

BOARD ADMINISTRATIVE PROCEDURE	
<i>Administrative Procedure</i>  <b>ASTHMA: REDUCING THE RISKS (Ryan's Law)</b>	<i>Administrative Procedure Number</i>  <b>804</b>
<i>Directional Policy</i>  <b>Healthy Schools and Workplaces</b>	

### Title of Administrative Procedure:

ASTHMA: REDUCING THE RISKS (Ryan's Law)

### Date Approved:

2023

### Projected Review Date:

2028

### Directional Policy Alignment:

This Administrative Procedure aligns with the Healthy Schools and Workplaces Directional Policy 800. The Board recognizes that the health and well-being of our students and staff is foundational to their success. A healthy environment involves being respectful of one another's social, emotional, spiritual and physical well-being. We all have a collective responsibility to create healthy work environments to keep our students and staff safe.

### Alignment with Multi-Year Strategic Plan:

The Asthma: Reducing the Risks Administrative Procedure supports the Board's Mission to educate students in faith-filled, loving, safe, inclusive schools to develop the God given abilities of each person. This Administrative Procedure aligns with the Board's Multi-Year Strategic Plan 2021-2025 priorities of Valuing Relationships, Nurturing Mental Health and Well-Being, and Ensuring Equity.

[PVNCCDSB Board Vision, Mission and Strategic Priorities](#)

**Action Required / Guidelines:**

In accordance with Ryan's Law, Ensuring Asthma Friendly Schools - 2015 and Policy Program Memorandum 161 - 2018, in respecting the dignity and worth of all people and in keeping with the Gospel values, Catholic Social Teachings, and the Catholic Graduate Expectations - the PVNC 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. This Administrative Procedure outlines 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 Plan of Care and 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:**

- ensuring alignment of this administrative procedure with the [Healthy Schools and Workplaces Directional Policy](#);
- 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:**

- providing leadership and designating resources to ensure the implementation of and compliance with this administrative procedure.

**Superintendents are responsible for:**

- supporting principals and other employees for whom they have supervisory responsibility with the implementation and compliance with the procedures and requirements under this administrative procedure;
- 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:**

- implementing this administrative procedure in accordance with the parameters outlined;
- providing leadership and support for staff in their knowledge, understanding, and implementation of this administrative procedure;
- communicating 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:
  - during the time of registration
  - each year during the first week of school
  - when a child is diagnosed and/or returns to school following a diagnosis
- identifying students with asthma at the time of registration, during the first week of school or following diagnosis and gathering necessary asthma related information from the parents/guardians and student;
- co-creating, reviewing, or updating an individual student Plan of Care for asthma management for each student diagnosed with asthma, based on the recommendation of the student's health care provider;
- maintaining a Plan of Care 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;
- ensuring that all students have 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;
- informing 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 Plan of Care;
- maintaining an individual Plan of Care for each student known to have a diagnosis of asthma and ensure that the plan contains, but is not limited to:
  - a current emergency contact list;
  - up-to-date medical information including a list of current required medication and appropriate puffer devices;
  - pre-authorization to administer medications;
  - parental permission for the student to carry medication and/or medical supplies
  - physician's instructions and a signed reciprocal consent to disclose information with the attending physician;
  - an emergency response plan that includes contingencies for school excursions and activities;
  - parent/guardian or adult student consent to disclose;
  - log of interventions and/or administration of medication;
  - a current photograph of the student;
  - 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;
  - 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;
  - 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.
- providing relevant information from the student's Plan of Care to school staff and others who are identified in the Plan of Care (e.g, transportation providers,

occasional staff who will be in direct contact with the student), including any revisions that are made to the plan;

- communicating with parents/guardians in medical emergencies, as outlined in the Plan of Care

**Staff are responsible for:**

- ensuring they are knowledgeable about the requirements and parameters outlined in this administrative procedure;
- becoming familiar with all students in their care who have been diagnosed with asthma;
- reviewing Plans of Care for any student with whom they have direct contact and knowing where to access the individual Plans of Care for all students during a medical emergency.
- providing occasional staff and other board personnel with access to individual Plans of Care of students for whom they will have direct contact with.
- following 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
- enabling students with prevalent medical conditions to participate in school to their full potential, as outlined in their Plan of Care;
- 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;
- 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;
- taking reasonable steps to safeguard the well-being of students while at school and during school athletic events, field trips etc.;
- responding appropriately to care for students, when an injury or illness occurs;

**Students are responsible for:**

- 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 are expected to:

- carry on self or have accessible at all times their reliever inhaler/
- wear medical alert identification;
- promptly seek support from an adult in the event of the onset of symptoms of asthma or any challenges they may be facing related to asthma;
- participate in the development and review of the Plan of Care to promote an understanding of the plan and develop their potential for self-advocacy and self-management;
- set goals for increased self-management, in conjunction with parents / guardians and health care professionals.

**Parents 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;
- collaborating with a medical doctor and the Principal to create a Plan of Care for their child;
- providing the school and/or child with sufficient quantities of (non-expired) medication and supplies in their original, clearly labeled containers, as directed by a medical doctor and as outlined in the Plan of Care;
- ensuring that written consent has been given for their child to carry their asthma medication (if student is 16 or older - parental/guardian consent not required), 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 completed Plan of Care, 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;
- communicating and collaborating with school staff about arrangements and considerations for field trips, excursions, co-curricular activities, and co-operative education placements etc.

**Progress Indicators:**

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

**Definitions:**

***Asthma:*** 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*** - is 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.”

***Plan of Care*** - is a form that contains individualized information on a student with a prevalent medical condition. The Plan of Care for a student with a prevalent medical condition should be co-created, reviewed, and/or updated by the parents/guardians in consultation with the principal or the principal's designate, designated staff (as appropriate), and the student (as appropriate), during the first thirty school days of every school year and, as appropriate, during the school year (e.g., when a student has been diagnosed with or changes to a prevalent medical condition).

## References:

- Administrative Procedure 805 - Administration of Medication or Health Support Services, and Emergency Response
- [Ryan's Law, 2015](#) – Ensuring Asthma Friendly Schools
- [Policy Program Memorandum 161](#) - 2018
- [Education Act, s.265](#) – Duties of Principal
- [Regulation 298 s.20](#) – Duties of Teachers