

ADMINISTRATIVE PROCEDURE 825-002 Asthma: Reducing the Risks (Ryan's Law)

DIRECTIONAL POLICY

825-Student Achievement and

Well-Being

TITLE OF ADMINISTRATIVE PROCEDURE:

ASTHMA: REDUCING THE RISKS (Ryan's Law)

DATE APPROVED:

January 25, 2016

PROJECTED REVIEW DATE:

January, 2021

DIRECTIONAL POLICY ALIGNMENT:

Student Achievement and Well-Being

ALIGNMENT WITH MULTI-YEAR STRATEGIC PLAN (MYSP):

The Asthma: Reducing the Risks Administrative Procedures support our Vision for achieving excellence in Catholic Education through an unwavering focus on learning, leadership and service. This Vision calls the Board to these Strategic Priorities:

- ensure our structures, processes, relationships, and actions reflect our Gospel Values and Catholic Social Teachings;
- implement the most effective, evidenced-based instructional and assessment practices to help all students meet the Catholic School Graduate Expectations;
- embed technology to support digital literacy, creativity, innovation, collaboration, and the learning needs of all students;
- develop the intellectual, spiritual, mental, physical, and emotional well-being of students in safe, diverse, respectful, and faith-filled learning environments;
- implement fair and transparent processes in recruitment, leadership, talent development, and succession planning to ensure our employees have the necessary knowledge, skills, and attributes to support our Vision.

ACTION REQUIRED/GUIDELINES:

GUIDELINES:

In accordance with Ryan's Law – Ensuring Asthma Friendly Schools – 2015, in respecting the dignity and worth of all people and in keeping with Gospel values, the Peterborough Victoria Northumberland and Clarington Catholic District School Board believes that the safety of students with a medical condition such as asthma is a shared responsibility of the board, school, family, health care provider and community partners. These Administrative Procedures outline the Board's commitment to students with asthma.

The Board believes that:

- all students have the right to be educated in an environment that is as safe as possible and that students who have asthma have access to their medication as needed;
- current and up-to-date information shared by parents, guardians and students is critical to developing a student-specific emergency response to an asthma emergency;
- parents and school staff must work together by communicating regularly and at least annually to review the medical needs of students, which includes but is not limited to, how asthma medication is to be accessed and administered in the event of an asthma exacerbation.

RESPONSIBILITIES:

The Board of Trustees is responsible for:

• reviewing the Asthma: Reducing the Risks Administrative Procedure as part of its regular policy and procedures review cycle.

The Director of Education is responsible for:

• including the Asthma: Reducing the Risks Administrative Procedure in the Board policies and procedures posted on the Board web site.

Superintendents are responsible for:

- requiring that every school principal establish a process to identify students with asthma at time of registration or following diagnosis and gather necessary asthma related information from the parents/guardians and student;
- requiring that every school principal develop an individual student asthma management plan for each student diagnosed with asthma, based on the recommendation of the student's health care provider;
- requiring that every school principal maintain a file for each student diagnosed with asthma. The file may
 contain personal medical information, treatment plans and/or other pertinent information about the
 student. If that information is obtained with the consent of the student or the parent/guardian, in
 accordance with applicable legislation, including relevant privacy legislation. This file shall also include
 current emergency contact information;
- requiring that every school principal inform school board personnel and others who are in direct contact on a regular basis with a student with asthma about the contents of the student's asthma management plan;
- ensuring that asthma education and training opportunities about recognizing and preventing asthma
 triggers, recognizing when symptoms are worsening, and managing asthma exacerbations, are available for
 all employees and others who are in direct contact with students on a regular basis.

