



Medical/Health Supports Policy

Date Approved: December 2010

Review Date: December 2013

Purpose:

The purpose of this policy is to:

- demonstrate the Hamilton-Wentworth District School Board's commitment to ensuring the provision of plans, programs, and/or services that will enable students with health/medical needs to attend and participate in school;
- share the responsibility for providing such plans, programs, and/or services with families and community agencies/partners; and
- ensure that key principles of independence, dignity, integration and equality of opportunity are reflected and valued in our learning and working environment.

Guiding Principles:

1. All health support services must be administered in a manner that respects, to the degree possible in the circumstances, the student's right to privacy, dignity, and cultural sensitivity.
2. All procedures related to medical/health supports for individual students will include consultation processes with families and, where required, appropriate service providers.
3. Students with special medical/health needs will be maintained in the school in which they are registered whenever possible; however, when this is not possible, students will be supported in appropriate facilities within the system to address their individual needs.
4. Procedures related to medical/health needs of individual students will address physician or health professional prescribed plans of care and relevant legislation and policies.
5. Medical/health services may be requested in accordance with the Ministry of Education Policy/Program Memorandum 81: Provision of Health Support Services in School Settings.
6. The designation of roles and responsibilities for medical/health support services in school settings does not preclude, in emergency situations, the provision of assistance by school board personnel.
7. Staff who provide health supports to students shall have full coverage under the Board's liability policies.
8. Services and supports as described in the directives contained within this policy shall be rendered by authorized personnel only (i.e., Board staff who have received pertinent information and training). Students and volunteers are not considered authorized personnel.

Intended Outcome:

The Hamilton-Wentworth District School Board, in conjunction with the appropriate health care provider, will share the responsibility for providing school health support services to ensure that all school-aged children can attend and participate in school regardless of their special health support needs.

Responsibility: Superintendent with responsibility for Special Education

Definitions/Acronyms:

CCAC	: Community Care Access Centre
IEP	: Individual Education Plan
OT	: Occupational Therapist
PT	: Physiotherapist
PPM	: Ministry of Education’s Policy/Program Memorandum
EA	: Educational Assistant

Action Required:

- Ensure that a set of directives in the following areas, that outline specific medical/health procedures to be followed, are developed and regularly reviewed and updated:
 - Administration of Oral Prescription Medication;
 - Diabetes Management and Education;
 - Blood Borne Pathogens;
 - Anaphylaxis;
 - Pediculosis;
 - Use of Service Dogs in Schools;
 - Catheterization and Suctioning, Lifting, Positioning, and Physical Management;
 - Use of Automated External Defibrillators (AEDs).
- Ensure that additional directives as may be required to address other specific medical/health conditions are developed, and then regularly reviewed and updated.

Progress Indicator:

The Hamilton-Wentworth District School Board will work with Community Care Access Centre and other authorized service providers to facilitate supports such that students with medical/health needs are able to attend and participate in school.

References:

Legislation:	Education Act Ontario Human Rights Code Accessibility for Ontarians with Disabilities Act Freedom of Information Act Occupational Health and Safety Act Policy/Program Memorandum 81: Provision of Health Support Services in a School Setting Memorandum dated August 14, 1989, Catheterization and Suctioning Sabrina’s Law
Pillar Policies:	Diversity and Equity Safe Schools
Policy:	Transportation Occupational Health and Safety Accessibility Standards for Customer Service (and related Policy Directives)
Plan:	HWDSB Accessibility Plan



Medical / Health Support Policy

Policy Directive: Use of Automated External Defibrillators (AEDs)

Date Approved:

Review Date:

BACKGROUND INFORMATION

Applicable Reference from the Policy

Hamilton-Wentworth District School Board is committed to ensuring the provision of plans, programs, and/or services that will enable students with health or medical needs to attend and participate in school.

All health support services must be administered in a manner that respects, to the degree possible in the circumstances, the student's right to privacy, dignity, and cultural sensitivity.

Definition

An Automated External Defibrillators (AED) is a portable electronic device that can audibly prompt and deliver an electric shock that will disrupt or stop the heart's dysrhythmic electrical activity. The shock can cause the heart to revert to a more effective rhythm during some life threatening situations. However, the AED is not a stand-alone treatment. It is only one step in a chain of medical care involving cardio-pulmonary resuscitation, defibrillation, advanced life support with drugs and airway control, and cardiac intensive care in a hospital.

