

# Administration of Urgently Required Medication/Treatment

ADMINISTRATIVE PROTOCOL Revised: September 3, 2024

Supporting Policy JLCE-1

As per Policy JLCE-1 – First Aid and Emergency Medical Care, all trained school division personnel who are assigned to administer first aid or emergency medical care to students within the Division must follow all procedures outlined below. Similarly, the parent/guardian must comply with the conditions outlined below.

# I. INFORMATION AND AWARENESS

- 1.1. <u>Identification of students to school authorities: For all medical conditions</u>
  except asthma (see SECTION 1.2) and anaphylaxis (see Policy | LCE-2)
  - 1.1.1. It is the responsibility of the parent/guardian whose child is known to have a condition that may urgently require medication/treatment to identify their child to the School Principal by completing the health information section of their school registration form.
  - 1.1.2. The school will provide the URIS Group B Application and the Authorization for Administration of Medication form to the parent/guardian for completion.
  - 1.1.3. The school will store the completed URIS Group B Application and the Authorization for Administration of Medication form in the student's cumulative file and store a copy in an accessible and secure location for quick access.
  - 1.1.4. The school will submit a copy of the completed URIS Group B Application and the Authorization for Administration of Medication form to the URIS nurse at the Winnipeg Regional Health Authority.
  - 1.1.5. The nurse will consult with the parents/guardians, student, school, and physician, as required.

#### 1.2. Identification of students to school authorities: Asthma

- 1.2.1 It is the responsibility of the parent/guardian whose child is known to have asthma to identify their child to the School Principal by completing the health information section of their school registration form.
- 1.2.2 The school will provide the URIS Group B Application and the Authorization for Administration of Reliever Medication and Asthma Standard Health Care Plan (SHCP) form to the parent/guardian for completion.
- 1.2.3 The school will store the completed URIS Group B Application and the Authorization for Administration of Reliever Medication and Asthma Standard Health Care Plan (SHCP) form in the student's cumulative file and store a copy in an accessible and secure location for quick access.

- 1.2.4 The school will submit a copy of the completed URIS Group B Application and the Authorization for Administration of Reliever Medication and Asthma Standard Health Care Plan (SHCP) form to the URIS nurse at the Winnipeg Regional Health Authority.
- 1.2.5 The nurse will consult with the parents/guardians, student, school, and physician, if required.

# 1.3 Identification of students who may urgently require medication/treatment to staff

- I.3.1 All staff members shall be made aware that a child who may urgently require medication/treatment is attending their school and the child shall be identified, either individually or at a staff meeting at the beginning of the school year.
- 1.3.2 It is recommended that students wear a medic-alert bracelet that identifies specific medical information.
- 1.3.3 Medications shall be clearly marked with the student's name.

# 1.4 Training for teachers and other school staff

- 1.4.1 The School Principal will ensure that group training provided by a health care professional (i.e., registered nurse/doctor/pharmacist) occurs annually with school personnel, lunch hour supervisors and volunteers (if deemed appropriate by the School Principal) in schools where children with lifethreatening medical conditions are enrolled.
- 1.4.2 The Division will provide opportunities for group training provided by a health care professional for substitute teachers and bus drivers. Any new employees/volunteers who may have missed the school-based training may attend these sessions.
- 1.4.3 All staff who may be in a position of responsibility for children with lifethreatening medical conditions will receive, from a registered nurse, child specific training related to the medical condition.
- 1.4.4 Parents/guardians of the child with life-threatening medical conditions will ensure that the specific information about their child is made available to school personnel to be included in training sessions. Parents/guardians are encouraged to attend/participate in training sessions.

#### 1.5 Sharing information with other students and parents/guardians

1.5.1 In consultation with parents/guardians and student, the school may identify a student with life-threatening medical conditions to classmates who are in direct contact with the child and enlist their understanding and support. This will be done in a way that is appropriate to the students' age and maturity, without creating fear and anxiety.

## 1.6 Maintaining open communication between parents/guardians and the school

- 1.6.1 The school will maintain open lines of communication with the parents/guardians of students with life-threatening medical conditions.
- 1.6.2 Parents/guardians will be involved in establishing specific plans for their own children and may be involved in training staff in emergency procedures.

#### 2. FIRST AID AND EMERGENCY MEDICAL CARE

## 2.1. Responsibilities of the School Principal

- 2.1.1. Assist with the development and implementation of regulations and procedures for reducing risk in classrooms and common areas.
- 2.1.2. Identify staff who have current first aid certification.
- 2.1.3. Ensure first aid kits are available and in well-marked accessible areas of the school.
- 2.1.4. Ensure all staff and, where appropriate, lunch hour supervisors, bus drivers, and volunteers receive training for specific life-threatening medical conditions, as needed.
- 2.1.5. Ensure parents/guardians are contacted and incident reports are completed when required.
- 2.1.6. Develop a school plan for reducing risk in classrooms and common areas.
- 2.1.7. Ensure that substitute teacher files contain a copy of health care plans for individual students as well as a list of students in the classroom with a lifethreatening medical condition.

# 2.2. Responsibilities of the Classroom Teacher

- 2.2.1. Jointly with school administration, teachers are responsible for creating a safe and healthy instructional setting integrating hazard identification, assessing the risks, and controlling the situation in all aspects of the facility
- 2.2.2. Leave information in an organized, prominent and accessible format for substitute teachers.
- 2.2.3. Ensure that products and tools used in the classroom are safe for the age and ability of the students.
- 2.2.4. Provide training specific to using equipment that could cause injury.
- 2.2.5. Where appropriate, facilitate communication with other parents/guardians.
- 2.2.6. Ensure that medication(s) are taken on field trips and emergency response plans are in place when planning the trip.
- 2.2.7. Consult with parents/guardians when planning activities such as field trips, art, science and human ecology projects in order that alternate plans can be developed if necessary.

#### 3. SUPPORTING DOCUMENTS

This administrative protocol directly supports Policy JLCE-1 – First Aid and Emergency Medical Care. See also related policies:

- Policy JLCD Administering Medicines to Students
- Policy JLCE-2 Anaphylaxis

The following forms are archived <a href="here">here</a>:

- Authorization for the Administration of Medication
- Authorization for Administration of Reliever Medication and Asthma Standard Health Care Plan
- Authorization for Self-Administration of Medication
- Authorization for Self-Administration of Reliever Medication for Asthma

- Administration of Medication Record
- URIS Group B Application
- WRHA letters to parents/guardians

#### Other documents:

- Reducing exposure to bloodborne and other bodily fluid pathogens protocol
- Routine Practices: Guide to Creating a Healthy Environment and Preventing Infections within Child Care Facilities and Schools (Manitoba Education & Early Childhood Learning, 2023)