

## YORK CATHOLIC DISTRICT SCHOOL BOARD POLICY REVIEW COMMITTEE AGENDA

**Catholic Education Centre, Board Room**  
**Tuesday, June 6, 2023 6:30 P.M.**

### **Prayer**

*Make us worthy, Lord, to serve our fellow brothers and sisters throughout the world who live and die in poverty and hunger. Give them through your hands this day, their daily bread, and by our understanding of love, give peace and joy. Amen.*

### **Land Acknowledgement**

*We are gathered on the ancestral lands and waters of all Indigenous Peoples, who have left their footprints on Mother Earth before us. We respectfully acknowledge those who have walked on it, those who walk on it now, and future generations who have yet to walk upon it. We pray to the Creator for strength and wisdom that all may continue to serve as stewards of the Earth.*

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# YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Governance</b>
<i>Policy Number</i>	<b>109</b>
<i>Former Policy Number</i>	<b>604</b>
<i>Total Pages</i>	<b>4</b>
<i>Original Approved Date</i>	<b>April 1982</b>
<i>Subsequent Approval Dates</i>	<b>November 1994 June 8, 2010 May 31, 2016</b>

## RECORDS AND INFORMATION MANAGEMENT (RIM)

### 1. PURPOSE

The York Catholic District School Board recognizes that records and information are strategic assets that must be managed securely, efficiently and effectively for present and future generations. The purpose of the Records and Information Management (RIM) policy is to support the management of records and information in a disciplined, coordinated and strategic manner. **The creation and management of York Catholic District School Board records shall be in accordance with subsection 171(1), par. 38 of the *Education Act*, the *Municipal Freedom of Information and Protection of Privacy Act*, the *Personal Health Information Protection Act* and all other applicable legislative provisions.**

~~Furthermore, this policy outlines how the Board will comply with the obligation to maintain records and information in keeping with relevant legislation through the application of a systematic classification scheme for the identification, arrangement, retrieval, security and disposition of records and information.~~

### 2. ~~POLICY STATEMENT~~ **OBJECTIVE**

~~It is the policy of the York Catholic District School Board to maintain a standardized Records and Information Management procedure in order to safeguard the assets of the Board and ensure efficiency in the creation, maintenance, retrieval, storage and disposition of all records and information.~~

**The objective of the Records and Information (RIM) policy is to establish information lifecycle requirements to effectively protect the authenticity, reliability, usability and integrity of recorded information and ensure efficiency in the retention, preservation and disposition of all records and information of the Board.**

### 3. PARAMETERS

~~3.1 Records and Information, in electronic and paper formats, shall be maintained and retained in keeping with guidelines established by the Province of Ontario and as outlined in the Board's *Records and Information Management Procedure Manual*.~~

**3.1 In accordance to the *Education Act*, York Catholic District School Board shall institute a program of records and information management that will establish schedules for the retention, disposition and eventual destruction of records of the Board and of the schools under its jurisdiction other than records retained for archival use.**

**3.2 The management of York Catholic School Board records and information shall be**

in accordance with Generally Accepted Recordkeeping Principles established by the Association of Records Managers and Administrators (ARMA) International as global standards.

- 3.3 The Board shall provide an appropriate environment for the storage and retrieval of active, inactive and archival records.
- 3.4 Records and information ~~gathered during~~ **created, produced, collected, received and distributed** in the course of Board business are considered (to be) corporate information and, therefore, are the property of the Board.
- 3.5 Any record made of any act, transaction, **decision**, occurrence, or event is admissible as evidence if such is made in the usual and ordinary course of any business.
- 3.6 All Board records and information, regardless of format and location, must be identified and classified in accordance with their level of sensitivity and confidentiality, and stored in a secure location for the period of time defined in the Board's records retention schedule.
- 3.7 The willful destruction, alteration, deletion, removal from the custody or control of the Board, concealment or private use of Board records and information is prohibited by this policy unless done so in accordance with the Board's approved records and information management retention schedule.
- 3.8 All Trustees, Board staff, employees, and third-party contractors or agents who leave employment shall ensure that all files and records are transferred to the manager/supervisor to ensure retention and operational continuity. York Catholic District School Board staff are prohibited from keeping Board records following the cessation of their employment.
- 3.9 ~~Staff shall be trained on their responsibilities~~ **The Board shall provide appropriate training for staff** as outlined in the Records and information Management ~~Manual~~ **procedure**.
- 3.10 Where practical and possible, information technology shall support the procedures of records and information management.

~~3.2 The Board's *Records and Information Management Program Manual* shall:~~

~~3.2.1 Define practices for the effective control over Board records and information providing for the security and confidentiality of all records and information stored:~~

~~3.2.2 Define all records and types of information to be stored:~~

~~3.2.3 Define processes for a record-keeping system that will effectively maintain, store and allow for the safe retrieval of records and information:~~

~~3.2.4 Define a records and information management retention schedule that sets out, for each classification of records created or received, the length of time the records will be retained:~~

~~3.2.5 Define processes for the secure disposal of records and information when administrative, legal and fiscal values have ceased and all legal requirements as they affect Board documents have been met or have become inactive as defined in the retention schedule:~~

~~3.2.6 Define processes for the identification and preservation of records and information of enduring value due to archival, historical or other vital reason(s):~~

~~3.2.7 Be updated in conjunction with any review of the *Records and Information Management Policy*:~~

~~3.2.8 Be available to all Board employees through the Board's website.~~

#### 4. RESPONSIBILITIES

##### 4.1 Director of Education

4.1.1 To oversee compliance with the Records and Information Management Policy.

##### 4.2 Administrator Responsible for the oversight of Records and Information Management

4.2.1 To provide training to all staff who are responsible for Records Information and Management processes and as it relates to the requirements outlined in the Records and Information Management ~~Program. Manual.~~

##### 4.3 Superintendents, Senior Managers and Managers

4.3.1 To assume responsibility for the information and records they create and maintain.

4.3.2 To oversee compliance within their departments of the Records and Information Policy and the requirements outlined in the Records and Information Management Program. ~~Manual.~~

##### 4.4 Staff

To comply with the Records and Information Management Policy and the requirements outlined in the Records and Information Management ~~Manual.~~ **Program.**

#### 5. DEFINITIONS

##### 5.1 Information

Refers to facts and data acquired for any purpose of the Board or by the Board.

##### 5.2 Records

Information in any form, including a record made, recorded, transmitted or stored in digital form or other intangible form by electronic, magnetic, optical or any other means, but does **not** include a mechanism or system for making, sending, receiving, storing or otherwise processing information.

##### 5.3 Records and Information Management (RIM)

Refers to the efficient and systematic control of the creation, receipt, maintenance, use and disposition of records throughout its lifecycle including the processes for capturing and maintaining evidence of and information about business activities and transactions in the form of records.

##### 5.4 Records Retention Schedule (RRS)

A list of all the record classifications and their corresponding retention periods.

#### 6. CROSS REFERENCES

##### **Legislation**

[Education Act](#)

[Evidence Act](#)

[Archives and Recordkeeping Act](#)

[Municipal Freedom of Information and Personal Privacy Act](#)

[Personal Health Information Protection Act](#)

## **YCDSB Policies**

[Policy 104 Participation Meetings Using Electronic Means](#)

[Policy 108A School Archives and Memorabilia](#)

[Policy 108B Central School Board Archival Collection](#)

[Policy 112 Privacy and Freedom of Information](#)

[Policy 113 Intellectual Property](#)

[Policy 116 Copyright](#)

[Policy 117 Code of Conduct](#)

[Policy 227 Ontario Student Record](#)

[Policy 317 Electronic Communications and Social Media](#)

[Policy 705 Use of Video Surveillance](#)

[Policy 609 Accessibility Standards for Information and Communication](#)

[Policy 809 Staff Use of External Legal Resources](#)

## **Related Documents**

[Ontario Student Record \(OSR\) Guideline, 2020](#)

[ARMA International – The Principles](#)

## **POLICY TITLE: — RECORDS AND INFORMATION MANAGEMENT (RIM)**

### **SECTION B: GUIDELINES**

In compliance with the requirements of the *Municipal Freedom of Information and Protection of Privacy Act* for a standardized corporate records and information management system, the York Catholic District School Board has developed and implemented a records and information management program manual.

This program manual outlines provisions for the management of records and information within the Board, ensuring the security of such records and information and efficiency in the creation, maintenance, retrieval, storage and disposition of records the security of such records and information.

The objective of the records and information management program is to:

- Support efficient and effective program and service delivery;
- Foster informed decision-making;
- Facilitate accountability, transparency, and collaboration; and to;
- Preserve and ensure access to records and information in accordance with the laws of Canada and Ontario and for the benefit of present and future generations.

The Board's *Records and Information Management Program Manual* also provides direction and guidance to staff related to:

- a logical and systematic classification scheme for the arrangement of records in group or category classifications;
- methods of identification so that files can be created and/or retrieved efficiently; and,
- effective controls and security over Board records and information.

The Board's *Records and Information Management Program Manual*, contains information to assist staff with the application of provisions related to the following components:

- 1.1 Records Management Classification System;
- 1.2 Freedom of Information and Protection of Privacy;
- 1.3 Records Retention Schedule;
- 1.4 Records Disposition Criteria;
- 1.5 Inactive Records Storage; and,
- 1.6 Forms Management Program



## **YORK CATHOLIC DISTRICT SCHOOL BOARD**

### **PROCEDURE: Records and Information Management**

#### **Addendum to Policy 109: Records and Information Management**

Effective: dd/mmm/yyyy



## **1. PURPOSE**

York Catholic District School Board is committed to implementing and maintaining a comprehensive Records and Information Management (RIM) Program for the systematic creation of records and information that are accurate, authentic, reliable, trustworthy, secure, efficient and effectively support accountability while serving as evidence and preserving Board activities for as long as required for present and future generations.

- 1.1 The RIM program complies with the obligation to maintain records and information in keeping with relevant legislation through the application of a systematic classification and retention scheme for the creation, identification, arrangement, retrieval, security, storage, retention, and disposition or archive of records and information.
- 1.2 Records and information created, produced, collected, received, and distributed, during the course of Board business, administrative department, and school support day to day operations are considered to be Board information and strategic assets in custody and / or control of the Board.
  - 1.2.1 This procedure applies directly to the following policies and procedures:
    - YCDSB Records and Information Management Policy
    - YCDSB Privacy and Freedom of Information Policy
    - YCDSB Privacy Breach Procedure, Freedom of Information Request
    - YCDSB Records Retention and Disposition Procedures
    - YCDSB Records Classification, Retention, Security and Disposition Schedule
    - YCDSB Code of Conduct
- 1.3 The records and information management policy and procedures ensure that the appropriate attention/ protection is given to all YCDSB records and increases the efficiency of document/ file retrieval. The procedures ensure responsible management of board records and record-keeping systems as valuable resources, assets, and board compliance.
- 1.4 All board/school records created, received, and/or maintained by YCDSB's affiliated staff and those acting as agents, in the course of their duties on behalf of YCDSB, regardless of physical form or characteristic (including paper, electronic, audiovisual, microform), are considered YCDSB's property and subject to its control(s), including this procedure.

## **2. RIM PRINCIPLES**

- 2.1 The records management procedures ensure board/school records are effectively managed throughout their creation, maintenance, and final disposition by:
  - Accountability information structures are in place for the management of board/school records.
  - Identify documents into non-business, transitory and board records to apply retention on board/school records that must be retained for an approved set period of time.
  - Record processes and the adequacy of records systems are transparent throughout processes.
  - Procedures are standardized across all departments.
  - Implement a central records management inventory system to ensure board/school records can be located and retrieved effectively and efficiently in order to minimize board maintenance costs.
  - Opportunities for integration with the records/document management system are recognized.

- All records systems have integrity and are reliable, compliant, comprehensive and systematic.
- Support accountability, audits, and promote efficiency in order to minimize corporate risks.
- Comply with all applicable legal and audit requirements
- Be easily located and accessible based on security permissions
- Preserve archival significance
- Ensure proper and timely disposition to mitigate risk and liabilities
- Promote accountability and efficiency in order to save time and costs

### 3. LEGISLATION

3.1 *The Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)* provides individuals with a right of access to certain records and personal information under the custody or control of institutions covered by the Act. The purposes of the Act are as follows:

- to provide a right of access to information under the control of institutions in accordance with the principles that,
- information should be available to the public,
- necessary exemptions from the right of access should be limited and specific,
- decisions on the disclosure of information should be reviewed independently of the institution controlling the information; and
- to protect the privacy of individuals with respect to personal information about themselves held by institutions and to provide individuals with a right of access to that information.

The Municipal Freedom of Information and Protection of Privacy Act is divided into four parts:

**Part I:** Freedom of Information deals with the right of access to records, the exemptions to that right, and access procedures (Sections 4-26).

**Part II:** Protection of Individual Privacy concerns the collection, use and disclosure of personal information. This part also deals with an individual's right of access to his or her own personal information and the right to request correction of that information (Sections 27-38).

**Part III:** Appeal deals with the right to appeal and the procedure involved in appealing a decision made by an institution (Sections 39-44).

**Part IV:** General covers general matters including the charging of fees, offences, regulations and the powers and duties of the Information and Privacy Commissioner (Sections 45-55).

The Act applies to any record in the custody or under the control of an institution. This includes records that were created both before and after the Act [Subsection 52(1)]. An Institution is the general term for local organizations, boards and other bodies covered by the Act. An institution is responsible for administering and adhering to the requirements of the Act.

The Act does not impose any limitation on the information otherwise available by law to a party for litigation. Where an institution is required to produce documentary evidence pursuant to rules of court, the exemptions in the Act does not affect the power of a court or tribunal to compel a witness to testify or compel a production of a document [Subsection 51(2)].

3.2 *The Personal Health and Information Protection Act (PHIPA)* sets how to manage personal health information records for students and employees of the Board.

3.3 *Education Act* sets out provisions for district school boards to establish Records and Information Programs to establish schedules for the classification, retention, disposition and

eventual destruction or archive of records of the board and the schools under its jurisdictions other than records retained for archival use.

This procedure is consistent with subsection 171, (1), par.38 of the Education Act which states the Board may institute a records and information management program.

3.4 *The Ontario Evidence Act and The Canada Evidence Act* addresses how the Board's Records and Information Management may be used as evidence in legal court proceedings.

3.5 Other Sources of Legislation For some records, the law will specify a limitation, which is a time frame of risk during which the organization may sue or be sued. Other considerations when determining the retention period of a record are operational needs, costs, benefits and risks involved in keeping a record. Should any of these sources change, the RIM Program Manual will be revised to reflect the necessary revisions. Questions and/or concerns should be communicated to the Director's Office.

#### **4. RIM Program Scope and Requirements**

4.1 The YCDSB's Records and Information Management Program shall:

- Define practices for the effective control over Board records and information providing for the security and confidentiality of all records and information stored.
- Define all records and types of information to be stored.
- Define processes for a record-keeping system that will effectively maintain, store and allow for the safe retrieval of records and information.
- Define a records and information management retention schedule that sets out, for each classification of records created or received, the length of time the records will be retained.
- Define processes for the secure disposal of records and information when administrative, legal and fiscal values have ceased and all legal requirements as they affect Board documents have been met or have become inactive as defined in the retention schedule.
- Define processes for the identification and preservation of records and information of enduring value due to archival, historical or other vital reason(s).
- Be updated in conjunction with any review of the Records and Information Management Policy.
- Be available to all Board employees through the Board's website.

#### **5. Roles and Responsibilities**

In order to effectively manage the Records Management Program, it is important to provide a clear definition and understanding of each role, function, and responsibilities in the workplace.

The Senior leadership team for all areas of the business are responsible for ensuring the success of the YCDSB Records Management Program within their respective areas of responsibility by:

- Supporting the implementation of the program.
- Allocating resources to effectively manage board records.
- Promoting and ensuring compliance.
- Making provisions for regular audits.

##### **5.1 Director of Education**

- To oversee compliance with the Records and Information Management Policy, Procedures, and Program.
- To provide the administrative procedures necessary to implement this policy.

## **5.2 Superintendents, Administrators, Senior Managers and Managers**

- To assume responsibility for the information and records they create and maintain.
- To oversee compliance within their departments of the Records and Information Policy and the requirements outlined in the Records and Information Management Program.

These groups / individuals are responsible for:

- To assign and document accountability of records management within the department.
- To classify their board records according to the YCDSB Records Retention and Disposition schedules
- To ensure all their board records are included in the YCDSB Records Retention and Disposition Schedules, and the schedules are followed.
- To consult with, Records Management Manager/Officer, regarding best practices for achieving accountability, access, and development of records procedures to manage board records throughout its life-cycle (“creation, maintenance, final disposition”).
- To ensure their staff create, maintain and dispose of board records in accordance with established records management policies and procedures
- To provide the necessary resources to manage board records
- To develop a Records Information Resource Centre with a Records Coordinator to manage the standards of the Records Management Program and liaise with the Records Management Manager/Officer to ensure compliance of the operations.
- To hold the destruction of records when the board/school records are related to a legal claim or a regulatory inquiry which is ongoing or is anticipated.

## **5.3 Senior Leadership Department Heads at Board or School Administrator(s)**

- To oversee Records and Information Management
- To ensure the schedule for classification, retention, disposition, archive and routine evaluations of adherence to the policy for RIM Program activities and routine audits to ensure productivity of the program.
- To provide training to all staff who are responsible for Records Information and Management processes and as it relates to the requirements outlined in the Records and Information Management Program Manual.

## **5.4 Staff**

- To comply with the Records and Information Management Policy and the requirements outlined in the Records and Information Management Program.

**For the current operations of the departments who do not have a Records Management contact, the administrative staff will be the point-of-contact for managing files for their respective groups.**

### **Key Responsibilities:**

- To maintain the collection of information sources with an index and retrieval system approved by Records and Information Management
- To file documents into the approved file system to support the department process
- To implement a charge-out system to prevent lost departmental records
- To catalogue and track file folders and similar materials
- To only use paper copies when needed and eliminate paper duplicates
- To respond to record requests
- To track all file folders, storage boxes, and similar materials stored at the offsite record center
- To schedule, track and manage the commercial storage of board records
- To use appropriate file supplies and equipment

- To transfer to inactive storage or archives when those files are no longer needed in the office.
- To conduct an annual purge of board records

**All staff are responsible for:**

- Creating board records in a timely and accurate manner to document all decisions and actions taken for which they are responsible.
- Maintaining board records so that accurate and complete information can be found when needed. This means setting up and maintaining directory files and filing materials (in all formats) in accordance with this records management procedures.
- All Departmental Records are classified to the records series as set out in the YCDSB Classification and Retention Schedule (Appendix A). If a YCDSB record is not listed in a record series, the department must contact the Privacy, Records, Information, and Archive Management Services who will provide guidance (and/or create a new Records Series where applicable).
- Carrying out the disposition of board records under their control in accordance with the Records Retention and Disposition Schedules.

## **5.5 Privacy, Records, Information, and Archive Management Services**

Board-wide responsibility for the records management program by:

- Providing central direction for the YCDSB Records and Information Management Program, including the development of board records management policies, standards, procedures and guidelines. Their identification, description, storage, transfer and preservation or disposal.
- Every department and sub-departments (collectively “Departments”) must develop and implement comprehensive, written operations procedures for Records and Information Management that:
  - Specify who is accountable for each aspect of Records and Information Management within their Departments; and
  - Ensure compliance with the RIM Policy and all reference documents listed
- Monitoring, research, and management of the Records Retention and Disposition Schedule.
- Developing effective techniques for management of board records in conjunction with Departments including the administration of the board records / document management system.
- Developing and promoting, in collaboration with the Information Services Division and Departments, a framework for the management of electronic information, which includes standards, guidelines, tools, and best practices that support this procedure.
- Providing records management advice, training and assistance to Departments.
- Assisting Departments to integrate records management requirements into business strategies and plans.
- Developing business continuity planning for identifying and protecting board records deemed vital for continuity of mission-critical business operations.
- Coordinating dispositions and destruction approvals.
- Working with the Regional Internal Audit Team to develop monitoring procedures to ensure compliance to policy and practice.
- Safeguard from improper disclosure, use, disposition or destruction, in accordance with legal, privacy (applicable privacy legislation and YCDSB’s Privacy Policy and Guidelines), and policy obligations. (For board records containing personal information, refer to YCDSB Privacy Code). Safeguard vital board records and contingency management of board records.

- Install proper controls and guidelines for managing YCDSB's board records within storage at the YCDSB warehouse or school storage rooms.

## **5.6 Records Management Committee**

To Serve in an advisory capacity and establish subcommittees to evaluate special issues from time to time.

- Overall responsibility for the administration of the RIM program.
- Responsible for evaluating enhancements, initiating changes, working with Senior Management to address compliance and soliciting feedback, and ensuring that the needs of the Departments / Functioning Areas are being met on a continuous basis

## **5.7 Archives**

To serve as the YCDSB's corporate memory by identifying, preserving and making available for use; the board's permanently valuable / historical records.

## **5.8 Information Technology**

To develop a framework for the management of electronic information, which includes:

- standards, guidelines, tools, and best practices that support this policy and procedure,
- provides assistance in the sourcing and implementation of the board records / document management system,
- acts as the custodian (but not the owner) of electronic records – implement the appropriate controls; providing physical and procedural safeguards for electronic records / information; ensuring electronic records / information are accessible and readable during their life-cycle; and assisting the Departments / Functional Area's in evaluating the cost-effectiveness of controls,
- developing test and implement a disaster recovery plan to ensure vital board records are backed up in order to facilitate access and readability in the event of a disaster,
- ensuring board records accessibility and usability over time and through technological change.

## **5.9 Regional Internal Audit Team (RIAT)**

- To conduct audits of records management activities to ensure compliance to this policy and procedure

## **5.10 Office Services**

- To work with the Records and Information Management Manager / Officer to provide cost-effective and secure transfer, storage and retrieval services for inactive board records within the warehouse and school storage rooms.
- To Work with the Records and Information Management Manager / Officer to provide cost-effective, secure and accurate disposal services for board records eligible for destruction in accordance with the Records Retention Schedule.

# **6. Definitions**

## **Archive**

An area utilized for storage of inactive records, manuscripts, papers and memorabilia which are retained permanently for the benefit of the school/board and posterity.

## **Classification and Retention Schedule**

A schedule setting out a functional organizational structure for classifying official records and applicable retention periods developed through a review of the board information assets and



departmental consultation. This identifies legal requirements, operational needs, and records management best practices.

### **Information Governance**

A strategic asset that governs the decision and accountability framework to apply appropriate controls for the creation, valuation, use, sharing, storage, archiving, and deletion of information. This includes clearly outlining the policies, standards, processes, metrics, and roles guiding the efficient and effective use of information.

### **Information Lifecycle**

The stages in which information passes is characterized as creation or collection, processing, dissemination, use, storage, and disposition, to include destruction and deletion.

### **Official Records**

Recorded information in the custody and control of the board relating to the mandate and functions of the board that have been identified for the legal retention and disposition requirements. Records having the legally recognized and judicially enforceable quality of establishing some fact, policy, or institutional position or decision.

### **Record**

Information created, received, and maintained as evidence and information by an organization or person, in pursuance of legal obligations or the transaction or decision of a business.

### **Records and Information Management**

The field of management responsible for establishing and implementing policies, systems, and procedures to capture, create, access, distribute, use, store, secure, retrieve, and ensure disposition of an organization's records and Information.

### **Transitory or Non-Records**

Documents that have short-term use only and do not need to be filed and have no evidence value within legal proceedings. They are produced or received in the course of actions, in preparation of other records which replace them or convenient reference.

## **7. YCDSB Classification and Retention Schedule**

The YCDSB Records Classification System provides a framework for organizing company records of any medium into folders for access, retrieval, storage, and disposition. The standard format for classification is based on five groups: Primary Classification, Primary Name, Department, Record Type and Date. YCDSB records managed by various departments will be arranged by primary classification, primary name, secondary name, file code and date.

Classification Example to Create Files:

Primary Classification □ Primary Name □ Secondary Name □ File Code □ Date □ Year

*Example:*

Employee □ Smith, Jane. □ Employee Records □ H07 □ 2022

Most YCDSB records fall into one of the Primary Classifications below based on the type to which the information is related. For example, a contract relates to a vendor and therefore falls into the Vendor Classification: Board, Employee, Student, Vendor, Property, Project.

The Primary Name is the dominant description field used to retrieve the relevant information of the file.

The following lists each of the Primary Classifications and the corresponding naming conventions to be used for the Primary Name field of the file.

**Board** – For internal documents, York Catholic District School Board will represent the internal document types

*Naming Convention: Full Legal Name of the Company*

*Example: YORK CATHOLIC DISTRICT SCHOOL BOARD*

**Employee** – Information and documents specific to an employee. This includes union matters relating to employees, group and policy grievances

*Naming Convention: Employee's Last Name, First Name*

*Example: SMITH, JOHN*

**Student** – Information and documents specific to a customer

*Naming Convention: Student's Last Name, First Name*

*Example: DOE, JANE*

**Vendor** – information and documents relating to a Loblaw Vendor or Counterparty

*Naming Convention: Full legal name of the vendor or in certain cases, a recognizable portion of the name.*

*Example: BLACK AND DECKER*

**Property** – Information and documents specific to property owned or leased by Loblaw. This includes Franchise and Franchisee information and documents.

*Naming Convention: Province, Region, Address*

*Example: ON AURORA 325 BLOOMINGTON RD.*

**Project**– Information and documents specific to a project.

*Naming Convention: Full Title of Project*

*Example: FORMS AND WORKFLOWS VENDOR SELECTION 2023*

*See Appendix A – YCDSB Classification and Retention Schedule*

## **8. Records Retention**

YCDSB records must be retained:

- i. For the minimum retention periods set up in the YCDSB RIM Policy
- ii. In a manner that (i) ensure easy retrieval by other employees authorized to access such records, (ii) is secure and (iii) complies with the "Information Security Policy"
- iii. With special safeguards for Vital Records which include a contingency plan to recreate or access alternate copies of Vital Records if necessary

## **9. Disposition of Records**

- a. Each Department must conduct (minimum) an annual review to identify YCDSB Records that are eligible for destruction because the minimum retention period has expired.
- b. When the minimum retention period has expired, each Department must dispose of, or archive the YCDSB Records in accordance with the YCDSB RIM Policy, disposition process, and Appendix A.



## **10. Assessments of Records and Information Management Compliance**

- a. Each Department must conduct an annual review of compliance with its Records and Information Management processes, identifying and documenting risks and other significant issues, and undertaking corrective action as required.

## **11. REFERENCES**

### **Legislation**

*Municipal Freedom of Information and Protection of Privacy Act*  
*The Personal Health and Information Protection Act*  
*Education Act*  
*The Ontario Evidence Act*  
*The Canadian Evidence Act*

### **YCDSB Policies**

*Policy 104 Participation Meetings Using Electronic Means*  
*Policy 108A School Archive*  
*Policy 108B Central School Board Archival Collection*  
*Policy 112 Privacy and Freedom of Information*  
*Policy 113 Intellectual Property*  
*Policy 116 Copyright*  
*Policy 117 Code of Conduct*  
*Policy 227 Ontario Student Record*  
*Policy 317 Electronic Communications and Social Media*  
*Policy 705 Use of Video Surveillance*  
*Policy 609 Accessibility Standards for Information and Communication*  
*Policy 809 Staff Use of External Legal Resources*



## YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Community</b>
<i>Policy Number</i>	<b>606</b>
<i>Former Policy Number</i>	<b>706</b>
<i>Total Pages</i>	<b>13</b>
<i>Original Approved Date</i>	<b>December 19, 1995</b>
<i>Subsequent Approval Dates</i>	<b>January, 1997</b> <b>February 12, 2002</b> <b>June 4, 2013</b> <b>June 21, 2016</b> <b>June 19, 2018</b>

### CATHOLIC SCHOOL COUNCILS

#### 1. PURPOSE

The York Catholic District School Board, as per the *Education Act*, Ontario Regulation 612/00, *School Councils and Parent Involvement Committees*, requires that a Catholic School Council will assist the school in engaging parents to improve student achievement, **and in** developing positive communication links with home, church and the broader school community. In accordance with section 2(2) of the Ontario Regulation 612/00, the Catholic School Council's primary purpose is to propose recommendations in accordance with this Regulation to the Principal of the school and the Board that established the council. The Catholic School Council will also assist the school in realizing its goals and mission as well as the Board's vision.

#### 2. OBJECTIVE

It is the policy of the York Catholic District School Board that each school will establish a Catholic School Council **and adhere to the provisions outlined in York Catholic District School Board's Catholic School Councils Constitution and all other applicable legislation.**

#### 3. PARAMETERS

##### 3.1 General

- 3.1.1 A Catholic School Council is an advisory body to the Principal and the Board whose primary means of achieving its purpose is by making recommendations in accordance with Ontario Regulation 612/00 s.2(1).
- 3.1.2 Schools will make every attempt to reflect the diversity of the school community within the membership of the Catholic School Council in order to encourage Parent/Guardian engagement and include the voices of all stakeholders (*Ministry of Education: School Councils: A Guide for Members*, s. 3.1).
- 3.1.3 Catholic School Council elections shall be held within the first thirty (30) calendar days of each school year, on a date that is fixed by the current Chair

or Co-Chairs of the Catholic School Council in consultation with the Principal [Ontario Regulation 612/00, s. 4(4)].

- 3.1.4 In accordance with section 4(5) of the Ontario Regulation 612/00, an election of parent members of a Catholic School Council shall be,
- (i) in person, at a location that is accessible by the public;
  - (ii) by electronic or telephonic means; or
  - (iii) both in person, at a designated location, and by electronic or telephonic means.
- 3.1.5 Fourteen (14) days prior to the election date of parent members, the principal of the school, on behalf of the Catholic School Council, shall give written notice of the date, time and location of the election to every parent of a student who is enrolled in the school [Ontario Regulation 612/00, s.4 (6)].
- 3.1.5.1 The notice may be given to the parent's child for the delivery to his or her parent; and
  - 3.1.5.2 Posting the notice in a designated location in the school that is visible to parents;
  - 3.1.5.3 Delivering the notice to the parent by email or by electronic means;
  - 3.1.5.4 Posting the notice on the school's website.
- 3.1.6 The election of parent members shall be by secret ballot [Ontario Regulation 612/00, s.4 (8)].
- 3.1.7 If a new school is established, the first election of parent members to the school council shall be held during the first 30 days of the school year [Ontario Regulation 612/00, s. 4(5)].
- 3.1.8 The Board shall solicit the views of the Catholic School Council with respect to Board matters as outlined in the Ontario Regulation 612/00 (s.19).
- 3.1.9 Where there is a particular concern, the Catholic School Council may also make a delegation to the Board in accordance with Policy 106, *Delegations to the Board*. ~~and input to Agenda Items.~~
- 3.1.10 The school community may be invited to provide input to the Catholic School Council. In its role as an Advisory body, it is the responsibility of the Catholic School Council to come to a final decision/position with respect to the issue/topic being addressed. The Principal shall make their final determination once **all** input from the Catholic School Council has been reviewed.
- 3.1.11 The Catholic School Council shall establish goals, priorities and procedures (~~i.e.: Constitution/Operating By-Laws~~) [Ontario Regulation 612/00 s.15]. The Catholic School Council Constitution/~~Operating By-Laws~~ **provided by the Board** shall be reviewed at the first meeting of the newly elected Catholic School Council.
- 3.1.12 All Catholic School Council members, who have direct and regular contact with students shall provide proof of Vulnerable Sector ~~Screening~~-Check or an

Enhanced Police Information Check (E-PIC) obtainable from the York Regional Police at [www.yrp.ca](http://www.yrp.ca).

- 3.1.13 All Catholic School Council members who have direct and regular handling of Catholic School Council finances shall fulfill their responsibilities in accordance with YCDSB Policy 603A *School Fundraising*.
- 3.1.14 All Catholic School Council members are mandated to keep student information confidential.
- 3.1.15 There will be no honorarium paid to any person serving as a member of the Catholic School Council [Ontario Regulation 612/00, s.11(1)].
- 3.1.16 The Principal shall ensure that no partisan information is distributed on school premises.
- 3.1.17 Board personnel and the York Catholic Parent Involvement Commitment (YCPIC) will organize information and training sessions to enable Catholic School Council Members to develop their skills.
- 3.1.18 The York Catholic District School Board reserves the right to disband a Catholic School Council in the event of a conflict that cannot be resolved, and/or behaviour contrary to the Council's role and responsibilities. Elections to reconstitute a new Catholic School Council will be held in accordance with Ontario Regulation 612/00.

## **3.2 Membership: Composition & Term of Office**

- 3.2.1 All members on a Catholic School Council are valued and equal partners. Each elected or appointed member, receives one vote.
  - 3.2.1.1 The principal of the school cannot vote in votes taken by the school council or by a committee of the school council.
- 3.2.2 The Board encourages all Catholic Schools Councils to have student representation.
- 3.2.3 Membership on the Catholic School Council shall be determined in the following manner:
  - 3.2.3.1 Parent/Guardian representatives shall be elected by Parents and Guardians of students enrolled in the school;
  - 3.2.3.2 Elementary and Secondary Student representatives shall be elected by students enrolled in the school;
  - 3.2.3.3 One teacher representative shall be elected by members of the teaching staff assigned to the school;
  - 3.2.3.4 One non-teaching representative employee shall be elected by non-teaching employees assigned to the school (i.e.: Secretaries, Custodian Educational Assistants, Educational Intervenors, Designated Early Childhood Educators, Lunchtime Supervisors, Office Support Workers);

- 3.2.3.5 One School Community representative shall be appointed by the Catholic School Council;
- 3.2.3.6 One Ontario Association of Parents in Catholic Education (OAPCE) representative. The designated OAPCE representative shall be a Parent/Guardian of a student currently enrolled in the school.
- 3.2.3.7 Parish Representative(s) designated by the Parish or Parishes affiliated with the school;
- 3.2.3.8 The Chair of the Catholic School Council shall be a member who is a Parent/Guardian of a student enrolled at the school, and shall be elected by the Catholic School Council [Ontario Regulation 612/00 s8(2)];
- 3.2.3.9 The Principal shall be a designated, non-voting member.
- 3.2.4 ~~It is recommended that~~ The membership of a Catholic School Council shall not exceed 25 parents.
- 3.2.5 Parent/Guardian(s) shall form the majority of members on the Catholic School Council.
  - 3.2.5.1 Where the number of persons running for positions on Catholic School Council exceeds the number of positions available; there shall be a limitation imposed of only one person per household being allowed to hold a position.
  - 3.2.5.2 Where the number of members is fewer than 25 persons ~~or less than the required number of members~~, two members of the same household may run, hold a position and exercise their right to vote.
- 3.2.6 A person who is employed by the board cannot be the Chair or Co-Chair of the Catholic School Council [Ontario Regulation 612/00 s.8(3)].
- 3.2.7 The Principal will communicate with the Pastor of the Parish or Parishes affiliated with the school to confirm a Parish Representative who will be designated as a member of the Catholic School Council. In a situation where a school is affiliated with more than one Parish, representation must be sought from all Parishes concerned. If more than one Parish Representative is designated from the affiliated Parishes, it must be understood that only one vote is allocated to this position.
- 3.2.8 A person is not qualified to be a parent member of the Catholic School Council if ~~he or she is~~ they are employed at the school ~~his or her~~ their child attends, and may only be elected as either the teaching or non-teaching staff representative (i.e.: An Office Support Worker is a Board employee, part of a Union and has a permanent position. Therefore, this person would qualify for election only as a non-teaching representative).
- 3.2.9 A person who fulfills a staff's absence on an emergency basis but is not a certified teacher of the Board and is not part of a Union nor holds a permanent position, may be elected to the Catholic School Council as a parent member if they have a child attending the school.

- 3.2.10 A parent, who is employed by the board but does not work at the school their children attend, may be elected as a parent member as long as they declare to other parents that they are employed by the school board prior to their election. This information shall be recorded in the minutes of the first Catholic School Council meeting.
- 3.2.11 The term of office for elected and appointed positions on a Catholic School Council shall not exceed one year. A member of a Catholic School Council may be re-elected or reappointed, ~~unless otherwise provided by the by-laws of the council~~ (Ontario Regulation 612/00 s.6).
- 3.2.12 A vacancy in the membership of the Catholic School Council shall be filled by election or by appointment, in accordance with the **Constitution** ~~by-laws~~ of the Council. ~~set by the individual Catholic School Council. Catholic School Councils that want the option of filling a vacancy by appointment must ensure that a — by-law is in place to provide for that option. Otherwise, the vacancy must be filled by election.~~ If an election is to occur to fill a vacancy, then the election rules set out in Ontario Regulation 612/00 apply (Ontario Regulation 612/00 s.7)

### **3.3 Meetings**

- 3.3.1 All Catholic School Councils shall hold a minimum of four meetings per year [Ontario Regulation 612/00 s.12(1)].
- 3.3.2 A Catholic school council shall meet within the first 35 days of the school year after the election is held. The date for the initial meeting shall be determined by the principal of the school [Ontario Regulation 612/00,s.12(2)].
- 3.3.3 All Catholic School Council meetings, Executive meetings and Subcommittee meetings shall be held,
- (i) in person, on school premises or at a location accessible to the public and open to all members of the school community [Ontario Regulation 612/00, s.12(6)].
  - (ii) by electronic or telephonic means; or
  - (iii) both in person, at a location described in clause (i) and by electronic means.
- 3.3.3.1 A member of a school council who participates in a meeting through electronic or telephonic means shall be deemed present in the meeting.
- 3.3.4 The Principal shall, on behalf of the Catholic School Council, give written notice of the dates, times and locations of the meetings of the council to every parent/guardian of a student who is enrolled in the school [Ontario Regulation 612/00 s 12(7)].
- 3.3.5 The notice provided by the Principal and required by subsection 3.3.4 may be given by doing one or more of the following:
- (i) Giving the notice to the parent by email or by other electronic means.
  - (ii) Posting the notice in a designated location in the school in a location that is visible to parents.
  - (iii) Delivering the notice to the parent by email or by other electronic means.

(iv) Posting the notice on the school's website.

- 3.3.6 All Catholic School Councils shall make every reasonable effort to avoid scheduling Catholic School Council meetings on evenings of scheduled Board meetings to enable Trustees the opportunity to attend.

### **3.4 Committees**

- 3.4.1 A Catholic School Council may, in accordance with its by-laws, establish committees to make recommendations to the Catholic School Council [Ontario Regulation 612/00 s.13(1)].

### **3.5 Establishing By-Laws/ Review of Constitution**

- 3.5.1 The Catholic School Council must ~~review~~ **familiarize themselves with the** Constitution ~~and operating by-laws~~ on an annual basis, as soon as possible after the Catholic School Council meets for the first time to address the following as outlined in Ontario Regulation 612/00 s.15:
- 3.5.1.1 Election procedures;
  - 3.5.1.2 Filling vacancies; and,
  - 3.5.1.3 Conflict of interest and conflict resolution procedures.
- 3.5.2 ~~By-laws~~ **The Catholic School Councils Constitution** must be revised in accordance with any amended legislation governing the operation of a school council.
- 3.5.3 ~~By-laws governing other areas of operation may also be developed but must be in accordance with applicable Board policies and Ontario Regulation 612/00.~~
- 3.5.4 ~~In the event of a school closure/consolidation as a result of a Pupil Accommodation Review, the first order of business for the newly elected Executive shall be to review/revise the Catholic School Council's existing constitution and by-laws of the consolidated school.~~

### **3.6 Minutes and Financial Records**

- 3.6.1 A Catholic school council shall keep minutes of all of its meetings and records of all of its financial transactions.
- 3.6.2 The minutes of Catholic School Council meetings and records of financial transactions shall be accessible by any person at the school for examination.
- 3.6.3 The recorded minutes of all the Catholic School Council meetings and records of financial transactions shall be submitted to the Principal of the school.
- 3.6.4 Accurate accounting shall be maintained by the Principal and the Treasurer of the Catholic School Council to comply with the requirement of accountability and transparency to the school community.
- 3.6.5 Subsections (3.6.1) and (3.6.2) do not apply to minutes and records that are more than four years old.

### **3.7 Fundraising**

- 3.7.1 All fundraising activities shall be conducted in accordance with Board Policies and Guidelines (Policy 603A *School Fundraising* and Policy 603B *Fundraising for External Charitable Purposes*).
- 3.7.1.1 Funds raised are to be used for a purpose approved by the Board and/or Principal. Catholic School Councils shall ensure that Catholic



- School Council funds and school resources are not used to promote a particular viewpoint (Ontario Regulation 612/00 s. 22).
- 3.7.1.2 Any funds and assets generated through fundraising activities assisted by the Catholic School Council are the property of the Board.
  - 3.7.1.3 In the event of a school consolidation/closure, the following will be adhered to as outlined in the Board's Procedure: *Transition Process for School Consolidation/Closure, Addendum to Policy 713 Pupil Accommodation Review of School* as follows:
    - 3.7.1.3.1 Any residual fundraising monies shall be proportionately distributed, based on student enrolment, to the affected schools; and,
    - 3.7.1.3.2 All school assets purchased through fundraising or General School Budget (GSB), shall be distributed equitably based on a needs assessment completed by Board staff, in consultation with the appropriate School Superintendent(s) and Principals of the affected schools:
      - (i) First, to the affected schools; and,
      - (ii) Second, to other schools as identified by Board Staff.

### **3.8 Annual "Year-End" Report**

- 3.8.1 All Catholic School Councils shall submit a written report annually on its activities to the principal of the school and to the board **by September 20th each year** [Ontario Regulation 612/00,s.24(1)]. **Catholic School Councils should use the [template provided here](#) by the Board.**
- 3.8.2 If the Catholic School Council engages in fundraising activities, the annual report shall include a report on those activities.
- 3.8.3 On behalf of the Catholic School Council, the principal shall give a copy of the report to every parent of a student who is enrolled in the school.
- 3.8.4 Subsection (3.8.3) may be complied with by doing one or more of the following:
  - (i) Giving a copy of the report to the parent's child for delivery to the parent.
  - (ii) Posting a copy of the report in the school in a location that is accessible to parents.
  - (iii) Delivering a copy of the report to the parent by email or by other electronic means
  - (iv) Posting a copy of the report on the school's website.

### **3.9 Electronic Mail Communication & Social Media**

- 3.9.1 Only York Catholic District School Board staff, using a Board email address, can create, update and moderate information that is shared on the Board's endorsed social media platform.
- 3.9.2 Catholic School Council members, and parents at large, are encouraged to follow Board/School social media accounts.
  - 3.9.2.1 All Catholic School Council communication must be approved by the Principal and posted only on the school website. Catholic School Councils shall not create social media accounts such as Facebook, Twitter, Instagram etc.



- 3.9.2.2 All Catholic School Council content must be approved by the Council and the Principal before being published on the School website.
- 3.9.2.3 In accordance with the *Municipal Freedom of Information and Privacy Act*, only the Board/Schools have the authority to collect personal information and parental consent for the posting or sharing of student information, photos and videos.
- 3.9.2.4 Catholic School Councils may provide content to the social media account via the Principal, but may not have access to post directly to the school social media account.
- 3.9.2.5 Catholic School Council members shall promote and practice strong digital citizenship/discipleship when or if communicating on their personal accounts. When posting on the internet or emailing, members will not disclose any information that is confidential.

### **3.10 York Catholic Parent Involvement Committee (YCPIC)**

- 3.10.1 The purpose of the York Catholic Parent Involvement Committee is to support, encourage and enhance parent engagement at the board level in order to improve student achievement and well-being [Ontario Regulation 612/00, s.27)].
- 3.10.2 The York Catholic Parent Involvement Committee shall work with Catholic School Councils of the Board and, through the Director of Education as per Ontario Regulation 612/00, s. 27 & 28 to:
  - 3.10.2.1 Share effective practices to help engage parents;
  - 3.10.2.2 Identify and reduce barriers to parent engagement;
  - 3.10.2.3 Help ensure that schools of the board create a welcoming environment for parents of its pupils;
  - 3.10.2.4 Develop skills and acquire knowledge that will assist the parent involvement committee and councils of the board with their work; and,
  - 3.10.2.5 Determine, in consultation with the Director of Education and in keeping with Board's policies, how funding, if any, provided under the *Education Act* for parent involvement is to be used.

### **3.11 Ontario Association of Parents in Catholic Education (OAPCE)**

- 3.11.1 The Ontario Association of Parents in Catholic Education is established to,
  - 3.11.1.1 Respond to and represent the interests and concerns of Parent/Guardian(s) who have children enrolled in publicly funded Catholic schools with a focus on all aspects of student education: spiritual, academic, health and safety, as well as other issues which may arise from parent communication with the organization;
  - 3.11.1.2 Collaborate with local and provincial education partners to strengthen the voice of Catholic education.

## **4. RESPONSIBILITIES**

### **4.1 Director of Education**

- 4.1.1 To oversee compliance with the Catholic School Councils policy and related guidelines.

### **4.2 Senior Administration**

- 4.2.2 To support school communities with the implementation of and compliance with the Catholic School Councils policy and related guidelines.

### 4.3 Principal

- 4.3.1 To perform the duties as outlined in Ontario Regulation 612/00 *School Councils and Parent Involvement Committees* and Ontario Regulation 613/00 *Operation of Schools*.
- 4.3.2 To ensure compliance with the Catholic School Councils policy and related guidelines.
- 4.3.3 To make every effort to engage parents who reflect the diversity of the school community to be members of the Catholic School Council.
- 4.3.4 To facilitate the establishment of the Catholic School Council and assist in its operation.
- 4.3.5 To attend Catholic School Council meetings.
- 4.3.6 To support and promote Catholic School Council's activities that are consistent with the board's policy statement dealing with Catholic School Councils.
- 4.3.7 To seek input from the Catholic School Council in areas for which it has been assigned advisory responsibility.
- 4.3.8 To consult with the Catholic School Council on fundraising expenditures.
- 4.3.9 To Act as a resource on laws, regulations, board policies, and collective agreements.
- 4.3.10 To obtain and provide information required by the Catholic School Council to enable it to make informed decisions.
- 4.3.11 To communicate with the Chair of the Catholic School Council, as required.
- 4.3.12 To ensure that parent members are given written notice of the date and time of the location or means to access the election 14 days prior to the date of the election.
- 4.3.13 To ensure that all Catholic School Council meeting dates are posted on the Catholic School Council section of the School Website and in the School Calendar, and that all agendas and minutes are posted on the school website in a timely manner.
- 4.3.14 To ensure that the Catholic School Council's Annual "Year End" Report is submitted to the Board and posted to the Catholic School Council section of the School Website in a timely manner.
- 4.3.15 To ensure that copies of the agenda and minutes of all Catholic School Council meetings including Executive and Subcommittee meetings are kept at the school for four years.
- 4.3.16 To ensure that copies of all Catholic School Council, Executive and any Subcommittee Agendas, Minutes and the Annual "Year End" Report are shared with the Catholic School Council, all Parents/Guardians, local Trustee(s) and School Superintendent electronically, if possible, and in a timely manner.
- 4.3.17 To assist the Catholic School Council in communicating with the school community.
- 4.3.18 To contact the wider school community, local Trustee(s) and School Superintendent to notify of any change or cancellation of Catholic School Council meetings.
- 4.3.19 To present to the Catholic School the General School Budget and the School Bank Account allocations as well as all fundraising expenditures on a regular basis.
- 4.3.20 To maintain the authority to end and/or terminate the meeting, should inappropriate discussions about individual Parent/Guardian(s), students, staff, Trustees or other Catholic School Council members arise.

#### 4.4 Catholic School Council

- 4.4.1 To fulfill the role of an advisory body to the school and board as follows:
  - 4.4.1.1 To respect the confidentiality of all information that may be received regarding any pupils or staff while a volunteer and/or Catholic School Council member and refrain from releasing that information to any person in accordance with the *Municipal Freedom of Information and Protection of Privacy Act*;
  - 4.4.1.2 To coordinate the election procedures for Catholic School Councils to be held within the first thirty calendar days of the start of the school year;
  - 4.4.1.3 To promote the best interests of the school community;
  - 4.4.1.4 To communicate regularly, via the School Website or School Newsletters, with parents and other members of the school community seeking their views and preferences with regard to matters being addressed by the Catholic School Council; and,
  - 4.4.1.5 To report on the activities of the Catholic School Council to the school community and Board as required.
- 4.4.2 To maintain a school-wide focus on all issues with sensitivity to the school's needs, culture and demographics.
- 4.4.3 To respect that Catholic School Council meetings are not a forum for discussion about individual Parent/Guardian(s), students, staff, trustees or other Catholic School Council members.
- 4.4.4 To respond to Board requests regarding policies under review in a timely manner.

#### 5. DEFINITIONS

##### 5.1 Advisory Body

A group established to provide advice and recommendations. An advisory body does not have final decision-making powers.

##### ~~5.2 By laws~~

~~The rules developed and adopted by the Catholic School Council for the regulation of its operation and proceedings. By laws must not conflict with Board policies or provincial legislation by which a Catholic School Council is established.~~

##### 5.2 Constitution

A document that defines the structure of the Catholic School Council and sets out the principles according to which the council is governed. Catholic School Councils are not required to develop lengthy Constitutions, since Ontario Regulation 612/00 sets out the mandate and roles and responsibilities for School Councils.

##### 5.43 Digital Citizenship/Discipleship

The norms of appropriate, responsible behaviour with regard to technology use. It encompasses digital literacy, ethics, etiquette, online safety, rights, culture, wellness and copyright.

##### 5.54 Diversity

The presence of a wide range of human qualities and attributes within a group, organization or society. The dimensions of diversity include, but are not limited to,

age, ancestry, culture, ethnicity, gender identity, gender expression, language, physical and intellectual ability, race, religion, sex, sexual orientation and socio-economic status.

#### 5.65 Electronic Communication & Social Media

Any software, application(s), e-mail, SMS (Texting) and website(s) which enable users to access, create, download, exchange and store information online.

#### 5.76 Personal Information

In accordance with Ontario's *Personal Information Protection and Electronic Documents Act (PIPEDA)*, personal information includes:

- Name, race, ethnic origin, religion, marital status, educational level
- E-mail address and messages, Internet Protocol (IP) address
- Age, height, weight, medical records, blood type, DNA code, fingerprints, voiceprint
- Income, purchases, spending habits, banking information, credit/debit card data, loan or credit reports, tax returns
- Social Insurance Number (SIN) or other identification numbers

#### 5.87 School Community

All Parent/Guardian(s) who have children enrolled in the school as well as stakeholders within the designated school boundary including, but not limited to staff, local pastor(s), parish representative, community representative and/or residents.

## 6. CROSS REFERENCES

### Legislation

*Education Act*, [Ontario Regulation 612/00 School Councils and Parent Involvement Committees](#)  
*Education Act*, [Ontario Regulation 613/00 Operation of Schools](#)  
[Municipal Freedom of Information and Protection of Privacy Act](#)  
[Ontario Ministry of Education School Councils: A Guide for Members, 2001, Revised 2002](#)

### YCDSB Policies

[Policy 106 Delegations to the Board](#)  
[Policy 201 Healthy Schools](#)  
[Policy 201A Healthy Schools – Eating & Nutrition](#)  
[Policy 205 Student Government](#)  
[Policy 317 Electronic Communications & Social Media](#)  
[Policy 603A School Fundraising](#)  
[Policy 603B Fundraising for External Charitable Purposes](#)  
[Policy 608 Volunteers in Schools](#)  
[Policy 713 Pupil Accommodation Review](#)  
[Policy 803 School Generated Funds](#)

### YCDSB Procedures

YCDSB [School Generated Funds Administrative Procedure](#)  
YCDSB [Transition Process for School Consolidation/Closure Procedure](#)

## CATHOLIC SCHOOL COUNCILS

### GUIDELINES

#### 1. Role of Catholic School Council Members

- 1.1 Provide informed advice to the Principal on matters related to student achievement, well-being and continuous school improvement
- 1.2 Maintain a school-wide perspective on issues
- 1.3 Participate in Catholic School Council meetings
- 1.4 Participate in information and training programs
- 1.5 Act as a link between the Catholic School Council and the school community
- 1.6 Encourage the participation of all Parent/Guardian(s) and of other people within the school community
- 1.7 Respect the confidentiality of all information that may be received regarding any pupils or staff while being a volunteer and/or Catholic School Council member and refrain from releasing that information to any person in accordance with the *Municipal Freedom of Information and Protection of Privacy Act*.

#### 2. Role of Catholic School Council Chair/Co Chair

- 2.1 Call Catholic School Council meetings; (minimum of four per year – first meeting to be held within 35 days of the start of the school year)
- 2.2 New members to the Catholic School Council Executive should attend the Catholic School Council Orientation Workshop offered by the York Catholic Parent Involvement Committee held annually in the Fall
- 2.3 Prepare, in concert with the Principal, the agenda for Catholic School Council, Executive or Subcommittee meetings
- 2.4 Chair Catholic School Council meetings
- 2.5 Ensure that the minutes of Catholic School Council, Executive or Subcommittee meetings are recorded, maintained and kept for four years
- 2.6 Participate in information and training programs
- 2.7 Communicate with the school Principal as required
- 2.8 Ensure that there is regular communication with the school community posted on the Catholic School Council section of the school website
- 2.9 Consult with senior board staff and Trustees, as required, and submit annually a written report of the Catholic School Council activities to the Principal and the Board. This Year-End Report will be posted on the school website.
- 2.10 Respect the confidentiality of all information that may be received regarding any pupils or staff while being a volunteer and/or Catholic School Council member and refrain from releasing that information to any person in accordance with the *Municipal Freedom of Information and Protection of Privacy Act*

#### 3. Role of Catholic School Council Secretary

- 3.1 Ensure that the minutes of the Catholic School Council meetings are recorded and retained for a minimum of four years
- 3.2 Keep a record of the proceedings of all other Catholic School Council meetings (i.e.: Executive or Sub-Committee meetings) for a minimum of four years

- 3.3 Attend to all official correspondence and communication, posting of notices and filing of records as directed by the Catholic School Council in collaboration with the Chair and Principal, and in accordance with Board policies and procedures.

**4. Role of Catholic School Council Treasurer**

- 4.1 Entrusted with the receipt, care and management of all Catholic School Council funds in accordance with Board policies and procedures
- 4.2 Prepare all deposits and ensure that they are signed by both the Treasurer and Chair or Co-Chair
- 4.3 Ensure that all deposits are prepared by a minimum of two (2) Catholic School Council members, one being the Treasurer, to confirm deposit amounts
- 4.4 Prepare all documentation for the payment of invoices authorized by the Catholic School Council
- 4.5 Provide an account of all transactions and a current financial statement (budget vs. actual analysis) at regular Catholic School Council meetings, or whenever required
- 4.6 Ensure that all financial records of the Catholic School Council remain at the School and are available for audit purposes
- 4.7 Prepare a full Financial Statement prior to the Catholic School Council's Annual General Meeting
- 4.8 Develop budget proposals based on Catholic School Council approved expenditures
- 4.9 Retain all financial records for four years.





## YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Students</b>
<i>Policy Number</i>	<b>206</b>
<i>Former Policy Number</i>	
<i>Total Pages</i>	<b>7</b>
<i>Original Approved Date</i>	
<i>Subsequent Approval Dates</i>	

### Supporting Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools

#### 1. PURPOSE

The York Catholic District School Board strives to create a safe and accepting learning environment for students with prevalent medical conditions. The York Catholic District School Board recognizes that Health Management Plans are a shared responsibility that require a team approach among students, Parent(s)/Guardian(s), health care providers and the school community. In addition, the Board believes in the importance of empowering students with prevalent medical conditions to be confident and capable learners who can reach their full potential for self-management of their medical conditions, according to their plan of care. This policy is in accordance with Policy/Program Memorandum 161 and all other applicable legislation.

#### 2. OBJECTIVE

It is the policy of the York Catholic District School Board that all students be entitled to safe and healthy environments in our schools. The Board is committed to supporting students with prevalent medical conditions to fully access school in a safe, accepting and healthy learning environment that supports well-being. The Board will support the empowerment of students as confident and capable learners, to reach their full potential for self- management of their medical condition(s) according to their *Health Management Plan*.

#### 3. PARAMETERS

3.1 Every school in the York Catholic District School Board shall implement and maintain procedures in accordance with this policy for students with Anaphylaxis, Asthma, Diabetes, and/or Epilepsy and will cross reference Policy 208 *Student Disability accommodation* and Policy 207 *Administration of Oral Medication to Elementary and Secondary Students*. While it is impossible to create a risk-free environment, school staff and Parent(s)/Guardian(s) can take important steps to minimize potentially life-threatening situations including the following:

- 3.1.1 Clearly articulate the expected roles and responsibilities of parents(s)/guardian(s), school staff and of the student themselves;
- 3.1.2 Establish a communication and implementation plan for the dissemination of information to Parent(s)/Guardian(s), students, employees and include any other person who has direct contact with a student who has one or more of these diagnoses;

- 3.1.3 Provide annual training and resources for all school employees who are in direct and regular contact with students **with prevalent medical conditions to ensure the safety and wellbeing of students.**
- 3.1.4 To develop and implement strategies that reduce the risk of a medical incident for students with Prevalent Medical Conditions in classrooms, common school areas and on approved excursions and activities.
- 3.2 Upon registration or upon being informed of a student's diagnosis, Parent(s)/Guardian(s) and students of 16 years of age or older supply information specific to their symptoms and the management of their Prevalent Medical Condition.
- 3.3 **A Health Management Plan shall be co-created, reviewed, and updated for each student diagnosed with a Prevalent Medical Condition in consultation with the parent(s)/guardian(s), appropriate school staff, and with the student, along with any notes and instructions from the student's health care provider.**
- 3.4 **Employees and other staff who are in direct contact on a regular basis with a student with a Prevalent Medical Condition shall be informed of the contents of the student's Health Management Plan.**
- 3.5 A centrally accessible file containing all individual Health Management Plans shall be created, maintained and shall contain **a copy of any notes and instructions from a health care provider** for students with a Prevalent Medical Condition for the current school year.
- 3.6 All decisions regarding admittance of service ~~dogs~~ **animals** to a school shall be made in accordance with YCDSB's Policy 214, **Student Use of Service Animals**, and the *Decision-Making Protocol for Entry of a Personal Service Animal*.
- ~~3.8 Students and/or designated staff shall be permitted to carry prescribed medication and/or supplies only if the office is made aware to support the implementation of the Health Management Plan.~~
- 3.7 No action or other proceedings for damages shall be commenced against an employee for an act or omission, done or omitted by the employee in good faith, in the execution or intended execution of any duty or power under the *Good Samaritan Act*. Subsection 2(1) and (2) of this act outline the following with regard to individuals:
2. (1) *Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in acting or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.*
- (2) *Subsection (1) applies to, ... (b) an individual...who provides emergency first aid assistance to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.*



## **4. RESPONSIBILITIES**

### **4.1 Director of Education**

- 4.1.1 To oversee compliance with the *Supporting Students with Prevalent Medical Conditions (Anaphylaxis, Asthma Diabetes and/or Epilepsy) in schools* Policy.

### **4.2 Superintendent of Human Resources**

- 4.2.1 To ensure that all staff who have direct and regular contact with students with prevalent medical conditions are trained upon hiring and on an annual basis.

### **4.3 Superintendent of Education**

- 4.3.1 To support Principals with the implementation of and compliance with the *Supporting Students with Prevalent Medical Conditions (Anaphylaxis, Asthma Diabetes and/or Epilepsy) in schools* Policy.

### **4.4 Principals**

- 4.4.1 To participate in annual training with staff and others in direct contact with students to learn how to recognize the symptoms of prevalent medical conditions and the procedures to follow should a life-threatening reaction occur.
- 4.4.2 To implement and comply with this policy.
- 4.4.3 To clearly communicate to parents and appropriate staff the process for parents to notify the school of their child's medical condition(s), as well as the expectation for parents to co-create, review, and update a Health Management Plan with the principal or the Principal's designate. This process should be communicated to parents, at a minimum:
  - (i) during the time of registration
  - (ii) each year during the first week of school
  - (iii) when a child is diagnosed and/or returns to school following the diagnosis
- 4.4.4 To co-create, review, or update the Health Management Plan for a student with a prevalent medical condition with the parent(s), in consultation with school staff (as appropriate) and with the student (as appropriate).
- 4.4.5 To maintain a file with the Health Management Plan and supporting documentation for each student with a prevalent medical condition.
- 4.4.6 To provide relevant information from the student's Health Management Plan to school staff and others who are identified in the Health Management Plan.
- 4.4.7 To communicate with parent(s)/guardian(s) in medical emergencies, as outlined in the Health Management Plan.
- 4.4.8 To encourage the identification of staff who can support the daily or routine management needs of students in the school with prevalent medical conditions.

#### **4.5 School Staff**

- 4.5.1 To review the Health Management Plan for any student with prevalent medical conditions with whom they have direct and regular contact.
- 4.5.2 To participate in training on prevalent medical conditions, at a minimum annually, as required by the school board.
- 4.5.3 To share information on a student's signs and symptoms with other students, if the parent(s)/guardian(s) give consent to do so and as outlined in the Health Management Plan and authorized by the Principal in writing.
- 4.5.4 To follow school board strategies that reduce the risk of student exposure to triggers or causative agents in classrooms, common school areas, and extracurricular activities, in accordance with the student's Health Management Plan.
- 4.5.5 To support a student's daily or routine management, and respond to medical incidents and medical emergencies that occur during school, as outlined in Board policies and procedures.
- 4.5.6 To support inclusion by allowing students with prevalent medical conditions to perform daily or routine management activities in a school location as outlined in their Health Management Plan, while being aware of confidentiality and the dignity of the student.

#### **4.6 Parent(s)/Guardian(s)**

- 4.6.1 To educate their child about their medical condition(s) with support from their child's healthcare professional, as needed.
- 4.6.2 To guide and encourage their child to reach their full potential for self-management and self-advocacy.
- 4.6.3 To inform the school of their child's medical condition(s) and co-create the Health Management Plan for their child with the principal or their designate.
- 4.6.4 To communicate changes to the Health Management Plan, such as changes to the status of their child's medical condition(s) or changes to their child's ability to manage the medical condition(s), to the principal or their designate.
- 4.6.5 To confirm annually to the Principal or their designate that their child's medical status is unchanged.
- 4.6.6 To initiate and participate in annual meetings to review their child's Health Management Plan.
- 4.6.7 To supply their child and/or school with sufficient quantities of medication and supplies in their original, clearly labelled containers, as directed by a health care professional and as outlined in the Health Management Plan, and track the expiration dates if they are supplied.

- 4.6.8 To seek medical advice from a medical doctor, nurse practitioner, or pharmacist, where appropriate.

#### **4.7 Students**

- 4.7.1 Depending on their cognitive, emotional, social, and physical stage of development, and their capacity for self-management, students are expected to actively support the development and implementation of their Health Management Plan.
- 4.7.2 To take responsibility for advocating for their personal safety and well-being that is consistent with their cognitive, emotional, social, and physical stage of development and their capacity for self-management.
- 4.7.3 To participate in the development of their Health Management Plan.
- 4.7.4 To participate in meetings to review their Health Management Plan.
- 4.7.5 To carry out daily or routine self-management of their medical condition to their full potential, as described in their Health Management Plan.
- 4.7.6 To set goals on an ongoing basis for self-management of their medical condition, in conjunction with their parent(s)/guardian(s) and health care professionals.
- 4.7.7 To communicate with their parent(s)/guardian(s) and school staff if they are facing challenges related to their medical condition(s) at school.
- 4.7.8 If possible, to inform school staff and/or their peers if a medical incident or a medical emergency occurs.

### **5. DEFINITIONS**

#### **5.1 Anaphylaxis**

Is a serious and possibly life-threatening allergic reaction that requires immediate recognition and intervention. Symptoms can vary from person to person and may include:

- Skin: hives, swelling (face, lips, and tongue), itching, warmth, redness
- Breathing (respiratory): coughing, wheezing, shortness of breath, chest pain/tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing-
- Stomach (gastrointestinal): nausea, pain/cramps, vomiting, diarrhea
- Heart (cardiovascular): paler than normal/blue skin colour, weak pulse, passing out, dizziness or light-headedness, shock
- Other: anxiety, sense of “doom” (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste

#### **5.2 Asthma**

As defined by the Ontario Lung Association, is a very common chronic (long-term) lung disease that can make it hard to breathe. People with asthma have sensitive airways that react to triggers. There are many different types of triggers such as, poor air quality, mold,

dust, pollen, viral infections, animals, smoke and cold air. The symptoms can cause mild to severe reactions and be fatal. Common asthma symptoms include:

- Shortness of breath;
- Wheezing (whistling sound from inside the chest);
- Difficulty breathing;
- Chest tightness; and
- Coughing.

### **5.3 Diabetes - Type 1**

A chronic condition where the pancreas stops producing insulin, a hormone that helps the body control the level of glucose (sugar) in your blood. The body produces glucose, and also gets it from foods that contain carbohydrates, such as bread, potatoes, rice, pasta, milk and fruit. Without insulin, glucose builds up in the blood instead of being used by your cells for energy. A lack of insulin can cause both short-term and long-term health problems. Symptoms of undiagnosed type 1 diabetes include:

- Increased thirst;
- increased urination;
- lack of energy;
- weight loss.

### **5.4 Diabetes - Type 2**

can affect children and youth, but it is more common in adults. With type 2 diabetes, the body does not respond well to insulin, and the pancreas cannot produce enough insulin to compensate. Type 2 diabetes can often be managed through changes to diet and lifestyle, as well as with oral medications (pills). Some children with type 2 diabetes may need insulin injections.

### **5.5 Epilepsy**

Results from sudden bursts of hyperactivity in the brain; this causes “seizures” which vary in form, strength, and frequency, depending on where in the brain abnormal activity is found. Epilepsy is the diagnosis and seizures are the symptom. If a person has two (2) or more seizures that are not related to another condition, that person will be diagnosed as having epilepsy.

### **5.6 Health Management Plan**

A plan of care that contains individualized information on a student with a prevalent medical condition.

### **5.7 Medical Incident**

A circumstance that requires an immediate response and monitoring, since the incident may progress to an emergency requiring contact with Medical Services

### **5.8 Prevalent Medical Conditions**

For the purposes of this policy, Prevalent Medical Conditions refer to the medical conditions of students in schools who have asthma, diabetes, epilepsy, and/or anaphylaxis as diagnosed by a medical doctor or nurse practitioner.

## 6. CROSS REFERENCES

### Legislation

[Education Act, RSO 1990](#)

[PPM 161 Supporting Children and Students with Prevalent Medical Conditions \(Anaphylaxis, Asthma, Diabetes, and/or Epilepsy\) in Schools](#)

[Food Allergy Canada](#)

[Sabrina's Law](#)

[Asthma Canada](#)

[The Lung Association-Ontario](#)

[Ryan's Law](#)

[Diabetes at School](#)

[Epilepsy Ontario](#)

[Good Samaritan Act](#)

### YCDSB Policies

[Policy 201A Healthy Schools – Eating and Nutrition](#)

[Policy 203 Student Transportation Services](#)

[Policy 207 Administration of Oral Medication to Elementary and Secondary Students](#)

[Policy 208 Student Disability Accommodation](#)

[Policy 214 Student Use of Service Animals](#)



## York Catholic District School Board

### **PROCEDURE:**

### **206A SUPPORTING STUDENTS WITH PREVALENT MEDICAL CONDITIONS: ANAPHYLAXIS**

### **Addendum to:**

### **Policy 206 Supporting Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools**

Effective: DD/MMM/YYYY

## PURPOSE

The York Catholic District School Board recognizes that there are some students within the school system that are susceptible to severe anaphylactic reactions which could be life threatening. The York Catholic District School board also recognizes that anaphylaxis management is a shared responsibility that requires a team approach among allergic students, Parent(s)/Guardians, health care providers and the entire school community.

## 1. Roles & Responsibilities

### 1.1 Parent(s)/Guardian(s) of Children with Anaphylaxis

As primary caregivers of their child, parent(s)/guardian(s) are expected to be active participants in supporting the management of their child's anaphylaxis while the child is at school and at school related activities. Parent(s)/Guardian(s) are expected to:

- Inform the Principal immediately upon registration and/or when in receipt of a diagnosis of an anaphylactic allergy
- Provide the school with a completed copy of form S15(a) for Elementary students and S15(a1) for Secondary students prior to, or immediately after the start of the student's Elementary career and prior to, or immediately after the start of the student's Secondary career, or immediately after a diagnosis of an anaphylactic allergy
- **Participate in the co-creation, review and updating of the Anaphylaxis Health Management Plan and other required forms within the first 30 days of each school year, upon registration, and following any changes or new diagnosis**
- Ensure that all medical information pertinent to the student's life-threatening allergy is always current
- Provide the school with two (2) \* up-to-date single-dose applications of the Epinephrine auto-injector, one to be stored in the school office, clearly marked with student's name and known allergen and the second to be carried on the student's person, clearly marked with the student's name and known allergen
- Or, to provide the school with one (1)\* up-to-date **Allerject** application of the Epinephrine auto-injector, to be worn on the student's person, clearly marked with student's name and known allergen or to be kept with a person in a position of authority
- Provide your child with a **MedicAlert® bracelet** to be worn at all times
- Practice allergen avoidance measures
- Research field trip sites and overnight excursion sites for potential allergen risks
- Provide education to their child about their medical condition, as well as the safekeeping and administration of their medication with support from their child's health care professional

\*If the Parent(s)/Guardian(s) is not in agreement with providing the school with two up- to-date applications of the Epinephrine auto-injector or the possession and carrying of one application Epinephrine auto-injector or the ALLERJECT Epinephrine auto-injector on the student then the parent will be required to indicate this on the S15(a) or S15(a1) form upon submission to the Principal acknowledging that they take full responsibility for their decision.

### 1.2 Students with Anaphylaxis

Depending on their cognitive, emotional, social and physical stage of development, and their capacity for self-management, students shall actively support the development and implementation of their anaphylaxis Health Management Plan. Students are expected to:

- Practice allergen avoidance measures
- Learn to recognize symptoms of an anaphylactic reaction

- Promptly inform an adult as soon as accidental exposure occurs or symptoms appear
- Take responsibility for advocating for their personal safety and well-being, as well as the safekeeping and administration of their medication that is consistent with their cognitive, emotional, social and physical stage of development and their capacity for self-management
- Communicate with their Parent(s)/Guardian(s) and school staff if they are facing challenges related to their medical condition at school
- Wear a Medic Alert identification at all times

### 1.3 School Staff

School staff play a key role in supporting the student's safe, accepting, and healthy learning environment, and allowing students to participate in school to their fullest potential. School staff will:

- Participate in the regular and current training on anaphylaxis twice annually to learn how to recognize the symptoms of an anaphylactic reaction and the procedures to follow should a life-threatening allergic reaction occur.
- Provide a copy of the S15(a) or S15(a1) form (which includes a photo of the student) to occasional teachers **and support staff**
- Discuss anaphylaxis with the class, in age appropriate terms outlining the allergen in the class, describing symptoms of an anaphylactic reaction and procedures to follow should an anaphylactic reaction occur.
- Ensure that all reasonable safety procedures are carried out in courses and activities for which the teacher is responsible.
- Administer an Epinephrine auto-injector or other medication that is prescribed, even if there is no pre-authorization to do so if there is reason to believe that a student is experiencing an anaphylactic reaction

### 1.4 Principal

In addition to the responsibilities outlined above under "School Staff", the principal (or designate) will:

- Participate with staff and others in direct contact with students in training on anaphylaxis twice annually to learn how to recognize the symptoms of an anaphylactic reaction and the procedures to follow should a life-threatening allergic reaction occur.
- Inform Parent(s)/Guardian(s) of the need to advise the school if their child has a life threatening allergy.
- Communicate with all staff and others who are in direct contact with students the name, grade and classroom teacher of students who could require the immediate administration of medication due to life-threatening allergies and where their Anaphylaxis Health Management Plan and medication are located.
- Develop **and co-create with parent(s)/guardian(s)** a Health Management Plan for each student who has an anaphylactic allergy that includes details informing staff and others who are in direct contact with the student on a regular basis of the type of allergy, monitoring and avoidance strategies and appropriate treatment; a readily accessible emergency procedure for the student, including emergency contact information and storage for Epinephrine auto-injector, where necessary.
- create and maintain a centrally accessible file containing all individual action plans for all students with anaphylaxis for the current school year.
- Ensure that this policy and accompanying guidelines are included in the school's Emergency Response/Health Management Plan.
- Provide and communicate to all staff the designated location of medication for students



with anaphylaxis.

- Establish an “allergy safe” school environment via food restrictions, no food sharing rules and hand washing routines.
- Communicate to the entire school community stressing “allergen safe” schools via newsletter, website, student agendas, regular assemblies and posting of “allergy safe” signs throughout the school.
- Provide separate communication to individual classrooms regarding allergens in that classroom and through the classroom to the community regarding specific allergens.
- Promote the avoidance of allergens where practical and possible (i.e., school events, such as Pancake Tuesday, any Food & Nutrition program provided by a third party and all one day and/or overnight school excursions.)
- Ensure that school volunteers and visitors are aware of **Policy 206: Supporting Students with Prevalent Medical Conditions**. ~~Anaphylaxis policy.~~

### 1.5 Student Transportation Services

- Ensure the names of students with a diagnosis of Anaphylaxis have been communicated to Transportation Service Providers.
- Ensure that **Policy 206: Supporting Students with Prevalent Medical Conditions** has been communicated with all Transportation Service Providers.
- Ensure that the current form S15(a) or S15(a1) form received from the Principal is available on file:
  - i) in the Student Transportation Services office,
  - ii) in the appropriate service provider’s dispatch office, and,
  - iii) in the appropriate school vehicle(s)
- Require the service provider to ensure there has been adequate Epinephrine auto-injector in-servicing and training of all regular drivers and substitute drivers that transport a student with life-threatening allergies.
- Work with the school Principal and service provider to assign seating

### 1.6 Human Resources

- To ensure that all occasional teachers and casual support staff are in-serviced upon hiring and on an annual basis by Human Resources on how to recognize symptoms of an anaphylactic attack, on how to respond to life threatening allergic reactions, and how to administer medication (e.g. Epinephrine auto-injector).

## 2. Anaphylaxis Health Management Plan

The Anaphylaxis Action Plan is a form that contains individualized information on the student’s allergy, School Care Team of Staff, preventative strategies to reduce risk, symptoms of an anaphylactic reaction and emergency medical response.

The Anaphylaxis Action Plan shall be co-created, reviewed or updated by the parent(s)/guardian(s) in consultation with the principal, designated staff and the student within the first 30 days of the school year or as soon as possible upon registration or diagnosis.

Parent(s)/guardian(s) have the authority to designate who is provided access to the Anaphylaxis Health Management Plan. With authorization from parent(s)/guardian(s), the Anaphylaxis Health Management Plan will be:

- i) Shared with appropriate school staff and others who are in direct contact with students with anaphylaxis (e.g. food service providers, transportation providers, volunteers).
- ii) Posted in a key area of the school where staff have access on a regular basis.
- iii) Posted inside the food preparation area of the cafeteria.
- iv) Located in the educator’s daybook and/or occasional educator plans.

### 3. Facilitating and Supporting Daily or Routine Management

Students are to have access to two (2) epinephrine auto-injectors at school:

- (i) Children who have demonstrated maturity (usually by the age 6 years) must carry their own epinephrine. Direct adult supervision should be available in the case of younger children, as very young children might require staff to carry or store the auto-injector to allow medication to be available in the classroom.
- (ii) A spare epinephrine auto-injector is to be kept in a location on school site that is easily accessible, usually in the office, and not in locked cupboards or drawers.

All employees, the student with anaphylaxis and others who come in regular contact with the student should know the location of the auto-injectors.

It is a shared responsibility between the school, students and parent(s)/guardian(s) to promote and maintain an allergen minimized environment.

In addition to being carried by the student, an auto-injector with the original pharmacist label and container may be stored in the office or other secure location, in accordance with the Board's Policy 207: *Administration of Oral Medication to Elementary and Secondary Students*.

### 4. Emergency Response

"Emergency" is defined by the Health Care Consent Act, 1996 to include a situation where the individual is experiencing severe suffering, or is at risk of sustaining serious bodily harm, if the treatment is not administered promptly.

All staff are required to be trained annually in the emergency response to an anaphylactic reaction. The individualized response to a student's anaphylactic emergency shall be detailed in their Health Management plan. Staff who are in direct contact with the student, shall review and be trained on the individual action plan.

Generally, in the event of an emergency, staff shall:

- (i) Give an epinephrine auto-injector (e.g., EpiPen, Allerject®) at the first sign of known or suspected anaphylactic reaction.
- (ii) Call 9-1-1. Tell them someone is having a life-threatening allergic reaction.
- (iii) Call, or direct another adult to call, the emergency contact person.
- (iv) Give a second dose of epinephrine as early as five (5) minutes after the first dose if there is no improvement in symptoms.
- (v) Provide the used auto-injector to the paramedics for safe disposal.
- (vi) Document the Medical incident in the Health Management Plan

### 5. Raising Awareness

Where possible, school staff should raise awareness of Anaphylaxis and other prevalent medical conditions that affect students. They can do so through curriculum content in classroom instruction, related learning experiences and classroom leadership opportunities. Awareness is especially important at times of transition (e.g. the move to a new school, the move from elementary to secondary school), when students have to face social, physiological, and environmental changes.

### 6. Liability

*The Good Samaritan Act, passed in 2001, protects individuals from liability with respect to voluntary emergency medical or first aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:*

*2.(1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in action or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.*

*(2) Subsection (1) applies to, ... (b) and individual... who provides emergency first aid to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.*

*In addition, Sabrina's Law (2005) includes provisions limiting the liability of individuals who respond to an emergency relating to these conditions, as cited below:*

*Section 3(4) of Sabrina's Law: No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee's gross negligence.*

## **7. Definitions**

### **Age and/or Developmentally Appropriate**

Age and/or developmentally appropriate readiness for individual students will need to be considered by the Superintendent of Schools and Principal in consultation with the Parent(s)/Guardian(s). The responsibilities that a student can assume will be assessed based on the student's age and capability to understand their life-threatening condition. Students with special education needs may require additional assistance and avocation by school or central staff and Parent(s)/Guardian(s).

### **Allergens**

Allergens are any substance or condition that can bring on an allergic reaction leading to a severe, life-threatening, allergic reaction known as anaphylaxis.

### **Allergen Safe School Environment**

Allergen safe school environment is one where every reasonable effort and precaution has been taken to minimize the risk of exposure to potentially life threatening allergens.

### **Anaphylactic Reaction**

Anaphylactic reaction is a life-threatening reaction characterized by a range of symptoms including but not limited to:

**Skin Reactions:** hives, swelling, itching, body warmth, skin redness or rash,

**Respiratory Reactions:** coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, swelling of the tongue, tingling of the mouth, nasal congestion or hay fever-like symptoms or trouble swallowing,

**Gastrointestinal Reactions:** nausea, pain or cramps, vomiting or diarrhea,

**Cardiovascular Reactions:** pale/blue colour, weak pulse, unconsciousness, dizzy or lightheaded, shock.

Other symptoms may include, but are not limited to anxiety, headache or feeling of "impending doom" that can develop within seconds to minutes of exposure to an allergen. In rare cases, the timeframe can vary up to several hours after exposure.

### **Anaphylaxis**

Anaphylaxis means a severe systemic allergic reaction which can be fatal, resulting

in circulatory collapse or shock.

**Auto-Injector**

An auto-injector is a medical device used to deliver a pre-measured dose (or doses) of Epinephrine auto-injector commonly trademarked as the Epinephrine auto-injector.

**Person in a Position of Authority**

A person employed by the Board to perform services with respect to a student or students.

**School Environment**

School environment includes the entire school building and grounds, buses and other modes of transportation, school excursions, before and after school programs, and school sanctioned events involving students.

**8. Cross References****Legislation**

[\*Sabrina's Law, 2005, Statutes of Ontario, Chapter 7\*](#)  
[\*Ontario Ministry of Education Anaphylaxis Resource Kit\*](#)

**YCDSB Policies**

[\*Policy 201A Healthy Schools - Eating and Nutrition\*](#)  
[\*Policy 703 Community Use of Schools\*](#)

[\*YCDSB Purchasing Reference Guide\*](#)

*YCDSB Standard Child Care and Purchasing of Services Leases and/or Contracts*

*YCDSB Student Transportation Procedures Manual*

[\*YCDSB Third Party Protocol\*](#)

**Related Forms**

S15(a) Elementary Administration of Prescription Medication for Anaphylaxis

S15(a1) Secondary Administration of Prescription Medication for Anaphylaxis



York Catholic District School Board

**ELEMENTARY ADMINISTRATION OF PRESCRIPTION  
MEDICATION FOR ANAPHYLAXIS**

**S15(a)**  
(Rev. May 2023)  
Policy 209-206

THE FOLLOWING REQUEST(S) WILL EXPIRE WHEN ELEMENTARY STUDENT ENTERS SECONDARY.

STUDENT'S NAME: \_\_\_\_\_ STUDENT'S DATE OF BIRTH: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_ ROUTE # (AM&PM): \_\_\_\_\_

<p>Address _____</p> <p>Phone # _____</p> <p>Physician's Name _____</p> <p>Phone # _____</p> <p>I give permission for the Principal to contact the physician relating to my child's medical condition, if necessary, both for the purposes of accommodating <del>him or her</del> <b>them</b> or protecting <del>him or her</del> <b>them</b> from potential harm.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>		<p><b>PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)</b></p>	<p><b>MEDICATION KEPT:</b></p> <p>With Student <input type="checkbox"/> Specify location:</p> <p>In Office <input type="checkbox"/></p> <p>Other:</p> <p><i>The EpiPen® will be returned to the student at the end of each school year.</i></p>
<p><b><u>THIS STUDENT HAS A LIFE-THREATENING ALLERGY TO THE FOLLOWING:</u></b></p>	<p>In order to protect your child's safety, we recommend that you provide the office with an EpiPen to use in the event of an emergency and that you also ensure that your child carries a second EpiPen with <del>him or her</del> <b>them</b> at all times. Having two EpiPens available for your child will enable us to treat <del>him or her</del> <b>them</b> as rapidly as possible.</p> <p><input type="checkbox"/> I have provided an EpiPen® for the office.</p> <p><input type="checkbox"/> I have provided an EpiPen® for my child to carry at all times</p> <p><input type="checkbox"/> I have provided a Medic Alert Bracelet and will encourage my <del>son/daughter</del> <b>child</b> to wear it at all times.</p> <p><input type="checkbox"/> I have <b>not</b> provided an EpiPen® for my child to carry at all times</p>		
<p>Parent/Guardian Signature: _____ Date: _____</p> <p>Physician Signature: _____ Date: _____</p> <p>NAME OF MEDICATION(S): _____</p> <p><b>Epinephrine Auto-Injector Dosage:</b> <input type="checkbox"/> EpiPen Jr. 0.15mg <input type="checkbox"/> EpiPen 0.30 mg <input type="checkbox"/> Allerject 0.15 mg <input type="checkbox"/> Allerject 0.30mg</p>			
<p>PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED PURSUANT TO THE <i>EDUCATION ACT</i> AND THE <i>MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT</i>. QUESTIONS ABOUT THE COLLECTION AND THE USE OF THIS PERSONAL INFORMATION SHOULD BE DIRECTED TO THE PRIVACY MANAGER - FREEDOM OF INFORMATION, YORK CATHOLIC DISTRICT SCHOOL BOARD, 320 BLOOMINGTON RD. W., AURORA, ONTARIO, L4G 3G8 OR (905) 713-2711.</p> <p>c.c. Student Transportation Services Office File</p> <p>Cont'd. on reverse 48</p>			

**ACTION – EMERGENCY PLAN:**

➤ Use EpiPen® immediately and try to keep child calm

➤ DESIGNATE SOMEONE TO CALL 911 and advise the dispatcher that a student is having an anaphylactic reaction (a severe life-threatening allergic reaction).

➤ Call parent or guardian

➤ If ambulance has not arrived in 10-15 minutes and breathing difficulties are present (e.g. wheeze, cough, throat clearing), or student is unconscious give a second EpiPen®.

➤ The student must be taken to a hospital immediately, even if symptoms subside entirely.

➤ Send an additional EpiPen® (if available) with the ambulance driver.

**POSSIBLE ANAPHYLACTIC SYMPTOMS:**

flushed face, hives, tingling in the mouth, swelling or itchy lips, tongue, eyes

tightness in throat, chest

difficulty breathing or swallowing, wheezing, coughing, choking

vomiting, nausea, diarrhea, stomach pains

loss of consciousness

fear and/or panic

**LIST ADDITIONAL/OTHER SYMPTOMS FOR YOUR CHILD:****PARENT INPUT ON EMERGENCY PLAN:****DESCRIPTION OF ALLERGY****THIS STUDENT HAS A LIFE-THREATENING ALLERGY TO THE FOLLOWING:****AND ALL FOODS CONTAINING THESE ALLERGENS IN ANY FORM OR AMOUNT, INCLUDING THE FOLLOWING:****STRATEGIES** (List avoidance/safety rules for your child, if any):

**SECONDARY ADMINISTRATION OF PRESCRIPTION  
MEDICATION FOR ANAPHYLAXIS****S15(a1)**  
(Rev. Oct. 2015)  
Policy 209  
**206**

STUDENT'S NAME: \_\_\_\_\_ STUDENT'S DATE OF BIRTH: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_ ROUTE # (AM&amp;PM) \_\_\_\_\_

<p>Address _____</p> <p>Phone # _____</p> <p>Physician's Name _____</p> <p>Phone # _____</p> <p>I give permission for the Principal to contact the physician relating to my child's medical condition, if necessary, both for the purposes of accommodating <del>him or her</del> <b>them</b> or protecting <del>him or her</del> <b>them</b> from potential harm.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>		<p><b>PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)</b></p>	<p><b>MEDICATION KEPT:</b></p> <p>With Student <input type="checkbox"/> Specify location:</p> <p>In Office <input type="checkbox"/></p> <p>Other: _____</p> <p><i>The EpiPen® will be returned to the student at the end of each school year.</i></p>
<p><b><u>THIS STUDENT HAS A LIFE-THREATENING ALLERGY TO THE FOLLOWING:</u></b></p>			<p>As per policy 209, <b>206</b> in order to protect your child's safety, we recommend that you provide the office with an EpiPen to use in the event of an emergency and that you also ensure that your child carries a second EpiPen with <del>him or her</del> <b>them</b> at all times. Having two EpiPens available for your child will enable us to treat <del>him or her</del> <b>them</b> as rapidly as possible.</p> <p><input type="checkbox"/> I have provided an EpiPen® for the office.</p> <p><input type="checkbox"/> I have provided an EpiPen® for my child to carry at all times.</p> <p><input type="checkbox"/> I have provided a Medic Alert Bracelet and will encourage my son/daughter to wear it at all times.</p> <p><input type="checkbox"/> I have <b>not</b> provided an EpiPen® for my child to carry at all times.</p>
<p>Parent/Guardian Signature: _____ Date: _____</p> <p>Physician Signature: _____ Date: _____</p> <p>NAME OF MEDICATION(S): _____</p>		<p><b>Epinephrine Auto-Injector Dosage:</b></p> <p><input type="checkbox"/> EpiPen Jr. 0.15mg</p> <p><input type="checkbox"/> EpiPen 0.30 mg</p> <p><input type="checkbox"/> Allerject 0.15 mg</p> <p><input type="checkbox"/> Allerject 0.30mg</p>	
<p>PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED PURSUANT TO THE <i>EDUCATION ACT</i> AND THE <i>MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT</i>. QUESTIONS ABOUT THE COLLECTION AND THE USE OF THIS PERSONAL INFORMATION SHOULD BE DIRECTED TO THE PRIVACY MANAGER - FREEDOM OF INFORMATION, YORK CATHOLIC DISTRICT SCHOOL BOARD, 320 BLOOMINGTON RD. W., AURORA, ONTARIO, L4G 3G8 OR (905) 713-2711.</p> <p>c.c. Student Transportation Services Office File</p> <p>Cont'd. on reverse</p>			



**ACTION – EMERGENCY PLAN:**

➤ Use EpiPen® immediately and try to keep child calm

➤ DESIGNATE SOMEONE TO CALL 911 and advise the dispatcher that a student is having an anaphylactic reaction (a severe life-threatening allergic reaction).

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➤ If ambulance has not arrived in 10-15 minutes and breathing difficulties are present (e.g. wheeze, cough, throat clearing), or student is unconscious give a second EpiPen®.

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**POSSIBLE ANAPHYLACTIC SYMPTOMS:**

flushed face, hives, tingling in the mouth, swelling or itchy lips, tongue, eyes

tightness in throat, chest

difficulty breathing or swallowing, wheezing, coughing, choking

vomiting, nausea, diarrhea, stomach pains

loss of consciousness

fear and/or panic

**LIST ADDITIONAL/OTHER SYMPTOMS FOR YOUR CHILD:****PARENT INPUT ON EMERGENCY PLAN:****DESCRIPTION OF ALLERGY****THIS STUDENT HAS A LIFE-THREATENING ALLERGY TO THE FOLLOWING:****AND ALL FOODS CONTAINING THESE ALLERGENS IN ANY FORM OR AMOUNT, INCLUDING THE FOLLOWING:****STRATEGIES** (List avoidance/safety rules for your child, if any):



York Catholic District School Board

**STUDENT ~~-PRESCRIPTION~~ MEDICATION LOG**

Student:

Name of Designated Administrator(s) of Prescription/Non-Prescription Medication:

(Please refer to Form S.16(a) or S16(a1))

Teacher

Grade/Class

Week or Month of:

DATE	TIME	NAME OF PRESCRIPTION/ <del>NON</del> PRESCRIPTION MEDICATION	DOSAGE	INITIAL OF ADMINISTRATOR OF <del>-PRESCRIPTION</del> MEDICATION **	COMMENTS

PLEASE RECORD WHEN ~~-PRESCRIPTION~~ MEDICATION HAS NOT BEEN ADMINISTERED BECAUSE OF ABSENCE OR OTHER REASON

c.c. Office Medical Log Binder for current and following school year with S16a/S16a1

\*\* If you are not a named Administrator, please print name in the Comments Section



## York Catholic District School Board

### Administration of Medication to Students with Anaphylaxis

*Insert: School Letterhead*

Date:

Dear Parent / Guardian;

As we update our school records related to the administration of medication for anaphylactic students, you are asked to carefully review, sign and return the attached Form S15 (Acknowledgement and Consent) along with the S15(a) for Elementary Students, or S15(a1) for Secondary Students as soon as possible. This information is necessary for the safety and protection of your child.

As per ~~Policy 209: Protection of Students with Anaphylaxis~~, **Policy 206 Supporting Students with Prevalent Medical Conditions: Anaphylaxis, Asthma, Diabetes and/or Epilepsy**, ~~section 4.6.3 it is the responsibility of the Parent/Guardian "to ensure that all medical information pertinent to the student's life-threatening allergy is always current"~~, **section, 4.6.5 To confirm annually to the Principal or their designate that their child's medical status is unchanged**. Please complete and return the attached forms with a physician signature as soon as possible if your child is:

- New to the school and has a diagnosis of anaphylaxis, or
- Is presently attending the school, but has been recently diagnosed with anaphylaxis.

If revisions to the medical information outlined on the attached Form S15(a) or Form S15(a1) are necessary for students who have a previous *Administration of Medication for Anaphylaxis* form on file, you will be required to complete a new form and secure an updated physician signature. If no revisions are necessary, please return the signed Form S15 along with the S15(a) or S15(a1) with an updated picture of your child as soon as possible.

Please contact the school office if you have any questions and/or concerns.

Thank you for your immediate attention to this request and your ongoing support in the shared responsibility for anaphylaxis management in our school.

Sincerely,

Principal Name



## **YORK CATHOLIC DISTRICT SCHOOL BOARD**

### **PROCEDURE: 206B SUPPORTING STUDENTS WITH PREVALENT MEDICAL CONDITIONS: Asthma**

**Addendum to:**

**Policy 206 Supporting Students with Prevalent Medical Conditions  
(Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools**

Effective: DD/MMM/YYYY

## PURPOSE

The York Catholic District School Board recognizes that there are some students within the school system who have been diagnosed with asthma which could be life threatening. The York Catholic District School board also recognizes that asthma management is a shared responsibility that requires a team approach among students, Parent(s)/Guardian(s)/Caregiver(s), health care providers and the entire school community.

### 1. Roles & Responsibilities

#### 1.1 Parent(s)/Guardian(s) of Children with Asthma

As primary caregivers of their child, parent(s)/guardian(s) are expected to be active participants in supporting the management of their child's asthma while the child is at school and at school related activities. Parent(s)/Guardian(s) are expected to:

- Inform the Principal immediately upon registration and/or when in receipt of a diagnosis of asthma.
- Provide the Principal with a completed copy of form S40(a) for Elementary students and S40(a1) for Secondary students:
  - Prior to, or immediately after the start of the student's Elementary career;
  - Prior to, or immediately after the start of the student's Secondary career;
  - Or immediately after a diagnosis of asthma;
  - Or immediately after a change in prescribed medication (i.e.: types of inhaler and/or dosage).
- **Participate in the co-creation, review and updating of the Asthma Health Management Plan and other required forms within the first 30 days of each school year, upon registration, and following any changes or new diagnosis**
- Ensure that all medical information pertinent to the student's diagnosis of asthma is always current.
- Provide the school with one (1)\* up-to-date inhaler, to be carried on the student's person, clearly marked with student's name and diagnosis or to be kept with a person in a position of authority, depending on the age and/or developmentally appropriate readiness of the student.
- Provide your child with a MedicAlert® bracelet or other appropriate form of medical identification to be worn at all times.
- Research field trip sites and overnight excursion sites for potential health/medical risks.
- **Communicate with school staff about arrangements and considerations for field trips, excursions, co-curricular activities, and co-operative education placements.**
- Provide education to their child about their medical condition, as well as the safekeeping and administration of their medication with support from their child's health care professional.
- Educate their child about asthma, the Asthma Health Management Plan, and support them to reach their full potential for self-management and self-advocacy.
- Immediately inform school administration regarding any changes to their child's health, lifestyle, needs, management, and emergency contact information, and confirm for the Principal no less than annually that their child's medical status is unchanged.

\*If the Parent(s)/Guardian(s)/Caregiver(s) is not in agreement with providing the school with one (1) up-to-date application of the inhaler, to be carried on the student's person or kept with a person in a position of authority, then the Parent(s)/Guardian(s)/Caregiver(s) will be required to indicate this on the S40(a) or S40(a1) form upon submission to the Principal, thereby acknowledging that they take full responsibility for their decision.

## 1.2 Students with Asthma

Depending on their cognitive, emotional, social and physical stage of development, and their capacity for self-management, students shall actively support the development and implementation of their Asthma Health Management Plan. Students are expected to:

- Practice asthma avoidance measures.
- Learn to recognize symptoms of an asthma episode.
- Promptly inform an adult as soon as asthma symptoms appear.
- Take responsibility for advocating for their personal safety and well-being, as well as the safekeeping and administration of their medication that is consistent with their cognitive, emotional, social and physical stage of development and their capacity for self-management.
- Wear a MedicAlert® bracelet or other appropriate medical identification at all times.
- Set goals for increased self-management, in conjunction with parent(s)/guardian(s) and health care professionals.

## 1.3 School Staff

School staff play a key role in supporting the student's safe, accepting, and healthy learning environment, and allowing students to participate in school to their fullest potential. School staff will:

- Participate in annual training on asthma to learn how to recognize the symptoms of an asthma episode and the procedures to follow should an episode occur.
- Provide a copy of the S40(a) or S40(a1) form (which includes a photo of the student) to occasional teachers and support staff
- Discuss asthma with the class, in age appropriate terms outlining the potential triggers in the class, describing symptoms of an asthma episode and procedures to follow should an asthma episode occur.
- Ensure that all reasonable safety procedures are carried out in courses and activities for which the teacher is responsible.
- Administer the student's prescribed asthma medication, even if there is no pre-authorization to do so, if there is reason to believe that a student is experiencing an asthma episode.
- Develop a communication system (i.e.: journal or agenda) to inform Parent(s)/Guardian(s)/Caregiver(s) of any concern(s) or seek additional information related to the student's asthma.

## 1.4 Principal

In addition to the responsibilities outlined above under "School Staff", the principal (or designate) will:

- Implement and comply with the Education Act, S. 265(1j) as it relates to the care of students and property giving assiduous attention to the health and comfort of the students
- Participate in annual training with staff and others in direct contact with students to learn how to recognize the symptoms and the procedures to follow should a life-threatening reaction occur
- Inform Parent(s)/Guardian(s)/Caregiver(s) at the time of registration or upon diagnosis, of the need to advise the school if their child has asthma
- Develop and co-create with parent(s)/guardian(s) a Health Management Plan for each

student who has asthma that includes details informing staff and others, who are in direct and regular contact with the student, outlining monitoring and avoidance strategies and appropriate treatment; a readily accessible emergency procedure for the student, including emergency contact information; and, and the location for the storage of medication.

- Permit students with asthma to carry their medication with them when Parent(s)/Guardian(s)/Caregiver(s) have provided consent to do so. Students who are 16 years old or older do not require prior parental consent.
- Communicate with all staff and others who are in direct contact with students the name, grade and classroom teacher of students who could require the immediate administration of medication due to a diagnosis of asthma and where their Health Management Plan and medication are located.
- Create and maintain a central file for all students with asthma.
- Ensure that a copy of the central file is included in the school's Emergency Response/Health Management Plan.
- Provide and communicate to all staff the designated location of medication for students with asthma.
- Provide the Student Transportation Services Department with the names of all students with a diagnosis of asthma and forward a copy of the completed S40(a) or S40(a1).
- Ensure that school volunteers who are in direct contact with students are aware of **Policy 206: Supporting Students with Prevalent Medical Conditions in Schools** ~~Asthma policy.~~

### 1.5 Student Transportation Services

- Ensure the names of students with a diagnosis of asthma have been communicated to Transportation Service Providers.
- Ensure that Policy 206: *Supporting Students with Prevalent Medical Conditions in Schools* has been communicated with all Transportation Service Providers.
- Ensure that the current form S40(a) or S40(a1) form received from the Principal is available on file:
  - i) in the Student Transportation Services office,
  - ii) in the appropriate service provider's dispatch office, and,
  - iii) in the appropriate school vehicle(s)
- Require the service provider to ensure there has been adequate training of all regular drivers and substitute drivers that transport a student with asthma.
- Work with the school Principal and service provider to assign a specific seat to a student with asthma, if required.

## 2. Asthma Health Management Plan

The Asthma Health Management Plan contains individualized information on the student's asthma, School Care Team of staff, preventative strategies to reduce risk, symptoms of an asthma attack and emergency medical responses.

The Asthma Health Management Plan shall be co-created, reviewed or updated by the parent(s) / guardian(s) in consultation with the principal, designated staff and the student within the first 30 days of the school year or as soon as possible upon registration or diagnosis.

A School Care Team will be identified on the Asthma Health Management Plan. Specific responsibilities of the School Care Team in supporting, monitoring and responding to an asthmatic emergency will be delineated. The School Care Team will receive student-specific training by the principal, healthcare practitioner and/or parent on the implementation of the Asthma Health Management Plan.



Parent(s)/Guardian(s) have the authority to designate who is provided access to the Asthma Health Management Plan. With authorization from parent(s)/guardian(s), the Asthma Health Management Plan will be:

- i. Shared with appropriate school staff and others who are in direct contact with students with asthma (e.g. transportation providers, volunteers).
- ii. Posted in a key area of the school where staff have access on a regular basis.
- iii. Located in the educator's daybook and/or occasional staff plans.

### **3. Facilitating and Supporting Daily or Routine Management**

In general, asthma medications work in one of two ways to relieve symptoms. They either work by controlling or preventing the inflammation and mucous production or by relieving the muscle tightness around the airways.

- i. Controller Medication (Flovent, Advair, Qvar, Pulmicort, etc.):
  - Used daily, before and after school at home, to prevent asthma attacks
  - Decreases and prevents swelling of the airways
  - Can take days to weeks of regular use to work effectively
- ii. Reliever Medication (Ventolin/Salbutamol, Bricanyl, etc.)
  - Used to relieve symptoms of asthma
  - Called the 'rescue' inhaler (usually blue in colour)
  - Needs to be readily accessible at all times
  - Provides relief quickly, within minutes
  - Relaxes the muscles of the airways
  - Taken only when needed or prior to exercise, if indicates Students shall carry or have accessible at all times their reliever medication and spacer, if required.

Students with asthma who are also diagnosed with anaphylaxis are more susceptible to severe breathing problems when experiencing an anaphylactic reaction. It is extremely important for asthmatic students to keep their asthma well controlled. Students with asthma who are at risk of anaphylaxis should carry their asthma medication with their epinephrine auto-injector.

In addition to being carried by the student, asthma medications, with the original pharmacist label and container, may be stored in the office or other secure location, in accordance with the Board's Policy 207: *Administration of Oral Medication to Elementary and Secondary Students*.

### **4. Emergency Response**

"Emergency" is defined by the Health Care Consent Act, 1996 to include a situation where the individual is experiencing severe suffering, or is at risk of sustaining serious bodily harm, if the treatment is not administered promptly.

All staff are required to be trained annually in the emergency response to an asthma attack. The individualized response to a student's asthma emergency shall be detailed in their Health Management Plan.

Staff who are in direct contact with the student, and those identified on the School Care Team, shall review and be trained on the Health Management Plan.

a. Generally, in the event of an asthmatic emergency, staff shall:

- i. Remove the student from the trigger.
- ii. Have the student use a reliever inhaler as directed in the Asthma Health Management Plan.

- iii. Have a student remain in an upright position.
- iv. Have a student breathe slowly and deeply.
- v. If a student totally recovers, participation in activities may resume.

If symptoms persist:

- i. Wait 5-10 minutes to see if breathing difficulty is relieved.
  - ii. If not, repeat the reliever inhaler as directed in the Asthma Health Management Plan.
  - iii. If the student's breathing difficulty is relieved, they can resume school activities, but should be monitored closely. The student should avoid vigorous activity and may require additional reliever medication.
  - iv. Contact parent(s)/ guardian(s) to inform and track on the Medical Emergency Record.
- b. If symptoms persist or worsen (i.e., difficulty speaking or is struggling for breath, appears pale or grey, sweating, greyish/blue lips or nail beds), staff shall:
- i. Call 9-1-1. Tell them someone is having an asthmatic emergency.
  - ii. Continue to give the reliever inhaler every 5-15 minutes until paramedics arrive.
  - iii. Call, or direct another adult to call, the emergency contact person.

In cases where an anaphylactic reaction is suspected, but there is uncertainty whether or not the person is experiencing an asthma attack, epinephrine should be used first. Epinephrine can be used to treat life-threatening asthma attacks, as well as anaphylactic reactions.

## **5. Raising Awareness**

Where possible, school staff should raise awareness of Asthma and other prevalent medical conditions that affect students. They can do so through curriculum content in classroom instruction, related learning experiences and classroom leadership opportunities. Awareness is especially important at times of transition (e.g. the move to a new school, the move from elementary to secondary school), when students have to face social, physiological, and environmental changes.

## **6. Liability**

The Good Samaritan Act, passed in 2001, protects individuals from liability with respect to voluntary emergency medical or first aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

2.(1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in action or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.

(2) Subsection (1) applies to, ... (b) and individual... who provides emergency first aid to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.

In addition, Ryan's Law (2015) includes provisions limiting the liability of individuals who respond to an emergency relating to these conditions, as cited below:

Section 4(4) of Ryan's Law: No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act.

## 7. Definitions

### **Age and/or Developmentally Appropriate Readiness**

Age and/or developmentally appropriate readiness for individual students will need to be considered by the Superintendent of Schools and Principal in consultation with the Parent(s)/Guardian(s)/Caregiver(s). The responsibilities that a student can assume will be assessed based on the student's age and capability to understand their condition. Students with special education needs may require additional assistance by school or central staff and Parent(s)/Guardian(s)/Caregiver(s).

### **Asthma**

A chronic inflammatory disease of the airway that may cause one or more of the following symptoms:

- Shortness of breath;
- Tightness in the chest;
- Coughing; and/or,
- Wheezing.

Symptoms can:

- Range from mild to severe and sometimes can be life threatening;
- Vary from person to person;
- Flare up from time to time and then not appear for long periods; and/or,
- Vary from one episode to the next.

The cause of asthma is not known, and currently there is no cure. A high percentage of asthma patients also have seasonal allergies that are known to trigger an asthma episode.

### **Exercise-Induced Asthma**

When students participate in physical activity, they commonly breathe through their mouths at a rapid rate, which causes cooling and drying of the sensitive airways. This cooling and drying effect causes the airways to narrow resulting in asthma symptoms. Exercise-induced asthma may present itself during or after physical activity. It is more common when activities are conducted in cold environments and during high pollen or pollution count days. However, students can experience exercise-induced asthma anywhere, including indoors.

### **Asthma Medication**

Most people with asthma take two kinds of medication. Each asthma medication treats only one aspect of the condition and are defined as follows:

- **Controllers**, also called 'preventers', reduce inflammation in the airways. Controllers are taken every day.
- **Relievers**, generally known as 'inhalers', are very good at helping to alleviate symptoms immediately, such as coughing or wheezing. However, reliever medications do nothing for the underlying problem of inflammation. Relievers are only a short-term solution to breathing problems and indicate that there is underlying inflammation present that requires a controller medication.

### **Asthma Triggers**

Things in your environment that cause worsening of asthma symptoms or asthma attacks. There are two types of asthma triggers:

1. **Inflammatory (allergic) triggers** can cause inflammation of the lungs' airways or tightening of the airways' muscles. Inflammatory triggers include:

- Dust mites
- Animals/Pet Allergens (i.e., dander)
- Moulds
- Pollen
- Food Allergies/Additives (i.e., sulphites)
- Cockroaches
- Other Allergens

2. **Symptom (non-allergic) triggers** generally do not cause inflammation, but may for some students as identified by the parent/guardian/caregiver and confirmed by the physician and/or licensed health care provider. Symptom (non-allergic) triggers can provoke the feeling of “constricted” airways, especially if they are already inflamed. Symptom triggers include:

- Air Pollutants (i.e., Smoke/Smog)
- Exercise
- Cold air/weather changes
- Viral Infections
- Chemical fumes, scented products (perfumes, detergents, etc.)
- Intense emotions

### **Person in a Position of Authority**

A person employed by the Board to perform services with respect to a student or students.

### **School Environment**

School environment includes the entire school building and grounds, buses and other modes of transportation, school excursions, before and after school programs, and school sanctioned events involving students.

## **8. Cross References**

### **Legislation**

*Ryan’s Law, Ensuring Asthma Friendly Schools, 2015, Statutes of Ontario, Education Act*  
*Ministry of Education OPHEA Resource Guide: Creating Asthma Friendly Schools*

### **YCDSB Policies**

*Policy 206: [Supporting Students with Prevalent Medical Conditions](#)*

*Policy 207: [The Administration of Oral Medication to Elementary and Secondary Students](#)*

*YCDSB Student Transportation Procedures Manual*

*[YCDSB Third Party Protocol](#)*

### **Related Forms**

S40 Administration of Medication to Students with Asthma

S40(a) Elementary Administration of Prescription Medication for Asthma

S40(a1) Secondary Administration of Prescription Medication for Asthma



## York Catholic District School Board

### **ADMINISTRATION OF MEDICATION to STUDENTS with ASTHMA**

Acknowledgement and Consent (*Students Under 18 Years of Age*)

It should be understood that parents are asking non-medical persons to undertake the administration of prescription medications (i.e. inhaler or other prescription medication as prescribed by a physician or licensed health care provider) and must, therefore, assume the associated inherent risks. School staff members providing assistance in the administration of prescription medication to students are not medically trained personnel. They will endeavour to follow all reasonable instructions, as provided on the Board forms S40(a) Elementary, or S40(a1) Secondary, in order to ensure the safety and security of each student.

If you choose to request school staff to administer prescription medication to your child, please note the following from the *Act*:

*An Act to Protect Pupils with Asthma [Ryan's Law (Ensuring Asthma Friendly Schools)], 2015 states:*

*No action or other proceedings for damages shall be commenced against any board employee for an act or omission, done or omitted by the employee in good faith.*

In order to minimize these risks, parents should ensure that their requests include all information that might be needed to safely administer prescription medications, including the identification of possible side effects as identified, on the Board S40(a) and S40(a1), by a physician or licensed health care provider. A one-time signature from a physician or licensed health care provider is now required; both at the elementary panel and a one-time signature from a physician or licensed health care provider at the secondary panel.

The York Catholic District School Board does not provide medical expense insurance on behalf of its students who require assistance in the administration of prescription medication.

It is your legal obligation to ensure that the information in your child's file is kept up to date with the medication that your child is taking.

### **ACKNOWLEDGEMENT and CONSENT**

WE HAVE READ AND ACKNOWLEDGE THE ABOVE, AND HEREBY CONSENT TO THE ADMINISTRATION OF PRESCRIPTION MEDICATION TO \_\_\_\_\_  
BY SCHOOL STAFF. (name of student)

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

☐ **I have reviewed the existing S40(a) form signed by the physician or licensed health care provider, and verify that there are no revisions to the medical information at this time.**

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Parents/Guardians may request a copy of his/her Acknowledgement and Consent Form from the Principal.

Questions about this form should be addressed to the Principal.

**ELEMENTARY SCHOOL  
ADMINISTRATION OF PRESCRIPTION MEDICATION FOR ASTHMA**

THE FOLLOWING REQUEST(S) WILL EXPIRE WHEN THE ELEMENTARY STUDENT ENTERS SECONDARY SCHOOL.

STUDENT'S NAME: \_\_\_\_\_ STUDENT'S DOB: \_\_\_\_\_  
SCHOOL NAME: \_\_\_\_\_ ROUTE/BUS# \_\_\_\_\_  
(IF APPLICABLE)

<p>Address _____</p> <p>Phone # _____</p> <p>Physician's or Licensed Health Care Provider's Name _____</p> <p>Phone # _____</p> <p>I give permission for the Principal to contact the physician or licensed health care provider relating to my child's medical condition, if necessary, for the purpose of the development of the individual action plan [S40(a) or S40(a1)].</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p><b>PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)</b></p>	<p><b>MEDICATION KEPT:</b></p> <p>With Student <input type="checkbox"/> at all times*</p> <p>If not with student at all times, specify location:</p> <p>In Office <input type="checkbox"/></p> <p>Other (i.e., with person in a position of authority): _____</p> <p><i>The inhaler or other prescribed medication will be returned to the student at the end of each school year.</i></p>
<p><b>THIS STUDENT HAS ASTHMA &amp; MAY REACT TO THE FOLLOWING TRIGGERS (PLEASE INDICATE):</b></p> <p><input type="checkbox"/> DUST MITES <input type="checkbox"/> ANIMALS <input type="checkbox"/> MOULDS <input type="checkbox"/> POLLENS <input type="checkbox"/> VIRAL INFECTIONS <input type="checkbox"/> AIR POLLUTANTS <input type="checkbox"/> SMOKE <input type="checkbox"/> EXERCISE <input type="checkbox"/> COLD AIR <input type="checkbox"/> CHEMICAL FUMES/STRONG SMELLING SUBSTANCES <input type="checkbox"/> SPECIFIC FOOD ADDITIVES (PLEASE LIST) _____ <input type="checkbox"/> INTENSE EMOTIONS <input type="checkbox"/> OTHER: _____</p>	<p><input type="checkbox"/> I have provided an inhaler for my child to carry on their person at all times</p> <p><input type="checkbox"/> I have provided a MedicAlert® Bracelet or other appropriate medical identification to my son/daughter to wear at all times.</p> <p><input type="checkbox"/> *I have <b>not</b> provided an inhaler for my child to carry at all times on their person and take full responsibility for this decision.</p> <p><input type="checkbox"/> I have provided an inhaler to the office.</p> <p><b>We recommend that you provide your child with an inhaler, to be carried on their person at all times, to use in the event of an emergency. Having the inhaler on their person, and immediately available to your child, will enable us to treat him or her as rapidly as possible.</b></p>	
<p>Parent/Guardian Signature: _____ Date: _____</p> <p>Physician/Licensed Health Care Provider Signature: _____ Date: _____</p> <p>NAME OF MEDICATION(S) and DOSAGE: _____</p>		
<p>PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED PURSUANT TO THE <i>EDUCATION ACT</i> AND THE <i>MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT</i>. QUESTIONS ABOUT THE COLLECTION AND THE USE OF THIS PERSONAL INFORMATION SHOULD BE DIRECTED TO THE PRIVACY MANAGER - FREEDOM OF INFORMATION, YORK CATHOLIC DISTRICT SCHOOL BOARD, 320 BLOOMINGTON RD. W., AURORA, ONTARIO, L4G 3G8 OR (905) 713-2711. c.c. Student Transportation Services Office File</p> <p>Cont'd. on reverse</p>		

**ACTION – INDIVIDUAL EMERGENCY PLAN:**

- ☐ Remove student from the trigger if possible in order to reduce the severity of the symptom(s)
- ☐ Use inhaler immediately or administer prescribed medication as indicated on this form and try to keep student calm
- ☐ Have student remain in an upright position (**DO NOT** have student lie down)
- ☐ Encourage student to breathe slowly and deeply (**DO NOT** have student breathe into a bag)
- ☐ If student totally recovers, participation in activities may resume

**IF SYMPTOMS PERSIST:**

- ☐ Wait 5-10 minutes to see if breathing difficulty is relieved and student's breathing returns to normal
- ☐ If not, repeat the administration of the reliever medication (inhaler)
- ☐ If the student's breathing difficulty is relieved and student's breathing returns to normal, the student can resume school activities, but should be monitored closely. The student should avoid vigorous activity and may require the administration of additional reliever medication

**IT IS AN EMERGENCY SITUATION IF THE STUDENT:**

- ☐ Has used the reliever medication and it has not helped within 5-10 minutes
- ☐ Has difficulty speaking or is struggling for breath
- ☐ Appears pale, grey or is sweating
- ☐ Has greyish/blue lips or nail beds

**OR**

- ☐ There is doubt or concern about the student's condition

**ACTION:**

- ☐ **CALL 911** and advise the dispatcher that a student is having an asthma exacerbation (describe the observable symptoms), wait for ambulance, **DO NOT** drive student
- ☐ Continue to administer the reliever medication every two to three (2-3) minutes until medical assistance arrives
- ☐ Call Parent or Guardian and/or Caregivers as soon as possible
- ☐ The student must be taken to a hospital immediately, even if symptoms subside entirely.

**POSSIBLE ASTHMA SYMPTOMS:**

Shortness of breath  
Tightness in chest  
Coughing  
Wheezing

**LIST ADDITIONAL/OTHER SYMPTOMS FOR YOUR CHILD:****PARENT INPUT ON EMERGENCY PLAN:****STRATEGIES (LIST AVOIDANCE/SAFETY RULES FOR YOUR CHILD, IF ANY):**



**SECONDARY SCHOOL  
ADMINISTRATION OF PRESCRIPTION MEDICATION FOR ASTHMA**

**STUDENT'S NAME:** \_\_\_\_\_ **STUDENT'S DOB:** \_\_\_\_\_  
**SCHOOL NAME:** \_\_\_\_\_ **ROUTE/BUS#** \_\_\_\_\_  
(IF APPLICABLE)

<p>Address _____</p> <p>Phone # _____</p> <p>Physician's or Licensed Health Care Provider's Name _____</p> <p>Phone # _____</p> <p>I give permission for the Principal to contact the physician or licensed health care provider relating to my child's medical condition, if necessary, for the purpose of the development of the individual action plan [S40(a) or S40(a1)].</p> <p><input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Yes</b></p>		<p><b>PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)</b></p>	<p><b>MEDICATION KEPT:</b></p> <p>With Student <input type="checkbox"/> at all times*</p> <p>If not with student at all times, specify location:</p> <p>In Office <input type="checkbox"/></p> <p>Other (i.e., with person in a position of authority): _____</p> <p><i>The inhaler or other prescribed medication will be returned to the student at the end of each school year.</i></p>
<p><b>THIS STUDENT HAS ASTHMA &amp; MAY REACT TO THE FOLLOWING TRIGGERS (PLEASE INDICATE):</b></p> <p><input type="checkbox"/> DUST MITES <input type="checkbox"/> ANIMALS <input type="checkbox"/> MOULDS <input type="checkbox"/> POLLENS <input type="checkbox"/> VIRAL INFECTIONS <input type="checkbox"/> AIR POLLUTANTS <input type="checkbox"/> SMOKE <input type="checkbox"/> EXERCISE <input type="checkbox"/> COLD AIR <input type="checkbox"/> CHEMICAL FUMES/STRONG SMELLING SUBSTANCES <input type="checkbox"/> SPECIFIC FOOD ADDITIVES (PLEASE LIST) _____</p> <p><input type="checkbox"/> INTENSE EMOTIONS _____ <input type="checkbox"/> OTHER: _____</p>			<p><input type="checkbox"/> I have provided an inhaler for my child to carry on their person at all times</p> <p><input type="checkbox"/> I have provided a MedicAlert® Bracelet or other appropriate medical identification to my son/daughter to wear at all times.</p> <p><input type="checkbox"/> *I have <b>not</b> provided an inhaler for my child to carry at all times on their person and take full responsibility for this decision.</p> <p><input type="checkbox"/> I have provided an inhaler to the office. <b>We recommend that you provide your child with an inhaler, to be carried on their person at all times, to use in the event of an emergency. Having the inhaler on their person, and immediately available to your child, will enable us to treat him or her as rapidly as possible.</b></p>
<p>Parent/Guardian Signature: _____ Date: _____</p> <p>Physician/Licensed Health Care Provider Signature: _____ Date: _____</p> <p>NAME OF MEDICATION(S) and DOSAGE: _____</p>			
<p>PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED PURSUANT TO THE <i>EDUCATION ACT</i> AND THE <i>MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT</i>. QUESTIONS ABOUT THE COLLECTION AND THE USE OF THIS PERSONAL INFORMATION SHOULD BE DIRECTED TO THE PRIVACY MANAGER - FREEDOM OF INFORMATION, YORK CATHOLIC DISTRICT SCHOOL BOARD, 320 BLOOMINGTON RD. W., AURORA, ONTARIO, L4G 3G8 OR (905) 713-2711. c.c. Student Transportation Services Office File</p> <p style="text-align: right;">Cont'd. on reverse _____</p>			

**ACTION – INDIVIDUAL EMERGENCY PLAN:**

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- ☐ Appears pale, grey or is sweating
- ☐ Has greyish/blue lips or nail beds

**OR**

- ☐ There is doubt or concern about the student's condition

**ACTION:**

- ☐ **CALL 911** and advise the dispatcher that a student is having an asthma exacerbation (describe the observable symptoms), wait for ambulance, **DO NOT** drive student
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- ☐ Call Parent or Guardian and/or Caregivers as soon as possible
- ☐ The student must be taken to a hospital immediately, even if symptoms subside entirely.

**POSSIBLE ASTHMA SYMPTOMS:**

Shortness of breath

Tightness in chest

Coughing

Wheezing

**LIST ADDITIONAL/OTHER SYMPTOMS FOR YOUR CHILD:****PARENT INPUT ON EMERGENCY PLAN:****STRATEGIES (LIST AVOIDANCE/SAFETY RULES FOR YOUR CHILD, IF ANY):**



York Catholic District School Board

**STUDENT ~~-PRESCRIPTION~~ MEDICATION LOG**

Student:

Name of Designated Administrator(s) of Prescription/Non-Prescription Medication:

(Please refer to Form S.16(a) or S16(a1))

Teacher

Grade/Class

Week or Month of:

DATE	TIME	NAME OF PRESCRIPTION/ <del>NON</del> PRESCRIPTION MEDICATION	DOSAGE	INITIAL OF ADMINISTRATOR OF <del>-PRESCRIPTION</del> MEDICATION **	COMMENTS

PLEASE RECORD WHEN ~~-PRESCRIPTION~~ MEDICATION HAS NOT BEEN ADMINISTERED BECAUSE OF ABSENCE OR OTHER REASON

c.c. Office Medical Log Binder for current and following school year with S16a/S16a1

\*\* If you are not a named Administrator, please print name in the Comments Section



# York Catholic District School Board

## Administration of Medication to Students with Asthma

### Parent Letter Template

School Letterhead

Date

Dear Parent/Guardian;

As we update our school records related to the administration of medication for students with asthma, I am requesting that you sign and return the attached Form S40 (Acknowledgement and Consent) and carefully review the current S40(a) for Elementary Students, or S40(a1) for Secondary Students as soon as possible. This information is necessary for the safety and protection of your child.

As per ~~Policy 209: Protection of Students with Asthma~~, **Policy 206 Supporting Students with Prevalent Medical Conditions: Anaphylaxis, Asthma, Diabetes and/or Epilepsy**, ~~section 4.6.3 it is the responsibility of the Parent/Guardian “to ensure that all medical information pertinent to the student’s life-threatening allergy is always current”~~, **section, 4.6.5 To confirm annually to the Principal or their designate that their child’s medical status is unchanged.**

If revisions to the medical information outlined on the attached Form S40(a) or Form S40(a1) are necessary for students who have a previous *Administration of Medication for Asthma* form on file, you will be required to complete a new form and secure an updated physician signature.

If no revisions are necessary, please return the “new” signed Form S40 along with the current S40(a) or S40(a1) and an updated picture of your child as soon as possible.

Please contact the school office if you have any questions and/or concerns.

Thank you for your immediate attention to this request and your ongoing support in the shared responsibility for asthma management in our school.

Sincerely,

Principal Name



## YORK CATHOLIC DISTRICT SCHOOL BOARD

### PROCEDURE:

### **206C SUPPORTING STUDENTS WITH PREVALENT MEDICAL CONDITIONS: DIABETES**

### Addendum to:

### **Policy 206 Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools**

Effective: DD/MMM/YYYY

## PURPOSE

The York Catholic District School Board recognizes that daily management of Diabetes is essential to prevent or postpone serious complications and that it is a shared responsibility with the student, Parent(s)/Guardian(s) and the school community. The ultimate goal is to enable children/youth to be as independent as possible in the management of their own care, recognizing that some students will require assistance and/or supervision with the daily management of their Diabetes. The York Catholic District School Board recognizes that there are some students within the school system who live with a diagnosis of Diabetes which could be life threatening if Parent(s)/Guardian(s), students and school personnel are not clear and confident in their roles and responsibilities.

## 1. Roles & Responsibilities

### 1.1 Parent(s)/Guardian(s) of Children with Diabetes

As primary caregivers of their child, parent(s)/guardian(s) are expected to be active participants in supporting the management of their child's diabetes while the child is at school and at school related activities. Parent(s)/Guardian(s) are expected to:

- Inform the Principal immediately upon the student's registration or receipt of a diagnosis of Diabetes.
- Provide the school with current medical information sufficient to understand the medical needs of the student
- Participate in the co-creation, review and updating of the Diabetes Health Management Plan and other required forms within the first 30 days of each school year, upon registration, and following any changes or new diagnosis
- Complete and submit all forms provided by the Principal to support the health and safety needs of the student
- Consult and collaborate with the Principal and teacher related to any modifications needed to the daily *Diabetes Health Management Plan* (S16b) for special events or field trips
- Review the *Diabetes Health Management Plan* (S16b) on an annual basis at the beginning of each school year in collaboration with the school team
- Encourage their child to wear a medical alert identification.
- Teach their child to understand the causes, identification, prevention and management of low/high blood sugar as appropriate to their age or cognitive ability, including to recognize and act on the first symptoms of low blood sugar, and to communicate clearly to adults/those in authority that they have diabetes and when feeling the onset of symptoms or a general feeling of "unwellness"
- Supply their child and/or the school with sufficient quantities of supplies for their Diabetes Management Kits (e.g., blood glucose monitoring items, insulin injections, oral glucose, juice), as directed by their health care practitioner and as outlined in the Diabetes Health Management Plan, and replenish as necessary, tracking use and expiration dates
- Seek medical advice from a medical doctor, nurse practitioner or pharmacist to contribute to the Diabetes Health Management Plan, as appropriate, and to set goals for self-management
- Educate their child about diabetes, their Diabetes Health Management Plan, and support them to reach their full potential for self-management and self-advocacy
- Provide the Principal with an updated *Diabetes Health Management Plan* (S16b/S16b1) in the event of changes to the diagnosis or treatment regime

### 1.2 Students with Diabetes

Depending on their cognitive, emotional, social and physical stage of development, and their capacity for self-management, students shall actively support the development and

implementation of their Diabetes Health Management Plan. Students are expected to:

- Take responsibility for advocating for their personal safety and well-being, as well as the safekeeping and administration of their medication that is consistent with their cognitive, emotion, social and physical stage of development and their capacity for self-management
- Participate in the development and review of their *Diabetes Health Management Plan* as appropriate
- Set goals on an ongoing basis for self-management of their medical condition, in conjunction with their Parent(s)/Guardian(s) and health care professional(s)
- Work towards learning to manage their Diabetes as outlined in their *Diabetes Health Management Plan* where it is developmentally appropriate
- ~~Carry Diabetes medical identification on their person at all times as indicated by Parent(s)/Guardian(s)~~
- Be encouraged to carry out daily or routine self-management of their medical condition to their full potential, as described in their Diabetes Health Management Plan (e.g., bringing and caring for/maintaining their Diabetes equipment/supplies, proper disposal of sharps, carrying their source of fast acting sugar on them at all times)
- Inform, if possible, school staff and/or their peers if a medical incident or medical emergency occurs
- Wear a medical alert identification that they and/or Parent(s)/Guardian(s) deem appropriate

### 1.3 School Staff

School staff play a key role in supporting the student's safe, accepting, and healthy learning environment, and allowing students to participate in school to their fullest potential. School staff will:

- Review the contents of the *Diabetes Health Management Plan* for any student with whom they have direct and regular contact
- Complete annual training on Diabetes provided by the York Catholic District School Board
- Support the student's *Diabetes Health Management Plan*, such as, verify the student's reading of the glucometer, monitor the student during insulin self-administration and assist the student as required and outlined on the *Diabetes Health Management Plan*, including knowledge of the student's symptoms of low (hypoglycemia) or high (hyperglycemia) blood sugar and how it should be treated and how to respond to severe hypoglycemia and hyperglycemia
- Respond to medical incidents and emergencies that occur during the school day as outlined on the *Diabetes Health Management Plan*.
- Recognize and acknowledge that low (hypoglycemia) and high (hyperglycemia) blood sugar levels can affect mood, behavior and cognitive performance and to provide the necessary accommodations that may be needed for students who experience low (hypoglycemia) or high (hyperglycemia) blood sugar levels during tests or exams throughout the instructional day
- Allow sufficient time to finish snacks/meals and allow for flexibility in classroom/school routines as required by the student for Diabetes management tasks and treatment of low (hypoglycemia) or high (hyperglycemia) blood sugar e.g., ensure the student has unrestricted access to water and a washroom, ensure that the student has easy access to blood sugar monitoring kit/supplies, ensure they have adequate time to treat low or high blood sugar levels prior to participating in any school activities
- Participate in an established communication plan to notify Parent(s)/Guardian(s) of episodes of low (hypoglycemia) or high (hyperglycemia) blood sugar levels or any other concerns
- Provide Parent(s)/Guardian(s) with notice of upcoming changes in school routines



- that may impact the student's Diabetes and/or management of the student's Diabetes, e.g., changes in physical activity events, school excursions, special events involving food, changes to snack/lunch schedules or routines
- Implement the plan of action developed in consultation with the Principal and the Parent(s)/Guardian(s) addressing the safety and well-being of the student when participating in out-of-school events/activities and overnight excursions
  - Ensure that for all out of school events/activities and overnight excursions, a designated adult has a copy of the student's *Diabetes Health Management Plan*, along with all necessary Diabetes equipment and/or supplies
  - Notify Parent(s)/Guardian(s) when emergency Diabetes supplies stored at the school are running low or have expired
  - Recognize that even students who are normally independent in their daily Diabetes management may need help at times when they are experiencing low or high blood sugar
  - Ensure that a student is not left alone following a low sugar episode until fully recovered as outlined in the student's *Diabetes Health Management Plan* (S16b)
  - Develop and participate in an established communication plan to notify Parent(s)/Guardian(s) of medical emergencies or any other concerns/information related to the student's Diabetes
  - Keep all forms current (relevant to the student's condition) and signed by the physician
  - Participate in school case conferences when required with the school Principal, staff and involved health care professionals
  - Collaborate with the Principal and school staff in establishing a clear communication plan between home and school
  - Provide all necessary equipment and supplies for blood sugar monitoring and insulin administration (self-administered or by ~~LHN~~ HCCSS nurse), and appropriately labeled medication, as indicated in the *Diabetes Health Management Plan* (S16b). All equipment must be in full working order and maintained as required, with sufficient supplies available on a daily basis
  - Ensure that a supply of fast acting sugar (e.g., juice) is provided to the school and replenished on a regular basis, or as needed
  - Provide an emergency glucagon kit to the school as needed
  - Provide education to their child about their medical condition, as well as the safekeeping and administration of their medication with support from their child's health care professional
  - Guide and encourage their child to reach their full potential for self- management and self-advocacy related to their medical condition and participate in their Diabetes management as is age/developmentally appropriate
  - Set goals in conjunction with their child and health care professionals on an ongoing basis for self-management of their child's medical condition

#### 1.4 Principal

In addition to the responsibilities outlined above under "School Staff", the principal (or designate) will:

- Participate in an annual training on Diabetes provided by the York Catholic District School Board
- Inform the Parent(s)/Guardian(s) at the time of registration or upon receipt of a diagnosis, of the need to advise the school if their child has Diabetes
- Provide the Parent(s)/Guardian(s) with appropriate forms to co-create the *Diabetes Health Management Plan* (S16b/S16b1) at the time of registration or following a new diagnosis.
- Convene a meeting with Parent(s)/Guardian(s), school personnel and Student

- Services personnel to discuss a request for the admittance of a service dog, in accordance with the Board's decision-making protocol for entry of a personal service dog
- Ensure that the **Parent Consent Form (S16)** and the *Diabetes Health Management Plan (S16b)* is sent to the Parent(s)/Guardians for review and updating on an annual basis at the beginning of each school year
  - Arrange a meeting/conference with appropriate school personnel and Parent(s)/Guardian(s) to review the student's medical needs as outlined on the *Diabetes Health Management Plan* on an annual basis and as needed throughout the school year
  - **With Parent/Guardian consent**, provide the Student Transportation Services Department and other relevant school staff with the names of all students with a diagnosis of Diabetes and relevant information from the student's *Diabetes Health Management Plan*
  - Communicate the *Diabetes Health Management Plan (S16b/S16b1)* with all staff who are in direct and regular contact with students who have a diagnosis of Diabetes and could require immediate medical attention
  - Ensure that school staff are aware of the student's medical needs and have access to the *Diabetes Health Management Plan (S16b/S16b1)* ensuring and maintaining the privacy of student information
  - Post posters of signs and symptoms of low and high blood sugar in key locations throughout the school (printable resources can be found at [www.Diabetesatschool.ca](http://www.Diabetesatschool.ca))
  - Initiate a referral to the ~~Local Health Integrated Network (LHIN)~~ **Home and Community Care Support Services (HCCSS)** for nursing support for all students who are unable to manage their blood glucose (sugar) monitoring, insulin injections or insulin pump independently, as well as to request support for the training (diabetic teaching) and education of involved school personnel
  - Identify school staff/team (primary and alternates) that can support the management of the student's *Diabetes Health Management Plan* (e.g., support blood sugar checks; monitor the student during self-administration of insulin)
  - Allow the student and/or the ~~LHIN~~ **HCCSS** staff, to check blood sugar, administer insulin, and treat low or high blood sugar safely within the school environment, whenever and wherever needed, and to provide a private area if preferred by the student, Parent(s)/Guardian(s) to do so
  - Ensure that emergency supplies provided to the school by the Parent(s)/Guardian(s), of fast-acting sugar (i.e., glucose tablets, juice) including additional snacks are stored in readily accessible locations throughout the school (i.e., classroom, health room, office)
  - Advise all relevant staff of the location of the student's emergency supplies. Location of emergency supplies should be listed in the student's *Diabetes Health Management Plan*
  - Ensure that Occasional Teachers and supply support staff (~~EAVE/CYW~~) are aware that they have a student with Diabetes in their class and know how to recognize the signs/symptoms of low and high blood sugar and have a copy of the student's *Diabetes Health Management Plan*
  - Permit students with Diabetes to carry their Diabetes supplies and fast acting sugar on their person, as per Policy 207A *Administration of Oral Medication to Elementary and Secondary Students*.
  - Provide safe storage of an emergency glucagon kit at the school if requested by Parent(s)/Guardian(s)
  - Ensure that proper health and safety procedures for the disposal of sharps within the school environment are followed
  - Develop an action plan with the Parent(s)/Guardian(s) that addresses the safety and well-being of the student when participating in out-of-school events/activities and

## 1.5 Student Transportation Services

- Ensure the names of students with a diagnosis of Diabetes has been communicated to Transportation Service Providers
- Work with the Principal and transportation service provider to assign a specific seat to a student diagnosed with Diabetes, if required
- Allow student with Diabetes to carry their Diabetes supplies and source of fast acting sugar (e.g., juice box) on the school bus, test blood sugar and/or treat low/high blood sugar as needed while on the bus
- Ensure that Policy 213-206: *Supporting Students with Prevalent Medical Conditions in Schools*: ~~Diabetes~~ has been communicated to Transportation Service Providers

## 2. Diabetes Health Management Plan

The Diabetes Health Management Plan is a form that contains individualized information on the student's condition, and identifies the School Care Team of staff, strategies to monitor blood sugar levels, administer insulin, symptoms of low and elevated blood sugar levels, and emergency medical responses.

The Diabetes Health Management Plan shall be co-created, reviewed or updated by the parents / guardians in consultation with the principal, designated staff and the student within the first 30 days of the school year or as soon as possible upon registration or diagnosis.

Parent(s)/Guardians(s) have the authority to designate who is provided access to the Diabetes Health Management Plan. With authorization from parent(s)/guardian(s), the Diabetes Health Management Plan will be:

- (i) Shared with appropriate school staff and others who are in direct contact with students with diabetes (e.g. food service providers, transportation providers, volunteers).
- (ii) Posted in a key area of the school where staff have access on a regular basis.
- (iii) Located in the educator's daybook and/or occasional staff plans.

## 3. Facilitating and Supporting Daily or Routine Management

In general, diabetes is managed through daily routines involving blood glucose monitoring, managing the intake of food, administration of insulin via injection or pump, and planning for activity. The student's capacity to independently monitor and carry out these routines depends on a number of factors including their cognitive, emotional, social and physical stage of development, all of which must be outlined in their Diabetes Health Management Plan.

In developing the Diabetes Health Management Plan, school staff must allow for flexibility and individualized discretion on where and when these daily routines occur, respecting both inclusion and preference for privacy.

Parent(s)/Guardian(s), in working with school staff, must ensure that a Diabetes Management Kit is provided, maintained and refreshed to support daily management at school. This kit may include: blood glucose monitoring items, insulin injections, oral glucose, juice. The Diabetes Management Kit, including medications with the original pharmacist label and container, may be stored in the office or other secure location, in accordance with the Board's Policy 207: *Administration of Oral Medication to Elementary and Secondary Students*.

## 4. Emergency Response

"Emergency" is defined by the Health Care Consent Act, 1996 to include a situation where

the individual is experiencing severe suffering, or is at risk of sustaining serious bodily harm, if the treatment is not administered promptly.

All staff are required to be trained annually. The individualized response to a student's diabetic emergency shall be detailed in the student's Diabetes Health Management Plan. Staff who are in direct and regular contact with the student, shall review and be trained on the Diabetes Health Management Plan.

For severe hypoglycemia where a student is unresponsive, staff shall:

1. Place student on their side.
2. Call 9-1-1. Do not give food or drink.
3. Contact parent(s)/guardian(s) or emergency contact
4. Supervise student until EMS arrives. Follow the direction of medical staff.
5. ~~Transport student to hospital by ambulance~~
6. Document medical incident in Diabetes Health Management Plan

## **5. Raising Awareness**

Where possible, school staff should raise awareness of Diabetes and other prevalent medical conditions that affect students. They can do so through curriculum content in classroom instruction, related learning experiences and classroom leadership opportunities. Awareness is especially important at times of transition (e.g. the move to a new school, the move from elementary to secondary school), when students have to face social, physiological, and environmental changes.

## **6. Liability**

The Good Samaritan Act, passed in 2001, protects individuals from liability with respect to voluntary emergency medical or first aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

*2.(1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in action or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.*

*(2) Subsection (1) applies to, ... (b) and individual... who provides emergency first aid to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides assistance at the immediate scene of the accident or emergency.*

## **7. Definitions**

### **Age and/or Developmentally Appropriate**

Developmentally appropriate readiness for individual students will need to be considered by the Superintendent of Education: School Leadership and Principal in consultation with the Parent(s)/Guardian(s). The responsibilities that a student can assume will be assessed based on the student's age and capacity to understand their life-threatening condition. Students with special education needs may require additional assistance by school or central staff and Parent(s)/Guardian(s).

### **Diabetes Health Management Plan**

A plan of care that outlines the daily routine management tasks required to support the student's safety at school and an emergency plan of care that outlines the procedures to respond to hypoglycemia or hyperglycemia.

### **Diabetic Ketoacidosis**

A potentially life-threatening condition that occurs, when blood sugar levels are **too high** and

the body breaks down fat for energy leading to a high level of ketones in the body. At high levels, ketones are poisonous and can lead to coma or death if not treated.

**Hyperglycemia (High Blood Sugar)**

A condition occurring when the amount of blood glucose (sugar) is higher than a student's target range, the student may show signs of thirst, increased urinary frequency, and fatigue.

**Hypoglycemia (Low Blood Sugar)**

A condition occurring when the amount of blood glucose (sugar) has dropped below a student's target range, ranging from mild, moderate to severe. Hypoglycemia requires treatment with a fast acting glucose and the rechecking of blood sugar until levels have stabilized within the target range.

**Insulin**

A hormone required to convert glucose (sugar) to energy for the body to use. Without insulin sugar builds up in the blood instead of being used for energy. Students with Type 1 Diabetes must administer insulin by syringe, insulin pen or pump.

**Local Health Integrated Network (LHIN)**

A publicly funded service provided to schools for the support of school age children, which may include nursing to support diabetic management or teaching as determined by the LHIN staff.

**Type 1 Diabetes**

An autoimmune disease in which the pancreas stops producing insulin, usually diagnosed in children and adolescents.

**Type 2 Diabetes**

A disease in which the pancreas does not produce enough insulin or the body does not properly use the insulin it makes typically occurring in adults, but is now being diagnosed in teens and children.

## 8. CROSS REFERENCES

**Legislation**

[Canadian Diabetes Association Canadian Pediatric Society](#)

[Good Samaritan Act](#)

[Guidelines for the Care of Students Living with Diabetes at School](#)

[Program Policy Memorandum 161 Supporting Students with Prevalent Medical Conditions](#)

**YCDSB Policies**

Policy 203 [Student Transportation Services](#)

Policy 207 [Administration of Oral Prescription Medication to Elementary & Secondary Students](#)

Policy 208 [Student Disability Accommodation](#)

YCDSB Student Transportation Procedures Manual

[YCDSB Third Party Protocol](#)

**Related Forms**

SE3 Consent for Consultation with Board Staff

S16b *Diabetes Health Management Plan* (Appendix A)

(Includes S16b Plan, S16b1 Blood Sugar Log and Parent(s)/Guardian(s) letter)



# YORK CATHOLIC DISTRICT SCHOOL BOARD

## DIABETES HEALTH MANAGEMENT PLAN PART A: DAILY MANAGEMENT PLAN

STUDENT'S NAME: \_\_\_\_\_ TEACHER'S NAME: \_\_\_\_\_  
 DATE OF BIRTH: \_\_\_\_\_ GRADE: \_\_\_\_\_  
 PARENT'S NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
 PARENT'S NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
 ALTERNATE EMERGENCY CONTACT INFO: \_\_\_\_\_

Home Address _____	PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)
Physician's Name _____	
Phone # _____	
Address _____	
Names of trained adults who will provide support with diabetes-related tasks (e.g. designated staff or community care allies):	
Names of trained adults that can administer nasal glucagon:	
Emergency glucagon medication provided by parent <input type="checkbox"/> Yes <input type="checkbox"/> No	
Method of home-school communication:	
Any other medical condition or allergy?	
Time of day when low blood sugar is most likely to occur:	
What has been provided to treat low blood sugar symptoms:	

- ☐ Nasal – to be administered by trained adult  
☐ Glucagon via injection – to be administered by paramedics, nurse, or parent

Where the sugar source is located: \_\_\_\_\_

**Children with diabetes must eat their snacks and meals as outlined in the management plan.**

Morning Snack Time: \_\_\_\_\_ Lunch Time: \_\_\_\_\_ Afternoon Snack Time: \_\_\_\_\_

**Children with diabetes should never be refused water to drink or bathroom privileges.**



## EMERGENCY PROCEDURES

### HYPOGLYCEMIA – LOW BLOOD GLUCOSE (BG) (4 MMOL/L OR LESS) DO NOT LEAVE STUDENT UNATTENDED

Usual symptoms of Hypoglycemia for my child are:

- |                  |                     |               |                |
|------------------|---------------------|---------------|----------------|
| ☼ Shaky          | ☼ Irritable/Grouchy | ☼ Dizzy       | ☼ Trembling    |
| ☼ Blurred Vision | ☼ Headache          | ☼ Hungry      | ☼ Weak/Fatigue |
| ☼ Pale           | ☼ Confused          | ☼ Other _____ |                |

Steps to take for Mild Hypoglycemia (student is responsive)

1. Check blood glucose (BG), give \_\_\_\_\_ grams of fast acting carbohydrate (e.g. ½ cup of juice, 15 skittles)
2. Re-check blood glucose in 15 minutes.
3. If still below 4 mmol/L, repeat steps 1 and 2 until BG is above 4 mmol/L. Give a starchy snack if next meal/snack is more than one (1) hour away.

Steps for Severe Hypoglycemia (student is unable to take anything by mouth due to incoherence, irritability, unresponsiveness)

1. Place the student on their side ~~in the recovery position.~~
2. ~~As per parent request, Trained adult to administer~~ Nasal glucagon **to be administered by trained adult with parent(s)/guardian(s) consent**
3. Call 9-1-1. Do not give food or drink (choking hazard)
4. Contact parent(s)/guardian(s) or emergency contact
5. Supervise student until EMS arrives. **Follow the direction of medical staff.**

### HYPERGLYCEMIA — HIGH BLOOD GLUCOSE (BG) (14 MMOL/L OR ABOVE)

Usual symptoms of hyperglycemia for my child are:

- |                      |                      |                  |
|----------------------|----------------------|------------------|
| ☼ Extreme Thirst     | ☼ Frequent Urination | ☼ Headache       |
| ☼ Hungry             | ☼ Abdominal Pain     | ☼ Blurred Vision |
| ☼ Warm, Flushed Skin | ☼ Irritability       | ☼ Other: _____   |

Steps to take for Mild Hyperglycemia:

1. Allow student free use of bathroom
2. Encourage student to drink water only
3. Inform the parent(s)/guardian(s) if BG is above \_\_\_\_\_

Symptoms of Severe Hyperglycemia (Notify parent(s)/guardian(s) immediately):

- |                            |            |                 |
|----------------------------|------------|-----------------|
| ☼ Rapid, Shallow Breathing | ☼ Vomiting | ☼ Fruity Breath |
|----------------------------|------------|-----------------|

Steps to take for Severe Hyperglycemia

1. If possible, confirm hyperglycemia by testing blood glucose
2. Call parent(s)/guardian(s) or emergency contact



## DAILY/ROUTINE DIABETES HEALTH MANAGEMENT PLAN

Student is able to manage their diabetes care independently and does not require any special care from the school.

☼ Yes

☼ No

☼ If yes, go directly to page **two (2)** — Emergency Procedures

ROUTINE	ACTION
<b><u>BLOOD GLUCOSE MONITORING</u></b>	Target Blood Glucose Range:
☼ Student requires trained individual to check BG/ read meter.	Time(s) to check BG:
☼ Student needs supervision to check BG/ read meter.	Contact Parent(s)/Guardian(s) if BG is:
☼ Student can independently check BG/ read meter.	Parent(s)/Guardian(s) Responsibilities:
☼ Student has continuous glucose monitor (CGM)	School Responsibilities:
📖 Students should be able to check blood glucose anytime, anyplace, respecting their preference for privacy.	Student Responsibilities:
<b><u>NUTRITION BREAKS</u></b>	Recommended time(s) for meals/snacks:
☼ Student requires supervision during meal times to ensure completion.	Parent(s)/Guardian(s) Responsibilities:
☼ Student can independently manage <b>their</b> his/her food intake.	School Responsibilities:
📖 Reasonable accommodation must be made to allow student to eat all of the provided meals and snacks on time. Students should not trade or share food/snacks with other students.	Student Responsibilities:
	Special instructions for meal days/ special events:

ROUTINE	ACTION (CONTINUED)
<p><b><u>INSULIN</u></b></p> <p>⚙ Student takes insulin at school by:</p> <ul style="list-style-type: none"> <li>⚙ Injection</li> <li>⚙ Pump</li> </ul> <p>⚙ Insulin is given by:</p> <ul style="list-style-type: none"> <li>⚙ Student</li> <li>⚙ Student with supervision</li> <li>⚙ Parent(s)/Guardian(s)</li> <li>⚙ Trained Individual (Nurse)</li> </ul> <p>📖 All students with Type 1 Diabetes use insulin. Some students will require insulin during the school day, typically before meal/nutrition breaks.</p>	Location of insulin:
	Required times for insulin:
	⚙ Before school: <span style="float: right;">⚙ Morning Break:</span>
	⚙ Lunch Break: <span style="float: right;">⚙ Afternoon Break:</span>
	⚙ Other (Specify):
	Parent(s)/Guardian(s) Responsibilities:
	School Responsibilities:
	Student Responsibilities:
Additional Comments:	
<b>ACTIVITY PLAN</b>	
<p>Physical activity lowers blood glucose. BG is often checked before activity. Carbohydrates may need to be eaten before/after physical activity. A source of fast-acting sugar must always be within students' reach.</p>	Please indicate what this student must do prior to physical activity to help prevent low blood sugar:
	1. Before activity:
	2. During activity:
	3. After activity:
	Parent(s)/Guardian(s) Responsibilities:
	School Responsibilities:
	Student Responsibilities:
	<p>For special events, notify parent(s)/guardian(s) in advance so that appropriate adjustments or arrangements can be made. (e.g., extracurricular, Terry Fox Run)</p>

ROUTINE	ACTION (CONTINUED)
<b>DIABETES MANAGEMENT KIT</b> Parent(s)/Guardian(s) must provide, maintain, and refresh supplies. School must ensure this kit is accessible at all times. (e.g., field trips, fire drills, lockdowns) and advise parents when supplies are low.	Kits will be available in different locations but will include: <ul style="list-style-type: none"> <li>⚙ Blood Glucose meter, BG test strips, and lancets</li> <li>⚙ Insulin and insulin pen and supplies</li> <li>⚙ Source of fast-acting sugar (e.g., juice, candy, glucose tabs)</li> <li>⚙ Carbohydrate containing snacks</li> <li>⚙ Other (Please list) _____</li> </ul>
	Location of Kit:
<b>SPECIAL NEEDS</b> A student with special considerations may require more assistance than outlined in this plan.	Comments:

## HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

**Healthcare provider may include:** Physician, Nurse Practitioner, Registered Nurse, Pharmacist, Respiratory Therapist, Certified Respiratory Educator, or Certified Asthma Educator.

Healthcare Provider's Name: \_\_\_\_\_

Profession/Role: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Special Instructions/Notes/Prescription Labels: \_\_\_\_\_

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

**\*This information may remain on file if there are no changes to the student's medical condition.**

## AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS ~~PLAN OF CARE~~ **HEALTH MANAGEMENT PLAN** IS TO BE SHARED

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

Other Individuals To Be Contacted Regarding ~~Plan Of Care~~ **the Health Management Plan:**

Before-School Program      ☐ Yes      ☐ No      \_\_\_\_\_

After-School Program      ☐ Yes      ☐ No      \_\_\_\_\_

School Bus Driver/Route # (If Applicable) \_\_\_\_\_

Other: \_\_\_\_\_

**This plan remains in effect for the 20\_\_ — 20\_\_ school year without change and will be reviewed on or before as required:** \_\_\_\_\_ **Please complete parent(s)/guardian(s) consent form S16d each year.** (It is the parent(s)/guardian(s) responsibility to notify the Principal if there is a need to change the plan of care during the school year).

Physician: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Parent(s)/Guardian(s): \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

## Diabetes Health Management Parent/Guardian Letter

### School Letterhead

Date

Dear Parent/Guardian:

As we update our school records related to your child's Diabetes Health Management Plan (S16b), I am requesting that you carefully review, update, complete, sign and return the attached **S16**, S16(b) and the Consent for Consultation with Board Staff (SE3) to the school office. This information is necessary for the safety and protection of your child.

It is the responsibility of the Parent(s)/Guardian(s) to ensure that all medical information pertinent to your child's diabetes is always current. Please complete and return the attached forms with a physician signature.

If revisions to the medical information outlined on the attached forms are necessary, you will be required to complete a new form and secure an updated physician signature. If no revisions are necessary, please return **the yearly consent form (S16), and the** signed Form S16(b) with an updated photo of your child.

Please contact the school office if you have any questions and/or concerns.

Thank you for your immediate attention to this request and your ongoing support in the shared responsibility for management of your child's diabetes at school.

Please return all forms as soon as possible.

