

## **Purpose/Background**

The onus for administering medication or medical treatment to students is on the student, parent, guardian or medical practitioner. Assessing both the need for, and correct means of, administering medication or medical treatment are beyond the knowledge and competency of staff.

The Division recognizes that while it is not the mandate of the schools, one or more of its staff may be requested to administer medication or medical treatment.

The Division consequently believes that, except in the case of accidents and emergencies, the administration of medication or medical treatment is to be limited to that which can be provided by staff who have received explicit instructions from the attending physicians and the parent of the student with the medical condition

## **Procedures**

### **1. Over-the-Counter Medication**

Over-the-counter medication shall not be distributed to any student enrolled in a Division School, unless RVS AF316-A Administering Medication or Medical Treatment to Students has been completed and is on file at the school, authorized by a medical practitioner, and signed by the parent(s)/guardian(s). The over-the-counter medication must be supplied by the parent/guardian, clearly labeled by a pharmacist or regulated professional with the student's name on it, correct dosages for administration, and replaced upon expiration.

### **2. Prescription Medication or Medical Treatment**

If, under exceptional circumstances, a student must receive medication or medical treatment prescribed by a medical practitioner during the school day or during extra/curricular activities, the student is incapable of self-administration, and the parents are unable to be at the school to administer the medication or treatment, the following will apply:

- 2.1 The parents must request that the Principal store the medication and provide medical treatment. This request must be made in writing to the Principal.
- 2.2 The request for the administration of medication or medical treatment must include RVS AF316- A Administering Medication or Medical Treatment to Students, with written instructions signed annually by the parent and the physician, pharmacist or regulated professional, including the following information:
  - 2.2.1 Student's name;
  - 2.2.2 Name of medication and/or treatment;
  - 2.2.3 Purpose of medication and/or treatment;
  - 2.2.4 Time intervals for administration;
  - 2.2.5 Dosage and procedure for administration;
  - 2.2.6 Possible side effects;

- 2.2.7 Procedure to follow in case of adverse reaction;
  - 2.2.8 Special storage instructions for the medication, i.e., refrigerator;
  - 2.2.9 Security requirements to prevent risk to others;
  - 2.2.10 Termination date for administration;
  - 2.2.11 Authorization and procedure for student self-administration (i.e., insulin dispensers, asthma inhalers, etc.);
  - 2.2.12 Appropriate contact phone numbers.
  - 2.3 The parent must assume responsibility for informing the school of any change in the student's health, medication, or treatment, accompanied by appropriate documentation as outlined in procedures 1 and 2.2.
  - 2.4 Except in the case of accidents and emergencies, no employee shall administer any medication or medical treatment unless the conditions in procedures 1, 2 and 3 have been met.
  - 2.5 School personnel will perform no physical therapy on students.
  - 2.6 Only the Principal or the person designated by him/her will administer the medication and/or medical treatment.
3. Admission of Students Requiring Specialized Health Care to School and Class
- 3.1 In those circumstances where a student is dependent upon sophisticated life-support medication, or is inordinately vulnerable to severe reaction or injury, appropriate arrangements with parents will be made to ensure the welfare of the student, including adherence to procedure 2 above, and
    - 3.1.1 Making reasonable provisions which will enable the student to receive special medical treatment as required at school; or
    - 3.1.2 In cases where reasonable provisions cannot be made, the Division will be responsible for locating an educational setting that provides the medical requirements for the student.
4. Responsibilities and Rights of Staff
- 4.1 A staff member engaged in the administration of medication or medical treatment has the responsibility of endeavouring to provide the same care and concern for the student as could reasonably be expected of a parent under those circumstances.
    - 4.1.2 A staff member is required to record all medication or treatment provided on RVS form AF316-A Administering Medication or Medical Treatment to Students.
  - 4.2 A staff member involved in the administration of medication and medical treatment has the following rights:
    - 4.2.1 To receive a copy of the written instructions provided by the parent and physician;

- 4.2.2 To clarify his/her role in providing medication or treatment with the Principal or designate, who may seek further clarification from the parent or physician or instruct the employee to do same;
- 4.2.3 To require that the insurance coverage carried by the Division adequately reflects the medical situation in which s/he is involved;
- 4.2.4 To require that a consent form be signed by the parent which includes a section waiving the rights of the parent to pursue the Division or its personnel in an action to recover damages for improper administering of medication or medical treatment;
- 4.2.5 To expect the Division to provide appropriate training to perform the expected medical responsibilities;
- 4.2.6 To expect a written request in those situations which involve long term medical care;
- 4.2.7 To protest, in writing, should he not feel competent to fulfill the medical responsibilities;
- 4.2.8 To reject, in writing, a request for administration of medication and medical treatment.

#### 5. Allergic Reactions – Required Information

In the event a student has potentially fatal debilitating allergic reaction that requires immediate administration of medication or emergency procedures (to prevent death or health complications), the rights and limitations inherent in the *Emergency Medical Aid Act and Bill 201 Protection of Students with Life Threatening Allergies Act* will apply, and the following procedures will be followed:

- 5.1 Each student registered in a Division school is required to have RVS form AF316-A Administering Medication or Medical Treatment to Students signed annually by the physician, pharmacist or regulated professional and parent(s), identifying any medical problems the student may have.
- 5.2 If a student is identified as having severe allergies that are potentially fatal or debilitating, RVS AF316-A Administering Medication or Medical Treatment to Students containing the information outlined in clause 2.2 will be completed and will include the signature of the physician and parent(s).
- 5.3 It is the Principal's responsibility to make reasonable attempts to ensure that:
  - 5.3.1 This information is complete and kept on file in an easily accessible location;
  - 5.3.2 The staff are briefed on the nature of the medical problems, including symptoms and emergency procedures to be used;
  - 5.3.3 The emergency medication is clearly labeled and kept in a secure location where the Principal and/or staff members can access it at short notice;
  - 5.3.4 If required, the physician is contacted for clarification from a medical standpoint;
  - 5.3.5 Parent(s) are advised that staff perform a monitoring function for the administration of medication but are not normally medically qualified to administer medication.

**6. Emergency Treatment – Allergic Reaction, etc.**

In the event a student has a potentially fatal or debilitating allergic reaction that requires immediate emergency treatment or displays potentially serious reactions as a result of a known medical condition (e.g., epilepsy, insulin shock, etc.) the following steps shall be taken:

- 6.1 The Principal or staff members who have been briefed on the proper treatment procedures shall administer the treatment or the medication in strict accordance with the physician's instructions. In the event the student is riding on a Division bus when emergency medical treatment is required, then the bus driver shall administer the treatment or the medication in accordance with the best available instructions at the scene.
- 6.2 The person in charge will call 911 to secure trained medical assistance and arrange for the student to be transported to a medical facility. Every effort will be made to contact the student's physician.
- 6.3 The student's parent(s) shall also be contacted immediately and informed of the situation.

**7. Emergency administration of medication not pre-authorized**

- 7.1 Each school, in collaboration with Director of Learning Supports, will ensure that a minimum of one epinephrine autoinjector is maintained in accordance with *Bill 201 Protection of Students with Life Threatening Allergies Act* and is stored and labeled in accordance with 5.3.3.
- 7.2 Even if not preauthorized to do so under section 6.1, an employee may administer an epinephrine auto-injector or other medication as prescribed to a student for the treatment of an anaphylactic reaction if the employee has reason to believe that the student, weighing 15 kilograms (33 pounds) or more is experiencing an anaphylactic reaction.
- 7.3 In the event an epinephrine injector is used Steps 6.1, 6.2, and 6.3 shall be followed.
- 7.4 Following the administration of an emergency epinephrine autoinjector, staff will complete page 2 of RVS AF316-A and submit to Director of Learning Supports.

**8. Implementation**

- 8.1 The implementation of this administrative procedure is the joint responsibility of the Associate Superintendent of Learning and the Director of Learning Supports.
- 8.2 All questions regarding the implementation of this procedure at the school level are to be referred jointly to the Associate Superintendent of Learning and the Director of Learning Supports who will determine the most responsible person.

**Reference:**

- RVS AF316-A Administering Medication or Medical Treatment to Students
- Education Act
- Freedom of Information and Protection of Privacy Act
- Bill 201 Protection of Students with Life-Threatening Allergies Act
- Emergency Medical Aid Act

- Occupational Health and Safety Act
- Guidelines for Child/Student Focused Medication Management (CSFMM) In Preschool and School Settings - Alberta Health Services
- Anaphylaxis: A Handbook for School Boards-Canadian School Boards Association
- ATA Provision of Medical Services to Medically Fragile Students

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## **Appendix A – SEVERE ALLERGIES**

### **Purpose/Background**

The purpose of this Appendix is to attempt to minimize the risk of exposure of students with severe allergies to potentially life-threatening allergens without unnecessarily depriving the student with severe allergies of normal peer interactions or placing unreasonable restrictions on the activities of other students in the school.

### **Definition**

A severe allergy means a severe allergic reaction or anaphylactic response to an allergen, which if left untreated, can lead to sudden death.

### **Procedures**

1. Responsibility of Parents - Parents of students with severe allergies must:
  - 1.1 Advise the Principal and home-room teacher about the student's severe allergy when the allergy is diagnosed, at the beginning of each school year, or when the student changes schools;
  - 1.2 Provide and keep emergency information current;
  - 1.3 Assist the Principal by asking the student's medical doctor to complete the Severe Allergy Alert RVS form AF316-A Administering Medication or Medical Treatment to Students when the student is first registered or re-registered with the Division, or when the student's severe allergies change;
  - 1.4 Provide the Principal with a recent photograph of the student;
  - 1.5 Provide the student with a Medic Alert bracelet or other suitable identification;
  - 1.6 Provide the student with a case containing at least one unexpired injector or other medication as prescribed by a physician and ensure that the student has the injector or medication readily available, while at school, on off-campus programs, off-site activities or at other school events and activities;
  - 1.7 Check expiry dates of medication and injectors and replace them as necessary;
  - 1.8 Provide snacks and lunches for the student;
  - 1.9 Assist the Principal by supporting the provision of educational information about severe allergies to other parents and the school community including providing consent to the disclosure of any personal information about the student that may assist in the achievement of the intent of this Appendix; and,
  - 1.10 Advise the school bus driver of the student's severe allergies.

2. Responsibility of Students with Severe Allergies - Students with severe allergies must:
  - 2.1 Eat only foods brought from home unless authorized by the parents in writing;
  - 2.2 Wash their hands before eating;
  - 2.3 Learn to recognize symptoms of a severe allergic reaction;
  - 2.4 Promptly inform a teacher or an adult as soon as accidental ingestion or exposure to an allergen occurs or symptoms of a severe allergic reaction appear;
  - 2.5 Keep an injector or medication handy at all times and;
  - 2.6 When age appropriate, know how to use an injector or take medication.
  
3. Responsibility of the Principal - The Principal is responsible for planning the coordination and management of students who have life-threatening allergies. The Principal is encouraged to involve parents in all phases of planning.

The Principal must make reasonable efforts to:

- 3.1 Advise the parents of the student with severe allergies of this Appendix and provide them with a copy;
- 3.2 Consult with and advise the parents of the student with severe allergies, the School Council and the school community of any school specific procedures regarding severe allergies;
- 3.3 Request that the parents sign the authorization to administer medication RVS form AF316-A Administering Medication or Medical Treatment to Students.
- 3.4 Advise all staff members of students who have potentially life-threatening allergies as soon as possible;
- 3.5 Request the consent of the parent to post the student's picture and display the emergency care plan in an appropriate location in the school as determined by the Principal;
- 3.6 Ensure that an emergency plan is developed for each student with severe allergies in cooperation with the parents, the student's physician and where the Principal deems it necessary, the public health nurse or contracted nursing staff and that the plan is kept in a readily accessible location at the school and includes emergency contact information; and,
- 3.7 Advise the school bus driver of the student's severe allergies.
- 3.8 With the consent of the parent or guardian, the Principal may post a photograph of the student with severe allergies with a description of the allergy and the student's emergency response protocol in a central but not a public location at the school.

4. Educating the School Community - The Principal must make reasonable efforts to ensure:
  - 5.1 That all members of the school community including substitute teachers, student teachers and volunteers have appropriate information about severe allergies anaphylaxis and safety procedures; and,
  - 5.2 That all off-site activity service providers are notified of the student's severe allergy, if necessary.

With the consent of the parent, the Principal and the classroom teacher must ensure that:

  - 5.3 The student's classmates are provided with information on severe allergies in a manner that is appropriate for the age and maturity level of the student; and
  - 5.4 Strategies to reduce teasing and bullying are incorporated in this information.
  
5. Responsibility of Teachers - The classroom teacher of a student with severe allergies must make reasonable efforts to:
  - 6.1 Discuss anaphylaxis with the class, in age-appropriate terms;
  - 6.2 Avoid allergenic foods and substances for classroom events;
  - 6.3 Facilitate communication with other parents;
  - 6.4 Leave information about students with severe allergies in an organized, prominent and accessible format for substitute teachers;
  - 6.5 Discuss anaphylaxis in appropriate terms with student teachers, guest speakers and volunteers who are in the classroom, and explain the school rules and the school's emergency response protocol;
  - 6.6 Ensure that the emergency response protocol and appropriate medication is taken on off-site activities; and,
  - 6.7 Ensure that appropriate and knowledgeable adults accompany off-site activities.
  
6. Responsibility of Teachers and Lunchroom Supervisors - The classroom teacher and any lunch program supervisor of a student with severe allergies must make reasonable efforts to:
  - 7.1 Know the school's emergency response protocol;
  - 7.2 Encourage students not to share or trade food;
  - 7.3 Encourage the student with severe allergies to eat only what they bring from home;
  - 7.4 Reinforce hand-washing before and after eating;
  - 7.5 Follow school policies for reducing risk in classrooms and common areas; and,

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- 7.6 Encourage an empathetic understanding of severe allergies and the seriousness of the consequences.
7. Emergency Response Protocols - The Principal must ensure that:
- 8.1 A school severe allergies emergency response protocol is developed including provision for the collection and storage of injectors, education of all parties, procedures to be followed, location of the medication, photographs of students, and off-campus, off-site, and lunch program procedures;
  - 8.2 Any injectors provided by parents and which are not in the student's possession are stored in a covered, secure and accessible location at the school;
  - 8.3 All teaching staff, including substitute teachers, and non-teaching staff and lunch program supervisors and staff, and student teachers are aware of the location of the injectors;
  - 8.4 An individual student emergency response protocol is developed for each student with severe allergies in cooperation with the parents, the student's physician and where the Principal deems it necessary, the public health nurse; and,
  - 8.5 The student's emergency response protocol includes emergency contact information and procedures, and is kept in a readily accessible location at the school.
8. Ancillary Matters
- 9.1 It is intention of this Appendix to complement Administrative Procedure 316 - Administering Medication or Medical Treatment to Students, but in the case of conflict between this Appendix and the provisions of Administrative Procedure 316, the provisions of the Administrative Procedure 316 shall govern.
  - 9.2 While the intention of this Appendix is to minimize the risk to students with severe allergic reactions, within reason, there is no guarantee that risks will not be presented in the school environment that cannot be controlled and this Appendix is not intended to confer any guarantee of safety for any student suffering from severe allergies.