

STUDENT HEALTH SERVICES

Background

The District recognizes that its employees do not generally possess the expertise required to determine the need for, or the appropriate means of, administering medical treatment to students. Nevertheless, a staff member may be required to administer medication or emergency first aid treatment to a student in order to preserve the life or physical well-being of that student.

Medical treatments of students by District staff is a sensitive issue and must be governed by District policy and procedures to ensure consistency as well as protect the rights of students and staff.

Guidelines

1. Doctrine of In Loco Parentis

In situations relating to the medical treatment of students, the District recognizes that its employees are subject to the responsibility and limitations inherent in the common law doctrine of in loco parentis. Specifically, in loco parentis requires that:

- 1.1 An employee act as would a reasonable and prudent parent in the same circumstances and conditions.
- 1.2 The employee does not have all of the authority that a parent would have; i.e. employees do not have the authority to provide consent for the medical treatment of a student.
- 1.3 The employee recognizes the limitations of his/her ability to provide direct assistance.

2. Scope of Routine Medical Services

The level of service provided by District staff for students requiring routine medical attention will be determined by application of the following criteria:

- 2.1 The attending physician may indicate upon the enrollment of the student and thereafter as dictated by individual needs, in writing, that:
 - 2.1.1 The service requested is of such a simplistic nature that a lay person (i.e. teacher, educational assistant) could successfully perform the function.
 - 2.1.2 The service has to be performed during regular school hours and/or approved school activities.
 - 2.1.3 The service is critical to the well-being and functioning of the student.

- 2.1.4 No other reasonable alternative service is available; i.e. through any community agency.
- 2.2 The Principal deems that appropriate resources are available and that the services will not be disruptive to the educational program.

3. Emergency Assistance

The District recognizes that its employees may, from time to time, encounter situations that necessitate taking immediate action supportive of a student's physical well-being. Staff members who render assistance to a student who is ill, injured or unconscious as a result of accident or emergency will be protected from legal action as outlined in Section 2 of the Emergency Medical Aid Act.

Furthermore, all employees are protected by the District's liability insurance when acting within the scope of their approved duties.

Procedures

1. Administration of Prescription Drugs to Students

- 1.1 If a student who is incapable of self-administration must receive medication prescribed by a medical practitioner during the school day or during an extracurricular or co-curricular activity, the Principal may agree to provide a monitoring function.
- 1.2 Where staff members are designated by the Principal to monitor the administration of medication, it is essential that medical directions be obtained and followed explicitly and that adequate records are kept; e.g.:
 - 1.2.1 Student's name.
 - 1.2.2 Name of medication or preparation.
 - 1.2.3 Prescription number (if available).
 - 1.2.4 Physician.
 - 1.2.5 Prescribed dosage during school hours.
 - 1.2.6 Observed dates and times of consumption.
 - 1.2.7 Notes of any related incidents.
 - 1.2.8 Reactions.
 - 1.2.9 Breaks in routine.
 - 1.2.10 Related communication with parents, guardian or physician.
 - 1.2.11 Extenuating circumstances.
 - 1.2.12 Instructions on the use of an epi-pen for students with life-threatening allergies. (Epinephrine: a disposable spring-loaded self-injectable syringe with a concealed needle.)

NOTE: Refer to the instructions as completed for the student on the appropriate form.

- 1.3 Principals shall ensure that staff monitoring the administration of any medication are informed in advance concerning possible reactions which may occur and the appropriate procedures to follow. Parents or guardians should be consulted as necessary.

2. Life-Threatening Medical Conditions

- 2.1 The Principal, through registration procedures and in consultation with parents or guardians, shall attempt to identify any students who are subject to medical conditions which may be life threatening and who, therefore, may require specific medical attention.
- 2.2 Having secured advice in such cases, the Principal shall attempt to ensure that all who may be involved with the student (e.g. school staff, volunteers, school bus drivers and substitutes) are informed concerning any required emergency procedures.
- 2.3 Specific instruction by medically qualified personnel should be sought for staff members who may be required to apply respiratory equipment or give injections; e.g. severe allergic reactions, etc.