Principals and Vice-Principals are responsible for:

- ensuring that all students have easy access to their prescribed reliever inhaler(s) medications;
- identifying asthma triggers in classrooms, common school areas and in planning field trips and implement strategies to reduce risk of exposure;
- identifying all students diagnosed with asthma and make them known to staff as necessary while giving due consideration to the issue of privacy;
- collecting up-to-date information from parents/guardians related to a child's diagnosis of asthma;
- maintaining an individual plan for each student known to have a diagnosis of asthma and ensure that the plan contains:
 - a current emergency contact list;
 - o up-to-date medical information including a list of current required medication and appropriate puffer devices;
 - pre-authorization to administer medications;
 - physician's instructions and a signed reciprocal consent to disclose information with the attending physician;
 - o an emergency response plan that includes contingencies for school excursions and activities;

- o parent/guardian or adult student consent to disclose;
- o log of interventions and/or administration of medication;
- a current photograph of the student;
- o complete the allergy alert information on the student management system;
- review the individual student plan at least yearly prior to the commencement of classes and periodically thereafter as needed;
- o arrange training for the school staff on how to administer asthma medication;
- identify a consistent, safe, accessible, unlocked storage place known to all applicable staff for asthma medication;
- o annually send a letter to parents/guardians requesting that they inform the school immediately if their child(ren) have been diagnosed with asthma and accompanying medical/medication information.
- establishing a communication plan to share information about asthma to parents/guardians, students, employees and include any other person who has direct contact with a student with asthma;
- ensuring that asthma education and training opportunities about recognizing and preventing asthma
 triggers, recognizing when symptoms are worsening, and managing asthma exacerbations, are provided for
 all staff who are in direct contact with students on a regular basis.

Teachers are responsible for:

- in the case of an emergency assist with administering asthma medication to students in their care;
- calling 911, or, if appropriate, notify the principal or designate to call 911, in the case of a medical emergency;
- becoming familiar with all students in their care who have been diagnosed with asthma;
- monitoring the school's health and safety board or area where students who have been diagnosed with asthma have their pictures and medication information displayed;
- communicating regularly with parents/guardians in their class who have a child diagnosed with asthma for any updates related to the child's medical care or condition;
- reporting to the principal or designate of any student who has experienced an asthmatic exacerbation immediately or as soon as possible;
- signing an annual policy and procedure review form that includes the Asthma: Reducing the Risks Administrative Procedure.

Parents/Guardians and adult Students are responsible for:

- informing school officials forthwith of any diagnosis of asthma (or known triggers);
- ensuring that the information on their child, including but not limited to the medication that the student is taking, is up-to-date;
- ensuring that written consent has been given for their child to carry their asthma medication, if the parent deems it appropriate that the medication be carried on the child's person;
- pre-authorizing the administration of medication in response to an asthma exacerbation, provided that the school has up-to-date treatment medication and any applicable consent from the parent or guardian;
- co-operating with school staff when requests are made for information related to storage of medication, administration of medication and updated medical information..

PROGRESS INDICATORS:

All students who are diagnosed with asthma have an individual plan at the school, outlining monitoring and avoidance strategies, as well as appropriate treatment, of which all school staff are aware.

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DEFINITIONS:

Asthma – as defined by the Ontario Lung Association, is a very common chronic (longterm) lung disease that can make it hard to breathe. People with asthma have sensitive airways that react to triggers. There are many different types of triggers such as exercise, poor air quality, mold, dust, pollen, viral infections, animals, smoke and cold air. Symptoms of asthma are variable and can include coughing, wheezing, difficulty breathing, shortness of breath and chest tightness. The symptoms can range from mild to severe and sometimes could be life threatening.

Emergency Medication – as defined for this administrative procedure refers to medication that is administered by a staff member to a student at the time of an asthma exacerbation, for example, a reliever inhaler or stand-by medication. 'Medication' refers to medications that are prescribed by a healthcare provider and, by necessity, may be administered to a student, or taken by the student during school hours or school related activities.

Immunity – in relation to The Act to Protect Pupils with Asthma states that "No action or other proceeding for damages shall be commenced against an employee 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 this Act."

REFERENCES:

Ryan's Law, 2015 – Ensuring Asthma Friendly Schools

Education Act, s.265 – Duties of Principal

Regulation 298 s.20 – Duties of Teachers

NOTES: