

# PEEL DISTRICT SCHOOL BOARD POLICY

## Supporting Students with Prevalent Medical Conditions

**POLICY ID:** TBD

**FUNCTIONAL CATEGORY:** TBD

**RESPONSIBILITY:** Superintendent of Education, Special Education, Social-Emotional Learning and Well Being

**APPROVAL:** Board of Trustees

**APPROVAL DATE:** 3/29/2023

**EFFECTIVE DATE:** 3/30/2023

**PROJECTED REVIEW DATE:** 2027 – 2028 school year

**REVIEW SCHEDULE:** Five (5) years

### 1. Purpose

The Supporting Students with Prevalent Medical Conditions Policy (this “Policy”) has been developed in accordance with Policy/Program Memorandum (PPM) 161, Supporting Students with Prevalent Medical Conditions in Schools to promote the safety and well-being of students in schools who have prevalent medical conditions as defined in PPM 161, specifically asthma, diabetes, epilepsy, and/or those at risk for anaphylaxis.

The purpose of this Policy is to:

- a) support Peel District School Board (“PDSB”) students with prevalent medical conditions to fully access school in a safe, accepting, and healthy learning environment that supports well-being;
- b) empower students with prevalent medical conditions, as confident and capable learners, to reach their full potential for self-management of their medical condition(s), according to their Plan of Care.

### 2. Application and Scope

This Policy applies to all students with prevalent medical conditions, their parents/guardians and school staff, including occasional staff, who support students

with prevalent medical conditions. This Policy will be implemented in a manner consistent with existing provisions of collective agreements and related memoranda of understanding with unions/associations. This Policy will, at all times, be interpreted in a manner consistent with PDSB policies, relevant Ministry PPMs and guidance documents including PPM 161, 81, and 149, and other applicable legislation including but not limited to the *Education Act*, *Immunization of School Pupils Act*, the *Regulated Health Professions Act*, the *Good Samaritan Act*, *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA), *Personal Health Information Protection Act* (PHIPA), *Ryan's Law*, *Sabrina's Law*, and the *Ontario Human Rights Code*. Students with prevalent medical conditions will be accommodated in accordance with the above up to the point of undue hardship, which considers health and safety requirements.

This Policy is aligned with and supports the principles and expectations of PDSB Policy 51, Human Rights, Policy 54, Equity and Inclusive Education and the Anti-Racism Policy.

### 3. Definitions

- 3.1 **Education Act:** Reference to the Ontario *Education Act* incorporates its regulations and all applicable Ministry of Education policy and program memoranda and guidance documents.
- 3.2 **Parent/Guardian:** Refers to the person having lawful custody of a student, which can include a Parent(s) or guardian(s). Reference to parent(s)/guardian(s) does not apply to students who are 18 years or older, or where a student is 16 or 17 years old and has withdrawn from parental control.
- 3.3 **Plan of Care:** A form that contains individualized information on a student with a prevalent medical condition (PPM 161).
- 3.4 **Prevalent medical condition:** refers specifically to asthma, diabetes, epilepsy and/or are at risk of anaphylaxis which have the potential to result in a medical incident or a life-threatening medical emergency.
- 3.5 **Principal:** refers to the principal or a delegated vice-principal.
- 3.6 **Student or Pupil:** Pupil under the *Education Act*.

## **4. Policy**

### **4.1 Collection of Personal Information**

- a) PDSB will support staff in collaborating with students, parents/guardians, and appropriate medical/health professionals and paraprofessionals to collect information related to students' medical conditions, consistent with the existing provisions of collective agreements and related memoranda of understanding among parties to such agreements.
- b) Parents and guardians of children with prevalent medical conditions are requested to inform PDSB of their child's medical condition(s) and to communicate any other changes related to their child's health information on an annual basis or whenever there are changes in the child's medical condition / treatment or whenever the child has been diagnosed with a new condition. PDSB will request new and current students and/or their parents/guardians to provide information on the students' prevalent medical condition(s) on an annual basis or once the student has been diagnosed with a new condition.
- c) The collection, use and disclosure of personal health information of students with prevalent medical conditions will occur in accordance with the Privacy and Confidentiality provisions of this Policy and applicable PDSB policy or procedure relating to privacy and access to information.

### **4.2 Plan of Care**

- a) A Plan of Care will be developed for every student with a prevalent medical condition. The Plan of Care will be co-created, reviewed and/or updated by the parent(s)/guardian(s) in consultation with the Principal or their designate, designated staff as appropriate, and the student as appropriate.
- b) The Plan of Care, including the emergency response to medical incidents and medical emergencies and supporting student's daily or routine independent management, must be consistent with the responsibilities of the parties involved as set out in this Policy and associated procedures, and all

other applicable PDSB policy and procedure, legislation and PPMs. The Plan of Care must consider the obligations set out in applicable legislation, policies, and collective agreements and must take into account the local needs and circumstances of the school, such as geographical considerations, demographics, and cultural considerations, as well as the availability of supports and resources, including school staff within the school board and the community.

- c) PDSB will ensure appropriate staff intervention within the scope of their training, knowledge and role as non-medically trained professionals is provided when a student with a prevalent medical condition is not able to self-manage their Plan of Care (e.g., due to language barriers, cognitive and/or physical ability, maturity, behavioural issues). Such staff intervention will require the active cooperation and involvement of parents/guardians in supporting the management of the student's care.
- d) The Plan of Care will be co-created, reviewed and/or updated during the first thirty school days of every school year and during the school year, as applicable (e.g., when a student has been diagnosed with a prevalent medical condition, or where a consensus is not reached on the Plan of Care within the first thirty school days of the school year).
- e) The Plan of Care will contain specific information on the student with a prevalent medical condition and will include at minimum:
  - (i) 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;
  - (ii) identification of school staff who will have access to the Plan of Care;
  - (iii) identification of routine or daily management activities that will be performed by the student, parent(s), or staff volunteer(s), as outlined in school board policy, or by an individual authorized by the parent(s);

- (iv) a copy of notes and instructions from the student's health care professional, where applicable;
- (v) information on daily or routine management accommodation needs of the student (e.g., space, access to food) (where possible, a student should not be excluded from the classroom during daily or routine management activities, unless the student or the parent(s) indicate they prefer exclusion);
- (vi) 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);
- (vii) identification of symptoms (emergency and other) and response, should a medical incident occur;
- (viii) emergency contact information for the student;
- (ix) clear information on the school board's emergency policy and procedures;
- (x) details related to storage and disposal of the student's prescribed medication(s) and medical supplies, such as:
  - parental permission for the student to carry medication and/or medical supplies;
  - location of spare medication and supplies stored in the school, where applicable;
  - information on the safe disposal of medication and medical supplies;
- (xi) requirements for communication between the parent(s) and the principal (or the principal's designate) and/or school staff, as appropriate, including format and frequency;
- (xii) parental consent (at the discretion of the parents) to share information on signs and symptoms with other students.

- f) Parents can designate who is provided access to the agreed upon Plan of Care. With authorization from the parents, the Principal or the Principal's designate will share the Plan of Care with school staff who are in direct contact with students with prevalent medical conditions and others as appropriate who are in direct contact with students with prevalent medical conditions (e.g., food service providers, transportation providers, volunteers).
- g) PDSB will create and make a Plan of Care template available on their public website in the language of instruction.

#### **4.3 Supporting Daily or Routine Independent Management**

- a) PDSB will provide supports to students with prevalent medical conditions to facilitate their daily or routine independent management activities in school.
- b) Facilitating and supporting daily or routine management involves, but is not limited to, supporting inclusion by allowing students with prevalent medical conditions to independently perform daily or routine management activities in a school location (e.g., within a classroom, gymnasium, library, schoolyard; on a school bus; at a field trip location), as outlined in their Plan of Care.

#### **4.4 Emergency Response**

- a) PDSB will collaborate with relevant stakeholders to establish expectations regarding emergency response to medical incidents and/or medical emergencies that are aligned with existing board policies and procedures and the student's Plan of Care.

#### **4.5 Partnership with Stakeholders**

- a) The health, safety and well-being of students with prevalent medical conditions is a responsibility shared by PDSB, parents/guardians, students, the provincial government, municipal health agencies, health care providers and community partners.
- b) PDSB will provide health support services in accordance with Ministry PPM 81, Provision of Health Support Services in School Settings, and with PDSB policy and operating procedures relating, but not limited to, the provision of

health support services in school settings and administration of prescribed medications to students in schools.

#### **4.6 Safety Considerations**

- a) Students are permitted to carry their medication(s) (including prescribed controlled substances) and supplies, as outlined in the Plan of Care.
- b) PDSB will support training to local schools and relevant school staff in the storage (according to the item's recommended storage conditions) and safe disposal of medication and medical supplies. PDSB will provide schools with appropriate supplies to support safe disposal of medication and medical supplies.
- c) PDSB and local schools will establish a process and appropriate resources to support students with prevalent medical conditions in the event of a school emergency (e.g., bomb threats, evacuation, fire, “hold and secure”, lockdown) or for activities off school property (e.g., field trip, sporting event).
- d) In accordance with the requirement of the *Child and Family Services Act*, 1990, where PDSB employees have reason to believe that a child may be in need of protection, they are required to report to the Children's Aid Society.

#### **4.7 Training**

- a) Relevant school staff (including occasional staff) with direct contact with a student with a prevalent medical condition will be provided with school-based training at a minimum, annually. Training should take place within the student's first thirty days of school, where possible, to ensure the safety and well-being of the student, and should be reviewed as appropriate.
- b) The training will consider the obligations set out in applicable legislation, policies, and collective agreements and must take into account the local needs and circumstances of the school, such as geographical considerations, demographics, and cultural considerations, as well as the availability of supports and resources, including school staff within the school board and the community.

- c) The scope of training will be consistent with expected duties of school board staff, as outlined in PDSB policy and procedure and applicable collective agreements, legislation and/or Ministry policy/program memoranda or guidance. The scope of the training will include:
- (i) strategies for preventing risk of student exposure to triggers and causative agents;
  - (ii) strategies for supporting inclusion and participation in school;
  - (iii) recognition of symptoms of a medical incident and a medical emergency;
  - (iv) information on school staff supports, in accordance with board policy;
  - (v) medical incident response and medical emergency response;
  - (vi) the roles and responsibilities of students, parents/guardians, school staff and the Principal;
  - (vii) documentation procedures.
- d) Training will be based on evidence-based materials that have been developed by health and education partners, including resources provided by the Ministry of Education. PDSB, in consultation with appropriate stakeholders will determine the scope of training required to support the implementation of prevalent medical condition procedures and the mode of delivery of the training, including the appropriate agency or organization to deliver such training. Training will be provided by an appropriate person with requisite professional knowledge in the particular prevalent medical condition.
- e) Staff will receive general awareness training and relevant resources to prevent and respond to medical conditions and health emergencies. Relevant staff will be provided with training on life-threatening medical situations, prevalent medical conditions and first aid/CPR training. Each site will be equipped with required first aid materials as required by applicable health and safety law.



#### **4.8 Procedures and Guidelines**

- a) Procedures and guidelines may be issued under this Policy further setting out strategies and the responsibilities of all parties, including students, parents/guardians, school staff and principals with respect to specific prevalent medical conditions. Such procedures and guidelines will incorporate and be subject to this Policy.

#### **4.9 Liability**

- a) In accordance with the *Good Samaritan Act*, 2001, S.O. 2001, c. 2, despite the rules of common law, PDSB will protect employees from liability for damages who voluntarily and without reasonable expectation of compensation or reward provide emergency health care services or first aid assistance as set out in that Act that result from the employee'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 employee.
- b) In accordance with *Sabrina's Law*, 2005, S.O. 2005, PDSB will protect employees from liability for damages 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 that Act, unless the damages are the result of an employee's gross negligence.
- c) In accordance with *Ryan's Law*, 2015, S.O. 2015, c. 3, PDSB will protect employees from liability for damages 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 that Act.

#### **4.10 Privacy and Confidentiality**

- a) PDSB will ensure all staff are trained to recognize and respect the importance of a student's privacy, dignity, religious belief, and cultural sensitivity when collecting, accessing and sharing medical information and administering or supporting with the administration of medication in accordance with applicable PDSB policy and procedure and law including the

Ontario *Municipal Freedom of Information and Protection of Privacy Act* and the *Personal Health Information Protection Act*.

- b) To ensure effective policy review, PDSB will develop processes to collect data on the number of students with prevalent medical conditions, using a critical equity lens, ensuring full accessibility, respect of individual privacy rights, inclusive demographic representation and the complexity of all identities (including intersectionality of multiple social identities) and collect and monitor the number of medical incidents/emergencies that have occurred on annual basis.

## **5. Roles and Responsibilities**

### **5.1 Parents of children with prevalent medical conditions**

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

- a) educate their child about their medical condition(s) with support from their child's health care professional, as needed
- b) guide and encourage their child to reach their full potential for self-management and self-advocacy and supporting their child's self-management including through administration of medication, technological monitoring, and nutritional requirements
- c) inform the school of their child's medical condition(s) and co-create the Plan of Care for their child with the principal or the principal's designate
- d) communicate changes to the Plan of Care, such as changes to the status of their child's medical condition(s) or changes to their child's ability to manage the medical condition(s), to the principal or the principal's designate
- e) co-develop of a Plan of Care based on operational feasibility and requirements set out in legislation, PDSB policy and procedures, and relevant guidance

- f) support with their child's monitoring and self-management, depending on the student's cognitive, emotional, social, and physical stage of development, and their capacity for self-management
- g) in addition to the child's medical practitioner, administer or support their child with the administration of medications and treatment of the student's medical condition
- h) facilitate the provision of in-school third-party support through authorized community agencies required to support the student's prevalent medical condition
- i) confirm annually to the principal or the principal's designate that their child's medical status is unchanged
- j) initiate and participate in annual meetings to review their child's Plan of Care
- k) supply their child and/or the school with sufficient quantities of medication and supplies in their original, clearly labelled containers, as directed by a health care professional and as outlined in the Plan of Care, and track the expiration dates if they are supplied
- l) seek medical advice from a medical doctor, nurse practitioner, or pharmacist, where appropriate

## **5.2 Students with prevalent medical conditions**

Depending on their cognitive, emotional, social, and physical stage of development, and their capacity for self-management, students are expected to actively support the development and implementation of their Plan of Care. Students will:

- a) take responsibility for advocating for their personal safety and well-being that is consistent with their cognitive, emotional, social, and physical stage of development and their capacity for self-management
- b) participate in the development of their Plan of Care
- c) participate in meetings to review their Plan of Care

- d) carry out daily or routine self-management of their medical condition to their full potential, as described in their Plan of Care (e.g., carry their medication and medical supplies; administration of medication; technological monitoring; nutritional requirements; following school board policies on disposal of medication and medical supplies) in conjunction with, parent(s), health care professional(s) and school staff (where appropriate)
- e) communicate with their parent(s) and school staff if they are facing challenges related to their medical condition(s) at school and in their self-management of their medical condition
- f) wear medical alert identification that they and/or their parent(s) deem appropriate
- g) if possible, inform school staff and/or their peers if a medical incident or a medical emergency occurs

### **5.3 School staff**

School staff will follow PDSB's policies and the provisions in their collective agreements related to supporting students with prevalent medical conditions in schools. School staff will:

- a) review the contents of the Plan of Care for any student with whom they have direct contact
- b) participate in training, during the instructional day, on prevalent medical conditions, at a minimum annually, as required by the school board
- c) share information on a student's signs and symptoms with other students, if the parents give consent to do so and as outlined in the Plan of Care and authorized by the principal in writing
- d) follow school board strategies that reduce the risk of student exposure to triggers or causative agents in classrooms, common school areas, and extracurricular activities, in accordance with the student's Plan of Care

- e) support a student's daily or routine management, and respond to medical incidents and medical emergencies that occur during school, as outlined in board policies and procedures
- f) support inclusion by allowing students with prevalent medical conditions 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
- g) enable students with prevalent medical conditions to participate in school to their full potential, as outlined in their Plan of Care
- h) not undertake responsibilities that exceed their role, professional knowledge and/or training provided on the prevalent medical condition as non-medically trained individuals.

The designation of roles and responsibilities for health support services in school settings does not preclude, in emergency situations, the provision of a health service by designated school board staff, administered in accordance with section 29(1)(a) of *the Regulated Health Professions Act* and under PDSB policies and procedures.

