



Windsor-Essex Catholic District School Board
 Section: Students
ADMINISTRATIVE PROCEDURE
PR ST: 11B ENSURING ASTHMA FRIENDLY SCHOOLS - RYAN'S LAW

NUMBER:	PR ST: 11B
EFFECTIVE:	June 28, 2016
AMENDED:	
RELATED POLICIES:	See References
REPEALS:	
REVIEW DATE:	2019-2020

1.0 OBJECTIVE:

- 1.1 The purpose of this Administrative Procedure is to support Policy ST:11B Ensuring Asthma Friendly Schools – Ryan’s Law by providing a framework for the requirements for staff to support students diagnosed with asthma.

2.0 PROCEDURE:

2.1 The Board shall:

- 2.1.1 Ensure that all students have easy access to their prescribed reliever inhaler(s) medications.
- 2.1.2 Identify asthma triggers in classrooms, common school areas and in planning field trips and implement strategies to reduce risk of exposure.
- 2.1.3 Establish a communication plan to share information about asthma to parents/guardians, students, employees and include any other person who has direct contact with a student with asthma.
- 2.1.4 Provide asthma education and training opportunities about recognizing and preventing asthma triggers, recognizing when symptoms are worsening and managing asthma exacerbations for all employees and others who are in direct contact with students on a regular basis.
- 2.1.5 Require that every school principal establish a process to identify students with asthma at time of registration or following diagnosis and gather necessary asthma related information from the parents/guardians and student.
- 2.1.6 Require that every school principal develop an Individual Student Asthma Management Plan with Emergency Procedures (ST:11B Form B) for each student diagnosed with asthma, based on the recommendation of the student’s health care provider (ST:11B Form A – Request and Authorization for the Administration of Asthma Medication).
- 2.1.7 Require that every school principal maintain a file for each student diagnosed with asthma. The file may contain personal medical information, treatment plans and/or other pertinent information about the student, if that information is obtained with the consent of the student or the parent/guardian, in accordance with applicable legislation, including

relevant privacy legislation. This file shall also include current emergency contact information.

- 2.1.8 Require that every school principal inform school board personnel and others who are in direct contact on a regular basis with a student with asthma about the contents of the student’s asthma management plan.
- 2.1.9 Review asthma policy as part of its regular policy review cycle.
- 2.1.10 Include the asthma policy in the board policies posted on the school and board website.

2.2 Principals shall:

- 2.2.1 Identify all students diagnosed with asthma and make them known to staff as necessary while giving due consideration to the issue of privacy.
- 2.2.2 Collect up-to-date information from parents/guardians related to a child’s diagnosis of asthma.
- 2.2.3 Maintain an individual plan for each student known to have a diagnosis of asthma and ensure that the plan contains:
 - a) a current emergency contact list;
 - b) up-to-date medical information including a list of current required medication and appropriate puffer devices;
 - c) pre-authorization to administer medications;
 - d) physician’s instructions and a signed reciprocal consent to disclose information with the attending physician;
 - e) an emergency response plan that includes contingencies for school excursions and activities;
 - f) parent/guardian or adult student consent to disclose;
 - g) log of interventions and/or administration of medication;
 - h) a current photograph of the student;
 - i) complete the allergy alert information on the student management system;
 - j) review the individual student plan at least yearly prior to the commencement of classes and periodically thereafter as needed;
 - k) arrange training for the school staff on how to administer asthma medication;
 - l) identify consistent, safe accessible unlocked storage place known to all applicable staff for asthma medication; and
 - m) information as to whether the pupil has his or her parent’s or guardian’s permission to carry his or her asthma medication, if the pupil is under 16 years old, (no parental consent is necessary if the pupil is 16 years or older).
- 2.2.4 Send home a note with all students in class in case of anaphylaxis from food or other agents.
- 2.2.5 Annually send a letter to parents/guardians requesting that they inform the school immediately if their child(ren) have been diagnosed with asthma and accompanying

medical/medication information.

2.3 Teachers shall:

- 2.3.1 Be familiar with and follow the Board’s Ensuring Asthma Friendly Schools Policy and Procedure, as well as the student’s Individual Asthma Management Plan.
- 2.3.2 Participate in regular training on dealing with life-threatening allergies.
- 2.3.3 Ensure that the student has the prescribed reliever inhaler and/or controller medication with the name of the student and dosage fully outlined.
- 2.3.4 Educate students on how to respond to students with life-threatening allergic reactions.
- 2.3.5 Communicate regularly with parents/guardians in their class who have a child diagnosed with asthma for any updates related to the child’s medical care or condition.
- 2.3.6 Post a sign on the classroom door advising everyone of the allergen and the caution to be followed.
- 2.3.7 Send a personal note to parents/guardians advising them of the allergen and the life-threatening reactions to this allergen.
- 2.3.8 Encourage the students, parents/guardians to avoid sending food to school containing these allergens and when any food is sent to the class to be shared, to ensure that a complete list of ingredients is provided.
- 2.3.9 Establish a no sharing of food, drinks or eating utensils rule during lunch and snack times.
- 2.3.10 Encourage all students to wash their hand with soap and water after handling food.
- 2.3.11 Ensure the desks or eating surfaces are kept clean.
- 2.3.12 Ensure that the prescribed reliever inhaler accompanies each asthma student on out-of-school activities.
- 2.3.13 Ensure that volunteers or older students who may supervise students have appropriate information/training.
- 2.3.14 Ensure desks or eating surfaces are kept clean.
- 2.3.15 Provide clear information for occasional teachers, including:
 - Leaving a message with the answering service for the occasional teacher indicating that there is a student with asthma in the class and directing the occasional teacher to seek more information from the principal or administration upon arrival at the school;
 - Leaving a copy of the Individual Student Management Plan (With Emergency Procedure) including relevant reliever inhaler(s) or controller medication for all students in their class with asthma or the location of the inhaler as per the student’s

management plan;

- Keeping a copy of the Individual Student Management Plan (With Emergency Procedure) with the teacher’s day planner.

2.3.16 Report to the principal or designate of any student who has experienced an asthmatic exacerbation immediately or as soon as possible.

2.4 Parents/Guardians and Adult Students shall:

2.4.1 Inform school officials forthwith of any diagnosis of asthma (or known triggers).

2.4.2 For their child, ensure that the information in the student’s file, including but not limited to the medication that the student is taking, is up-to-date and that consent has been given for their child to carry their asthma medication.

2.4.3 Pre-authorize the administration of medication in response to an asthma exacerbation provided that the school has up-to-date treatment medication and any applicable consent from the parent or guardian.

2.4.4 Co-operate with school staff when requests are made for information related to storage of medication, administration of medication and updated medical information.