Sincerely,

Principal Name



# YORK CATHOLIC DISTRICT SCHOOL BOARD

## STUDENT BLOOD SUGAR LOG

(Optional)

Student: \_\_\_\_\_

Teacher: \_\_\_\_\_

Grade/Class: \_\_\_\_\_ Week or Month of: \_\_\_\_\_

BLOOD SUGAR LOG						
Date	Time	Level	Checked by (print name)	Initial	Signs/symptoms of low blood sugar observed (if any)	Actions taken

c.c. Office Medical Log Binder for current and following school year with S16(b)



Consent for Consultation with Board Level  
Student Services Staff

Student: **Amy Anderson**  
Program School: **Secondary Demo**

**SAMPLE**

D.O.B.: **08 Jan 1992** Grade: **09**

*It is understood that the reasons for requiring consultation have been discussed with me/us by school staff. If further clarification is required, please contact the Principal prior to signing this form.*

I / We understand that school personnel recommend conferring with the following Board Level Student Services staff regarding my / our child. Refer to page 2 for more information about these services.

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Behaviour Resource Services | <input type="checkbox"/> Educational Audiology Services    | <input type="checkbox"/> Hearing Services   |
| <input type="checkbox"/> Physical Management (OT/PT) Services   | <input checked="" type="checkbox"/> Psychological Services | <input checked="" type="checkbox"/> Special Education Programming Services (Consultant) |
| <input type="checkbox"/> Speech and Language Services           | <input type="checkbox"/> Vision Services                   |   |

I / We understand the reason(s) for this recommendation and am / are in agreement that ongoing consultation may occur for a maximum period of one year from this date. I / We also understand that we may cancel or change this authorization in writing at any time prior to expiry date.

It is understood that:

1. School personnel will share pertinent information and recommendations with me / us.
2. For each formal scheduled conference of professionals, a written summary of the action items will be recorded on the Conference Record (SE2). The SE2 will be placed in the student's OSR; a copy will be shared with parent(s)/guardian(s) and professionals in attendance.
3. This consent remains in effect for one year from the date of completion.
4. Reports included in the files of the above agreed upon professionals may be shared during this consultation for the purpose of assisting the student.
5. Relevant information from the OSR may be shared with the above agreed upon professionals.

I / We therefore agree that consultation with the Board Level Student Services staff selected above will be held regarding my / our child.

Date: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Print Name: \_\_\_\_\_

☐ Parent ☐ Guardian ☐ Student

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Classroom Teacher

\_\_\_\_\_  
Special Education Teacher

I / We do NOT wish for consultation with Board Level Student Services staff at this time.

Date: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Print Name: \_\_\_\_\_

☐ Parent ☐ Guardian ☐ Student

Personal information is collected pursuant to the Education Act and the Municipal Freedom of Information and Protection of Privacy Act. Questions about the collection and the use of this personal information should be directed to the Privacy Officer, York Catholic District School Board, 320 Bloomington Road W., Aurora, Ontario L4G 0M1 or 905-713-2711.

**File in Ontario Student Record Folder – Documentation File**



## **Board Level Student Services**

### **Behaviour Resource Services**

Behaviour Resource Services (BRS) support students who present with difficulties in the areas of social, emotional, behavioural, and/or self-regulation which interfere with their ability to be successful in the school environment. BRS provides a continuum of services ranging in intensity and format to meet each student's unique needs. Permission is limited to consultation and does not include observation of or any interaction with your child. Should this become necessary, you will be asked to sign a separate consent form.

### **Educational Audiology Services**

Educational Audiologists recommend classroom amplification systems appropriate to the student's personal amplification needs within the classroom setting. Permission is limited to consultation and does not include observation of or any interaction with your child.

### **Hearing Services**

Hearing Services provide consultation to school staff for students with hearing loss as well as those who have been diagnosed with Central Auditory Processing disorder. Consultation is provided by a specialist teacher of the deaf/hard of hearing and/or the Special Education Consultant: Hearing. An audiological assessment (audiogram) is required prior to consultation. Recommendations may include instructional and environmental accommodations.

### **Physical Management (Occupational Therapy/Physical Therapy) Services**

Occupational and Physical Therapists (OT/PT) use a consultative model to support students who may have difficulty accessing the school learning environment due to a disability, medical, and/or developmental need. The goal of an OT/PT is to support optimal functional independence at school and will target one or more of the following areas: motor development, self-care, adapted equipment and technology support, functional life skills, sensory and/or accessibility needs. Permission is limited to consultation and does not include observation of or any interaction with your child. Should this become necessary, you will be asked to sign a separate consent form.

### **Psychological Services**

Psychological Services provide consultation to school personnel regarding a student's intellectual and academic development, as well as behavioural, emotional, and social functioning. Permission is limited to consultation and does not include observation of your child or any interaction with your child. Should this become necessary, you will be asked to sign a separate consent form.

### **Special Education Programming Services (Consultant)**

Special Education Program Consultants provide expertise in special education programming for a wide range of students who have special education needs. Permission will allow the Special Education Program Consultants to support school personnel in developing individual programming through consultation and possible direct observation of your child. Recommendations regarding strategies and best practices may be made to parents/guardians and/or school staff.

### **Speech and Language Services**

Speech and Language Pathologists contribute to program planning for students in the areas of communication, literacy, functional life skills and social skills development. Through consultative services, Speech and Language Pathologists advise and assist teachers, early childhood educators, educational assistants, parents/guardians and others regarding effective strategies in the area of communication skill development. Permission is limited to consultation and does not include observation of or any interaction with your child. Should this become necessary, you will be asked to sign a separate consent form.

### **Vision Services**

Vision Services provide support for students whose vision, even with correction, adversely impacts their educational performance. Strategies are provided and recommendations may be made for an individualized program to support on-going needs (e.g., program accommodations, braille, assistive devices/technology, and mobility training).



York Catholic District School Board

**STUDENT ~~-PRESCRIPTION~~ MEDICATION LOG**

Student:

Name of Designated Administrator(s) of Prescription/Non-Prescription Medication:

(Please refer to Form S.16(a) or S16(a1))

Teacher

Grade/Class

Week or Month of:

DATE	TIME	NAME OF PRESCRIPTION/ <del>NON</del> PRESCRIPTION MEDICATION	DOSAGE	INITIAL OF ADMINISTRATOR OF <del>-PRESCRIPTION</del> MEDICATION **	COMMENTS

PLEASE RECORD WHEN ~~-PRESCRIPTION~~ MEDICATION HAS NOT BEEN ADMINISTERED BECAUSE OF ABSENCE OR OTHER REASON

c.c. Office Medical Log Binder for current and following school year with S16a/S16a1

\*\* If you are not a named Administrator, please print name in the Comments Section



## YORK CATHOLIC DISTRICT SCHOOL BOARD

### PROCEDURE:

### 206D SUPPORTING STUDENTS WITH PREVALENT MEDICAL CONDITIONS: EPILEPSY

#### Addendum to:

#### Policy 206 Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools

Effective: DD/MMM/YYYY

## PURPOSE

The York Catholic District School Board recognizes that there are some students within the school system who have been diagnosed with Epilepsy which could be life threatening. The York Catholic District School Board also recognizes that Epilepsy management is a shared responsibility that requires a team approach among students, Parent(s)/Guardian(s), health care providers and the entire school community. **The purpose of this policy is to provide administrators, school staff, volunteers and parent(s)/guardian(s) with information, strategies and requirements in managing students with Epilepsy and to minimize, where possible, the risks (triggers) in the school setting.**

## 1. Roles & Responsibilities

### 1.1 Parents / Guardians of Children with Epilepsy

As primary caregivers of their child, parent(s)/guardian(s) are expected to be active participants in supporting the management of their child's epilepsy while the child is at school and at school related activities. Parent(s)/Guardian(s) are expected to:

- Inform the Principal immediately upon registration and/or when in receipt of a diagnosis of Epilepsy.
- Provide the school with current medical information sufficient to understand the medical needs of the student
- **Participate in the co-creation, review and updating of the Epilepsy Health Management Plan and other required forms within the first 30 days of each school year, upon registration, and following any changes or new diagnosis**
- Collaborate with the Principal and Health care professionals to complete and submit all forms provided by the Principal to support the health and safety needs of the student
- Consult and collaborate with the Principal and teacher related to any modifications needed to the *Epilepsy Health Management Plan* for special events or field trips
- Review the Epilepsy Health Management Plan (S16C) on an annual basis at the beginning of each school year in collaboration with the school team.
- Provide the Principal with an updated *Epilepsy Health Management Plan* in the event of changes to the diagnosis or action plan
- Keep all forms current and signed by the physician
- participate in school case conferences when required with the school Principal, staff and involved health care professionals
- Collaborate with the Principal and school staff in establishing a clear communication plan between home and school.
- Supply their child and/or the school with sufficient quantities of supplies and medication in their original **pharmaceutical container**, as directed by a physician or health care professional and as outlined in the *Epilepsy Health Management Plan*, and record the quantity provided as well as the expiration dates of medication that are supplied
- Educate their child about their medical condition, as well as the safekeeping and administration of their medication with support from the child's health care professional as appropriate and encourage the student to reach their full potential for self-management and self-advocacy
- **Provide the school with any individualized equipment (i.e., helmet) identified in the Epilepsy Health Management Plan to protect the safety of the student.**
- Guide and encourage their child to participate in their Epilepsy management as is age/developmentally appropriate
- Set goals in conjunction with their child and health care professionals on an ongoing basis for self-management of their child's medical condition
- **Communicate with school staff about arrangements and considerations for field trips,**

- excursions, co-curricular activities and co-operative education placements
- Encourage their child to wear medical alert identification

## 1.2 Students with Epilepsy

Depending on their cognitive, emotional, social and physical stage of development, and their capacity for self-management, students shall actively support the development and implementation of their Epilepsy Health Management Plan. Students are expected to:

- Take responsibility for advocating for their personal safety and well-being, as well as the safekeeping and administration of their medication that is consistent with their cognitive, emotional, social and physical stage of development and their capacity for self-management
- Participate in the development and review of their *Epilepsy Health Management Plan* as appropriate
- Carry out daily or routine self-management of their medical condition to their full potential, as outlined in their *Epilepsy Health Management Plan* (e.g., carry their medication and medical supplies as appropriate)
- Communicate with their Parent(s)/Guardian(s) and school staff if they are facing challenges related to their medical condition at school
- Wear a medical alert identification that they and/or their Parent(s)/Guardian(s) deem appropriate
- If possible, to inform school staff and/or their peers if a medical incident or a medical emergency occurs.

## 1.3 School Staff

School staff play a key role in supporting the student's safe, accepting, and healthy learning environment, and allowing students to participate in school to their fullest potential. School staff will:

- Complete annual training on Epilepsy, provided by the York Catholic District School Board.
- Review the contents of the *Epilepsy Health Management Plan* (S16c) for students with whom they have direct contact
- Provide a copy of the *Epilepsy Health Management Plan* (S16c) to occasional teachers
- Follow strategies that, reduce the risk of a student's exposure to triggers or causative agents in classrooms, common school areas, and extracurricular activities in accordance with the *Epilepsy Health Management Plan*
- Support the students daily routine management, and respond to medical incidents and medical emergencies that occur during school or school sanctioned out-of-school events/activities and overnight excursions, as outlined in the *Epilepsy Health Management Plan*
- Administer, as established with the Principal and prescribed by a physician or health care professional, the student's seizure medication, as outlined in the *Epilepsy Health Management Plan*
- Ensure that a student is not left alone following a seizure until fully recovered as outlined in the *Epilepsy Health Management Plan*
- Develop and participate in an established communication plan to notify Parent(s)/Guardian(s) of medical emergencies or any other concerns/information related to the student's Epilepsy
- Ensure that for all out of school events/activities and overnight excursions, a designated adult has a copy of the student's *Epilepsy Health Management Plan*, has been trained as required and has collaborated with Parent(s)/Guardian(s) ahead of the excursion to address any additional safety concerns

- Notify Parent(s)/Guardian(s) when emergency Epilepsy supplies stored at the school are running low or have expired
- Provide Parent(s)/Guardians(s) with notice of upcoming changes in school routines that may impact the student's Epilepsy and/or management of the student's Epilepsy, e.g., changes in physical activity events, school excursions, special events
- Recognize that even students who are normally independent in their daily Epilepsy management may need assistance at times

#### 1.4 Principal

In addition to the responsibilities outlined above under "School Staff", the principal (or designate) will:

- Participate in annual training with staff and others in direct contact with students to learn how to recognize the symptoms of epilepsy and the procedures to follow should a life-threatening reaction occur
- Inform the Parent(s)/Guardian(s) at the time of registration or upon receipt of a diagnosis, of the need to advise the school if their child has Epilepsy
- Permit students with Epilepsy or designated staff to carry their medication with them when Parent(s)/Guardian(s) have provided consent to do so. Students who are 16 years old or older do not require prior Parental/Guardian consent
- Provide Parent(s)/Guardian(s) with the *Epilepsy Health Management Plan form* (S16c) at the time of registration or following a new diagnosis and collaborate with Parent(s)/Guardian(s) in the co-creation of the plan
- Convene a meeting, in accordance with the Board's decision-making protocol for entry of a personal service dog, with Parents/Guardians, school personnel and Student Services personnel to discuss a request for the admittance of a service dog
- Ensure that the *Epilepsy Health Management Plan* form (S16) and (S16c) is sent to the Parent(s)/Guardian(s) for review and updating on an annual basis at the beginning of each school year or as required
- Communicate with all staff and others who are in direct contact with students, the name, grade and classroom teacher of students that have Epilepsy and may experience seizures within the school, requiring an immediate response with consent of the Parent(s)/Guardians(s) and/or students.
- Arrange a meeting/conference with appropriate school personnel and Parent(s)/Guardian(s) to review the student's medical needs as outlined on the *Epilepsy Health Management Plan* on an annual basis and as needed throughout the school year
- Communicate the *Epilepsy Health Management Plan* (S16c) with all staff who are in direct contact with the students with Epilepsy and are identified as a response team (e.g., classroom teacher, educational assistants, lunchtime supervisors etc.)
- Identify school care team that can support the daily/routine management and emergency procedures outlined on the students *Epilepsy Health Management Plan* and ensure training is provided by a regulated health care professional when required
- Create and maintain a central file for all students with Epilepsy
- Ensure that a copy of the central file is included in the school's Emergency Response/Action Plan
- Provide the Student Transportation Services Department with the names of all students with a diagnosis of Epilepsy and relevant information from the students' *Epilepsy Health Management Plan* with Parental/Guardian consent
- Ensure that school volunteers who are in direct contact with students are aware of the *Supporting Students with Prevalent Medical Conditions: Epilepsy* policy
- Ensure that school staff is aware of the student's medical needs and have access to the *Epilepsy Health Management Plan*.

## 1.5 Student Transportation Services

- Ensure the names of students with a diagnosis of Epilepsy have been communicated to Transportation Service Providers.
- Ensure that Policy 206 *Supporting Students with Prevalent Medical Conditions* has been communicated to all Transportation Service Providers.
- Work with the Principal and transportation service provider to assign a specific seat to a student diagnosed with Epilepsy if required.

## 2. Epilepsy Health Management Plan

The Epilepsy Health Management Plan is a form that contains individualized information on the student's condition, strategies to avoid triggers, actions to take to maintain the student's safety during and after a seizure, and emergency medical response.

The Epilepsy Health Management Plan shall be co-created, reviewed or updated by the parent(s)/guardian(s) in consultation with the principal, designated staff and the student within the first 30 days of the school year, or as soon as possible upon registration or diagnosis.

Parent(s)/Guardian(s) have the authority to designate who is provided access to the Epilepsy Health Management Plan. With authorization from parent(s)/guardian(s), the Epilepsy Health Management Plan will be:

- i. Shared with appropriate school staff and others who are in direct contact with students with epilepsy/seizure disorder (e.g. food service providers, transportation providers, volunteers).
- ii. Posted in a key area of the school where staff have access on a regular basis.
- iii. Located in the educator's daybook and/or occasional staff plans.

## 3. Facilitating and Supporting Daily or Routine Management

In general, students with seizures can progress through growth and developmental stages normally. An inclusive approach should be taken to all regular school activities, including sports, according to each student's individual Epilepsy Health Management Plan.

Many students with seizures successfully control their condition with medication. Students with seizures may require routine medication for their condition during the day or as an emergency response during a seizure. Routine medications, with the original pharmacist label and container, may be stored in the office or other secure location, in accordance with the Board's Policy 207: *Administration of Oral Medication to Elementary and Secondary Students*. Parent(s)/guardian(s) must provide the school with all emergency medications.

## 4. Emergency Response

"Emergency" is defined by the Health Care Consent Act, 1996 to include a situation where the individual is experiencing severe suffering, or is at risk of sustaining serious bodily harm, if the treatment is not administered promptly.

All staff are to be trained annually in the emergency response to a seizure. The individualized response to an emergency shall be detailed in the student's Epilepsy Health Management Plan. Staff who are in direct and regular contact with the student shall review and be trained on the Epilepsy Health Management Plan.

In addition to the specifics detailed in the Epilepsy Health Management Plan, it is considered an emergency when:

- (i) A student is not diagnosed with epilepsy or other seizure disorder
- (ii) Student is injured or has diabetes



- (iii) Student has difficulty breathing
- (iv) Student has a seizure in water

#### Seizure emergency - basic first aid

- (i) Stay calm and remain with the student
- (ii) Track the time and duration of the seizure
- (iii) Keep the student safe. Protect the student's head
- (iv) Do not restrain or interfere with the student's movements. Roll the individual onto their side as soon as possible
- (v) Clear the area
- (vi) Administer emergency medication as outlined in the student's Epilepsy Health Management Plan
- (vii) Do not place anything in the student's mouth. Monitor breathing.
- (viii) Stay with the student until fully conscious, talking with them calmly until re-oriented, allow them to rest before returning to regular activities.
- (ix) Document details in the Epilepsy Health Management Plan

In the event of an seizure emergency requiring Emergency Medical Services, staff will:

- (i) Call 9-1-1. Tell them someone is having a seizure
- (ii) Call, or direct another adult to call, the emergency contact person
- (iii) Document medical incident in Epilepsy Health Management Plan

#### 5. Raising Awareness

Where possible, school staff should raise awareness of Epilepsy and other prevalent medical conditions that affect students. They can do so through curriculum content in classroom instruction, related learning experiences and classroom leadership opportunities. Awareness is especially important at times of transition (e.g. the move to a new school, the move from elementary to secondary school), when students have to face social, physiological, and environmental changes.

#### 6. Liability

The Good Samaritan Act, passed in 2001, protects individuals from liability with respect to voluntary emergency medical or first aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

*2.(1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in action or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.*

*(2) Subsection (1) applies to, ... (b) and individual...who provides emergency first aid to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.*

#### 7. Definitions

##### **Age and/or Developmentally Appropriate Readiness**

Age and/or developmentally appropriate readiness for individual students will need to be considered by the Superintendent of Schools and Principal in consultation with the Parent(s)/Guardian(s). The responsibilities that a student can assume will be assessed based on the student's age and capacity to understand their condition.

Students with special education needs may require additional assistance by school or central staff and Parents/Guardians.

## Epilepsy

A neurological condition characterized by recurrent seizures. A seizure happens when abnormal electrical activity in the brain causes an involuntary change in the person's awareness or behaviour. Approximately one in ten Canadians will experience at least one seizure during a lifetime. A single seizure, however, is not Epilepsy. Epilepsy is a condition that is defined by multiple seizures.

### Epilepsy Health Management Plan

A plan of care that outlines the daily routine management tasks required to support the student's safety at school and an emergency plan of care that outlines the procedures to respond.

## Seizure

A sudden excessive electrical discharge in the nerve cells of the brain, that results in a change in function or behaviour. The brain is made up of billions of cells or neurons that communicate through electrical and chemical signals. When there is a sudden excessive electrical discharge that disrupts the normal activity of the nerve cells and results in a change in function or behaviour, this is a seizure.

### Seizure Triggers

Circumstances or events that provoke seizures.

While some people are not able to identify specific events or circumstances that affect seizures, others are able to recognize definite seizure triggers. Some common seizure triggers include:

- Forgetting to take prescribed seizure medication;
- Lack of sleep;
- Missing meals;
- Stress, excitement, emotional upset;
- Menstrual cycle/hormonal changes;
- Illness or fever;
- Low seizure medication levels;
- Medications other than prescribed seizure medication;
- Flickering lights of computers, television, video, etc.;
- Excessive alcohol consumption and subsequent withdrawal; and,
- Street drugs (e.g., cocaine, amphetamines, withdrawal from marijuana).

### Types of Seizures

There are many types of seizures. The different types begin in different areas of the brain and they are grouped into two categories: partial seizures and generalized seizures.

A **partial seizure** occurs when the excessive electrical discharge is limited to one part of the brain. Some common partial seizures types are:

- Complex Partial Seizures – Symptoms depend on the part of the brain that is affected; involve some loss of consciousness and may include rhythmic jerking of the hand or arm, feelings of nausea or fear, drooling, vomiting and involuntary movements such as blinking or swallowing; loss of awareness.
- Simple Partial Seizures – Often referred to as a focal seizure; affects only one area of the brain; does not cause loss of consciousness or lack of awareness; causes muscle contractions, followed by relaxation; contractions on just one side of the body; unusual head or eye movements; numbness, tingling or a feeling that something is crawling on the person's skin; abdominal pain; rapid heart rate or pulse; most do not last more than 1-2 minutes; may feel confused or have difficulty thinking clearly after a seizure has

occurred.

A **generalized seizure** is characterized by the involvement of the whole brain. The excessive electrical charge is widespread and involves both sides of the brain. The seizure may or may not be convulsive. Some common generalized seizure types are:

- Absence Seizures (formerly known as petit mal) – May cause the student to experience a “disconnected” feeling from their immediate surroundings; may stare blankly into space and eyes may roll back; brief loss of consciousness; usually last only a few seconds; student may not realize or remember experiencing the seizure. These are the most common type of seizure in children under 14 years of age.
- Atonic Seizures (commonly referred to as “drop attacks”) – Causes muscles to suddenly go limp; usually last less than 15 seconds; may experience several in succession.
- Clonic Seizures – Causes muscle spasms in the face, neck and arms triggering rhythmical jerking motions; may last for several minutes.
- Myoclonic Seizures – Causes muscles to suddenly jerk as if the student has received a shock.
- Tonic Seizures – Causes the tensing up of muscles in the student’s arms, legs or trunk; usually last less than 20 seconds and often occur while sleeping. But, if experienced during waking periods may cause loss of balance.
- Tonic-Clonic Seizures (formerly known as grand mal) – These are the most noticeable type of seizure causing the body to stiffen, jerk and shake and loss of consciousness; may cause loss of control of bladder or bowels; usually last 1-3 minutes; could lead to breathing difficulties.

## 8. Cross References

### Legislation

[Epilepsy Canada](#)

[Good Samaritan Act](#)

[Policy/Program Memorandum 161 Supporting Students with Prevalent Medical Conditions](#)

### YCDSB Policies

Policy 203 [Student Transportation Service](#)

Policy 207 [Administration of Oral Prescription Medication to Elementary & Secondary Student](#)

Policy 208 [Student Disability Accommodation](#)

[YCDSB Student Transportation Procedures Manual](#)

[YCDSB Third Party Protocol](#)

[YCDSB Decision-Making Protocol for Entry of a Personal Service Dog](#)

### Related Forms/Letters

SE3 Consent for Consultation with Board Staff

S16.(c) Epilepsy Health Management Plan (Appendix A)



## York Catholic District School Board

### EPILEPSY HEALTH MANAGEMENT PLAN

STUDENT'S NAME: \_\_\_\_\_

TEACHER'S NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

GRADE: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

PHONE #: \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

PHONE #: \_\_\_\_\_

ALTERNATE EMERGENCY CONTACT INFO: \_\_\_\_\_

<b>Home Address</b> _____ _____ _____ <b>Phone #</b> _____ _____ <b>Physician's Name</b> _____ <b>Phone #</b> _____	<b>PLACE STUDENT'S PHOTO HERE (MUST BE KEPT CURRENT)</b>
Has an emergency rescue medication been prescribed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, attach the rescue medication plan, healthcare providers' orders and authorization from the student's parent(s)/guardian(s) for a trained person to administer the medication.	
Note: Rescue medication training for the prescribed rescue medication and route of administration (e.g. buccal or intranasal) must be done in collaboration with a regulated healthcare professional.	
<b>KNOWN SEIZURE TRIGGERS</b>	
CHECK (✓) ALL THOSE THAT APPLY	
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Stress</div> <div style="width: 33%;"><input type="checkbox"/> Menstrual Cycle</div> <div style="width: 33%;"><input type="checkbox"/> Inactivity</div> <div style="width: 33%;"><input type="checkbox"/> Changes In Diet</div> <div style="width: 33%;"><input type="checkbox"/> Lack Of Sleep</div> <div style="width: 33%;"><input type="checkbox"/> Electronic Stimulation (TV, Videos, Florescent Lights)</div> <div style="width: 33%;"><input type="checkbox"/> Illness</div> <div style="width: 33%;"><input type="checkbox"/> Improper Medication Balance</div> <div style="width: 33%;"><input type="checkbox"/> Change In Weather</div> <div style="width: 33%;"><input type="checkbox"/> Other _____</div> <div style="width: 33%;"><input type="checkbox"/> Any Other Medical Condition or Allergy? _____</div> </div>	

DAILY/ROUTINE EPILEPSY MANAGEMENT	
DESCRIPTION OF SEIZURE (NON-CONVULSIVE)	ACTION:
	(e.g. description of dietary therapy, risks to be mitigated, trigger avoidance.)
DESCRIPTION OF SEIZURE (CONVULSIVE)	ACTION:
SEIZURE MANAGEMENT	
Note: It is possible for a student to have more than one seizure type. Record information for each seizure type.	
SEIZURE TYPE	ACTIONS TO TAKE DURING SEIZURE
(e.g. absence (petit mal), atonic, clonic, myoclonic, tonic, tonic-clonic (grand mal), simple partial, complex partial, infantile spasms)  Type: _____  Description: _____	
Frequency of seizure activity: _____  _____  Typical seizure duration: _____ Action Plan for supporting school access (e.g.: access on the stairs, transition between classes, toileting routines) _____ _____	

## BASIC FIRST AID: CARE AND COMFORT

First aid procedure(s): \_\_\_\_\_

Does student need to leave classroom after a seizure? ☐ Yes ☐ No

If yes, describe process for returning student to classroom: \_\_\_\_\_

### BASIC SEIZURE FIRST AID

- Stay calm and track time and duration of seizure
- Keep student safe
- Do not restrain or interfere with student's movements
- Do not put anything in student's mouth (unless directed on the action plan e.g. administration of sublingual medication)
- Stay with student until fully conscious

### FOR TONIC-CLONIC SEIZURE:

Protect student's head

Watch breathing (turn student on side, assists with keeping the airway open)

Turn student on side

## EMERGENCY PROCEDURES

Students with epilepsy will typically experience seizures as a result of their medical condition.

Call 9-1-1 when:

- Convulsive (tonic-clonic) seizure lasts longer than five (5) minutes.
- Student has repeated seizures without regaining consciousness.
- Student is injured or has diabetes.
- Student has a first-time seizure.
- Student has breathing difficulties.
- Student has a seizure in water
- ★ Notify parent(s)/guardian(s) or emergency contact.

## HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

**Healthcare provider may include:** Physician, Nurse Practitioner, Registered Nurse, Pharmacist, Respiratory Therapist, Certified Respiratory Educator, or Certified Asthma Educator.

Healthcare Provider's Name: \_\_\_\_\_

Profession/Role: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Special Instructions/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

★This information may remain on file if there are no changes to the student's medical condition.

## AUTHORIZATION/PLAN REVIEW

### INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

Other Individuals To Be Contacted Regarding Plan Of Care:

Before-School Program ☐ Yes ☐ No \_\_\_\_\_

After-School Program ☐ Yes ☐ No \_\_\_\_\_

School Bus Driver/Route # (If Applicable) \_\_\_\_\_

Other: \_\_\_\_\_

**This plan remains in effect for the 20\_\_— 20\_\_ school year without change and will be reviewed on or before:** \_\_\_\_\_. (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year).

Physician: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Parent(s)/Guardian(s): \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Signature





York Catholic District School Board

**STUDENT ~~-PRESCRIPTION~~ MEDICATION LOG**

Student:

Name of Designated Administrator(s) of Prescription/Non-Prescription Medication:

(Please refer to Form S.16(a) or S16(a1))

Teacher

Grade/Class

Week or Month of:

DATE	TIME	NAME OF PRESCRIPTION/ <del>NON</del> PRESCRIPTION MEDICATION	DOSAGE	INITIAL OF ADMINISTRATOR OF <del>-PRESCRIPTION</del> MEDICATION **	COMMENTS

PLEASE RECORD WHEN ~~-PRESCRIPTION~~ MEDICATION HAS NOT BEEN ADMINISTERED BECAUSE OF ABSENCE OR OTHER REASON

c.c. Office Medical Log Binder for current and following school year with S16a/S16a1

\*\* If you are not a named Administrator, please print name in the Comments Section



## YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Students</b>
<i>Policy Number</i>	<b>207</b>
<i>Former Policy Number</i>	
<i>Total Pages</i>	<b>5</b>
<i>Original Approved Date</i>	<b>April 18, 2006</b>
<i>Subsequent Approval Dates</i>	<b>October 29, 2013 September 25, 2018</b>

### ADMINISTRATION OF ORAL MEDICATION TO ELEMENTARY AND SECONDARY STUDENTS

#### 1. PURPOSE

The York Catholic District School Board recognizes that some students in schools, at the request of Parent(s)/Guardian(s), may require the administration of prescribed or non-prescribed oral medication during the school day. **Where it is medically necessary for students to take prescribed or non-prescribed oral medication while in attendance at school or during school-related activities (as indicated by health care professionals), parent(s)/guardian(s) and the individual schools will work together to facilitate the safe use and administration of such medication.**

#### 2. POLICY STATEMENT OBJECTIVE

**The objective of this policy is to establish a process for the administration of prescribed and non-prescribed medication to students**

#### 3. PARAMETERS

- 3.1 Parameters and responsibilities outlined in this policy shall be applied to the administration of oral prescribed **and non-prescribed** medication which must be provided during the school day as requested by the Parent(s)/Guardian(s) **and, if applicable, by a Physician or other Health Care Professional.**
- 3.2 Requests and authorization for the administration of oral prescribed **and non-prescribed** medication shall be made in writing by the Parent(s)/Guardian(s) **and, if applicable, by a Physician or other Health Care Professional** as follows:

##### **Elementary:**

- (i) YCDSB Form S16: Administration of Prescription or Non-Prescription Medication Parent/Guardian Consent Form
- (ii) YCDSB Form S16(a): Administration of Prescription or Non-Prescription Medication for Non-life Threatening Conditions

##### **Secondary:**

- (i) YCDSB Form S16: Administration of Prescription or Non-Prescription Medication Parent/Guardian Consent Form

(ii) YCDSB Form S16(a1): Secondary Administration of Prescription or Non-Prescription for Non-Life Threatening Conditions

- 3.2.1 Such requests shall specify the medication, the dosage, the frequency and method of administration, the dates for which the authorization applies and the notable side effects, if any.
- 3.3 Authorization in writing from the Parent/Guardian shall be kept on file in the school office.
- ~~3.4 All oral prescribed medication shall be provided to the school in the original tamper proof container with the dispensing pharmacy's label.~~
- 3.4 All oral prescribed medication must be provided in its original pharmaceutical container bearing the Physician's name, pharmaceutical label, directions for administering, date and Student's name.
- 3.5 All oral non-prescribed medication shall be provided to the school in the original tamper proof container labeled with the student's name.
- 3.6 All schools shall have a locked storage cabinet to keep oral medications safe and secure. Oral prescribed and non-prescribed medications that are in need of refrigeration shall be stored in a safe and secure location accessible only to those responsible for the overseeing of the administration of the medication.
- 3.7 A record of administration, herein named the Student Medication Log (Form S17), shall be maintained in the office by the staff responsible for these procedures. Form S17 shall include the student's name, date, time of provision, name of medication, column to identify prescription or non-prescription, expiry date of medication, dosage administered and name of the person overseeing the administration of such oral prescribed or non-prescribed medication.
- 3.8 Oral prescribed or non-prescribed medication shall be administered in a manner which allows for sensitivity and privacy. The student is encouraged to take a developmentally appropriate level of responsibility for the administration of his or her their oral medication.
- 3.9 Elementary students shall not be permitted to carry oral prescribed or non-prescribed medication with them unless the office is made aware in accordance with Section 4.5.2.
- 3.10 Secondary students shall be permitted to carry non-prescribed medication respective of their cognitive, emotional, social and physical stage of development, and capacity for self management.
- 3.11 All Students shall be permitted to carry oral prescribed medication with them for life-threatening medical conditions (i.e. Anaphylaxis, Diabetes, Asthma, or Epilepsy) only if the office is made aware in accordance with section 4.5.2.

- 3.12 Students with medication needs that are outside of the parameters of this policy shall have an individual emergency or health management plan developed by the school Administration in conjunction with the York Catholic District School Board Student Services Department.

#### **4. RESPONSIBILITIES**

##### **4.1 Director of Education**

- 4.1.1 To oversee compliance with the Administration of Medication to Elementary and Secondary School Students policy.

##### **4.2 Senior Administration**

- 4.2.1 To support Principals and Vice Principals with the implementation of and compliance with the Administration of Medication to Elementary and Secondary School Students policy.

##### **4.3 Principal**

- 4.3.1 To ensure that requests from Parent(s)/Guardian(s) are in writing [Form S16 and Form S16(a) for Elementary or S16(a1) for Secondary and signed by Parent(s)/Guardian(s), and, if applicable, by a Physician or other Health Care Professional.
- 4.3.2 To accept oral prescribed medication provided in its original pharmaceutical container bearing the Physician's name, pharmacy label, directions for administering, date and the student's name.
- 4.3.3 To accept oral non-prescribed medication provided in the original, tamper proof labelled container with the student's name.
- 4.3.4 To ensure that all Forms S16, S16(a), S16(a1) and S17 for the administration of oral non-prescribed and/or prescribed medication are kept within the vicinity of the medication.
- 4.3.5 To identify the staff member(s) who are willing to administer the oral non-prescribed and/or prescribed medication and ensure that any required training is provided for the safe administration or oversight of the administration of medication.
- 4.3.6 To discuss with the Parent(s)/Guardian(s) and document the student's ability and level of responsibility for self-administration of the oral non-prescribed and/or prescribed medication.
- 4.3.7 To ensure that the parameters of this policy are clearly understood and reviewed with staff members on an annual basis and implemented in a safe and caring manner.
- 4.3.8 To return to the Parent(s)/Guardian(s), in a secure manner, any unused or expired oral non-prescribed and/or prescribed medication when requested by the Parent(s)/Guardian(s), or when the treatment regime is complete or at the end of the school year, whichever occurs first.
- 4.3.9 To dispose of any unused or expired oral non-prescribed or prescribed medication left at school after the end of the school year in an environmentally safe manner, if not picked up by the Parent(s)/Guardian(s).

##### **4.4 School Staff**

- 4.4.1 To carry out the administration of oral non-prescribed and/or prescribed

medication as per the administration dosage and frequency specified if they have volunteered to assume this responsibility.

- 4.4.2 To supervise and observe the student while ~~he/she~~ **they** takes the oral non-prescribed **or prescribed medication**.
- 4.4.3 To transport all oral non-prescribed **and prescribed** medication in a safe and secure manner during school excursions. The medication shall be given as close as possible to the time **indicated on the S16a or S16a1 form and** that ~~it is ordered and~~ recorded on the Student Medication Log (S17) by the **designated administrator of medication**. ~~supervising teacher of the school excursion.~~

#### **4.5 Parents/Guardians**

- 4.5.1 To make every effort to have treatment **regimens** adjusted to avoid the administration of oral non-prescribed **and/or prescribed** medication during school hours.
- 4.5.2 To make requests for the administration of oral non-prescribed **and/or prescribed** medication in writing on Forms S16, S16(a) **for Elementary, and and S16(a1) for Secondary** as directed by the Principal.
- 4.5.3 To hand deliver the oral prescribed medication **in its original pharmaceutical container bearing the Physician's name, pharmacy label, directions for administering, date and the student's name** to the Principal or Vice Principal.
- 4.5.4 To hand deliver **to the Principal or Vice-Principal** the oral non-prescribed medication in the original tamper proof container **labeled with the student's name.** ~~to the Principal or Vice Principal.~~
- 4.5.5 To ensure that all oral non-prescribed **and/or prescribed** medication is up to date or replaced if expired or recalled.

### **5. DEFINITIONS**

#### **5.1 Oral Non-Prescribed Medication**

**For the purposes of this policy oral non-prescribed medication is that which is purchased over the counter and provided by the Parent(s)/Guardian(s) to be administered by mouth.**

#### **5.2 Oral Prescribed Medication**

For the purposes of this policy oral prescribed medication is that which is prescribed by a Physician or other Health Care Professional to be administered by mouth.

