



5.12 Student Health Service

5. Students - Administrative Procedure Manual

Communicable Diseases

The Pine Creek School Division recognizes that the prevention, management and control of communicable diseases requires cooperation with health-care professionals and practitioners and decisions made by the school division must be guided by the professional judgment of those charged with providing health care services.

Therefore, when making decisions with regard to communicable diseases and/or conditions including, but not limited to, measles, chicken pox, lice, scabies, mumps, influenza, etc., schools will refer to and adhere to the latest protocols posted by Manitoba Health Communicable Disease Control Unit on the provincial website which is currently hosted at: <http://www.gov.mb.ca/health/publichealth/cdc/protocol/index.html#P> While this website location may change, the policy still directs Pine Creek personnel to consult with the latest protocols set by Manitoba Health.

Such decisions may include, but are not limited to, the following: examination of students for communicable diseases or conditions; exclusion of staff or students from school; timelines for return to school; notifications to the general public; distribution of information on communicable diseases or conditions.

For further information, assistance and/or clarification, schools will liaise with public health professionals from the local Regional Health Authority.

The school division also recognizes its responsibility to respect the privacy of members of the school community affected by communicable diseases and conditions.

Anaphylaxis

This Pine Creek School Division reflects the guidelines and procedures outlined in the provincial Unified Referral and Intake System's (URIS) Manual (1999).

Anaphylaxis, sometimes called "allergic shock" or "generalized allergic reaction", is a severe allergic reaction that can lead to rapid death, if untreated. Avoidance of the allergen is the only way to protect children known to be at risk of anaphylaxis. Despite the best efforts of parents and schools, no individual or organization can guarantee an "allergy-free" environment. This procedure is developed to aid these efforts and attempts to provide clear procedures for schools in cases where an emergency response to anaphylaxis might become necessary.

The first plan of action calls for the administration of adrenaline by auto-injection (epi-pen) immediately, at the sign of a reaction, followed by immediate transportation to hospital, by ambulance if possible.

If conditions of this procedure are not met by the parents/guardians, the school division may not be in a position to help the student in the event of medical needs/emergencies.

Roles and Responsibilities

Ensuring the safety of children with known risk of anaphylaxis in a community setting depends on the co-operation of the entire community. To minimize risk of exposure, and to ensure rapid response to an emergency, parents/guardians, children and program personnel must all understand and fulfill their responsibilities. The inter-relatedness of these roles is vital, for failure of any group to respond appropriately will negatively impact upon all others.

The school will endeavor

- 1) To create a safe and healthy environment for students with severe life threatening allergies;
- 2) To be aware of those students' needs to maintain a positive self-concept and not exceed the level of attention given due to their condition.

Responsibilities of the child with a life -threatening allergy

- 1) Take as much responsibility as possible for avoiding allergens, including checking labels and monitoring intake (developmentally appropriate).
- 2) Eat only foods brought from home.
- 3) Wash hands before and after eating
- 4) Learn to recognize symptoms of an anaphylactic reaction (developmentally appropriate)
- 5) Promptly inform an adult, as soon as accidental exposure occurs if symptoms appear (developmentally appropriate)
- 6) Wears a medical identification bracelet
- 7) Keep an auto-injector on their person at all times i.e. fanny pack (developmentally appropriate)
- 8) Know how to use the auto-injector (developmentally appropriate)

Responsibilities of the parents/guardians

- 1) Identify their child's allergies and needs to the school and to provide authorization for the release of health related information to appropriate medical authorities and practitioners.
- 2) Ensure that their child has and carries an up-to-date auto injector or the auto-injector is in a specified location or with child care personnel
- 3) Ensure their child has and wears a medical identification bracelet
- 4) Provide the school with current (within one year) written medical instructions signed by the child's physician and parent/guardian
- 5) Submit all necessary documentation as required
- 6) Provide the school with adrenaline auto-injectors (pre-expiry date)
- 7) Ensure that auto-injectors are taken on field trips
- 8) Participate in the development of a written Individual Health Care Plan for their child, updated annually
- 9) Be willing to provide safe foods for their child for special occasions
- 10) Provide support to the school and staff as required
- 11) Teach their child: (developmentally appropriate)
 - i. To recognize the first signs of an anaphylactic reaction
 - ii. To know where their medication is kept and who can get it

- iii. To communicate clearly when he or she feels a reaction starting
- iv. To carry his/her own auto-injector on their person (eg. fanny pack)
- v. Not to share snacks, lunch or drinks
- vi. To understand the importance of hand washing
- vii. Coping skills relevant to condition / situation

Responsibilities of the School

- 1) Submit a URIS Application form to URIS (Unified Referral and Intake System)
- 2) Identify a contact person to liaise with the contracted health care professional, if other than him/herself
- 3) Develop and assist with the implementation of policies and procedures for reducing risk in the school
- 4) Ensure that the parents of an anaphylactic child are aware of relevant school and divisional procedures
- 5) Work as closely as possible with the parents/guardians of the child with known risk of anaphylaxis
- 6) Ensure the parents/guardians have completed all the necessary forms
- 7) Ensure the instructions from the child's physician are on file
- 8) Post emergency response plans, with photograph, in the staff room and office (with parent/child approval)
- 9) Maintain up-to-date emergency contacts and telephone numbers
- 10) Ensure all staff, including substitutes and bus drivers (regular and spare), are informed of the presence of a child with known risk of anaphylaxis, and that appropriate support/response is available should an emergency occur
- 11) Inform parents/guardians that a child with a life-threatening allergy is in direct contact with their child, and ask for their support and cooperation (with parent approval)
- 12) Arrange an annual in-service through the Public Health Nurse (or contracted nursing agency if Public Health Nurse is not available) to train staff and monitor personnel involved with the child with life-threatening allergies.
- 13) Ensure an Individual Health Care Plan, which includes an Emergency Response Plan, is completed and reviewed annually for each child with a life-threatening allergy.
- 14) If not developmentally appropriate for the child to carry an auto-injector, ensure that it is carried by an adult responsible for administering the medication
- 15) Ensure safe procedures are developed for field trips and extra-curricular activities

5. Responsibilities of the Classroom Teacher

- 1) Discuss anaphylaxis with the class in age appropriate terms
- 2) Inform students of the danger of sharing lunches or snacks
- 3) Choose allergen-free foods for classroom events
- 4) Encourage all children to wash hands before and after eating
- 5) Facilitate communication with other parents
- 6) Follow the school plan for reducing risk in classroom and common areas
- 7) Leave information and a photo of the anaphylactic child in an organized, prominent place and accessible format for substitute teachers

- 8) Ensure auto-injectors are taken on field trips

6. Responsibilities of Bus Drivers

- 1) Attend in-service sessions provided by the school division to receive training in the use of an auto-injector (epi-pen)
- 2) Be aware of emergency response procedures
- 3) Carry a copy of the emergency response plan on the school bus in a safe place
- 4) Ensure that an auto-injector is available and accessible when the student is on the bus