Chase McEachern Act (Heart Defibrillator Civil Liability Act)

Chase McEachern was a boy from Barrie, Ontario, who campaigned to have it mandatory that heart defibrillators be made available at schools and hockey arenas. Unfortunately, on February 9th, 2006, he collapsed at school of cardiac arrest before his vision could be implemented, and on February 15th, 2006 he died.

In 2006, the Ontario government introduced the Chase McEachern Act (Heart Defibrillator Civil Liability Act, 2006). **This Act protects people from liability if they use a defibrillator to assist someone at an emergency, as long as the defibrillators were made available in good faith.**

Protection from civil liability, user of defibrillator Section 2. (1) reads:

- 2.3.1 Despite the rules of common law, a person described in subsection (2) who, in good faith, voluntarily and without reasonable expectation of compensation or reward uses a defibrillator on a person experiencing an emergency is not liable for damages that result from the person's negligence in acting or failing to act while using the defibrillator, unless it is established that the damages were caused by the gross negligence of the person. 2007, c. 10, Schedule. N, s. 2 (1).

1.0 RESPONSIBILITY

- 1.1 Principals will ensure that staff receive appropriate training, as outlined in this policy.
- 1.2 Custodial staff will ensure that each AED device is inspected on a regular basis, as outlined in this policy.

2.0 DEPLOYMENT OF AED UNITS

- 2.1 AED devices will be distributed to schools according to criteria determined through consultation between the Board and the City of Hamilton Emergency Services.
- 2.2 AED devices will be installed in a location determined by the designated school principal in consultation with the City of Hamilton Emergency Services. AED devices will be deployed in view of an existing video camera where possible.

3.0 TRAINING

In buildings where an AED exists, the following levels of training will occur:

3.1 Awareness Training

- 3.1.1 The Principal will ensure that each staff member has received training as prescribed by the Board's Health and Safety Department.
- 3.1.2 The awareness training will occur at the beginning of each school year and will occur no later than November 1st.
- 3.1.3 Staff will be made aware of the location of the AED.
- 3.1.4 The Principal will ensure that the location of the AED is included in the school staff handbook.
- 3.1.5 Teaching staff will ensure that information is left for occasional teachers relating to the location of the AED.

3.2 Initial Training of Emergency Response Team

- 3.2.1 The City of Hamilton Emergency Services will provide the Principal with the contact information of an AED training provider.
- 3.2.2 The Principal will identify staff to be trained on the use of the AED as part of the school's Emergency Response Team.
- 3.2.3 The Principal will contact the AED training provider to arrange for the training to take place.
- 3.2.4 The training will be provided at no cost to the board.
- 3.2.5 School personnel must be made aware of which school staff have been trained on the use of the AED.
- 3.2.6 Principals, along with members of the Emergency Response Team, will work together to ensure that school-based procedures are in place to manage emergencies requiring the use of AEDs. .
- 3.2.7 Principals will ensure that staff who have been involved in an emergency that required the use of the AED are apprised of services available to them through their EAP provider.

3.3 Ongoing Training of Emergency Response Team

- 3.3.1 Each school is required to have an appropriate number of staff members trained in First Aid/CPR as per the Board's First Aid program. This training is provided by the

Board (Health and Safety), through a certified provider. Participants in this training become certified in First Aid/CPR.

- 3.3.2 The First Aid/CPR certification training shall include a module on the use of AEDs.
- 3.3.3 School personnel must be made aware of which school staff have First Aid/CPR training. Staff trained in First Aid/CPR shall have their certificates posted on the Health and Safety bulletin board.