#### **5.3 School Day**

School Day means a day that is within a school year calendar, is in accordance with established bell times for entry and dismissal and is not a school holiday or professional activity day. The school day may extend beyond established bell times for entry and dismissal if the student is participating in a co-curricular activity or school related excursion

## 6. CROSS REFERENCES

### Legislation

*Policy/Program Memorandum No. 81: Provision of Health Support Services in School Settings.*

*Policy/Program Memorandum No. 161: Supporting Children and Students with Prevalent Medical Conditions (anaphylaxis, asthma, diabetes, and/or epilepsy) in schools.*

### YCDSB Policy

Policy 206: *Supporting Students with Prevalent Medical Conditions: Asthma*

Policy 208: *Student Disability Accommodation*

Policy 209: *Supporting Students with Prevalent Medical Conditions: Anaphylaxis*

Policy 213: *Supporting Students with Prevalent Medical Conditions: Diabetes*

Policy 224: *Supporting Students with Prevalent Medical Conditions: Epilepsy*

Policy 303: *School Organized and Continuing Education Excursions*

Policy 314: *Retreats*

Policy 610: *Cannabis, Electronic Cigarettes, Tobacco-A smoke-Free Environment*

### RELATED FORMS

YCDSB Form S16: Administration of Prescription or Non-Prescription Medication  
Parent/Guardian Consent Form

YCDSB Form S16(a): Elementary Administration of Prescription or Non-Prescription  
Medication for Non-Life Threatening Conditions

YCDSB Form S16(a1): Secondary Administration of Prescription or Non-Prescription  
Medication for Non-Life Threatening Conditions

YCDSB Form S17: Student Medication Log



## YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Students</b>
<i>Policy Number</i>	<b>212</b>
<i>Former Policy Number</i>	
<i>Total Pages</i>	<b>7</b>
<i>Original Approved Date</i>	<b>January 27, 2015</b>
<i>Subsequent Approval Dates</i>	<b>November 26, 2019</b>

### CONCUSSIONS

#### 1. PURPOSE

The York Catholic District School Board is committed to promoting awareness of safety in schools, **reducing the risk of injury**, and recognizes that the health and safety of students is essential for student learning and wellbeing. All partners in education have important roles to play in promoting student health and safety and in fostering and maintaining healthy and safe environments in which students can progressively Return to Learn/ Return to Play. **This policy supports the implementation of the Board's obligations under the Education Act and the direction of the Ministry of Education stated in Policy/ Program (PPM) 158, School Board Policies on Concussion.**

#### 2. POLICY STATEMENT OBJECTIVE

It is the policy of the York Catholic District School Board to reinforce the knowledge, skills, **management, training and attitudes protocol(s)** regarding concussion **and Second Impact Syndrome, as well as the** awareness, prevention **and** identification of signs and symptoms. ~~as well as Second Impact Syndrome, management and training, while making meaningful connections with the curriculum, where relevant.~~

#### 3. PARAMETERS

- 3.1 The Board shall implement the procedures related to concussion awareness, prevention, identification, management procedures and training.
- 3.2 The procedure shall be reviewed on an annual basis to ensure compliance with Ministry of Education directives.
- 3.3 The Board shall provide annual training to relevant school board employees, third-party providers and school volunteers based on their roles and responsibilities.
- 3.4 The Board shall report to the Ministry of Education upon implementation, and upon request thereafter, on the activities to achieve the expectations outlined in Policy/Program Memorandum No. 158.
- 3.5 The Board shall work with the York Region Public Health to develop and implement the Concussion policy and related procedures.



- 3.6 The York Catholic District School Board shall establish a Concussion Codes of Conduct for individuals participating in board-sponsored interschool sports.
- 3.6.1 The Concussion Code of Conduct will include the following requirements:
- (i) maintaining a safe learning environment;
  - (ii) teaching and/or learning and applying the rules of a physical activity/sport;
  - (iii) implementing the skills and strategies for a physical activity in a proper progression;
  - (iv) fair play and respect for all;
  - (v) acknowledging and respecting the consequences for prohibited play that is considered high-risk for causing concussions;
  - (vi) providing opportunities to discuss potential issues related to concussions;
  - (vii) recognizing and reporting concussions;
  - (viii) acknowledging the importance of communication between student, parents, school staff, and any sport organization with which the student is registered;
  - (ix) supporting the implementation of a Return to School Plan for students who have a concussion diagnosis;
  - (x) prioritizing a student's return to learning as part of the Return to School Plan.
- 3.7 The York Catholic District School Board will require the confirmation of the annual review of Concussion Awareness Resources and the Concussion Code of Conduct by the following individuals:
- (i) students participating in board-sponsored interschool sports;
  - (ii) parents/guardians of student under 18 years of age who are participating in board-sponsored interschool sports;
  - (iii) coaches participating in board-sponsored interschool sports;
  - (iv) team trainers participating in board-sponsored interschool sports;
  - (v) officials participating in board-sponsored interschool sports; and
  - (vi) volunteers participating in board-sponsored interschool sports.
- 3.8 The York Catholic District School Board will ensure that the approved Rowan's Law: Concussion Awareness Resources and the Concussion Codes of Conduct are made available and accessible for staff, students, parents/guardians and volunteers.
- 3.9 Where relevant, student learning about concussions shall be connected to the curriculum to further support awareness and prevention strategies among students.
- 3.10 The Board shall refer to OPHEA's Concussion and Protocol when developing the process for the identification of suspected concussions that occur during school activities, events or interschool sports.
- 3.11 The Board shall develop a Return to School Plan for students who have been diagnosed with a concussion, regardless of whether the concussion was sustained at school or elsewhere.
- 3.12 If a student who is recovering from a concussion is experiencing long-term difficulties that begin to affect learning, the Board shall establish processes for identifying and documenting instructional approaches and resources that may be required for responding to the student's ongoing learning needs.



- 3.13 In accordance with relevant privacy legislation, the Board shall establish a process to document and track a student's progress, from removal from an activity due to a suspected concussion, to the return, through graduated steps, to learning and to physical activity.
- 3.14 The Board will limit the collection, use, and disclosure of personal and health information to that which is reasonably necessary to carry out the Board's concussion identification procedures and Return to School Plan. Personal and health information collected by the Board shall be retained, disclosed, and disposed of in accordance with the Board's Records and Information Management Policy.

#### **4. RESPONSIBILITIES**

##### **4.1 Director of Education**

- 4.1.1 To oversee compliance with the Concussions policy and procedures.

##### **4.2 Superintendents of Education**

- 4.2.1 To support the implementation of the Concussions policy and procedures.

##### **4.3 Superintendent of Human Resource and International Education**

- 4.3.1 To provide Board Employees with the appropriate training for the implementation of the Concussions policy and procedures.

##### **4.4 Superintendent of Curriculum and Assessment**

- 4.4.1 To support schools with resources designed to encourage and support school participation through announcements, an assembly, lessons, and/or activities.

##### **4.5 Principals**

- 4.5.1 To ensure the implementation of the Concussions policy and procedures.
- 4.5.2 To provide Parent(s)/Guardian(s) with information about the prevention and awareness of concussions (Policy; Procedures: Appendix C).
- 4.5.3 To provide, on an annual basis, a review of the Concussions policy and procedures to School Staff, Catholic School Council, students on placements, volunteers, and any other individuals who have direct contact with students in the school to ensure familiarization with the policy and procedures.
- 4.5.4 To inform all school staff working directly with a student, that if a concussion is suspected they are to communicate to the student, that they shall not participate in any learning or physical activities until the Parent/Guardian communicates the written results of a medical examination to the school (Policy Procedures: Appendix C).
- 4.5.5 To inform all school staff who work with the student, or are responsible for the supervision of the student, the results of the written medical examination once confirmed by the Parent(s)/Guardian(s) with the school.
- 4.5.6 To share the accommodation request, if a concussion has been diagnosed, with the School Based Resource Team (SBRT) or Student Success Team (SST).
- 4.5.7 To ensure an appropriate Return to Learn / Return to Play plan (Form S30B: Student Disability Accommodation Plan) is developed and implemented to meet the students' academic needs in consultation with appropriate School staff or Board staff, if required.
- 4.5.8 To communicate the Return to Learn/Return to Play plan with the

- Parent(s)/Guardian(s).
- 4.5.9 To follow and implement the appropriate reporting procedures related to the stages of Return to Learn/Return to Play as outlined in the procedures.
  - 4.5.10 To file all written documentation related to the suspected concussion, medical examination and Return to Learn/Return to Play plan in the student's OSR for the academic life of the student.
  - 4.5.11 To ensure that documentation of a student concussion is recorded. ~~in Maplewood.~~

#### **4.6 Manager of Child Care Services**

- 4.6.1 To communicate the Concussions policy and procedures to Operators of Child Care, Extended Day and Before and After School Programs.

#### **4.7 Employees**

- 4.7.1 To participate in training that is conducted related to this policy and procedures as required.
- 4.7.2 To follow the appropriate reporting guidelines outlined in the procedures and Management of Concussion Process (Policy Procedures: Appendix C).
- 4.7.3 To be a collaborative partner in the development and implementation of the student's Return to Learn / Return to Play plan (Form S30B: Student Disability Accommodation Plan) as required.
- 4.7.4 To ensure accommodations are made in accordance with the student's Return to Learn / Return to Play plan (Form S30B: Student Disability Accommodation Plan).

#### **4.8 Parent(s)/Guardian(s)**

- 4.8.1 To comply with the "documentation of a medical examination", "Return to Learn / Return to Play" requirements outlined within the procedures of the Concussion policy.
- 4.8.2 To provide the Principal with the appropriate medical information diagnosed by a licensed Medical Doctor or Nurse Practitioner, to support the development of the Student Disability Accommodation Plan, whether the injury occurs during or outside of school sanctioned activities.
- 4.8.3 To ensure up-to-date current and accurate information is provided by a licensed Medical Doctor or Nurse Practitioner on an ongoing basis to the Principal when monitoring and managing the signs and symptoms of a diagnosed concussion.
- 4.8.4 To communicate with Child Care and/or Continuing Education program providers and provide the appropriate medical information by a licensed Medical Doctor or Nurse Practitioner if a concussion has been diagnosed.
- 4.8.5 To review the York Catholic District School Board's Concussion Code of Conduct.

#### **4.9 Students**

- 4.9.1 To demonstrate respect for the mutual safety of all persons when participating in physical activity.
- 4.9.2 To participate in all lessons and/or concussion training related to the awareness, prevention, identification and management procedures.
- 4.9.3 To inform the school staff of a suspected or diagnosed concussion occurring in or outside of the school.
- 4.9.4 To remove themselves from an activity if there are any signs or symptoms of a

- suspected concussion.
- 4.9.4 To report to school staff and/ or volunteer if signs or symptoms of a concussion are recognized by another student.
  - 4.9.5 To follow Return to Learn and Return to Play plan.
  - 4.9.6 To communicate concerns and challenges during the recovery process to the Principal, teachers, coach, parents/guardians, physician and other pertinent school staff.
  - 4.9.7 To review and adhere to the Concussion Code of Conduct.

## 5. DEFINITIONS

### 5.1. Concussion

- 5.1.1 A brain injury that causes changes in the way in which the brain functions and that can lead to **signs and symptoms** that can be physical **and emerge immediately or in hours or in days after the injury** (e.g., headache, dizziness), cognitive (e.g., difficulty with concentration or memory), emotional/behavioural (e.g., depression, irritability), and/or related to sleep (e.g., drowsiness, difficulty in falling asleep);
- 5.1.2 May be caused either by a direct blow to the head, face, or neck or by a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull;
- 5.1.3 Can occur even if there has been no loss of consciousness;
- 5.1.4 Cannot normally be seen by means of medical imaging tests, such as X-rays, standard computed tomography (CT) scans, or magnetic resonance imaging (MRI) scans.

### 5.2 Concussion Code of Conduct

Steps to prevent and minimize the risk of sustaining concussion (and other brain injuries) in schools and at off-site events.

### 5.3 Interschool Sports

Organized and Board sanctioned athletic competitions taking place between two or more schools.

### 5.4 Return to Learn

A four-step process to support/accommodate a student, as needed, when returning to the classroom after a concussion.

### 5.5 Return to Play

A six-step process to reintroduce a student to activities and/or athletics after a concussion.

### 5.6 Second Impact Syndrome

Second Impact Syndrome is a rare condition that causes rapid and severe brain swelling and often catastrophic results. This syndrome may occur if an individual suffers a second concussion before ~~he or she is~~ **they are** free from symptoms sustained from the first concussion.

### 5.7 Sign

Outward, observed and objective evidence of illness, injury or disease, i.e.: loss of consciousness, slurred speech, slowed reaction time.

## **5.8 Symptom**

Subjective and unseen symptoms can only be detected or sensed by the injured or ill party, i.e.: headache, difficulty concentrating and/or remembering, anxious, drowsy.

## **6. CROSS REFERENCES**

### **Legislation**

Ministry of Education, [\*Concussion Awareness Resources\*](#)  
[\*Municipal Freedom of Information and Protection of Privacy Act \(MFIPPA\)\*](#)  
[\*Ontario Human Rights Code \(OHRC\)\*](#)  
[\*Personal Health Information Protection Act \(PHIPA\)\*](#)  
[\*Rowan's Law\*](#)

### **YCDSB Policies**

[\*Policy 208 Student Disability Accommodation\*](#)  
[\*Concussion Code of Conduct for Athletes, Parents/Guardians, Coaches\*](#)

### **YCDSB Procedures**

[\*Procedure Concussions\*](#)

### **Additional References**

Crisis Response Manual  
[\*Policy/Program Memorandum No. 158: School Board Policies on Concussion\*](#)  
[\*OPHEA Guidelines Ontario Physical Education Safety Guidelines - Concussions\*](#)

## **POLICY TITLE: CONCUSSIONS SECTION B: GUIDELINES**

~~The Board's procedures, an addendum to this policy, is adapted from the Ontario Physical Education Safety Guidelines—Concussions and contains information related to the following components:~~

### **1. Development of Awareness**

- ~~1.1 Strategies for sharing information on the seriousness of concussions, and on concussion prevention, identification, and management with all board employees and school volunteers.~~
- ~~1.2 Provisions for making connections with the curriculum, where applicable.~~

### **2. Prevention**

- ~~2.1 Strategies for preventing and minimizing the risk of sustaining concussions (and other head injuries) in schools and at off site school events.~~

### **3. Identification**

- ~~3.1 Information on the safe removal of an injured student from activity (for example, initial emergency response strategies following a blow to a student's head, face, or neck, or a blow to a student's body that transmits a force to the student's head);~~
- ~~3.2 Initial concussion assessment strategies (for example, a checklist of common symptoms and signs of a concussion); and,~~
- ~~3.3 Steps to take following an initial assessment~~

### **4. Management Procedures for a Diagnosed Concussion**

- ~~4.1 Information on the development of an individualized and gradual "Return to Learning and/or Return to Play" plan for every student with a diagnosed concussion; and,~~
- ~~4.2 Established processes for identifying and documenting instructional approaches and resources that may be required for responding to student's ongoing learning needs (for example, individualized classroom accommodations) for students experiencing long-term difficulties.~~

### **5. Training**

- ~~5.1 Strategies for providing annual training on concussion awareness, prevention, identification, and management to relevant board employees.~~
- ~~5.2 When developing these strategies, the board should consider basing the timing and intensity of training on staff roles and responsibilities.~~



## **York Catholic District School Board**

### **PROCEDURE: CONCUSSIONS**

**ADAPTED FROM: ONTARIO PHYSICAL AND HEALTH EDUCATION  
ASSOCIATION SAFETY GUIDELINES**

**Addendum to: Policy 212 Concussions**

Effective: Effective: January 2015  
Updated: September 2019 (Parent's Pathway revised)  
Review January 2020

## PURPOSE

These procedures are designed in conjunction with Policy 212: *Concussions* and outlines the process for developing an awareness of the signs and symptoms of a concussion, the prevention of concussions, the identification of a suspected concussion as well as the ongoing monitoring and management of a student with a diagnosed concussion.

Prior to participating in any board-sponsored interschool sports the [Concussion Code of Conduct Athletes, Parents/Guardians and Coaches](#) must be reviewed and signed accordingly.

These procedures are also cross referenced with Policy 208: *Student Disability Accommodation* which outlines processes to support a student with a diagnosed brain injury, of which concussion is one type.

### 1. Development of Awareness

Awareness of the signs and symptoms of a concussion and knowledge of how to properly manage a diagnosed concussion is critical in a student's recovery and is essential in helping to prevent the student from returning to learning or physical activities too soon and risking further complications. Ultimately, this awareness and knowledge could help contribute to the student's long-term health and academic success.

Resources and annual training will be provided under the direction of the Superintendent of Curriculum and Assessment to ensure the appropriate implementation of this Policy and Procedures. Please review the [Concussion Awareness Resources](#) by the Ministry of Education.

### 2. Prevention

Any time a student is involved in physical activity there is a chance of sustaining a concussion. Therefore, it is important to take a preventative approach encouraging a culture of safety mindedness when students are physically active.

#### 2.1 All School Staff who have direct and ongoing contact with students shall:

- 2.1.1 Be knowledgeable about *Policy 212: Concussions* and the procedures for the prevention, identification and management (return to learn and return to play) of student concussions.
- 2.1.2 Attend training sessions on concussion prevention or identification as required.
- 2.1.3 Be knowledgeable about safe practices for sports/activities, i.e.: rules and regulations pertaining to the specific sport or physical activity; relevant/pertinent "activity" pages in the [Ontario Physical Activity Safety Standards in Education](#)
- 2.1.4 Distribute and collect completed Admin 72: *Informed Consent/Permission Form for Sports Team* as required which includes Concussion Guidelines for Parents/Guardians and Caregivers (**Appendix A**).
- 2.1.5 Complete the Admin 73: *Informed Consent/Permission For Education Trips - Elements of Risk: Activity Specific* form as required (**Appendix B**).
- 2.1.6 Review the York Catholic District School Board's Concussion Code of Conduct.

### 3. Identification Procedures for Suspected Concussion

#### 3.1 Safe Removal of an Injured Unconscious Student

Follow Accident/Personal Injury - School Guidelines included in the YCDSB Crisis Response Manual

##### 3.1.1 When a serious accident occurs it is essential that:

- (a) an ambulance should be called if considered necessary;
- (b) the injured person is immobilized;
- (c) where practical, someone should remain with the injured person and send a messenger for assistance;
- (d) every care of the injured person be taken;



- (e) the Principal **should** communicate promptly with the Parent(s)/Guardian(s), or next of kin;
  - (f) the Board's Insurance/Risk Management Administrator and Health & Safety Manager be notified immediately.
- 3.1.2 **In the case of a student, where it is impossible to contact the Parent(s)/Guardian(s) immediately:**
  - (a) it is the duty of the Principal to obtain prompt medical aid for the pupil;
  - (b) it should be made clear to the physician that the principal is acting for the Parent(s)/Guardian(s);
  - (c) continued efforts should be made to communicate with the Parent(s)/Guardian(s).
- 3.1.3 **In the case of students, an up-to-date record (S2 Contacts/Emergency & Consent Form)** of the following information shall be available in each school office. All school personnel need to be aware of the exact location of this data:
  - (a) contact information of the Parent(s)/Guardian(s) both for home and for places of business;
  - (b) alternate contact and telephone number in case Parent(s)/Guardian(s) cannot be reached;
  - (c) name and telephone number of family physician.
- 3.14 **It is recommended that, to avoid unnecessary delay** injured persons be taken directly to the emergency ward of the nearest hospital accompanied by a member of staff or appropriate guardian. The Contacts/Emergency & Consent Form should accompany the student to the hospital. The person accompanying the student should remain with the student until the Parent(s)/Guardian(s) arrives. The Management of Concussion Form (Appendix C) should accompany **the** student to the hospital.
- 3.1.5 **Reports on accidents which occur on school premises** should be sent promptly to the Insurance/Risk Management Administrator - Corporate Services on an S3 *OSBIE Report Form* filed online.
- 3.2 **Safe removal of a student who has sustained a direct blow to the head, face or neck or by a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull and has not lost conscious;**
  - 3.2.1 Remove student from activity or game immediately
  - 3.2.2 Monitor student for signs and symptoms –Concussion Management (Appendix C)
  - 3.2.3 Student must not return to activity/game (second impact syndrome)
- 3.3 **Steps to take following initial assessment**
  - 3.3.1 Do not leave the student alone
  - 3.3.2 Monitor student for worsening signs and symptoms, if they worsen call 911 immediately and follow Identification Procedures for Suspected Concussion listed above.
  - 3.3.3 Signs or symptoms of concussion present: Contact the Parents/Guardians and have them seek medical attention immediately – give Parents/Guardians the Concussion Management package (Appendix C)

### **Signs and Symptoms of Concussion**

Signs and symptoms can appear immediately after the injury or may take hours or days to emerge. Signs and symptoms may be different for everyone. A student may be reluctant to report symptoms because of a fear that ~~s/he~~ **they** will be removed from the activity, ~~his/her~~ **their** status on a team or in a game could be jeopardized or academics could be impacted. Students should be encouraged to report any signs and/or symptoms of a suspected concussion immediately to school staff and ~~his/her~~ **their**



#### 4. Management Procedures for a Diagnosed Concussion

##### 4.1 Return to Learn

- 4.1.1 Concussion signs and symptoms can create a variety of challenges to learning that can affect overall school performance (**Concussion Management Appendix C**).
- Cognitive** symptoms may lead to difficulty with learning, including lack of attention and distractibility.
  - Physical** symptoms such as headache, light and/or noise sensitivity may impair the effectiveness of learning.
  - Emotional** control issues may lead to irritation, agitation or feeling overwhelmed.
- 4.1.2 Continue to monitor student signs and symptoms. Report any changes in the student's ability to participate in learning / physical activity to the Principal and Parents/Guardians in order to determine if the student's Return to Learn/Return to Play Plan (Student Disability Accommodation Plan Appendix D) is in need of revision.
- 4.1.3 In consultation with the student's Parent(s)/Guardian(s) and supported by the student's physician or Nurse Practitioner, accommodations may be decreased and/or removed gradually.

##### 4.2 Return to Learn - Students should be symptom-free for 24 hours to move from one stage to the next. Symptom-free means **NO** lingering headaches, sensitivity to light/noise, fogginess, drowsiness, etc.

	Recovery Stage	Activity Level	Objective of Stage
1.	Complete physical and cognitive rest until medical clearance	<ul style="list-style-type: none"><li>• No school</li><li>• Strict limits on technology usage</li><li>• Rest</li></ul>	<ul style="list-style-type: none"><li>• Return to school with academic accommodations</li></ul>
2.	Return to school with academic accommodations	<ul style="list-style-type: none"><li>• Continue technology limits</li><li>• Avoid heavy backpacks</li><li>• No tests, Physical Education, band or chorus</li><li>• Rest at home</li></ul>	<ul style="list-style-type: none"><li>• Continue academic accommodations</li></ul>
3.	Continue academic accommodations	<ul style="list-style-type: none"><li>• Attend school full time, if possible</li><li>• Increase workload gradually monitor symptoms</li><li>• Incorporate light aerobic activity</li><li>• Rest at home</li></ul>	<ul style="list-style-type: none"><li>• Full recovery to academics</li></ul>

4.	Full recovery to academics	<ul style="list-style-type: none"> <li>• Attend school full-time</li> <li>• Self-advocate in school</li> <li>• Resume normal activities</li> <li>• Resume sports following graduated Return to Play</li> </ul>	<ul style="list-style-type: none"> <li>• Full recovery</li> </ul>
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### 4.3 Return to Play

With each stage, the student can continue to the next stage if asymptomatic at the current level. **Each stage should take approximately 24 hours** or more, so the full return to play should take no less than 1 week. If symptoms arise during the stages of the protocol, the Principal will contact the Parent(s)/Guardian(s) to discuss observations and/or reported behaviour to determine if the student should move back to the last asymptomatic level and try to progress again after a **24 hour rest period**.

	Rehabilitation Stage	Functional Exercise at each Stage	Objective of Stage
1.	No Activity	Complete physical and cognitive rest	Recovery
2.	Light Aerobic Exercise	Walking, swimming or stationary cycling, low intensity; no resistance training	Increase heart rate
3.	Sport-specific exercise	Skating drills in hockey, running drills in soccer, no head impact activities	Add movement
4.	Non-contact Training	Progression to more complex training drills, may start progressive resistance training	Exercise, coordination and cognitive load
5.	Full Contact Practice	Following medical clearance, participate in normal training activities	Restore confidence and assess function skills by coaching staff
6.	Return to Play	Normal Game Play	

## 5. Training

Annual training will be provided for employees and school volunteers who have ongoing and direct contact with students to develop an awareness of the signs and symptoms of a suspected concussion, as well as gain knowledge related to the prevention, identification and management of a concussion.

Resources for staff training will be provided under the direction of the Superintendent of Curriculum and Assessment. Training for employees and volunteers include, but is not limited to, face-to-face in-services, on-line tutorials and curriculum resource packages for teachers to support the implementation of this Policy and procedures.

## 6. Emergency Response

“Emergency” is defined by the Health Care Consent Act, 1996 to include a situation where the individual is experiencing severe suffering, or is at risk of sustaining serious bodily harm, if the treatment is not administered promptly. All staff are required to be trained annually in the emergency response to a suspected or diagnosed concussion.

- a. **Suspected Concussion:** An emergency relating to a suspected concussion could be the result of an event, either witnessed or reported, that may have caused a jarring impact to the head, face, neck or body that caused the brain to move rapidly within the skull.

Generally, in the event of an emergency, staff shall:

- (i) Remove the student immediately from the activity or sport, if this can be done safely. The student is not to return to play, even if they indicate they are feeling better. If there is loss of consciousness, do not attempt to move the student.
- (ii) Initiate the Suspected Concussion Form (Appendix C)
- (iii) Red Flag Signs or Symptoms:  
Suspect a concussion if one or more signs or symptoms present (i.e. deteriorating conscious state, double vision, increasingly restless, agitated or combative, loss of consciousness, neck pain or tenderness, seizure or convulsion, severe or increasing headache, vomiting, weakness or tingling/burning in arms or legs)
  - Call 9-1-1 immediately
  - Remain with the student until Emergency Medical Services (EMS) and/or parent(s)/guardian(s) arrives, and document any physical, cognitive or behavioural changes in this time.
  - Recommend the student be transported to the hospital by ambulance and provide a copy of the Suspected Concussion Form to EMS.
  - Call, or direct another adult to call, the parent(s)/guardian(s) to inform them of the event and the location of the hospital.
  - Inform parent(s)/guardian(s) that student requires an emergency medical examination.
- (iv) Other Signs or Symptoms:  
Suspect a concussion if one or more other signs or symptoms present (i.e. balance, gait difficulties, motor incoordination, stumbling, slow laboured movements, blank or vacant look, disorientation or confusion, or an inability to respond appropriately to questions, facial injury after head trauma, Lying motionless on the playing surface, slow to get up after a direct or indirect hit to the head)
  - Call, or direct another adult to call the parent(s)/guardian(s) to inform them of the event and that the student requires to be picked up and taken for an urgent medical examination by a physician or nurse practitioner.
  - If any signs or symptoms worsen, and EMS has not already been called, call 9-1-1. Recommend the student is transported to the hospital by ambulance.
  - Provide the Suspected Concussion Form to the parent(s)/guardian(s) or EMS, as applicable.
- (v) No Signs or Symptoms:
  - Call, or direct another adult to call, the parent(s)/guardian(s) to inform them of the event and that the student requires a minimum of 24 hours of monitoring.
  - Student may remain at school but cannot participate in any physical activity, including outdoor nutrition break activities.
  - Inform relevant staff of the event and provide the Suspected Concussion Form for monitoring.
  - Provide the Suspected Concussion Form to the parent(s)/guardian(s) for

- monitoring after school hours.
  - Advise parent(s)/guardian(s) the student must be seen by a physician or nurse practitioner if signs or symptoms develop.
  - Advise the student and/or parent(s)/guardian(s) that the student may not operate a motor vehicle, ride the bus and/or walk home alone.
- (vi) Communicate with parent(s)/guardian(s) and ensure the process for concussion identification, using the Suspected Concussion Form, is understood and followed.
- (vii) Inform the principal of the event and emergency response.
- (viii) Advise parent(s)/guardian(s) the student should remain at home pending the outcome of a medical examination and/or the subsiding of signs or symptoms.
- (ix) File the completed Suspected Concussion Form in the student's Health Management Plan.

## **7. Liability**

The Good Samaritan Act, passed in 2001, protects individuals from liability with respect to voluntary emergency medical or first aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

2. (1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in acting or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.

(2) Subsection (1) applies to, ... (b) an individual... who provides emergency first aid to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides assistance at the immediate scene of the accident or emergency.

## **8. Cross References**

### **Legislation**

[Education Act, R.S.O. 1990, c. E.2., 27.1 Subsection 8\(1\)](#)

[Policy/Program Memorandum 158, School Board Policies on Concussion, Ministry of Education](#)

[Ontario Physical Activity Safety Standards in Education, 2019](#)

[Rowan's Law: Concussion Awareness Resources, Government of Ontario](#)

York Catholic District School Board  
**INFORMED CONSENT/PERMISSION FORM FOR SPORTS TEAMS**

\_\_\_\_\_ School is arranging to have its  
\_\_\_\_\_ team participate in a variety of exhibition  
(name of Sports Team, eg., Intermediate Boys' Volleyball Team)

games/matches and tournaments during the months of: \_\_\_\_\_, 20  
(list the months; i.e.: from October to December)

Cost per student \$ \_\_\_\_\_ (Please attach a cheque payable to the name of the school)

Cost covers \_\_\_\_\_

**THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE, AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.**

**ELEMENTS OF RISK:**

Educational activity programs, such as participation in this team sport involve certain elements of risk. Falls, collisions and other incidents may occur, causing injury. The following list includes, but is not limited to, examples of the types of injury which may result from participating in \_\_\_\_\_

(describe sport)

1. **Bumps & bruising; muscle sprain & strain**
2. **Fainting; shortness of breath; dehydration**
3. **Cuts & scrapes; broken bones; dental injuries**
4. **Head, neck and back injuries**
5. **Concussion**

The risk of sustaining these types of injuries result from the nature of the activity and can occur without any fault of either the student, or the school board, its' employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured. The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity. If you choose to participate in this team sport during the months of indicated above, ~~you must understand that you bear the~~ **be advised you accept full** responsibility for any injury that might occur.

The York Catholic District School Board does not provide accidental death, disability, dismemberment or medical expense insurance on behalf of the students participating in this activity.

**POLICY 212: CONCUSSIONS:**

**Policy 212: Concussions** will be followed if a student has sustained a hit or blow to the head or body and shows signs or symptoms of concussion. Management of concussion is key to supporting the student during recovery. Please be advised that your ~~son or daughter~~ **child** will be asked to seek medical attention if signs and symptoms of concussion arise. You are advised to view the Ministry of Education's approved and recommended resources link, <https://www.ontario.ca/page/rowans-law-concussion-awareness-resources> ~~and to view Dr. Evans YouTube video with your son or daughter~~ **child** [http://www.youtube.com/watch?v=\\_55YmbIG9YM](http://www.youtube.com/watch?v=_55YmbIG9YM).

**ACKNOWLEDGEMENT:**

- **WE HAVE READ THE ABOVE REGARDING: 1) ELEMENTS OF RISK AND 2) POLICY 212: CONCUSSIONS**
- **WE HAVE ALSO DISCUSSED THE SIGNS AND SYMPTOMS OF CONCUSSION AND MANAGEMENT OF CONCUSSION WITH OUR CHILD BASED ON CONCUSSION GUIDELINES FOR PARENTS & CAREGIVERS AND/OR DR. EVANS YOUTUBE VIDEO.**
- **WE UNDERSTAND THAT PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.**

Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

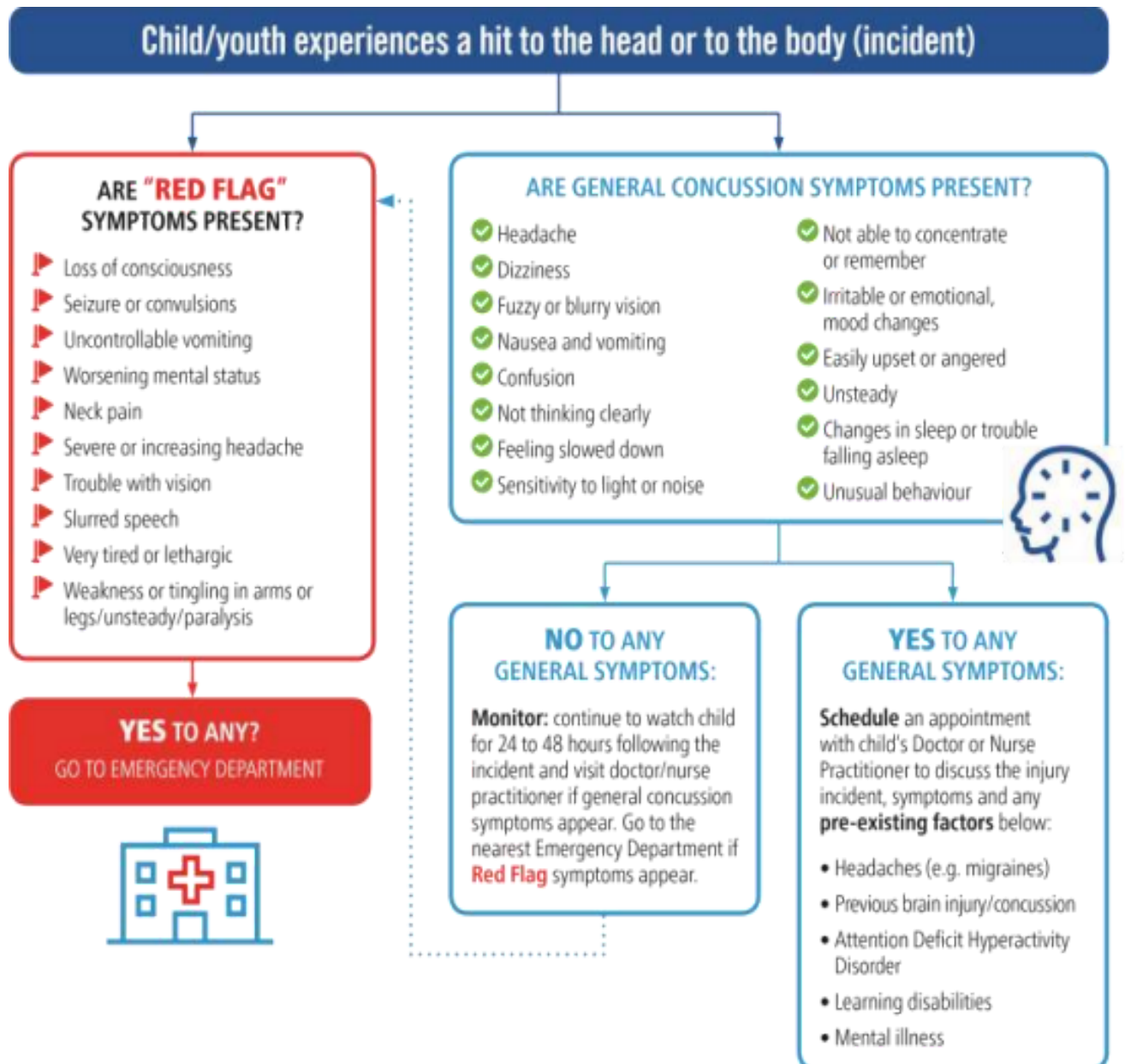
**PERMISSION**

I give \_\_\_\_\_ permission to participate on the \_\_\_\_\_  
(name of Team, e.g., Intermediate Boys' Volleyball Team)

Team in a variety of exhibition games/matches and tournament during the months of: \_\_\_\_\_, 20  
(list the months; e.g., from October to December)

# PARENT'S PATHWAY FOR CHILD AND YOUTH CONCUSSION

FOR USE BY PARENTS AND CAREGIVERS | APPROPRIATE FOR AGES 5 TO 18 YEARS Every child/youth suspected of a concussion should be seen by a medical doctor or nurse practitioner



## MANAGING YOUR CHILD'S CONCUSSION RECOVERY

**Rest** is most important for the first 24 to 48 hours. Following the 24 hour period of rest, encourage light activity only as tolerated.

**Get informed** about concussion injury recovery:

- Check for symptom changes regularly (at least once a day)
- Child will need physical and mental rest with regular naps and sleep
- Limit activities that require concentration like reading, computer use, video gaming, playing musical instruments and driving if applicable

**Tell** the child's school if a concussion is suspected or diagnosed. School boards have concussion policies to manage students with a concussion. Coaches, trainers and activity leaders outside of school also need to be informed.

**Return to Doctor/Nurse Practitioner** if general concussion symptoms last more than one to two weeks to reassess and monitor for any signs of ongoing, persistent symptoms. Ask for a referral to a concussion specialist if symptoms last more than four weeks.

**Return to learn and play:** Children and youth should not return to play or activities until they have successfully returned to school.