NOTE: A series of very specific and helpful suggestions have been made to help schools prevent and deal with anaphylaxis or life-threatening allergies. There are specific suggestions for staff, parents and students. Please refer to the May 1995 document Life-Threatening Allergies in Schools and the 2001 edition of Anaphylaxis - A Handbook for School Boards.

3. Serious Injury or Accident

In the event of serious injury or accident, the following procedures should be followed:

- 3.1 The Principal or designate shall make every reasonable effort to assess the seriousness of an emergency medical condition in order to initiate the necessary course of action.
- 3.2 When a student requires emergency medical treatment, the Principal or designate shall ensure that parents/guardians are contacted as soon as possible.
- 3.3 If there is any indication or possibility of a head injury to a student, the principal must report this to the parent of the student. This must be recorded on the accident report form.
- 3.4 An adult shall supervise the student until medical assistance is available or the parents/guardians arrive.
- 3.5 In the event of an emergency medical condition which renders a student immobile, or when the seriousness of the condition cannot be determined, the student should not be moved unless at risk of further injury.

- 3.6 The paramedics should be called to arrange for treatment and transportation to the nearest medical facility.
- 3.7 Appropriate arrangements should be made to access medical attention or transport the injured student to a medical facility in the event that paramedics are not available; e.g., on camping trips, excursions.
- 3.8 First aid kits must be available in all District buildings to accompany field trips.
- 3.9 The staff members shall complete appropriate reports on the serious injury or accident.

4. Non-Prescription Drugs

Non-prescription drugs shall not be purchased on the accounts of the District or the school nor distributed to any student enrolled in a school operated by the District.

5. Legal Consent for Medical Treatment

Under no circumstances will employees of the District give legal consent to medical treatment of students in their charge. In the event medical treatment is refused by a medical practitioner because of lack of valid consent, the employee shall:

- 5.1 Defer to the opinion of the medical practitioner.
- 5.2 Advise the Principal, or designate, of the problem and the recommendation of the medical practitioner.
- 5.3 Continue to attempt to contact the parents or legal guardian.

These provisions are not intended in any way to prevent an employee from administering an epi-pen and/or arranging for transfer to the hospital even if a parent or guardian is not available to give consent.

6. Epi-pens

- 6.1 Epi-pens must be provided by parents for a specific student's use.
- 6.2 When students are old enough (6-8 years old), students should carry their epi-pens on their person (Anaphylaxis Handbook).
- 6.3 Where students are not old enough or unable to carry and administer their own epi-pen, the principal will develop a plan with parents to ensure that the epi-pen is available and administrable.
- 6.4 Developing plans for epi-pens, or any drug, should be justifiable from the standpoint of a "prudent parent".

Reference: Section 45, School Act
Emergency Medical Aid Act, Section 2

EMERGENCY MEDICAL AID ACT CHAPTER E-7

HER MAJESTY, by and with the advice and consent of the Legislative Assembly of Alberta, enacts as follows:

Definitions

1. In this Act,
 - a) “Physician” means a person who is registered as a medical practitioner under the Medical Profession Act;
 - b) “Registered health discipline member” means a person who is registered under the Health Disciplines Act, or a regulated member under Schedule 1, 10, 13, 18 or 25 to the Health Professions Act;
 - c) “Registered nurse” means a person who is a registered nurse under the Nursing Profession Act.

RSA 2000 cE-7 s1; RSA 2000 cH-7 s155

Protection From Action

2. If, in respect of a person who is ill, injured or unconscious as the result of an accident or other emergency,
 - a) A physician, registered health discipline member, or registered nurse voluntarily and without expectation of compensation or reward renders emergency medical services or first aid assistance and the services or assistance are not rendered at a hospital or other place having adequate medical facilities and equipment, or
 - b) A person other than a person mentioned in clause (a) voluntarily renders emergency first aid assistance and that assistance is rendered at the immediate scene of the accident or emergency, the physician, registered health discipline member, registered nurse or other person is not liable for damages for injuries to or the death of that person alleged to have been caused by an act or omission on his or her part in rendering the medical services or first aid assistance, unless it is established that the injuries or death were caused by gross negligence on his or her part.

RSA 1980 cE-9 s2; RSA 1980 cH-5.1 s34; 1984 c53 s27

Revisions: May 18, 2007, May 30, 2017