

## **APPENDIX 3**

### **Procedures for Student Health and Safety Policy 6.04**

#### **A. Disclosure of Health and Medical Information**

1. Parents or guardians are responsible for notifying the school of their child's health needs and are expected to provide timely and accurate information about health concerns that could affect the child's behaviour and learning and/or the well being of other students and staff. Health and medical concerns are to be reported annually on the appropriate forms provided.

#### **B. Administration of Medication**

1. The administration of medication to students is the responsibility of the parent/guardian and the student's physician.
2. Students are expected to take required medications at home or under the supervision of a parent/guardian.
3. Notwithstanding sections 1 and 2 above, medications may be taken by a student at school provided that:
  - i. The student's attendance depends upon taking medication at school and may require assistance from designated staff to do so.
  - ii. A properly completed and signed 'Authorization to Administer Medication and Release' Form is received from the parent and approved by the Principal.
  - iii. In the case of prescription medications, an attending physician's signature is also required on the aforementioned form confirming that administration of such medication is within the realm of competence of an adult untrained in medical procedures.
4. An 'Authorization to Administer Medication and Release' Form is only valid for the school year and must be updated by the parent/guardian as required to reflect any changes in administration of a student's medication.
5. Information concerning the administration of medication to a student is to be recorded and stored in the student record file for the duration of the medication period.
6. Students are expected to assume as much responsibility as possible for the safe handling and self-administration of medication.
7. Medications are to be stored at school in accordance with the following requirements:
  - i. Prescription and non-prescription medications must be contained in approved childproof containers clearly labeled with the student's name, common name of medication, dosage and administration instructions.
  - ii. All medications are to be stored in a secure facility within the main office, keyed for access by all staff as required.
  - iii. A record of medications in storage must be maintained and kept in the storage facility.

- iv. Unused medications are to be returned to the parent/guardian at the end of the school year.
8. Arrangements to administer medication will remain in effect only as long as they are satisfactory to the Principal and staff members responsible.

### **C. Medical and Health Related Emergencies**

1. When a student is deemed to require immediate medical attention due to accident or illness the following procedures are to be followed in conjunction with those detailed in the *Crisis Management Procedures Manual*:
  - i. Contact Emergency Medical Services (911).
  - ii. Contact a parent/guardian or emergency contact person as soon as possible.
  - iii. Provide emergency first aid as required and ensure an adult remains with the student until relieved by a parent/guardian or emergency medical personnel.
  - iv. If the nature of the student's condition indicates that moving them will cause further injury, they should be immobilized until emergency medical personnel arrive.
  - v. If a parent/guardian cannot be contacted, provide medical assistance as required and notify the parent/guardian as soon as practicable.
  - vi. Notify the Principal of the incident as soon as possible.
  - vii. Complete an *Incident Report* as soon as practicable after the event.
2. If a student is transported to a medical facility without a parent/guardian being contacted, a staff member must accompany the student until relieved by a parent/guardian or until the student is discharged from medical care, at which time the attending staff member will accompany the student back to school unless otherwise directed by the parent/guardian.
3. Notwithstanding the requirement to provide the most immediate care to the student, all decisions regarding medical treatment are to be left to the parent/guardian and the student in consultation with medical staff.
4. A student who suffers a minor injury or becomes ill at school is to receive treatment within the parameters of first aid training and resources available to staff members.
5. Any student placed in the medical room is to be monitored by staff.
6. A parent/guardian or emergency contact person is to be notified when a student complains of any illness or injury at school.
7. A student being dismissed from school due to illness or injury must be released to a parent/guardian or designate. Students are not to be dismissed without supervision unless directed to do so by a parent/guardian.

## **D. Allergies and Chronic Illnesses**

1. Parents/guardians are responsible for informing the school of any allergies or chronic illnesses that may impact a student's attendance or performance at school. This information must include:
  - i. Nature of allergy or illness
  - ii. Symptoms and/or indications requiring intervention
  - iii. Emergency treatment procedures
  - iv. Possible side effects or reactions to treatment
  - v. Name and phone number of attending physician.
2. Parents are to be informed that staff members are not specifically trained to administer medication or provide treatment for medical conditions.
3. In accordance with Section B of this policy, any medication or anti-allergen that a student may require must be properly stored and labeled for identification in a secure facility within the school office.
4. Accurate and current records of all students with severe allergies or chronic illnesses that may require emergency intervention are to be maintained in the office and confidentially circulated to all staff members.
5. Notwithstanding the foregoing, allergic reactions and chronic illnesses are to be dealt with in the same manner as Medical and Health Related Emergencies cited in Section C above.

