggers or causative agents) to other parent(s)/guardian(s), students and staff members, and any others who are in direct contact with students who have a life-threatening medical condition
- 7.7 take precautions choosing classroom materials and planning classroom activities, field trips, off-site excursions or special events to minimize risks to students with a life-threatening medical condition (i.e., avoid student exposure to triggers or causative agents related to the medical condition)
- 7.8 take reasonable steps to accommodate students with a life-threatening medical condition on an individual basis at all school related activities

8. The Role and Responsibilities of the School Council

School council has a responsibility to be aware of and comply with this policy to ensure the safety of all children, and consider implications for fundraising or other events in the school.

9. Training and Resource Materials on Life-Threatening Medical Conditions

The UGDSB is committed to raising awareness of the life-threatening medical conditions of some of our students.

- 9.1 The board will make accessible to all staff a list of resources that provide information on various aspects of asthma, life-threatening allergies and anaphylaxis, diabetes, epilepsy/seizure disorder, and other serious medical conditions, including triggers or causative agents, and signs and symptoms of medical incidents and medical emergencies. Efforts will also be made to provide similar information to service providers working around students, such as food service and transportation providers.
- 9.2 The board is committed to training about life-threatening medical conditions, at a minimum annually, for school staff and others, including occasional staff, who have direct contact with affected students.

- 9.2.1 Training shall occur within the first thirty (30) days of school, where possible, to ensure the safety and well-being of all students, and should be reviewed as appropriate.

10. Liability

The following excerpts from Ontario legislation protect individuals from liability with respect to voluntary emergency medical or first-aid services.

10.1 Good Samaritan Act

“2. (1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person’s negligence in acting or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.”

“(2) Subsection (1) applies to,
...(b) an individual...who provides emergency first-aid assistance to a person who is ill, injured or unconscious as a result of an accident or other emergency, the individual provides the assistance at the immediate scene of the accident or emergency.”

10.2 Sabrina’s Law

Subsection 3(4)

“No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee’s gross negligence.”

10.3 Ryan’s Law

Subsection 4(4)

“No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act.”