

# **SUPPORTING STUDENTS WITH PREVALENT MEDICAL CONDITIONS**

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## **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 4.72 Asthma
- 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
- 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.
- 1.4 Principals and 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).

### **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:

- carrying out their daily or routine self-management of their medical condition to their full potential, as described in their Plan of Care.
- communicate with their parent(s)/guardian(s) and school staff if they are facing challenges related to their medical condition(s) at school.
- wearing medical alert identification as deemed appropriate.
- if possible, informing school staff and/or their peers if a medical incident or a medical emergency occurs.

2.3 School staff must, at minimum:

- review the contents of the Plan of Care for any student with whom they have direct contact.
- participate in training on prevalent medical conditions.
- Implement a student's Plan of Care, by enabling students to participate in school to their full potential 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.

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 Medical Emergency**

3.1 In responding to a medical emergency, staff, third party employees, and volunteers are acting according to the principle of "in loco parentis" and not as health professionals. Individuals who provide health supports to students 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 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 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.

**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 a 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.

CROSS-REFERENCE	LEGAL/MINISTRY OF EDUCATION REFERENCE
<p>Policies:</p> <ul style="list-style-type: none"> <li>▪</li> </ul> <p>Procedures:</p> <ul style="list-style-type: none"> <li>▪ 4.14 Anaphylaxis and Life-Threatening Allergies</li> <li>▪ 4.72 Asthma</li> <li>▪ 4.74 Student Concussion Protocol</li> <li>▪ 4.75 Diabetes Management</li> <li>▪ 4.76 Authorization for Storage and Administration of Prescribed Medication</li> <li>▪ 4.77 Seizure Disorder/Epilepsy</li> </ul>	<ul style="list-style-type: none"> <li>▪ <i>Education Act 265(1)(j)</i>,</li> <li>▪ Policy/Program Memorandum 81: Provision of Health Support Services in School Settings</li> <li>▪ Policy/Program Memorandum 149 Protocol for Partnerships with External Agencies for Provisions of Services by Regulated Health Professionals, Regulated Social Service Professions and Paraprofessionals</li> <li>▪ <i>Regulated Health Professions Act (1991)</i></li> <li>▪ <i>Ontario Human Rights Code</i></li> <li>▪ <i>Health Promotion and Protection Act (1990)</i></li> <li>▪ <i>Health Care Consent Act (1996)</i></li> <li>▪ <i>Municipal Freedom of Information and Protection of Privacy Act (1990)</i></li> <li>▪ <i>Personal Health Information Protection Act (2004)</i></li> <li>▪ Policy/Program Memorandum 161 - Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools.</li> <li>▪ <i>Good Samaritan Act (2001) s2(1) and (2)</i></li> <li>▪ <i>Sabrina's Law (2005)</i></li> <li>▪ <i>Ryan's Law (2015)</i></li> <li>▪ <i>Rowan's Law (2017)</i></li> </ul>