



MEMORANDUM

Date: January 10, 2024
File Code: M04

To:

System Planning Team
Elementary and Secondary Principals
Student Senate
Special Education Advisory Committee
Audit Committee
First Nation, Métis, and Inuit Education Advisory Committee
Parent Involvement Committee

Nancy Mapledoram-Councillor, ETFO
John Gibson, OSSTF & OSSTF-OT
Jackie Dupuis-Brandli, ETFO-ESP
Carla Lampi, ETFO-OT
Lori Caul, CUPE
School Council Chairs

From: Policy Committee
cc: Trustees
Subject: Stakeholder Input – Board Policy

On January 9, 2024, the Board approved the following policy for stakeholder consultation:

- *4.11 Supporting Students with Prevalent Medical Conditions*

Input received will be considered by the Policy Committee. The policy may be presented to the Board for approval at the Board Meeting of February 6, 2024. Upon approval, the policy will be posted to the website.

Please review the attached document and submit written comments to the attention of the Chair of the Policy Committee **by Monday, January 29, 2024**.

Via Mail:

c/o Marni McDonald, Office of the Director
Rainy River District School Board
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Fort Frances, ON | P9A 1N4

Via Email

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If responding by email, please indicate “Policy Review Input” in the subject line.

Via the Website:

[Policy Feedback Portal](#)

<i>Rainy River District School Board</i>	SECTION 4 <i>Students</i>
SUPPORTING STUDENTS WITH PREVALENT MEDICAL CONDITIONS	4.11

POLICY

The Rainy River District School Board will support students with prevalent medical conditions to fully access and participate in the learning environment.

RATIONALE

The Board is committed to empowering students to reach their full potential while managing their medical condition(s) according to their Plan of Care.

IMPLEMENTATION

As per:

- Procedure 4.14 Anaphylaxis and Life Threatening Allergies
- ~~Procedure 4.15 Pediculosis Control~~
- Procedure 4.70 Assisting Students with Physical Health Issues **Complex Medical Needs**
- Procedure 4.72 Asthma
- ~~Procedure 4.73 Communicable Diseases~~
- Procedure 4.74 Student Concussion Protocol
- Procedure 4.75 Diabetes Management
- Procedure 4.76 Authorization for Storage and Administration of Prescribed Medication
- Procedure 4.77 Seizure Disorder/Epilepsy
- ~~Procedure 4.78 Fifth Disease~~
- **Guidelines**

GUIDELINES

1.0 General Guidelines

- 1.1 All students with medical needs should be given the opportunity to participate in learning activities for as long as they are able to do so without creating an unacceptable health risk.**
- 1.2 All health support services must be administered in a manner that respects, to the degree possible in the circumstance, the student's privacy, dignity, and cultural sensitivity.
- 1.3 **Annual training and resources on prevalent medical conditions will be provided to the appropriate staff, including strategies that reduce the risk of student exposure to triggers or causative agents in classrooms and common school areas.**

~~Schools will work to develop strategies that reduce the risk of student exposure to triggers or causative agents in classrooms and common school areas.~~

- 1.4 Principals and their **school** staff will align emergency plans with the students' Plans of Care, as well as take into consideration how best to accommodate students with Plans of Care for activities that occur off of school property (e.g., field trips, sporting events).
- ~~1.5 This policy will be shared with parents, staff, and others in the school community who are in direct contact with students (e.g., occasional/casual staff, food service providers, transportation providers, volunteers).~~

2.0 Responsibilities

- 2.1 Parents/guardians are expected to be active participants in supporting the management of their child's medical condition(s) while the child is in school. At minimum, parents/guardians must:
- ~~ensure that~~ the school has the most up-to-date information regarding their child/children's health, and co-create the Plan of Care for their child with the principal or designate.
 - provide the school with the prescribed health supports.
 - seek medical advice from a medical doctor, nurse practitioner, or pharmacist, where appropriate.
- 2.2 Depending on their developmental stage and their capacity for self-management, students are expected to actively support the development and implementation of their Plan of Care, including, but not limited to:
- **c**arrying out their daily or routine self-management of their medical condition to their full potential, as described in their Plan of Care.
 - **c**ommunicate with their parent(s)/guardian(s) and school staff if they are facing challenges related to their medical condition(s) at school.
 - **w**earing medical alert identification as deemed appropriate.
 - **i**f possible, informing school staff and/or their peers if a medical incident or a medical emergency occurs.
- 2.3 School staff must, at minimum:
- **r**eview the contents of the Plan of Care for any student with whom they have direct contact.
 - **p**articipate in training on prevalent medical conditions.
 - **I**mplement ~~the~~ **a student's** Plan of Care, by **enabling** students with prevalent ~~medical conditions~~ to participate in school to their full potential ~~as outlined in their Plan of Care~~ **and by responding to medical emergencies.**
- 2.4 Principals and/or their designates must communicate, **at minimum, during student registration and each year prior to the first day of a new school year:**
- the process for parents/guardians to notify the school of their child's prevalent medical condition(s),

- the process for the school and parents/guardians to create, review and update a Plan of Care.