#### **5.4 Principal**

In addition to the responsibilities outlined above under “School Staff”, the principal and/or their designate will:

- a) clearly communicate to parents and appropriate staff the process for parents to notify the school of their child's medical condition(s), as well as the expectation for parents to co-create, review, and update a Plan of Care with the principal or the principal's designate. This process should be communicated to parents, at a minimum:
  - (i) during the time of registration
  - (ii) each year during the first week of school
  - (iii) when a child is diagnosed and/or returns to school following a diagnosis

- b) co-create, review, or update the Plan of Care for a student with a prevalent medical condition with the parent(s), in consultation with school staff (as appropriate) and with the student (as appropriate)
- c) maintain a file with the Plan of Care and supporting documentation for each student with a prevalent medical condition
- d) with parental consent, provide relevant information from the student's Plan of Care to school staff and others who are identified in the Plan of Care (e.g., food service providers, transportation providers, volunteers, occasional staff who will be in direct contact with the student), including any revisions that are made to the plan
- e) communicate with parent(s)/guardian(s) in medical emergencies, as outlined in the Plan of Care
- f) encourage the identification of staff who can support the daily or routine management needs of students in the school with prevalent medical conditions, while honouring the provisions within their collective agreements

## **5.5 School Board**

PDSB will:

- a) on an annual basis, communicate this Policy to parents, school board staff, and others in the school community who are in direct contact with students
- b) make this Policy and their Plan of Care template available on the public website in the language of instruction
- c) provide training and resources on prevalent medical conditions on an annual basis
- d) develop strategies that reduce the risk of student exposure to triggers or causative agents in classrooms and common school areas
- e) develop expectations for schools to support the safe storage and disposal of medication and medical supplies, and communicate these expectations to schools and support schools in the implementation of the expectations

- f) communicate expectations that students are allowed to carry their medication and supplies to support the management of their medical condition, as outlined in their Plan of Care
- g) consider its obligations under relevant PPMs and this Policy when entering into contracts with transportation, food service, and other providers

Notwithstanding anything in this Policy, PDSB may determine, in its discretion on a case-by-case basis considering the circumstances and severity of a student's prevalent medical condition, the types of responsibilities PDSB staff can take on in addition to any set out in relevant PPMs and PDSB policy and procedure. PDSB may accommodate up to the point of undue hardship, as determined in the discretion of PDSB.

## **5.6 Relevant Ministries and External Partners**

Relevant provincial ministries, including the Home Care Program of the Ministry of Health and the Ministry of Community and Social Services, and external agencies with whom PDSB has an agreement for the provision of services by regulated health professionals, regulated social service professions and paraprofessionals, will carry responsibility for roles and responsibilities as set out in relevant PPMs including PPM 161, Supporting children and students with prevalent medical conditions, PPM 81, Provision of health support services in school settings and PPM 149, Protocol for partnerships with external agencies for provision of services by regulated health professionals, regulated social service professionals, and paraprofessionals.

## **6. Reference Documents**

### **Legislation**

*Education Act*, R.S.O 1990, c. E.2

*Regulated Health Professions Act*, 1991, S.O. 1991, c. 18

*Good Samaritan Act*, 2001, S.O., 2001, c. 2

*Sabrina's Law*, 2005, S.O. 2005

*Ryan's Law*, 2015, S.O. 2015, c. 3

*Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. M.56

*Personal Health Information Protection Act*, 2004, S.O. 2004, c. 3, Sched. A

### **Ministry Policy/Program Memoranda**

PPM 161, Supporting children and students with prevalent medical conditions in schools

PPM 81, Provision of health support services in school settings

PPM 149, Protocol for partnerships with external agencies for provision of services by regulated health professionals, regulated social service professionals, and paraprofessionals

**PDSB Policy**

Policy 88, Freedom of Information and Privacy  
Policy 86, Emergency Preparedness  
Policy 51, Human Rights  
Policy 56, Occupational Health and Safety

**PDSB Procedure**

SESS 5, Reporting a Child in Need of Protection  
SESS 8, Procedures for Administration of Prescribed Medication to Pupils in School  
SESS 9, Provision of School Health Support Services  
SESS 16, In-School and In-Classroom Student Assistance Provided by Third Party  
SESS 18, Protocol for Externally Regulated Professionals and Paraprofessionals  
EHS 1.3.2, Environmental Health and Safety Training and Education Requirements  
EHS 2.8.4, Health and Safety – First Aid Requirements  
Emergency Evacuation Procedures

**Guidelines**

Creating Safe and Health Schools for Students with Anaphylactic Allergies Guidelines  
Creating Safe and Health Schools for Students with Asthma Guidelines  
Creating Safe and Health Schools for Students with Diabetes Guidelines

**7. Revision History**

<b>Review Date</b>	<b>Approval Date</b>	<b>Description</b>