

Administrative Procedure 316 - Ongoing Student Health Support

Background

The responsibility for the health, medical treatment and personal care of students ultimately rests with the parent or independent student. It is appropriate, however, in certain circumstances for staff to assist parents in the provision of medical and/or personal care to students. To ensure their safety and well-being, these procedures govern the recording of health information, and the safe administration of medication and personal care.

Definitions

Over-the-Counter Medications: Medicines sold directly to a consumer without the necessity of a prescription from a healthcare professional.

Personal Care: Any activities, such as toileting, tube feeding, suctioning, catheter care, etc, which are required to ensure the safety and / or well being of an individual.

PowerSchool: The Division's student information system.

PRN Medications (pro re nata): Medications administered on a "when required" basis following the written instructions of a healthcare professional.

School-related Activities: Events occurring when school is in session, or during school-sponsored programs or activities.

Self-administer: Occurs in the instance when a student assumes sole responsibility for independently carrying and taking medication.

Significant Health Concerns: Serious or life-threatening health conditions including, but not limited to, severe allergies, anaphylaxis, diabetes, and epilepsy.

Universal Precautions: Standard sets of procedures designed to prevent transmission of blood-borne diseases such as hepatitis B virus, including use of personal protective equipment. Universal precautions consider all blood and body fluids as potentially infectious.

Procedures

1. Reporting Medical Information
 - 1.1. For students new to a school, parents are asked to report any pertinent medical information on the Division Student Registration Form (either paper or electronic version).

- 1.2. For returning students, parents are requested to update medical information on the Annual Registration Update Form (paper or electronic version) at the start of each school year.
 - 1.3. Parents may provide verbal or written updates during the school year. In those instances, principals shall record that information in PowerSchool.
2. Reviewing, Recording and Communicating Medical Information
 - 2.1. The Principal shall review all medical information provided by parents at the start of the school year. If appropriate, as determined by the Principal, and to ensure staff have a complete understanding of the student's needs, the Principal shall arrange follow-up meetings with parents and appropriate staff, and complete relevant health plans.
 - 2.2. Given that not all medical information in PowerSchool is available to teachers, the Principal shall provide class reports to each teacher which summarize the medical information of their students at the beginning of the school year and/or semester.
 - 2.3. Medical information received from parents via paper copy shall be recorded in PowerSchool under the Emergency/Medical page.
 - 2.3.1. "Special Medical Considerations" - General medical information received from parents shall be recorded in this field.
 - 2.3.2. "Allergies" - Allergies shall be recorded in this field.
 - 2.3.3. "Medical Alert Text" - If the medical information requires either the dispensing of regular or PRN medication, or the student has a significant health concern, this field must be populated with the relevant diagnosis and critical information. Eg. *Anaphylactic allergy to nuts; student has Epipen on person.* The population of this field signals that more detailed forms have been completed, and are available in the office. As well, the population of this field signals a medical alert to the student's teacher(s). This field shall be completed / updated after meeting with parents.
 - 2.4. The Principal shall provide training for all staff who may be involved with the student, including but not limited to: bus drivers, field trip supervisors, coaches, lunch supervisors, etc.
 - 2.5. Staff will respect the confidentiality of a student's medical information.
 3. Ongoing Support Protocols
 - 3.1. Requests to provide a student with ongoing medical support while at school and during school-related activities, shall be made in writing by the parent using the Parental Request for Ongoing Student Health Support Form (*Form 316-1*) to the Principal.

- 3.2. The Principal, in consultation with other Division staff as applicable, shall make the decision with respect to this request based on the following criteria:
 - 3.2.1. The service requested is of such a straightforward nature that a layperson, (e.g. teacher, teacher assistant), could successfully perform the function.
 - 3.2.2. The service is critical to the well-being and functioning of the student.
 - 3.2.3. The Principal deems that appropriate resources are available, and the services will not be disruptive to the educational program.
- 3.3. Once the Principal agrees to the request, the Student Health Support Plan (*Form 316-2*), or, in the case of a life threatening allergy, the Student Anaphylaxis Support Plan (*Form 316-3*) shall be completed and kept on file.
- 3.4. For either prescribed or over-the-counter medications, the Child/Student Medication Record (*Form 316-4*) shall be completed.
- 3.5. The above forms shall be modified as parents provide updated health information.
4. Medication Protocols
 - 4.1. Routines to ensure the correct, safe administration of medication shall be developed and documented at each school site on the appropriate management plan in consultation with the parent, and where necessary, other Division staff.
 - 4.2. Parents will provide to the Principal any medication, equipment or life-saving device that is required for ongoing or emergency care.
 - 4.3. Parents shall personally deliver medications to the school where it shall be duly noted as received and the amount specified. Any unused medication shall be directly returned to the parent at the end of the school year or if the student transfers out of the school.
 - 4.4. Medication Storage
 - 4.4.1. PRN and regular prescription medications must be stored in pharmacy-labelled containers clearly marked with the student's name, dosage, and time of administration of the medication, and must be held in storage to which access is restricted.
 - 4.4.2. Over-the-counter medications must be provided by parents, stored in the original manufacturer-labelled container, and clearly marked with the student's name.
 - 4.5. Over-the-counter medications shall not be purchased on the accounts of the Division or the school.
 - 4.6. If the student is developmentally capable, a parent may request that the student be allowed to self-administer medication.

- 4.7. Injection of medication shall be administered only by a health professional, the parent, or the individual student. If the injection of medication by staff is determined as necessary, the Principal shall request approval from the Superintendent.
- 4.8. The disposal of sharps (lancets), blood glucose test strips, and/or other medical waste shall be completed according to occupational health and safety standards.

5. Staff Protocols

- 5.1. All staff shall follow universal precautions when handling blood and body fluids to prevent exposure to blood-borne diseases. Staff are to treat all bodily fluids as if they contained an infectious pathogen. Staff shall complete the following course in PublicSchoolWorks: M-026 Blood Pathogens for School Employees.

6. Specific Health Protocols

6.1. Anaphylaxis:

6.1.1. Child/Student Health Support Plan

- 6.1.1.1. A Student Anaphylaxis Support Plan ([Form 316-3](#)) will be completed for every student with a life-threatening allergy.
- 6.1.1.2. This plan will include monitoring instructions, allergen avoidance strategies, appropriate treatments, and emergency procedures.
- 6.1.1.3. Strategies for allergen avoidance will be based on the developmental age of the student and the particular allergen. The following resources can be referenced to inform staff of allergen avoidance strategies ([Allergy Aware](#), [Anaphylaxis in Schools](#), [Food Allergy Canada](#)).

6.1.2. Communication to parents, students, and staff:

- 6.1.2.1. All staff members (certified and non-certified) and including but not limited to bus drivers, field trip supervisors, coaches, and lunch supervisors will be made aware that a child at risk of anaphylaxis is attending their school.
- 6.1.2.2. With the consent of the parent, the Principal and the classroom teacher must ensure that the student's classmates are provided with information on severe allergies in a manner that is appropriate for the age and maturity of the students. The classroom teacher shall send a letter to the parents of the student's classmates using the Anaphylaxis Class Letter ([Form 316-5](#)).
- 6.1.2.3. A general awareness letter on allergies may be sent home to all parents at the discretion of the Principal using the Anaphylaxis General Letter ([Form 316-6](#)).

6.1.3. Staff training:

- 6.1.3.1. Staff shall complete the following course annually
PublicSchoolWorks: M-004 Anaphylaxis Awareness and Response.

6.1.4. Epinephrine auto-injectors:

- 6.1.4.1. The Principal shall ensure that a minimum of one epinephrine auto-injector is maintained in each school. If a school has elementary students, the Principal will maintain both an adult-dose and junior-dose epinephrine auto-injectors.
- 6.1.4.2. Principals shall store epinephrine auto-injectors according to the manufacturer's directions in a safe area, at room temperature and away from sunlight.
- 6.1.4.3. All Principals shall register each epinephrine auto-injectors online as soon as it is purchased. Once registered with the manufacturer, the Principal receives expiry date reminders and other related information ([EpiPen Registration](#)).
- 6.1.4.4. The Principal is responsible for replacing epinephrine auto-injectors. Principals will use the Epinephrine Auto-Injector Purchaser Form ([Form 316-7](#)) to purchase devices from a local pharmacy.
- 6.1.5. Emergency administration:
 - 6.1.5.1. Even if not preauthorized to do so, a staff member may administer an epinephrine auto-injector or other medication prescribed to a student for the treatment of an anaphylactic reaction if the employee has reason to believe that the student is experiencing an anaphylactic reaction.
 - 6.1.5.2. In an emergency administration of epinephrine, staff will use their judgement to determine whether to administer a junior-dose for students less than 30 kg (66 lbs) or an adult-dose for students over 30 kg (66 lbs).
 - 6.1.5.3. All individuals receiving epinephrine shall be transported to the hospital immediately for evaluation and observation.
- 6.2. Type 1 Diabetes:
 - 6.2.1. Resources - [Diabetes at School](#), [Caring for Kids](#)
- 6.3. Asthma
 - 6.3.1. Resources - [Asthma Canada](#), [Asthma Friendly](#)
- 6.4. Epilepsy
 - 6.4.1. Resources - [Epilepsy Foundation](#), [Epilepsy Canada](#)

Reference: Section 3, 7, 11, 33, 52, 53, 196, 197, 222 Education Act
Chapter P-30.6 Protection Of Students With Life-threatening Allergies Act

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