**If child has pre-existing factor(s):**

**Be aware** that recovery may take longer — weeks to months

**Watch** for anxiety, depression and risky behaviour and, where necessary, immediately seek referral for mental health services

**Monitor** closely and take child to a concussion specialist if symptoms last for more than four week

## BRAIN INJURY MANAGEMENT SUPPORT SERVICES IN YORK REGION

### Emergency Room Departments

#### TRIAGE, TREATMENT, ADMITTANCE AND REFERRAL

##### **Mackenzie Health:**

10 Trench Street, Richmond Hill. Tel: 905-883-1212

##### **Mackenzie Health Urgent Care Centre:**

9401 Jane Street, Vaughan Tel: 905-832-4554

##### **Markham-Stouffville Hospital:** 381

Church Street, Markham. Tel: 905-472-7000

##### **Southlake Regional Health Centre:** 596

Davis Drive, Newmarket. Tel: 905-895-4521

### Finding Concussion Programs

#### **Holland Bloorview Kids Rehabilitation Hospital**

##### **Concussion Clinical Services** (18 years and under)

[hollandbloorview.ca/programsandservices/Concussioncentre/Concussionservices](http://hollandbloorview.ca/programsandservices/Concussioncentre/Concussionservices)

##### **Canadian Academy of Sport and Exercise Medicine**

(Sport-related concussion) [casem-acmse.org/physiciandirectory/find-a-sport-medicine-doctor](http://casem-acmse.org/physiciandirectory/find-a-sport-medicine-doctor)

### Return to Learn/Return to Play

#### SCHOOL BOARD POLICIES AND RESOURCES FOR

#### MANAGING

#### STUDENTS WITH CONCUSSION

York Region District School Board

[yrdsb.ca/Parents/Pages/concussion-Management.aspx](http://yrdsb.ca/Parents/Pages/concussion-Management.aspx)

York Catholic District School Board Policy 212 – Concussions

[drive.google.com/file/d/0B0-HXDw45sKAVkNhX1hsVVFgVVE/view](https://drive.google.com/file/d/0B0-HXDw45sKAVkNhX1hsVVFgVVE/view)

### Resources

#### **York Region Public Health**

Injury prevention resources, including

concussion [york.ca/concussion](http://york.ca/concussion)

#### **Holland Bloorview Kids: Concussion Handbook for Parents and Kids**

Resource to help with concussion management and recovery

[hollandbloorview.ca/programsandservices/Concussioncentre/Concussioneducation/Handbook](http://hollandbloorview.ca/programsandservices/Concussioncentre/Concussioneducation/Handbook)

#### **Concussion Awareness Training**

**Tool** Online course [cattonline.com](http://cattonline.com)

#### **Ontario Government Concussion Web Portal**

Resources for students, parents, educators and coaches

[ontario.ca/concussions](http://ontario.ca/concussions)

#### **Parachute** Concussion

resources

[parachutecanada.org/concussion](http://parachutecanada.org/concussion)

#### **Ontario Brain Injury Association (OBIA)**

Support for people living with the effects of acquired brain injury (ABI) [obia.ca](http://obia.ca)



York Catholic District School Board

**INFORMED CONSENT/PERMISSION FOR EDUCATION TRIPS ELEMENTS OF RISK: ACTIVITY SPECIFIC**

(name of school) \_\_\_\_\_, \_\_\_\_\_  
(description of activity and dates)

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE, AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.

**ELEMENTS OF RISK:**

Educational activity programs, such as involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury which may result from participating in :

(describe activity)

1.	Concussion
2.	
3.	
4.	

The risk of sustaining these types of injuries result from the nature of the activity and can occur without any fault of either the student, or the school board, its employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured.

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

The York Catholic District School Board does not provide accidental death, disability, dismemberment or medical expense insurance on behalf of the students participating in this activity. If you do not have this type of coverage, you may purchase Student Accident Insurance through the Board's provider at [www.insuremykids.com](http://www.insuremykids.com), or by calling toll free at 1-800-463-5437.

**ACKNOWLEDGEMENT:**

**WE HAVE READ THE ABOVE. WE UNDERSTAND THAT IN PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.**

Signature of Student:	Date:
Signature of Parent/Guardian:	Date:

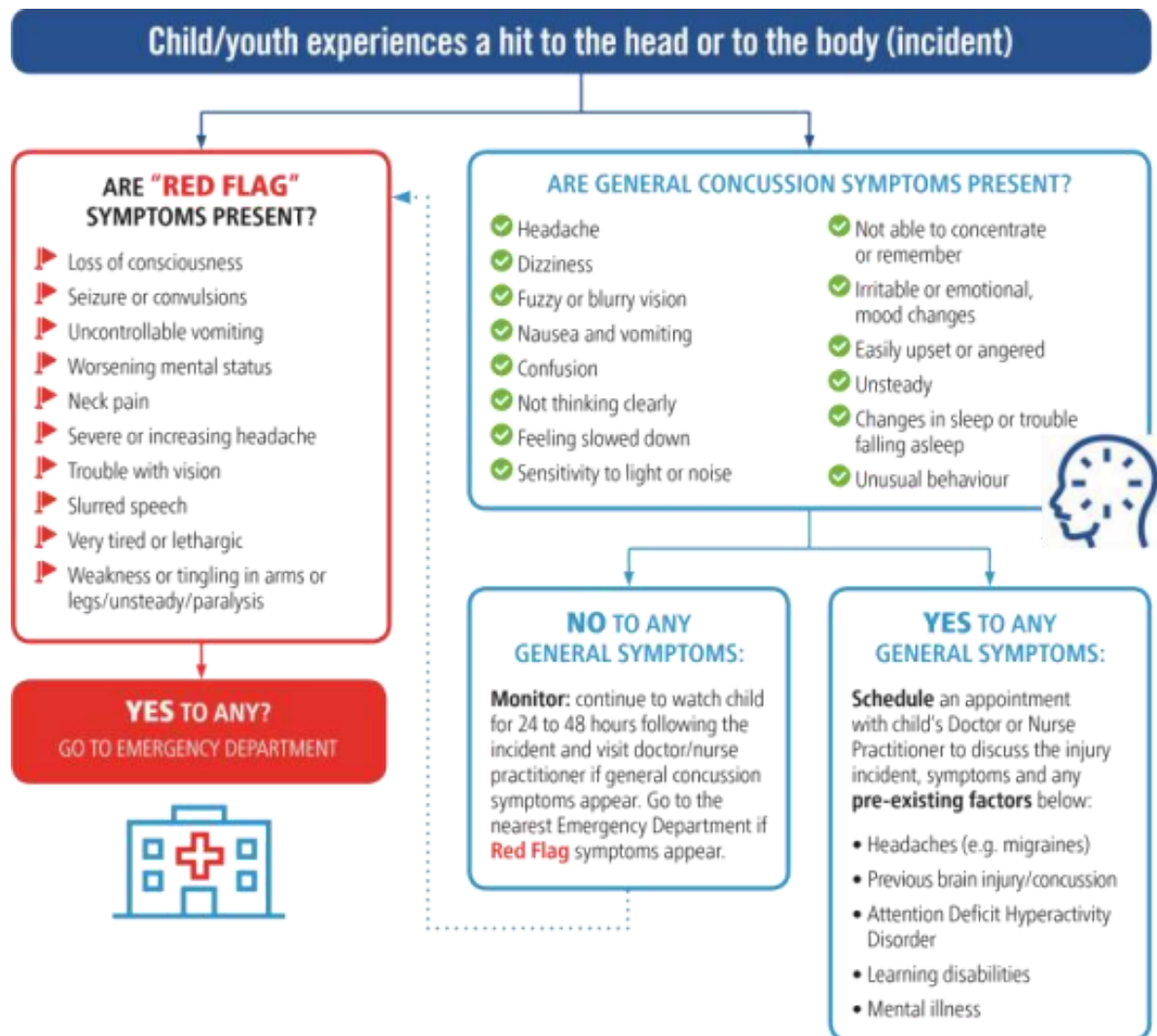
**PERMISSION:**

I give _____ permission to participate in the _____ (name of student) (description of activity)	
To be held on or about _____ (date).	
Signature of Parent/Guardian _____ _____ (Students Under 18 Years)	Date: _____



# PARENT'S PATHWAY FOR CHILD AND YOUTH CONCUSSION

FOR USE BY PARENTS AND CAREGIVERS | APPROPRIATE FOR AGES 5 TO 18 YEARS Every child/youth suspected of a concussion should be seen by a medical doctor or nurse practitioner



**PUBLIC HEALTH**  
1-877-464-9675  
TTY: 1-866-512-6228  
[york.ca/concussion](http://york.ca/concussion)

19-5388



## MANAGING YOUR CHILD'S CONCUSSION RECOVERY

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#### Canadian Academy of Sport and Exercise Medicine

(Sport-related concussion) [casem-acmse.org/physician/directory/find-a-sport-medicine-doctor](http://casem-acmse.org/physician/directory/find-a-sport-medicine-doctor)

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York Region District School Board

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York Catholic District School Board Policy 212 – Concussions  
[drive.google.com/file/d/0B0-HXDw45sKAVkNhX1hsVVFgVVE/view](https://drive.google.com/file/d/0B0-HXDw45sKAVkNhX1hsVVFgVVE/view)

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[york.ca/concussion](http://york.ca/concussion)

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Resource to help with concussion management and recovery  
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Resources for students, parents, educators and coaches  
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#### Parachute Concussion

resources  
[parachutecanada.org/concussion](http://parachutecanada.org/concussion)

#### Ontario Brain Injury Association (OBIA)

Support for people living with the effects of acquired brain injury (ABI) [obia.ca](http://obia.ca)

## York Catholic District School Board Concussion Management Student Medical Clearance following Suspected Concussion

\_\_\_\_\_ has demonstrated signs of a concussion and  
(Student Name)

according to York Catholic District School Board *Policy 212: Concussions* and related *Procedure* must be seen by a physician or Nurse Practitioner prior to returning to play and to establish the need for return to learn accommodations.

### Stage 1: Identification

#### RESULTS OF INITIAL MEDICAL EXAMINATION

- ☐ **NO** concussion has been diagnosed (**Student resumes normal learning and physical activity routines**)
- ☐ Concussion **HAS** been diagnosed and therefore the student must begin medically supervised, individualized and gradual return to learn/return to play Procedures (**below**).

### Stage 2A: Management of Return to Learn (Limitations)

### Stage 2B: Management of Return to Play (Limitations)

\_\_\_\_\_  
(Physician/Nurse Practitioner Name - Please Print)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Physician/Nurse Practitioner Signature)

\_\_\_\_\_  
(Date)

Students should be symptom free for 24 hours to progress to the next stage, see pg.3 (Attach any documentation received from the Physician/Nurse Practitioner to this form) Copy to Student's O.S.R.

**Stage 3 Clearance: Light**

Aerobic Exercise and Sport-Specific Exercise

## APPENDIX C

I, \_\_\_\_\_ Parent/Guardian of \_\_\_\_\_

confirm that they continue to be symptom free and is able to progress to Stage 3 Clearance: Light Aerobic Exercise (rehabilitation stage #2) and Sport-Specific Exercise (rehabilitation stage #3) at school.

\_\_\_\_\_  
(Parent/Guardian or Student over 18 Signature)\_\_\_\_\_  
(Date)**Stage 4 Clearance: Non-Contact Training**

I Parent/Guardian of

(Parent/Guardian or Student over 18 Name) (Student Name)

confirm that (s)he continues to be symptom free and is able to progress to Stage 4 Clearance: Non-Contact Training (rehabilitation stage #4) at school.

(Parent/Guardian or Student over 18 Signature) (Date)

Stage 5 Clearance: Full Contact Practice

I, have examined (Physician/Nurse Practitioner Signature) (Student Name)

and confirm (s)he continues to be symptom free and is able to transition to Stage 5- Full Contact Practice, followed by Stage 6- Normal Game Play, provided (s)he remains symptom free.

(Physician/Nurse Practitioner Signature) (Date)

(Attach any documentation received from the Physician/Nurse Practitioner to this form)

Copy to Student's O.S.R

Students should be symptom free for 24 hours to progress to the next stage.

RETURN TO LEARN PROTOCOL		
Recovery Stage	Activity Level	Objective of Stage
1. Complete physical and cognitive rest until medical clearance	<ul style="list-style-type: none"> <li>• No school</li> <li>• Strict limits on technology usage</li> <li>• Rest</li> </ul>	Return to school with academic accommodations
2. Return to school with academic accommodations	<ul style="list-style-type: none"> <li>• Continue technology limits •</li> <li>Avoid heavy backpacks</li> <li>• No tests, PE, band or chorus, shop/tech</li> <li>• Rest at home</li> </ul>	Continue academic accommodations
3. Continue academic accommodations	<ul style="list-style-type: none"> <li>• Attend school full time, if possible</li> <li>• Increase workload gradually</li> <li>• Monitor symptoms</li> <li>• Incorporate light aerobic activity</li> <li>• Rest at home</li> </ul>	Full recovery to academics
4. Full recovery to academics	<ul style="list-style-type: none"> <li>• Attend school full time</li> <li>• Self- advocate in school</li> <li>• Resume normal activities</li> <li>• Resume sports following graduated Return to Play</li> </ul>	Full recovery
RETURN TO PLAY PROTOCOL		
Rehabilitation Stage	Functional Exercise at each Stage	Objective of Stage
1. No Activity	Complete physical and cognitive rest	Recovery
2. Light Aerobic Exercise	Walking, swimming or stationary cycling low intensity; no resistance training	Increase heart rate
3. Sport-Specific Exercise	Skating drills in hockey, running drills in soccer, no head impact activities	Add movement
4. Non-Contact Training	Progression to more complex training drills, may start progressive resistance training	Exercise, coordination and Cognitive load
5. Full Contact Practice	Following medical clearance, participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6. Return to Play	Normal Game Play	

# YORK CATHOLIC DISTRICT SCHOOL BOARD

## STUDENT DISABILITY ACCOMMODATION PLAN

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

Student Number: \_\_\_\_\_

School: \_\_\_\_\_

Objectives	Action	Person Responsible for Actions	Who needs to be aware of Action	Review Date	Updates

### Freedom of Information

Personal information contained on this form is collected pursuant to the *Education Act* and the *Municipal Freedom of Information and Protection of Privacy Act*. Questions about the collection and the use of this personal information should be directed to the Freedom of Information Coordinator, York Catholic District School Board, 320 Bloomington Rd. W., Aurora, Ontario, L4G 3G8 or (905) 713-2711.

Place Copy in Student O.S.R. (Ontario Student Record)

cc:Parent/Guardian

## YORK CATHOLIC DISTRICT SCHOOL BOARD

### SAMPLE ACCOMMODATIONS FOR STUDENTS WITH CONCUSSIONS

#### Cognitive

- Concentrate first on general cognitive skills, such as flexible thinking and organization, rather than academic content.
- Focus on what the student does well and expand the curriculum to more challenging content as concussion symptoms subside.
- Adjust students' schedules as needed to avoid fatigue: shorten days, schedule challenging classes when student is most alert, allow for rest breaks, and reduce course load.
- Adjust the learning environment to reduce identified distractions or protect the student from irritations such as 'too bright' light or loud noises.
- If appropriate, use self-paced, computer-assisted, or audio learning systems for the students having difficulty with reading comprehension.
- Allow extra time for test/assignment completion.
- Assist the student with organizational strategies (e.g., daily organizer).
- Provide students with lesson notes.
- Allow increased repetition to support student learning.
- Break assignments down into smaller chunks and offer recognition cues.
- Provide alternate methods for students to demonstrate learning, such as multiple-choice or allowing for oral responses.
- Develop a Student Disability Accommodation Plan (SE30) where required.

#### Behaviour/Social/Emotional

- If a student is frustrated with failure in one area, redirect him/her them to other elements of the curriculum associated with success.
- Provide reinforcement for positive behavior, as well as for academic achievements.
- Acknowledge and empathize with a student's sense of frustration, anger or emotional outbursts: "I know it must be hard dealing with things right now."
- Provide structure and consistency; make sure all teachers are using the same strategies. • Remove a student from a problem situation, but avoid characterizing it as a punishment and keep it as brief as possible.
- Establish a cooperative relationship with the student, engaging them in any decisions regarding schedule changes or task priority setting.
- Involve families in any positive behavior support plans.
- Set reasonable expectations.
- Arrange preferential seating, such as moving the student away from windows (e.g. bright light), away from talkative peers, or closer to the teacher.

#### Physical

- Allow the student to rest and eat in a quiet area, as needed.
- Encourage the use of the elevator (if available).
- If the student is light sensitive, allow the use of sunglasses or hats, as needed.
- Allow the student to leave early from class to avoid crowded or noisy hallways.
- Participation in Physical Activity including physical education, sports, and recess, should be guided by Student Medical Clearance following Suspected Concussion (S39 Form; Appendix C)



## YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Program/Curriculum</b>
<i>Policy Number</i>	<b>317</b>
<i>Former Policy Number</i>	<b>508</b>
<i>Total Pages</i>	<b>9</b>
<i>Original Approved Date</i>	<b>January 29, 2013</b>
<i>Subsequent Approval Dates</i>	<b>November 26, 2013</b>

### ELECTRONIC COMMUNICATIONS & SOCIAL MEDIA

#### 1. PURPOSE

~~The York Catholic District School Board (the "Board") recognizes the use of Electronic Communication and Social Media by trustees, staff, students and school representatives' in support of student learning and in keeping with the Board's vision for Catholic education.~~

The York Catholic District School Board recognizes the importance of electronic communications and the use of social media as an effective tool for reaching out to the community, and for the reciprocal flow of information. The purpose of this policy is to adhere to all applicable laws and regulations and establish requirements for the safe and acceptable use of electronic communications and social media platforms.

#### 2. ~~POLICY STATEMENT~~ OBJECTIVE

~~It is the policy of the York Catholic District School Board to allow the use of Electronic Communications and Social Media to foster a learning environment for all students that is conducive to student learning in a safe, respectful and positive manner. In an effort to promote and teach behaviour within our schools that demonstrates good digital citizenship and respectful use of Electronic Communications and Social Media, the Board shall authorize Administration to implement related Guidelines that regulate the use of electronic communications and social media at their school.~~

The objective of this policy is to ensure a safe, positive and respectful online learning and working environment through the professional use of electronic communications and social media that is reflective of the Mission, Vision and Values of the York Catholic District School Board.

#### 3. PARAMETERS

3.1 It is the expectation of the York Catholic District School Board that all Board employees using electronic communications and social media shall become familiar with and abide by this policy. It is also the expectation of the Board that all members of the Ontario College of Teachers are familiar with the *Professional Advisory* on the Use of Electronic Communication and Social Media.

3.2 All Staff shall adhere to the ethical and professional principles outlined in YCDSB policies and procedures as well as any professional designation ethical standards



and/or code of conduct when writing and/or posting information online, on both professional and personal electronic communications and social media platforms.

- 3.3 Students of the York Catholic District School Board shall adhere to the appropriate and respectful use of electronic communications and social media as reflected in the Ontario Catholic Graduate Expectation; “an effective communicator who speaks, writes, and listens honestly and sensitively, responding critically in light of Gospel values”.
- 3.4 All York Catholic District School Board staff and students shall ensure that the content published on approved social media sites is consistent with the Mission, Vision and Values of the York Catholic District School Board.
- 3.25 Electronic communication and social media sites shall not be used to speak on behalf of the school, department or Board, unless ~~written permission~~ **the social media request form (see Appendix B of the procedure)** has been ~~given from~~ **approved by the** Principal or Manager, in consultation with the **appropriate** Superintendent and Communications Department.
- 3.36 The York Catholic District School Board and any school name, logo, school crest and emblem shall not be used in any electronic communication **or social media platform**, unless ~~permission~~ **the social media request form (see Appendix B of the procedure)** has been ~~granted from~~ **approved by the** Principal or Manager, in consultation with the **appropriate** Superintendent and Communications Department.
- 3.7 All schools must maintain and utilize the Board-approved third-party tools/apps/services to provide consistency in communication throughout our school communities.
- 3.8 The York Catholic District School Board only endorses the following Social Media sites to be used by schools and/or departments:
- Twitter
  - Instagram
  - LinkedIn
- 3.9 All York Catholic District School Board staff and students shall use Board provided electronic communication platforms (YCDSB.ca email, Google Classroom, etc.) to correspond online on topics relating to school coursework, or school sanctioned clubs or activities.
- ~~3.410 Personal sites and comments not related to the York Catholic District School Board, will clearly state that staff are not representing the views of the school, department, or Board.~~
- 3.510 Inappropriate or unauthorized use of electronic communication or social media **by staff of the York Catholic District School Board shall may** result in disciplinary action in accordance with Policy 412: *Progressive Discipline of Employees*.
- 3.11 Inappropriate use of electronic communication or social media, by students of the York Catholic District School Board may result in disciplinary action in accordance with Policy 117 Code of Conduct and/or Policy 202 Safe Schools - Student Discipline.
- 3.612 All updates and/or revisions to school websites must be approved by the Principal or ~~School~~ **appropriate** Superintendent of Education and maintained by an **authorized** Board employee under the direction of the Principal.

- 3.13 The York Catholic District School Board Staff shall not disclose personal, private or confidential information online that is protected under applicable legislation, including but not limited to the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and the Personal Health Information Protection Act (PHIPA).
- 3.14 The York Catholic District School Board staff shall adhere to copyright legislation on social media, which includes but is not limited to:
  - 3.14.1 Ensuring that all works published are original or cleared for copyright;
  - 3.14.2 Ensuring the ownership of the copyright is clearly indicated;
  - 3.14.3 Ensuring that the work of others is clearly referenced.
- 3.15 Photos, videos, audio recordings and/or personal information about an identifiable or potentially identifiable individual should not be posted without written consent of the student (if over 18 years old) or parent(s)/guardian(s).
- 3.16 All York Catholic District School Board staff have a duty to make child protection and safety a priority. Staff must report any infringement of provisions online or on social media platforms under section 125 of the *Child, Youth and Family Services Act* and as amended.

#### 4. RESPONSIBILITIES

##### 4.1 Director of Education

- 4.1.1 To ensure the implementation of the Electronic Communications & Social Media policy throughout the Board

##### 4.2 ~~Superintendent Officers~~ **Superintendents: School Leadership**

- 4.2.1 To work with and support school administrators to ensure that there is compliance with all sections of the Electronic Communications & Social Media policy.

##### 4.3 Principal, Manager or Designate

- 4.3.1 To support and assist the Director of Education in reviewing and ensuring that employees are familiar with and adhering to the Electronic Communications & Social Media policy.
- 4.3.2 To inform staff, ~~students~~, parents/volunteers and/or community members using online social media activities and groups to adhere to ethical standards that align with the *Professional advisory of the Ontario College of Teachers, and any other applicable professional advisory from a regulatory body, and the Mission, Vision Statement, policies and protocols of the York Catholic District School Board.*
- 4.3.3 **To monitor all authorized department, program, club, etc, social media accounts.**
- 4.3.4 To consult with the **appropriate** Superintendent and Communications Department when considering the use of social media for a school or department.
- 4.3.5 To ensure and promote increased awareness of digital citizenship to encourage appropriate, respectful, and ethical use of social media. ~~guided by York Catholic District School Board's 6 C's: Catholic Character, Critical Thinking, Communication, Collaboration, Creativity and Citizenship.~~
- 4.3.6 To ensure that school websites are maintained and updated by Board Employees.
- 4.3.7 To ensure inappropriate use of electronic communication or social media ~~such as, derogatory or vexatious comments towards students or staff~~ will be addressed, **immediately.**
- 4.3.8 To ~~consult with~~ **report to** the **appropriate** Superintendent of Employee Relations Human Resources and International Relations ~~Education~~ and Director of Education

on the appropriate actions to take when a Board employee engages any staff engaging in inappropriate and/or illegal use of the internet, electronic communication and social media.

#### **4.4 Employees**

- 4.4.1 To recognize and practice adhere to their professional obligations with the use of electronic communications and social media.
- 4.4.2 To obtain authorization from the Principal for the establishment of a department, program, club, etc, social media account.
- 4.4.3 To ensure that student information is not shared unless authorized by applicable legislation.
- 4.4.4 To ensure Social Media or Electronic Communications is not used to misrepresent the views or opinions of the school, department, or Board, and shall provide a clear disclaimer stating such.
- 4.4.5 To use electronic communications and social media with common courtesy and respectful behaviour consistent with the Board's Vision Statement and with the policies and procedures/guidelines of the York Catholic District School Board.
- 4.4.6 To be aware that they may be subject to disciplinary action, up to and including loss of access to Board systems, suspension from work, or discharge from employment, and/or including police involvement for unlawful or unacceptable use of Board Information Technology.

#### **4.5 Communications Department**

- 4.5.1 To support and advise School Principal, Manager and/or designate on any request for the use of social media.

#### **4.6. Students**

- 4.6.1 To adhere to the expectations of the Electronic Communications & Social Media policy.
- 4.6.2 To be aware that inappropriate use of electronic communication or social media such as, derogatory or vexatious comments towards students or staff will be subject to progressive disciplinary action.

#### **4.7 Parents, Volunteers and Community Representatives**

- 4.7.1 To comply with policies and procedures/guidelines in all interactions with the Board.
- 4.7.2 To be aware that inappropriate or unauthorized use of electronic communication or social media may result in loss of privileges.

### **5. DEFINITIONS**

#### **5.1 Designate**

A York Catholic District School Board employee.

#### **5.2 Electronic Communication and Social Media**

Encompasses software, applications, e-mail, and web sites, which enable users to interact, create and exchange information online.

#### **5.3 Personal site/Social Media**

Personal sites and social media are any site or social media that have not been approved by the Board or are on any social media or platforms that are not approved or consistent with our Mission, Vision and Values.

#### **5.4 Professional site/Social Media**

Professional sites and social media are any site or social media account that are for instructional purposes, to represent a classroom, school or YCDSB related activity and has been approved by the Principal, Manager or Director of Education.

#### **5.5 Unacceptable/Unlawful**

Any unacceptable/unlawful use of York Catholic District School Board information technology is prohibited. Examples are listed in, but not limited to, Appendix A.

### **6. CROSS REFERENCES**

#### **Legislation**

*Child, Youth and Family Services Act*  
*Copyright Act, Canada*  
*Criminal Code*  
*Education Act of Ontario*  
*Human Rights Code*  
*Municipal Freedom of Information and Protection of Privacy Act*  
*OCT Ethical Standards for the Teaching Profession*  
*OCT Standards of Practice for the Teaching Profession*  
*OCT Professional Advisory*

#### **YCDSB Policies**

*Policy 112 Privacy and Freedom of Information*  
*Policy 202 Safe Schools*  
*Policy 218 Code of Conduct*  
*Policy 311 Digital Discipleship: Student Use of Technology*  
*Policy 408 Digital Discipleship: Acceptable Use of Technology*

#### **YCDSB Procedures**

*Electronic Communications and Social Media*

## **~~POLICY TITLE: — ELECTRONIC COMMUNICATIONS & SOCIAL MEDIA~~**

### **~~SECTION B~~**

#### **~~GUIDELINES~~**

~~The purpose of these guidelines is to provide staff, administrators, students, parents and the York Catholic District School Board community information and direction when using social media applications both inside and outside of the classroom or school environment.~~

~~York Catholic District School Board realizes that part of 21st Century Learning is adapting to the changing methods of communication. The importance of teachers, students and parents engaging, collaborating, learning, and sharing in these digital environments is a part of 21st century learning. Fundamental to student success is the ability to use technology responsibly to gather, evaluate, construct and share knowledge in a 21<sup>st</sup> Century world.~~

~~To this aim, the York Catholic District School Board has developed the following guidelines to provide direction for staff, students and the school district community when participating in online social media activities. The York Catholic District School Board Electronic Communication and Social Media Guidelines encourage employees to participate in online social activities. By accessing, creating or contributing to any blogs, wikis, or other social media for classroom or Board use, staff agrees to abide by these guidelines.~~

#### **~~Section One: Electronic Communication and Social Media Guidelines for Staff~~**

- ~~1.1 All online correspondence between staff and students shall use Board provided electronic communication platforms (YCDSB.ca e-mail, Google Classroom, etc.) be related to school course work, or school sanctioned clubs or activities.~~
- ~~1.2 Personal online accounts shall not be used for school course work or school sanctioned clubs or activities.~~
- ~~1.3 Use of Board and school logos shall be in accordance with Policy 507, Section 3.3.~~
- ~~1.4 York Catholic District School Board staff shall identify themselves clearly and accurately when participating in social media. use only their given name when participating in an online social media group for academic purposes.~~
- ~~1.5 York Catholic District School Board staff shall use the Board network to access social media sites that are work related; Board staff shall not access personal social media sites during school/work hours.~~
- ~~1.6 York Catholic District School Board staff shall not accept or initiate electronic “friend” invitations from students.~~
- ~~1.7 Posting student information of any kind shall comply with the Annual Student Media Release FormMunicipal Freedom of Information Consent Form and Municipal Freedom of Information and Protection of Privacy Act, Education Act and other legislation.~~
- ~~1.8 York Catholic District School Board staff shall not disclose any confidential student information, personal information, or images without confirmation of written permission from the Parent(s)/Guardian(s) as provided by the FOI Consent Form maintained within the Student Information System.~~

- ~~1.9 York Catholic District School Board staff is personally responsible for the content they publish online.~~
- ~~1.10 York Catholic District School Board staff shall not use electronic social media sites to be engage in conduct that may be viewed as defamatory, harassing or detrimental to the Board, defamatory towards students, Board employees, or Board policies, procedures and guidelines.~~
- ~~1.11 York Catholic District School Board staff shall ensure that the content published on approved in any social media sites communication venue is consistent with the Mission and Values of York Catholic District School Board.~~
- ~~1.12 All staff and student online behaviour shall reflect the standards of honesty, respect, and consideration and be in accordance with Catholic values and with the applicable highest professional Standards.~~
- ~~1.13 When posting to a blog or social media site, York Catholic District School Board **staff** shall clearly state that the information is representative of their own personal views and opinions and not necessarily the views and opinions of York Catholic District School Board.~~
- ~~1.14 **Student** blogs do not require a disclaimer, but teachers shall moderate the content contributed by students.~~
- ~~1.15 Blogs, wikis and podcasts are an extension of the classroom. What is inappropriate in the classroom shall be deemed inappropriate online.~~
- ~~1.16 When posting on social media all, even on the strictest settings, York Catholic District School Board staff shall act on the assumption that all postings are in the public domain.~~
- ~~1.17 York Catholic District School Board staff shall adhere to School and Board Code of Conduct as well as any professional designation ethical standards and/or code of conduct (ie: Ontario College of Teachers) when writing and/or posting online.~~
- ~~1.18 York Catholic District School Board staff participating in social media activities shall respect copyright laws, not only with respect to the content produced on the social media sites, but also to the software application that enables it.~~
- ~~1.19 York Catholic District School Board staff shall ensure their profile and related content is consistent with the Code of Conduct how they wish to present themselves to colleagues, parents, and students.~~
- ~~1.20 When uploading digital pictures or avatars that represent yourself, York Catholic District School Board staff shall ensure they select a school appropriate image.~~
- ~~1.21 Microblogging comments made using such media are not protected by privacy settings. York Catholic District School Board staff shall be aware of the public and widespread nature of such media and refrain from any comment(s) that could be deemed unprofessional.~~
- ~~1.22 York Catholic District School Board staff may be subject to disciplinary action if their social media comments and posting, whether personal or school/Board related, result in a disruption to the school or Board environment; or negatively impact the staff's ability to perform his or her duties or are defamatory, pornographic, proprietary or harassing.~~

## **~~Section Two: Electronic Communication and Social Media Guidelines for Students~~**

- ~~2.1 Students shall be aware of what they post online. Social media venues including wikis, blogs, photo and video sharing sites are very public. (What you contribute leaves a digital footprint for all to see.)~~
- ~~2.2 Students shall follow Bthe school's and board's code of conduct when writing online ensuring that criticism is constructive and not hurtful. What is inappropriate in the classroom is inappropriate online.~~
- ~~2.3 Students shall not provide use extreme caution when giving out personal information, including, but not limited to, given name(s), telephone numbers, addresses, exact birthdates, and pictures, unless required by law.~~
- ~~2.4 Students shall not share other students or staff personal information without the consent for that person to do so.~~
- ~~2.5 Students shall not share their password. with anyone besides their teachers and parents.~~
- ~~2.6 If students are linking to other websites to support their thoughts and ideas they shall be sure to read the entire article prior to linking to ensure that all information is appropriate for a school setting.~~
- ~~2.7 Students participating in social media activities shall respect copyright laws, not only with respect to the content produced on the social media sites, but also to the software application that enables it.~~
- ~~2.8 Students shall not misrepresent themselves by using someone else's identity.~~
- ~~2.9 Blog and wiki posts should be well written. Students shall follow writing conventions including proper grammar, capitalization, and punctuation. If students edit someone else's work it shall be in the spirit of improving the writing.~~
- ~~2.10 Students shall immediately report to a teacher if they encounter inappropriate material that makes them feel uncomfortable, or is not respectful or inconsistent with the teachings of the Church.~~
- ~~2.11 Students who do not abide by these terms and conditions may lose their opportunity to take part in the project and/or future access to the use of online tools and may be subject to progressive disciplinary action.~~



## Appendix A

### Unacceptable/Unlawful Use of York Catholic District School Board Information Technology

The following is a partial list of examples that includes but is not limited to activities considered unacceptable/unlawful.

Bullying	An attempt to undermine an individual through cruel and humiliating behaviour, including 'cyber-bullying' which is used to send threatening, obscene, sexually explicit and violent messages that threaten emotional and physical safety of recipient(s).
Child pornography	Accessing, downloading, storing, sharing and distributing any child pornography
Copyright or trademark infringement	Infringing on another person's copyright, trademark, patent, trade secret, without lawful permission
Defamatory libel	A defamatory libel is matter published, without lawful justification or excuse, that is likely to injure the reputation of any person by exposing him/her to hatred, contempt or ridicule, or that is designed to insult the person of or concerning whom it is published. <i>Libel and Slander Act</i> .
Disclosing or gathering personal Information	Disclosing or gathering personal information in a manner inconsistent with the <i>Municipal Freedom of Information and Protection of Privacy Act</i> .
Gambling and lotteries	Uploading funds to online gambling or lottery sites, making bets or playing the games that they offer, and then cashing out any winnings
Hacking and other unauthorized access	Includes but not limited to using the computer to carry out sabotage, gain unlawful entry into encrypted sites, acquiring and disseminating private information, creating and disseminating computer viruses, stealing information and trade secrets, intentionally breaching protected internet sites that compromises the safety of others.
Harassment	The sending of electronic messages and information that causes the recipient(s) to fear for personal safety and that of others.
Hate propaganda	Communicating messages that promote or incite hatred against an identifiable group that is likely to lead to a breach of the peace—e.g. homophobic messages, racist comments and jokes, violent gender-specific messages.
Inappropriate communication with minors	Communicating, soliciting or sending sexually suggestive, emotionally laden, and intrusive personal messages to minors for any reason.
Intellectual property	Infringing on another person's property without lawful permission.
Interception of private communication or electronic mail	Unauthorized entry into the password protected e-mail and/or the interception of private electronic communication intended for someone else
Obscenity	Creating, acquiring, sharing, publishing and distributing any obscene material including pornography.
On-line Video Gaming/Gambling	Participating in on-line "video gaming" and/or on-line gambling, while using information technology.
Personal financial gains	Any use of Board information technology for commercial transactions, advertising, solicitation and financial gain.
Vandalism	Deliberately damaging or causing to be damaged Board information technology, for example routers, modems, wireless et cetera including but not limited to physical technology equipment, internet /intranet resources, online traffic flow, internet filters and firewalls, websites etc.
York Catholic District School Board Information Technology/Equipment	York Catholic District School Board Information Technology and/or Equipment used for anything outside of educational purposes is prohibited.





## YORK CATHOLIC DISTRICT SCHOOL BOARD

### **PROCEDURE:**

### **ELECTRONIC COMMUNICATIONS & SOCIAL MEDIA**

#### **Addendum to Policy 317: Electronic Communications & Social Media**

**Effective:** DD/MMM/YYYY

## **PURPOSE**

The York Catholic District School Board supports the responsible use of electronic communications and social media as an effective tool for engaging the school community.

The purpose of this administrative procedure is to provide a framework that outlines the appropriate uses and acceptable practices when using social media applications both inside and outside of the classroom or school environment. This procedure is created in conjunction with policy 317:

*Electronic Communications and Social Media* and adheres to all relevant legislation.

### **1. Authorization for Electronic communications and Social Media Accounts**

- 1.1 All electronic communications and social media sites shall not be used to speak on behalf of the school, department, or Board, unless written authorization has been given from a Principal, in consultation with the Superintendent.
- 1.2 The Principal of the school may grant permission to staff who are interested in establishing a social media account for instructional purposes, to represent a classroom, school or YCDSB related activity.
- 1.3 In accordance with section 3.4 of policy 317, Staff must receive permission from their school Principal, in consultation with Superintendent and Communications department prior to including a logo, school crest and emblem in any electronic communication (see Appendix B).
- 1.4 Social media initiatives representing the Board as a whole must be approved by the Director of Education and/or Manager of Communications (see Appendix B).

### **2. Securing Electronic Communications and Social Media Accounts**

- 2.1 It is the responsibility of an authorized member of staff to monitor content and regulate members of the social media account(s).
- 2.2 Staff shall not share account credentials and passwords to unauthorized members (i.e.: students, parents, members of the community, staff members who are not account administrators).
- 2.3 The school Principal shall be responsible for all authorization and regulation of social media accounts, websites and communication platforms that pertain to their school.
  - 2.3.1 The school Principal shall be provided with the account credentials and password for all authorized social media accounts.
  - 2.3.2 It is the responsibility of the authorized staff member and Principal to ensure account credentials and passwords are shared and stored in a secure manner.

### **3. Professional and Personal Guidelines for Staff**

- 3.1 York Catholic District School Board staff shall ensure that the content published on approved social media sites is consistent with the Mission, Vision and Values of York Catholic School Board.
- 3.2 York Catholic District School Board Staff and students shall use Board provided electronic communication platforms (YCDSB.ca email, Google Classroom, etc.) to correspond online on topics relating to school coursework, or school sanctioned clubs or activities.

- 3.3 York Catholic District School Board staff shall use the Board network to access social media sites that are work-related.
- 3.4 York Catholic District School Board staff shall identify themselves clearly and accurately when participating in social media.
- 3.5 York Catholic District School Board staff shall not issue or accept student and/or parent/legal guardian as “friend” requests or follow students on social media.
  - 3.5.1 If staff have a classroom account where they share important curricular information with students and/or parent(s)/guardian(s), students may follow the account. For the purposes of learning, staff members do not need to follow students back.
- 3.6 York Catholic District School Board staff shall ensure their professional/personal profile and related content is consistent with how they wish to present themselves to colleagues, parents and students.
  - 3.6.1 The YCDSB strongly advises against the use of a blended social media account (professional and personal). Staff are encouraged to maintain a clear distinction between their personal and professional social media use, and should have two separate accounts for these purposes.
- 3.7 York Catholic District School Board staff members are personally responsible for the content they publish online.
- 3.8 York Catholic District School Board staff shall not use electronic social media sites to engage in conduct that may be viewed as defamatory, harassing or detrimental to the Board, towards students or Board employees (see Appendix A).
- 3.9 York Catholic District School Board Staff shall adhere to the ethical and professional principles outlined in YCDSB policies and procedures as well as any professional designation ethical standards, and/or code of conduct, such as the Ontario College of Teachers when writing and/or posting information online.
- 3.10 If staff are linking to other websites to support their thoughts and ideas they shall be sure to read the entire article or related media prior to linking to ensure that all information is appropriate for a school setting.
- 3.11 York Catholic District School Board staff participating in social media activities shall respect copyright laws, not only with respect to the content produced on the social media sites, but also to the software application that enables it.
- 3.12 Electronic communication and social media are an extension of the classroom. Teachers shall moderate content. What is inappropriate in the classroom shall be deemed inappropriate online.