## **E. First Aid Training**

1. In recognizing the potential for illness or injury to occur among students and staff, all staff members will receive accredited first aid certification training according to a schedule to be determined by the Professional Development Committee and school administration.

## **F. Suicide Prevention, Intervention, and Postvention**

1. The Calgary Science School will develop and maintain plans for suicide **prevention, intervention and postvention**.
  - i. Plans for these three components are to be developed as follows:
    - (a) **Prevention** - Curricular inputs which educate students regarding coping and problem-solving strategies for living and which provide students with specific information relating to suicide at appropriate points in their education.
    - (b) **Intervention** - Provision for the early recognition of suicide potential, direct contact with the student involved, and referral to system and outside resources as necessary for assessment and care.
    - (c) **Postvention** - Plans for dealing with students and staff after a suicide (or other major loss) involving one of their members has occurred.

- ii. Plans are to be developed and kept current by the principal in consultation with staff and appropriate resource personnel.
  - iii. Plans are to be included in the school's staff handbook and made known to all school staff (certificated and non-certificated) at the commencement of each school year.
- 2. At least one certificated staff member will serve as a "Suicide Prevention Trainer".
- 3. The Suicide Prevention Trainer is responsible for:
  - i. Becoming knowledgeable regarding suicide prevention, intervention, and postvention.
  - ii. Providing in-service training to school-based staff designated intervenors.
  - iii. Responding to requests from staff for consultation pertaining to students or to the subject of suicide in general.
- 4. At least one member of the certificated staff of every school is to be assigned responsibility for serving as a "Designated Intervenor" to:
  - i. Participate in the "Suicide Prevention Training Program (SPTP)" workshop.
  - ii. Serve as a resource person to other staff within the school in matters pertaining to suicide prevention, intervention, and postvention.
  - iii. Familiarize all school staff at the commencement of each school year with the following:
    - (a) Suicide prevention awareness materials
    - (b) Prevention and intervention procedures.
- 5. Through the initiative of the principal, all certificated and non-certificated staff are to be provided with in-service activities designed to assist them in becoming and remaining familiar with the school's suicide prevention plans and with the knowledge required to implement them. The services of the school's designated intervenor are to be used in providing in-service training.
- 6. Plans for suicide prevention will include measures such as the following:
  - i. Providing instruction regarding the subject of suicide to students as a part of the elementary and junior high health curricula.
  - ii. Dealing with suicide in curriculum wherever it is relevant and appropriate to do so.
  - iii. Using staff from the Canadian Mental Health Association and other suitable community resource agencies.
- 7. Plans for suicide intervention will enable staff to become knowledgeable regarding the following subjects:
  - i. Indicators that a student may be (or may become) at risk of considering or attempting suicide.
  - ii. Resource personnel:
    - (a) School's Designated Intervener(s)
    - (b) Area Office trainer(s)
    - (c) Mental Health and other community contacts.

- iii. Action to be taken when students exhibit behaviour which indicates that they may become a suicide risk:
  - (a) Staff are to make their observations known to their school's designated intervener and principal.
  - (b) The designated intervener (and/or principal) is to consult with parents (and/or Child Welfare Services, if justified), and professional workers as judged appropriate in order to determine what assistance and further action is needed.
- iv. Action to be taken when a student is judged to be at immediate risk of attempting suicide or when a student attempts it:
  - (a) Summon emergency medical care if injury has occurred.
  - (b) Make immediate contact with a parent if possible. If justified, Child Welfare Services may be contacted either in addition to or in place of contact with a parent.
  - (c) Obtain professional assistance as judged appropriate.
  - (d) Make plans for ascertaining that the student receives follow-up care.
  - (e) Remain in the student's company until a parent, a law officer or professional assistance arrives.
8. Plans for suicide postvention will address a range of subjects detailed in the Crisis Management Manual (Appendices IX to XVI).

### **G. Child Abuse**

1. Any staff member who has reasonable and probable grounds to believe that a child is in need of protective services shall forthwith report the matter to Child and Family Services.
2. A staff member reporting suspected child abuse shall inform the Principal as soon as practicable.

### **H. Child Custody**

1. The Calgary Science School will observe the terms and conditions of any custody and access agreement or court order that has been provided in writing by a parent/guardian or authorized social agency.
2. A student is only to be released to a non-custodial adult with the expressed consent of the parent/guardian.
3. When a student is released to a non-custodial adult, the following information must be obtained and recorded:
  - i. Student name
  - ii. Non-custodial adult's name, address, and phone number
  - iii. Street address of destination if other than the student's home
  - iv. Reason for student's departure from school
  - v. Time of departure.