4.0 MAINTENANCE OF AED DEVICES

- 4.1 Daily: Each AED device will be visually inspected on a daily basis by custodial staff. If it is determined that the device or its casing has been tampered with, a report will be made to the Principal.
- 4.2 Monthly: to ensure that all AED devices are maintained in proper working order, monthly visual inspections must occur. Monthly inspections shall be performed by the In-School Joint Health and Safety Committee.
- 4.3 If during any visual inspection, the AED is noted to have a red "X" in the viewing window, a report will be made to the Principal, who will call the number listed on the AED device for immediate replacement and servicing.
- 4.4 Should the AED be used in an emergency, call the pager phone number posted in the AED cabinet. Hamilton Emergency Services will have an EMS Supervisor respond to the site with a replacement AED. The used unit will be restocked and the event record will be uploaded to the EMS data base. The original unit will be returned once it is restocked and serviced.

5.0 STUDENTS REQUIRING ACCESS TO AEDS (MEDICAL PRESCRIPTION)

- 5.1 Some students may require ongoing access to an AED, as prescribed by a medical doctor. For the purpose of 5.0 of this procedure, a medical prescription is used to describe a prescription from a member of The College of Physicians and Surgeons of Ontario.
- 5.2 In situations where there is no AED located in the school, or the AED in the school will not meet the needs outlined in the medical prescription, it is the parent/guardian's responsibility to provide an additional AED.
- 5.3 When a student has a medical prescription for an AED, the following roles/responsibilities will occur:
 - 5.3.1 Parent/Guardian:
 - Provide documentation from a member of the College of Physicians and Surgeons diagnosing the child and demonstrating the requirement of an AED.
 - In situations where there is no AED located in the school, or the AED in the school will not meet the needs outlined in the medical prescription, provide and maintain in good working order an AED for the exclusive use of the student.
 - Complete and sign a **Defibrillator Emergency Treatment Form**, in collaboration with school staff.
 - Maintain an ongoing and cooperative relationship with school staff.
 - Ensure during class trips off of the school property that an AED device accompanies the child.
 - Provide a copy of the owner's manual or any other pertinent information required for the safe operation of the student's AED device.

5.3.2 Principal:

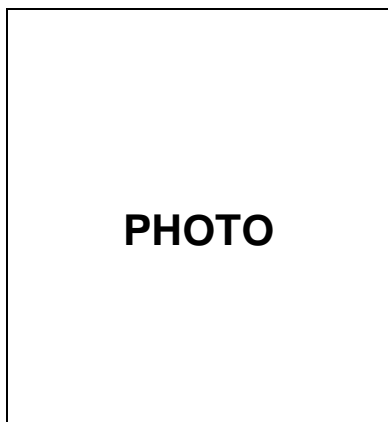
- Ensure that a **Defibrillator Emergency Treatment Form** is completed, signed, and dated.
- Ensure that copies of the **Defibrillator Emergency Treatment Form** are provided to all teachers who teach the student.
- Display the **Defibrillator Emergency Treatment Form** in the same school location as with other medical information.
- In situations where the student is required to bring a personal AED to school, develop, in collaboration with the parent/guardian, a protocol for the student bringing the AED to school, its storage during the day, and its transport home at night.
- Ensure members of the entire school staff are made aware of the student's medical condition and the appropriate treatment.

5.3.3 Classroom Teacher:

- Meet with the student and parent to gain insight into the specific information about the medical condition and proper treatment. This should include discussions about modifications to the student's activities at school.
- Leave the **Defibrillator Emergency Treatment Form** regarding the student in an organized, prominent and accessible format for occasional teachers.



DEFIBRILLATOR EMERGENCY TREATMENT FORM



Student Name: _____

Classroom Teacher _____

PARENT/GUARDIAN EMERGENCY CONTACTS: (Prioritize Calls 1-2-3)

Contact #1 (H) _____ (W) _____ (C) _____

Contact #2 (H) _____ (W) _____ (C) _____

Contact #3 (H) _____ (W) _____ (C) _____

AED IS ONLY TO BE USED WHEN THE STUDENT IS UNCONSCIOUS (UNRESPONSIVE) AND NOT BREATHING.

DO NOT LEAVE THE STUDENT ALONE.

If the student is unconscious:

- 1. Assess vitals; if necessary, trained staff will begin CPR. Retrieve and use Defibrillator.**
2. Roll the student on his/her side.
3. Call school office.
4. School office will **call 911.**
5. Ensure EMS responders are met and directed to the location of the student.
5. Inform parents or guardians.

Parent/Guardian Signature

Principal's Signature

Date