~~At minimum, this must be communicated to parents/guardians~~

- ~~• during registration;~~
- ~~• each year prior to the first day of a new school year;~~
- ~~• the school becomes aware that a child has been diagnosed with a prevalent medical condition.~~

~~2.5~~ ~~And~~, Principals/designates must provide relevant information from the student's Plan of Care to school staff and others who will be in direct contact with the student (e.g., volunteers, occasional staff), **ensuring that the necessary information, training, and support is provided to comply with their responsibilities.**

~~3.0~~ ~~Emergency Situations~~ **Medical Emergency**

3.1 In responding to **a medical emergency** ~~emergency situations~~, staff, third party employees, and volunteers are acting according to the principle of "in loco parentis" and not as health professionals. ~~These~~ Individuals who provide health supports to students ~~in an emergency situation~~ **during a medical** emergency shall have full coverage under the Board's liability policies.

~~4.0~~ **Administration of Medication, Services, and Supports**

4.1 Services and supports shall be rendered by Board staff who have received ~~pertinent~~ information and training as outlined and authorized in a student's Plan of Care.

4.2 In exceptional cases in which a student must have prescribed medication administered during school hours, the principal will arrange to have the medication administered at school ~~as per Procedure 4.70~~ **and will supervise the safe storage of this medication.**

4.3 The injection of medication in non-emergency situations will be by a health professional (i.e., nurse), the parent/guardian or an authorized student for self-treatment.

4.4 **For students with complex medical needs,** intensive and clinical treatment is to be provided by the Ministry of Health in a community treatment centre. Where provision of such treatment outside of the school setting interferes significantly with the student's education, the treatment services may, by special arrangement through the Ministry of Health designated provider, the Board and the parents/guardians, be provided in the school setting.

Definitions:

Anaphylaxis or allergic shock is a severe, life-threatening allergic reaction **resulting in circulatory collapse or shock, which can be fatal, and which requires an emergency response.**

Asthma is a chronic inflammatory condition that occurs in the smaller airways of the lungs,

making it difficult for the person to breathe. Asthma may be fatal and may require an emergency response.

A **concussion** is a brain injury that causes changes in how the brain cells function, leading to symptoms that can be physical (e.g. headache, dizziness), cognitive (e.g. memory problems, decreased concentration), or emotional (e.g. feeling depressed).

Complex medical needs include medical conditions for which nursing or other health support services may be required to facilitate participation in learning activities.

Diabetes is a chronic disease in which the body either cannot produce insulin or cannot properly use the insulin it produces.

Epilepsy is a neurological condition affecting the central nervous system, specifically the brain, characterized by spontaneous, repeated seizures.

~~A **communicable disease** is an illness due to a specific infectious agent or its toxic products that arises through transmission of that agent or its products from an infected person, animal, or inanimate source to a susceptible host; either directly or indirectly through an intermediate plant or animal host, vector or the inanimate environment, (*Control of Communicable Disease Manual, American Public Health Association, 19th Edition, 2008*). Examples are, but not limited to, chicken pox, common cold, fifth disease, measles, scabies, strep throat, impetigo.~~

Medical emergency is a circumstance that requires an immediate response and involvement of emergency medical services.

A **Plan of Care** contains individualized information on a student with a prevalent medical condition.

Prescription medication, within the limits of this policy, is any medication prescribed by physician.

Prevalent Medical Condition is a condition diagnosed by a registered health professional that **may impact the full participation of students in learning activities and requires accommodation and a Plan of Care to provide for the health and/or safety of the students** ~~that has the potential to result in a medical incident or a life-threatening medical emergency.~~

<p style="text-align: center;"><u>CROSS REFERENCE</u></p> <p>Procedures:</p> <ul style="list-style-type: none"> ● 4.14 Anaphylaxis and Life-Threatening Allergies ● 4.15 Pediculosis Control ● 4.70 Supporting Students with Serious Health Conditions Complex Medical Needs ● 4.72 Asthma ● 4.73 Communicable Diseases ● 4.74 Student Concussion Protocol ● 4.75 Diabetes Management ● 4.76 Authorization for Storage & Administration of Prescribed Medication ● 4.77 Seizure Disorder/Epilepsy ● 4.78 Fifth Disease <th data-bbox="667 121 928 1717"> <p style="text-align: center;"><u>Date Approved</u> October 1, 2019</p> <p style="text-align: center;"><u>Board Motion</u> 63</p> <p style="text-align: center;"><u>Review Prior to</u> 2024 2028</p> <th data-bbox="928 121 1537 1717"> <p style="text-align: center;"><u>LEGAL/MINISTRY OF EDUCATION REFERENCE</u></p> <p><i>Education Act 265(1)(j),</i></p> <p>Ministry of Education Policy/Program Memorandum 81: Provision of Health Support Services in School Settings</p> <p>Policy/Program Memorandum 149 Protocol for Partnerships with External Agencies for Provisions of Services by Regulated Health Professions, Regulated Social Service Professions and Paraprofessionals</p> <p><i>Regulated Health Professions Act (1991)</i></p> <p><i>Ontario Human Rights Code</i></p> <p><i>Health Promotion and Protection Act (1990)</i></p> <p><i>Health Care Consent Act (1996)</i></p> <p><i>Municipal Freedom of Information and Protection of Privacy Act (1990)</i></p> <p><i>Personal Health Information Protection Act (2004)</i></p> <p><i>The Immunization of School Pupils Act, 1982</i></p> <p>Communicable Disease Guidelines for Schools by the Northwestern Health Unit</p> <p>PPM Policy/Program Memorandum 161 - Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools.</p> <p><i>Good Samaritan Act (2001) s2(1) and (2)</i></p> <p><i>Sabrina’s Law (2005)</i></p> <p><i>Ryan’s Law (2015)</i></p> <p><i>Rowan’s Law (2017)</i></p> </th></th>	<p style="text-align: center;"><u>Date Approved</u> October 1, 2019</p> <p style="text-align: center;"><u>Board Motion</u> 63</p> <p style="text-align: center;"><u>Review Prior to</u> 2024 2028</p> <th data-bbox="928 121 1537 1717"> <p style="text-align: center;"><u>LEGAL/MINISTRY OF EDUCATION REFERENCE</u></p> <p><i>Education Act 265(1)(j),</i></p> <p>Ministry of Education Policy/Program Memorandum 81: Provision of Health Support Services in School Settings</p> <p>Policy/Program Memorandum 149 Protocol for Partnerships with External Agencies for Provisions of Services by Regulated Health Professions, Regulated Social Service Professions and Paraprofessionals</p> <p><i>Regulated Health Professions Act (1991)</i></p> <p><i>Ontario Human Rights Code</i></p> <p><i>Health Promotion and Protection Act (1990)</i></p> <p><i>Health Care Consent Act (1996)</i></p> <p><i>Municipal Freedom of Information and Protection of Privacy Act (1990)</i></p> <p><i>Personal Health Information Protection Act (2004)</i></p> <p><i>The Immunization of School Pupils Act, 1982</i></p> <p>Communicable Disease Guidelines for Schools by the Northwestern Health Unit</p> <p>PPM Policy/Program Memorandum 161 - Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools.</p> <p><i>Good Samaritan Act (2001) s2(1) and (2)</i></p> <p><i>Sabrina’s Law (2005)</i></p> <p><i>Ryan’s Law (2015)</i></p> <p><i>Rowan’s Law (2017)</i></p> </th>	<p style="text-align: center;"><u>LEGAL/MINISTRY OF EDUCATION REFERENCE</u></p> <p><i>Education Act 265(1)(j),</i></p> <p>Ministry of Education Policy/Program Memorandum 81: Provision of Health Support Services in School Settings</p> <p>Policy/Program Memorandum 149 Protocol for Partnerships with External Agencies for Provisions of Services by Regulated Health Professions, Regulated Social Service Professions and Paraprofessionals</p> <p><i>Regulated Health Professions Act (1991)</i></p> <p><i>Ontario Human Rights Code</i></p> <p><i>Health Promotion and Protection Act (1990)</i></p> <p><i>Health Care Consent Act (1996)</i></p> <p><i>Municipal Freedom of Information and Protection of Privacy Act (1990)</i></p> <p><i>Personal Health Information Protection Act (2004)</i></p> <p><i>The Immunization of School Pupils Act, 1982</i></p> <p>Communicable Disease Guidelines for Schools by the Northwestern Health Unit</p> <p>PPM Policy/Program Memorandum 161 - Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools.</p> <p><i>Good Samaritan Act (2001) s2(1) and (2)</i></p> <p><i>Sabrina’s Law (2005)</i></p> <p><i>Ryan’s Law (2015)</i></p> <p><i>Rowan’s Law (2017)</i></p>
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