- 3.13 When uploading digital pictures or avatars that represent yourself, York Catholic District School Board staff shall ensure they select a school appropriate image.
- 3.14 York Catholic District School Board staff may be subject to progressive disciplinary action as per the Board's Policy 412, *Progressive Discipline of Employees*, if their social media comments and posting, whether personal or school/Board related, result in a disruption to the school or Board environment; or are unacceptable or unlawful.
- 3.15 When posting on social media, all York Catholic District School Board staff shall act on the assumption that all postings are in the public domain.
- 3.16 Personal electronic mail communications and social media accounts shall not be used for work-related business, school course work or school sanctioned clubs or activities.
- 3.17 York Catholic District School Board staff shall not access personal social media sites during school/work hours.

#### **4. Personal Guidelines for Students**

- 4.1 Students must recognize that what they post online is public. Social media including, but not limited to Snapchat, Twitter, Instagram, etc. and photo/ video sharing sites are public domain and what a student contributes leaves a digital footprint for all to see.
- 4.2 Students shall follow the Board's code of conduct when communicating online ensuring that criticism is constructive and not hurtful. What is inappropriate in the classroom is inappropriate online.
- 4.3 Students should not provide personal information, including, but not limited to, given name(s), telephone numbers, addresses, exact birth dates, and pictures, unless required by law.
- 4.4 Students should not share their password(s) to personal electronic devices and social media account(s).
- 4.5 If students are linking to other websites to support their thoughts and ideas they shall be sure to read the entire article prior to linking to ensure that all information is appropriate for a school setting.
- 4.6 Students participating in social media activities shall respect copyright laws, not only with respect to the content produced on the social media sites, but also to the software application that enables it.
- 4.7 Students shall not misrepresent themselves by using fake identity or someone else's identity.

- 4.8 Students shall follow writing conventions including proper grammar, capitalization, and punctuation.
- 4.9 Students shall immediately report to a teacher if they encounter inappropriate material that makes them feel uncomfortable, or is not respectful or inconsistent with the social teachings of the Catholic Church.
- 4.10 Students who do not abide by these terms and conditions may lose their privilege to take part in the project and/or future access to the use of online tools and may be subject to progressive disciplinary action.

**5. Catholic School Councils:**

- 5.1 Only York Catholic District School Board staff, using a Board email address, can create, update and moderate information that is shared on Board endorsed social media platforms.
- 5.2 All Catholic School Council communication must be hosted on the school website.
- 5.3 All Catholic School Council content must be approved by all members of the School Council and the school's principal before being published on the school website.

**6. Privacy and Confidentiality**

- 6.1 Photos, videos, audio recordings and/or personal information about an identifiable or potentially identifiable individual should not be posted without the verbal or written consent of the student (if over 18) or parent(s)/guardian(s).
- 6.2 Prior and during school events, Principals should advise parents/guardians not to post photos, videos or comments that include staff and students at the school.
- 6.3 Particular care must also be taken into consideration if there are custody or safety concerns related to a child or family. Staff must do their due diligence to ensure that the privacy and confidentiality of identified students are protected.
- 6.4 Events such as school field trips or off-site extracurricular activities should not be posted prior to the event. These posts could compromise student safety. Vague posts that do not include the time or location may be posted. Information about school events that are open to parents and the public can be posted prior to the event taking place.
- 6.5 When seeking consent for student participation in classroom social media accounts/projects where students' personal information (including photos) may be shared, the parent(s)/guardian(s) and student must be provided with an overview of the activity which clearly states expectations and guidelines for students. If a parent/guardian or student chooses not to participate, the teacher shall find a suitable educational alternative for the student.

6.6 Accounts that are inactive or dormant for more than one(1) school year shall be deleted.

**7. Duty of Care**

All York Catholic District School Board staff have a duty to make child protection, and safety a priority. The same expectations and duties of educators and staff with respect to child welfare apply online, including social media. Any reporting or follow up should be made through normal reporting channels.

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## Appendix A

### Unacceptable/Unlawful Use of York Catholic District School Board Information Technology

The following is a partial list of examples that includes but is not limited to activities considered unacceptable/unlawful.

Bullying	An attempt to undermine an individual through cruel and humiliating behaviour, including 'cyber-bullying' which is used to send threatening, obscene, sexually explicit and violent messages that threaten emotional and physical safety of recipient(s).
Child pornography	Accessing, downloading, storing, sharing and distributing any child pornography
Copyright or trademark infringement	Infringing on another person's copyright, trademark, patent, trade secret, without lawful permission
Defamatory libel	A defamatory libel is matter published, without lawful justification or excuse, that is likely to injure the reputation of any person by exposing him/her to hatred, contempt or ridicule, or that is designed to insult the person of or concerning whom it is published. <i>Libel and Slander Act</i> .
Disclosing or gathering personal Information	Disclosing or gathering personal information in a manner inconsistent with the <i>Municipal Freedom of Information and Protection of Privacy Act</i> .
Gambling and lotteries	Uploading funds to online gambling or lottery sites, making bets or playing the games that they offer, and then cashing out any winnings
Hacking and other unauthorized access	Includes but not limited to using the computer to carry out sabotage, gain unlawful entry into encrypted sites, acquiring and disseminating private information, creating and disseminating computer viruses, stealing information and trade secrets, intentionally breaching protected internet sites that compromises the safety of others.
Harassment	The sending of electronic messages and information that causes the recipient(s) to fear for personal safety and that of others.
Hate propaganda	Communicating messages that promote or incite hatred against an identifiable group that is likely to lead to a breach of the peace—e.g. homophobic messages, racist comments and jokes, violent gender-specific messages.
Inappropriate communication with minors	Communicating, soliciting or sending sexually suggestive, emotionally laden, and intrusive personal messages to minors for any reason.
Intellectual property	Infringing on another person's property without lawful permission.
Interception of private communication or electronic mail	Unauthorized entry into the password protected e-mail and/or the interception of private electronic communication intended for someone else
Obscenity	Creating, acquiring, sharing, publishing and distributing any obscene material including pornography.
On-line Video Gaming/Gambling	Participating in on-line "video gaming" and/or on-line gambling, while using information technology.
Personal financial gains	Staff using social media or Board platforms to sell products and services to schools, the Board, colleagues, parents and students is a conflict of interest. Any use of Board information technology for commercial transactions, advertising, solicitation, and financial gain.
Vandalism	Deliberately damaging or causing to be damaged Board information technology, for example routers, modems, wireless et cetera including but not limited to physical technology equipment, internet /intranet resources, online traffic flow, internet filters and firewalls, websites etc.
York Catholic District School Board Information Technology/Equipment	York Catholic District School Board Information Technology and/or Equipment used for anything outside of educational purposes is prohibited.



## York Catholic District School Board Social Media Account Request Form

Before creating any social media account representing York Catholic District School Board, this form must be completed, submitted and approved.

Name of Requestor:

Date:

Department/Program/Club etc.

Email:

**(Any social media account operated by a staff member in order to communicate on behalf of the York Catholic District School Board must be connected to a YCDSB email account.)**

Platform:

- ☐ Twitter
- ☐ Instagram
- ☐ Blog
- ☐ Other \_\_\_\_\_

Account Name & URL for Account

Please indicate below the purpose of creating the social media account:

Please indicate below your target audience:



**Please read and confirm the following Terms and Conditions:**

- ☐ I agree that the purpose of the social media account is for educational/engagement purposes and to promote electronic communications among the YCDSB community.
- ☐ I agree that as the official representative for the social media account, I will monitor the account on a daily basis for inappropriate content and remove posts that do not adhere to the policies and procedures of the York Catholic District School Board.
- ☐ I agree to positively represent the York Catholic District School Board upholding the Mission, Vision and Values at all times.
- ☐ I have read and understand Policy 317: *Electronic Communications and Social Media*, the corresponding procedure, and Policy 408: *Digital Discipleship: Acceptable Use of Technology*.
- ☐ I have read and understand my responsibilities related to privacy, confidentiality and copyright.
- ☐ I confirm that all staff members listed below have read and understand these Terms and Conditions.

Social Media Account Administrator(s):

Name:	Signature:
Name:	Signature:
Name:	Signature:

Principal of School:

Name:	Signature:
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Director of Education and/or Manager of Communications (if applicable)

Name:	Signature:
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**Your request for establishing a York Catholic District School Board social media account has been:**

- ☐ **Approved**
- ☐ **Not Approved**

**Date of Approval:** \_\_\_\_\_



## YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Facilities</b>
<i>Policy Number</i>	<b>703</b>
<i>Former Policy Number</i>	<b>501</b>
<i>Total Pages</i>	
<i>Original Approved Date</i>	<b>September 1971</b>
<i>Subsequent Approval Dates</i>	<b>March 1996 April 8, 2003 July 6, 2010 June 21, 2011 November 27, 2018</b>

### COMMUNITY USE OF SCHOOLS

#### 1. PURPOSE

The York Catholic District School Board acknowledges that Board facilities are an integral part of the community and as such, add to the spiritual, educational, recreational and social development of all who share them. The Board supports the use of its facilities for the best interests of the community, when they are not required for school use. The purpose of this policy is to clarify the parameters and procedures through which Board facilities may be used for community purposes.

#### 2. ~~POLICY STATEMENT~~ OBJECTIVE

It is the policy of the York Catholic District School Board, to allow designated facilities to be used by the community during those times that such facilities are not required for School or Board purposes. **The objective of this policy is to outline requirements for providing access and use of the Board's school buildings, grounds and facilities for community purposes.**

#### 3. PARAMETERS

- 3.1 **The York Catholic District School Board recognizes the importance of fostering cooperation with community organizations and endorses the concept of "Community Use of Schools" and therefore maintains appropriate procedures, rules, and regulations to facilitate the application, approval, and issuance of permits for the use of its property under this policy.**
- 3.2 **Use of school grounds and community use of school facilities shall be in accordance with York Catholic District School Board's Code of Conduct Policy, whereby the individual entering into an agreement with the York Catholic District School Board must adhere to the code of conduct governing the behavior of all persons in schools.**
- 3.3 **The administration of the *Community Use of Schools* Policy and related procedures is the responsibility of the Community Use of Schools permit office of the York Catholic District School Board.**
- 3.4 **This policy will be implemented with a minimum of a cost recovery basis. All permit fees for all board facilities, equipment and furniture will increase be adjusted annually based upon the consumer price index (CPI). Rates will be updated accordingly and subject to change without notice.**

- 3.5 The York Catholic District School Board retains the right to refuse the use of its facilities to any person or group.
- 3.6 The permit holder shall ensure suitable adult supervision (18 years of age or older) of the activities during the time of the permit use, and shall cooperate fully with school administration or the custodian on duty for the safety of all.
- 3.7 Administration maintains the right to suspend or cancel without notice any permit in ~~accordance to~~ **accordance with** the York Catholic District School Board policies and procedures.
- 3.8 The Board shall hold the permit holder (person, group or authority) responsible and accountable for the safe use of the facility and all losses and damages arising from the use of the facility. Damages or losses attributed to the permit holder shall be reimbursed by the permit holder to the Board.
- 3.9 The Board reserves the right to levy additional charges where additional clean-up or damages result from the use of a facility.
- 3.10 A custodian must be in attendance and shall oversee the premises whenever a Community Use of School permit is in effect.
- 3.11 All tobacco and cannabis products as well as electronic cigarette devices, consumption of alcoholic beverages, drugs and the possession or use of weapons are strictly prohibited at all times in Board buildings or on Board property, with exception for the traditional use of tobacco that forms part of ~~Aboriginal~~ **Indigenous** culture and spirituality as per section 19**(4)** of the *Smoke Free Ontario Act*.
- 3.12 The Board shall not be responsible for any personal injury, or for the loss, theft, or damage of any articles of the permit holder, or of any one attending on the invitation of the permit holder, where such personal injury, loss, theft or damage results from the permit holder's negligence.
- 3.13 The York Catholic District School Board's liability insurance coverage for Community Use of Schools protects the Board against liability insurance claims. The Board's insurance coverage does not protect users or user groups. Permit holders are required to provide proof of liability insurance at the time of approval but no later than the date of the permit coverage.
- 3.14 The Board may cancel a permit (with reasonable notice), if the facility is needed by the school and/or Board. Where possible, the Board's practice is to give a minimum of seven (7) days' notice of such cancellation, but, in an emergency, the Board reserves the right to cancel without notice (e.g.: loss of hydro, water, inclement weather).
- 3.15 In the event that the building is required for school/Board purposes, the permit holder may contact the Permit Office for a refund of the permit rental fee only.
- 3.16 Community Use of Schools will request the Budget/Audit Department to offset the school's General School Budget (GSB) with 25% of the sports equipment rental (Schedule ~~D~~ **B & C**), on an annual basis, at the end of August, to assist with the replacement or repair of any damaged equipment.

## 4. RESPONSIBILITIES

### 4.1 Director of Education

- 4.1.1 To oversee compliance with the Community Use of Schools policy and procedures.

### 4.2 Controller of Plant & Accommodation Services **Superintendent of Facilities Services & Plant**

- 4.2.1 To oversee the implementation of this policy and procedures through the Community Use of Schools Permit Office.
- 4.2.2 To act as Facilitator for any disputes that may arise between the permit or potential permit holder and CUS permit office.

### 4.3 Principal

- 4.3.1 To facilitate the implementation of the Community Use of Schools policy and procedures at the school level.
- 4.3.2 To be the applicant for school activities, including Catholic School Council Meetings.
- 4.3.3 To apply for a permit to use the school after 6:00 pm and on weekends. To ensure that relevant staff is informed when permits are issued and that conditions of the permit are met.
- 4.3.4 To inform the permit holder a minimum of seven (7) days (where possible) in advance when the permitted facility will not be available.
- 4.3.5 To ensure a Damage or Misconduct Report is submitted to the Permit Department when a permit user fails to comply with the conditions of the permit.
- 4.3.6 To inform the Community Use of Schools Permit Office 72 hours in advance, if a custodian is not available to be in attendance on the permitted date.

### 4.4 Community Use of Schools Permit Office

- 4.4.1 To receive and process all permit applications in accordance with the policy and procedures, an addendum to this policy.
- 4.4.2 To issue the approved permit to the permit holder as well as the Principal, Head Custodian and Head Secretary.
- 4.4.3 To invoice the permit holder and collect fees.
- ~~4.4.4 To consider renewals when space is available and all prior fees and/or balances have been paid.~~
- 4.4.5 To follow up on damage or misconduct reports.
- 4.4.6 To liaise between permit holders and school administration.
- 4.4.7 To enforce the Community Use of Schools policy and procedures.

### 4.5 Permit Holder

- 4.5.1 To comply with the conditions for use as outlined in the Community Use of School Policy, guidelines and procedure, as well as all relevant Board Policies and Procedures.
- 4.5.2 To pay ~~all~~ fees and/or charges as may be required by the Board prior to permit issuance.

### 4.6 Custodians

- 4.6.1 To ensure that only the facility requested is used and available to the permit holder.
- 4.6.2 To ensure equipment noted on the permit is available to the permit holder.
- 4.6.3 To be responsible for the safety (i.e., extraction of water on wet and slippery floors) and the security of School or Board property.
- 4.6.4 To not give keys for any Board facility to any person who does not hold the authority to have such in their possession.
- 4.6.5 To orient permit holders to the building.
- 4.6.6 To report any damage to Board property (building and equipment) by the permit

- holder to the Permit Office via the Damage Report Form.
- 4.6.7 To report any misconduct by permit holder to the Permit Office via the Misconduct Report Form located in the online custodian resources conference.
  - 4.6.8 To submit the Community Use of Schools Weekend Report Form on the Monday following the weekend.
  - 4.6.9 To ensure that access to the building is kept clear of snow.
  - 4.6.10 To notify the Principal, 72 hours in advance, if a custodian is not available to be in attendance on the permitted date.

## **5. CROSS REFERENCES**

### **YCDSB Policy**

*[Policy 112 Privacy and Freedom of Information](#)*

*[Policy 117 Code of Conduct](#)*

*[Policy 206 Protection of Students with Asthma](#)*

*[Policy 209 Supporting Students with Prevalent Medical Conditions: Anaphylaxis](#)*

*[Policy 604 Child Care: Early Years, Extended Day, Before and After School Programs](#)*

*[Policy 610 Cannabis, Electronic Cigarettes, Tobacco - A Smoke-Free Environment](#)*

*[Policy 701 Access to Schools and Board Premises](#)*

*[Policy 705 Use of Video Surveillance Equipment](#)*

### **YCDSB Procedure**

*[YCDSB Independent Procedure: Implementing a Fragrance/Scent-Safe Workplace](#)*

*[YCDSB Independent Procedure: Community Planning & Partnerships](#)*

### **Related Forms**

YCDSB [Online Permit Application Form](#)

**YCDSB** [Online Permit Application Status](#)

YCDSB [Online Permit Cancellation Request Form](#)

YCDSB Misconduct Report Form

YCDSB Damage Report Form

YCDSB Weekend Report Form

## SECTION B: GUIDELINES

The Board's procedures, an addendum to this policy, contain information related to the following components:

### 1. Operating Times and Dates for Permits

~~Permits are required for all community use on school days between 6:00 p.m. and 10:15 p.m. and on weekends.~~

~~Permits will be granted for use of the school facilities from mid-September to mid-June in the current school year of issue. Summer permits will be granted between July and ending mid-August but are subject to staff and space availability as well as the Board summer maintenance and cleaning programs.~~

### 2. Permit Application Process

~~Permit applications are submitted on line, through the Board's website~~

~~<https://webappsprd.ycdsb.ca/permitapplication/>. Link is available here:~~

~~<https://www.ycdsb.ca/about/departments/plant-accommodation-services/community-use-of-schools/>~~

### 3. Fees

~~All permit charges shall be paid by credit card or cheque payable to the York Catholic District School Board, or on-line through PayPal prior to permit being issued.~~

### 4. Permit Holder's Responsibilities

~~The permit holder is responsible to ensure that Community Use of School policy and procedure rules and regulations are adhered to by all approved participants.~~

### 5. Restrictions

~~Permit privileges may be withdrawn for any violations as outlined in the procedures, an addendum to this policy.~~

### 6. Health & Safety

~~The permit holder is responsible to ensure appropriate supervision and must adhere to all fire safety regulations as outlined in the procedures, an addendum to this policy.~~



## **YORK CATHOLIC DISTRICT SCHOOL BOARD**

### **PROCEDURE: COMMUNITY USE OF SCHOOLS**

**Addendum to: Policy 703 Community Use of Schools**

Effective: ~~September 2021~~ **September 2023**  
**Revised: DD/MMM/YYYY**

## PURPOSE

This procedure is designed in conjunction with YCDSB [Policy 703 Community Use of Schools](#) and specifies the criteria to be applied for the approval of all permits.

### 1. Operating Times and Dates for Permits

- 1.1 Permits are required for all community use of school facilities on school days between 6:00 p.m. and 10:15 pm during the school year. Permits will be granted for use of the school facilities from mid-September to mid-June in the current school year of issue. Community Use of School Permits will not be granted during the regular school day from 8:00 a.m. to 6:00 p.m.
- 1.2 Permits will be granted for weekend use of school facilities from mid-September to mid June from 7:00 am to 9:00 pm. Permits do not run on long weekends. Additional charges apply for weekend use (see [attached](#) schedule).
- 1.3 For seasonal permits running from September to June, the schools will not be available during statutory holidays, school holidays, scheduled school functions, designated professional activity days and Christmas & March Break (including weekend use before and after the break) unless special permission is granted by the ~~Controller of Plant & Accommodation Services~~ [Superintendent of Facilities Services and Plant](#).
- 1.4 Permit applications for summer programs must be submitted prior to mid-May. Permits will be granted during July to mid-August based on availability and subject to approval.
- 1.5 During Christmas Break, March Break and summer months there will be no permits approved after 6:00 p.m.

### 2. Permit Application Process

- 2.1 Permit applications are submitted online through the Board's website [Community Use of Schools](#). The website includes links to the following resources: Policy, Procedure and the Classification & Fee Schedule.
- 2.2 The application must be submitted to the permit office no later than seven (7) days prior to the date that the facility is required.
- ~~2.3 The existing permit holder has the right to renew the permit within the first 30 days of the calendar year for the upcoming school year.~~
- ~~2.3 Permit applications will be approved on a first come first served basis. In the event that several applications are received at the same time, priority will be given to applicants in descending order of classification A-E and to York Region residents. When permit applications fall within the same classification, the Board will base its decision on past experience and the number of permits held by the applicant. Every effort will be made to accommodate all groups.~~ [Permits applications will be accepted annually in the month of February on a staggered approach based on classification of organization and will be approved on a first-come, first-serve basis. In order to provide fair access, the Board reserves the right to limit the number of permits held by one organization and priority will be given in descending order of classification A-E \(see Schedule A\).](#)
- [2.4 Separate permit applications are required for each weekday. Permit applications with multiple days may be denied.](#)
- [2.5 Priority for school break applications will be given to programs offered by the Board as well as licensed camps or programs. the B&A operators that are currently approved by the York Catholic District School Board.](#)
- ~~2.6 For schools that will be temporarily or permanently closed the Permit Holders will receive~~



assistance by the Permit Office in finding a new location within the vicinity of the school.

### 3. Fees

- 3.1 All permit charges shall be paid by **credit card or** cheque payable to the York Catholic District School Board ~~or on-line through PayPal prior to permit being issued.~~
- 3.2 **Hourly Fees charged for weekday permits from Monday to Friday** are based on a two-hour increments of 6:00 p.m. – 8:00 p.m. or 8:15 p.m. to 10:15 p.m. per single gym. **Hourly fees charged for weekend permits must be a minimum of four (4) hours. Weekend permits can run from 7:00 am to 9:00 pm.**
- 3.3 Additional fees are applicable on weekends and school breaks to cover start-up, set-up, and/or cleaning of the facility. ~~Also,~~ For permits with high attendance, a second custodian **is may be** required.  
~~Additional fees will be charged as follows:~~
- 3.3.1 On weekends there will be a minimum 4-hour custodial overtime charge **as well as a utility surcharge for gym, cafeteria and classrooms** applied for **Classifications A to F (See Schedule A).** ~~\$42.00 per hour Monday to Saturday inclusive for Classifications A to \$56.00 per hour Sunday for Classifications A to F. Utility surcharge is as follows:  
\$10.00 per hour for gym or cafeteria  
\$2.00 per hour per classroom~~
- 3.4 During the school breaks the custodial overtime is applicable after 3:00 pm. ~~Summer break permits will incur a summer facility surcharge of \$1100.00 per week. For childcare programs operating to the end of August a cleaning surcharge will be applied for the last two weeks of August in order to prepare the school for September opening. One week is \$500.00 and two full two weeks is \$900.00.~~
- 3.5 Fees are subject to HST
- 3.6 **Refund/Cancellation statement: The Processing, equipment and insurance** fees are non-refundable.
- **If the permit is canceled before the start date of the permit, the- equipment and insurance fee will be reimbursed. If a permit holder provides a minimum of seven (7) days' notice that they will not be using the permitted space, only the facility rental portion will be reimbursed.**
- 3.7 A service charge of \$50.00 will be levied for **a declined credit card or** NSF cheques.
- 3.8 A fee of \$15.00 will be charged for each change requested by the permit holder. Changes must be submitted ~~online to the Permit Office seven (7) days prior to a scheduled use of the facility.~~

### 4. Permit Holder's Responsibilities

- 4.1 The permit holder is required to have a copy of the permit on site and to restrict activities to the location of the facility stated on the permit and approved by the Board. Arrangements for the use of furniture and equipment are to be requested at time of the permit application.
- 4.2 The permit holder is responsible to ensure that *Community Use of School Policy* and *Procedure* are adhered to.
- 4.3 The permit holder or group to which the permit is issued shall save harmless the Board from any claims for damages that may arise out of the use of the facilities or for the loss or theft of any articles belonging to the permit holder. The permit holder or user groups must have a certificate of liability insurance coverage for a minimum amount of \$2,000,000,

and the Board shall be named as an additional insured on the insurance policy (such liability insurance can be purchased through the permit office at the time of application).

- 4.4 Permits are not transferable and under no circumstances shall the permit holder sublet the use of a facility.
- 4.5 The permit holder and user group must vacate the facility in a safe and orderly manner within 15 minutes of the permit exit time.
- 4.6 The permit holder shall be responsible for determining that the facilities are fit and suitable for the permitted activities.
- 4.7 The permit holder shall be responsible for the enforcement of the terms of the permit.
- 4.8 The permit holder shall report any damage to Board property (building and equipment) to the custodian in a timely manner.
- 4.9 The permit holder shall protect, indemnify and save harmless the Board, its servants of agents, of and from all claims for damages arising from the permit holder's negligence (and without limiting the generality of the foregoing) personal injury, property loss, infringement of royalty rights, slander, sedition and subversion that may rise out of or occur during the use of the facilities by the permit holder, or which may occur as a result of any public performance.
- 4.10 The permit holder must remove all of their equipment before leaving the facility. No storage of personal equipment is allowed on Board property.
- 4.11 The permit holder shall be responsible for any costs incurred arising out of misuse or damage to Board facilities or property.
- 4.12 The permit holder will be responsible for all costs due to cancellation, unless the permit office is notified in writing seven (7) days prior to the cancelled date. No refund will be issued. Frequent non-use of the requested space will result in permit cancellation.
- 4.13 The permit holder must ensure that all individuals attending are under their immediate supervision and control.
- 4.14 All permit holders are expected to leave facilities in a tidy manner with all garbage/recycling in appropriate bins.
- 4.15 Approved classroom use shall respect and adhere to the following:
  - 4.15.1 Do not erase items on the blackboard, disturb bulletin boards, or use teacher's aids within the classroom.
  - 4.15.2 Furniture moved must be put back.
  - 4.15.3 Electronic or technical equipment is not for community use unless clearly indicated on the permit and approved by Administration at the time of permit application.
  - 4.15.4 The permit holder will not have access to the school wifi.
- 4.16 York Catholic District School Board is committed to maintaining a safe and secure work environment for all employees. Workplace violence including physical or verbal abuse will not be tolerated.
- 4.17 The permit holder must adhere to the provisions outlined in York Catholic District School Board's Code of Conduct Policy.

## **5. Restrictions**

Permit privileges may be withdrawn for any violations to the following restrictions:

- 5.1 The consumption of alcoholic beverages and/or drugs are strictly prohibited at all times in all

Board facilities.

5.2 All tobacco, cannabis products and electronic cigarette devices are prohibited on Board property.

5.2.1 The use of tobacco for traditional indigenous cultural or spiritual purposes is permissible pursuant to section 19(4) of the *Smoke Free Ontario Act*.

5.3 Games of chance in any form are prohibited in all facilities.

5.4 Weapons of any kind are prohibited and are a violation of the Board's *Safe Schools Policy*.

5.5 The Board shall not store equipment or supplies owned by outside agencies, persons, or groups without permission from school administration. It must be noted that the Board and/or the school shall not be held responsible or liable for damages or loss to any non-board equipment or supplies.

5.6 Except for school activities, or unless pre-approved by the Board, no advertising in connection with any production or event is to be displayed on, or affixed to, any part of the school ground or facilities.

5.7 Only approved sports equipment will be allowed for use in gymnasiums. These include mush balls for baseball permits and plastic blades for floor hockey permits.

5.8 Only non-marking rubber soled shoes shall be worn in gymnasiums for sports activities i.e. no black soled gymnasium shoes.

5.9 The application of powder, wax, or any other preparation to floors for dancing purposes is strictly prohibited.

5.10 Activities considered by the Board to be injurious to the school grounds and/or facilities shall be prohibited.

5.11 Subletting or transferring of space to any other user than named on the permit is not allowed.

5.12 Allergens: Nuts, nut products, shellfish, fragrances are not permitted. 5.13 Only service animals are permitted inside school facilities.

5.13 Electrical cooking appliances are not allowed in the school facility.

5.14 Physical or verbal abuse of any York Catholic District School Board employee.

## **6. Health & Safety**

6.1 The permit holder is responsible for ensuring suitable supervision (adult of 18 years of age or older). If incidents of unsafe supervision are reported to Administration, Administration reserves the right to cancel or suspend the permit.

6.2 The permit holder must review and become familiar with fire safety procedures and ensure that, in the event of an emergency, they are strictly adhered to. All persons must leave the building immediately when an alarm is sounded, or when requested by Board Staff, Police, or Fire Officials.

6.3 Fire routes and pedestrian walkways shall be kept clear at all times. Vehicles may only be parked in approved parking lots, not on playing fields or grass. The permit holder must ensure that all participants and spectators are aware of parking availability and limitations.

6.4 The aisles, hallways, and exits must be kept free from obstruction.

6.5 All board properties are equipped with video surveillance equipment.

## Schedule A – Classifications/Categories of Permits

Classification	Description
Classification A	Board or School Sponsored Activities
Classification B	Catholic Church Services, Masses and Religious Instruction Classes provided by local Parish and affiliated with the Archdiocese.
Classification C	Negotiated Agreement for Defined Space Requirements to include: Colleges and Universities (School Yr. only), Election Polling Stations, Partnerships, Film Productions and Community Planning & Partnerships.
Classification C-1	Non-Profit Child Care Programs approved by the Board (Operating during school breaks)
Classification D	Non-profit Children and Youth Programs to include: Scouts, Girl Guides, Embers, Cubs, Cadets
Classification D-1	Non-profit Children and Youth Recreational Programs to include: Sports activities sponsored by Service Groups. (Voluntary Supervision)
Classification D-2	Non-profit Children and Youth Recreational Programs operated by Municipalities and Institutions, Religious, <b>and</b> Cultural <del>Service and Ratepayers Groups to include: Municipal Parks and Recreation, YMCA, YWCA, Lions, Kiwanis, Block Parents, Red Cross, Non-Profit Cultural Institution</del>
Classification D-3	Non-profit Adult Recreational Activities
Classification E	Community Group or Organization Religious, Cultural, Service and Ratepayers Groups, <b>and</b> Institutions <del>and recognized Political Organizations (Federal/Provincial/Municipal)</del> Individuals or Groups providing Services and Programs for the community and charging participation or user fees (Paid Supervision) Including: Music, Dancing, Arts, Drama and Gymnastics Classes
Classification F	Commercial Enterprises

## Schedule B – Non Profit - Permit Fees

	Classification - Hourly Rate				
	C1	D	D-1	D-2	D-3
<b>Space - facility fee</b>					
Classroom/Meeting room		\$0.00	\$7.20	\$2.97	\$17.99
Gym - Single Elem		\$0.00	\$7.20	\$11.42	\$17.99
Gym - Single Sec		\$0.00	\$7.20	\$11.42	\$17.99
Gym - Double Sec		\$0.00	\$14.40	\$22.85	\$35.99
Gym - Triple Sec		\$0.00	\$21.60	\$34.27	\$53.99
Cafeteria - Sec (excl. kitchen)		\$0.00	\$7.20	\$11.42	\$17.99
Library - Elem or Sec		\$0.00	\$4.20	\$11.42	\$17.99
<b>Weekend Fees</b>					
Custodial Overtime Fee - Sat		\$31.50	\$31.50	\$31.50	\$31.50
Custodial Overtime Fee - Sun		\$42.00	\$42.00	\$42.00	\$42.00
Utility Surcharge Gym or Cafe (Weekend only)	\$5.00	\$5.99	\$5.99	\$5.99	\$5.99
Utility Surcharge Classroom (Weekend only)				\$1.20	
<b>Equipment Fees</b>					
Chairs (each)	\$0.10	\$0.00	\$0.10	\$0.10	\$0.10
Tables	\$0.82	\$0.00	\$0.82	\$0.82	\$0.82
Gym Risers & Bleachers	\$10.25	\$0.00	\$10.25	\$10.25	\$10.25
Basketball Hoops	\$2.05	\$0.00	\$2.05	\$2.05	\$2.05
<del>Badminton or Volleyball Standards</del>					
Standards and Nets	\$3.28	\$0.00	\$3.28	\$3.28	\$3.28
Goals	\$2.05	\$0.00	\$2.05	\$2.05	\$2.05
Mats	\$4.10	\$0.00	\$4.10	\$4.10	\$4.10
Risers & Bleachers	\$10.25	\$0.00	\$10.25	\$10.25	\$10.25
<b>Fees per permit</b>					
Processing Fee	\$50.00	\$35.00	\$35.00	\$35.00	\$35.00
Insurance	Quote to be provided if purchasing from the board				
Basketball Hoops (over 20 uses)	\$40.98	\$0.00	\$40.98	\$40.98	\$40.98
<del>Badminton or Volleyball Standards (over 20 uses)</del>					
Standards and Nets (over 20 uses)	\$53.27	\$0.00	\$53.27	\$53.27	\$53.27
Goals (over 20 uses)	\$61.48	\$0.00	\$61.48	\$61.48	\$61.48
<del>Mats (over 20 uses)</del>					

The hourly rates noted above are as per anticipated Ministry Grant for 2023/2024 year. If funding does not occur, rates will be restored, and a new invoice will be issued.

Fees and rates are subject to HST. Insurance rates are subject to RST.

For Classification A & B, the only fees applicable are weekend overtime and utility surcharge.

For Classification C, all fees are negotiated.

For Classification C1, any applicable custodial overtime fee from Monday to Friday is \$42.00

## Schedule C – Profit - Permit Fees

	Classification - Hourly Rate	
	E	F
<b>Space - facility fee</b>		
Classroom/Meeting room	\$24.75	\$41.24
Gym - Single Elem	\$41.24	\$74.24
Gym - Single Sec	\$41.24	\$74.24
Gym - Double Sec	\$57.76	\$115.48
Gym - Triple Sec	\$82.48	\$148.46
Cafeteria - Sec (excl. kitchen)	\$74.24	\$173.21
Library - Elem or Sec	\$41.24	\$74.24
<b>Weekend Fees</b>		
Processing Fee	\$50.00	\$50.00
Custodial Overtime Fee - Sat	\$42.00	\$42.00
Custodial Overtime Fee - Sun	\$56.00	\$56.00
Custodial Fee	\$42.00	\$42.00
Insurance	Quote to be provided if purchasing from the board	
Utility Surcharge Gym or Cafe	\$11.26	\$11.26
Utility Surcharge Classroom	\$2.25	\$2.25
<b>Equipment Fees</b>		
Chairs (each)	\$0.30	\$0.43
Tables	\$3.30	\$4.95
Gym Risers & Bleachers	\$29.26	\$42.89
Basketball Hoops	\$3.30	\$3.30
<del>Badminton or Volleyball Standards</del>		
Standards and Nets	\$5.27	\$5.27
Goals	\$3.30	\$3.30
Mats	\$6.60	\$6.60
Risers & Bleachers	\$29.26	\$42.89
<b>Fees per permit</b>		
Processing Fee	\$50.00	\$50.00
Insurance	Quote to be provided if purchasing from the board	
Basketball Hoops (over 20 uses)	\$65.98	\$65.98
<del>Badminton or Volleyball Standards (over 20 uses)</del>		
Standards and Nets (over 20 uses)	\$85.77	\$85.77
Goals (over 20 uses)	\$98.98	\$98.98
<del>Mats (over 20 uses)</del>		

Rates noted above are per hour.

Fees and rates are subject to HST. Insurance rates are subject to RST.

## Schedule D – School Breaks

### ALL NON-PROFIT SCHOOL BREAK PROGRAMS

Exclusive use of space during school breaks	
Classroom/Portable	\$26.39 per day
Gymnasium – elementary	\$52.78 per day
Gymnasium (single) – secondary	\$52.78 per day
Gymnasium (double) – secondary	\$85.77 per day
Gymnasium (triple) – secondary	\$105.58 per day

### ALL PROFIT SCHOOL BREAK PROGRAMS

Exclusive use of space during school breaks	
Classroom/Portable	\$39.59 per day
Gymnasium – elementary	\$79.17 per day
Gymnasium (single) – secondary	\$79.17 per day
Gymnasium (double) – secondary	\$128.67 per day
Gymnasium (triple) – secondary	\$158.36 per day

#### Notes:

Processing fee for all school break permits is \$50.00 per permit.

Custodial overtime fees may be applicable during the school breaks as custodial hours of work may vary.

#### **SCHEDULE E NOTES:**

Summer rental rates are limited to the following time restrictions:

- (i) ~~Licensed before & after child care programs may operate starting July, ending mid August but are subject to staff and space availability as well as the Board's summer maintenance and cleaning programs. Any extensions to the end of August are subject to approval on an individual basis and additional costs will apply to prepare the school for September opening.~~
- (ii) ~~Non-profit children & youth recreational summer programs offered by municipalities and service groups are limited to a 6-week duration starting beginning of July, ending mid August and are subject to staff and space availability as well as the Board's summer maintenance and cleaning programs.~~
- (iii) ~~Summer surcharge of \$1100.00 per week is applicable.~~



# YORK CATHOLIC DISTRICT SCHOOL BOARD

## SCHEDULE A

### CLASSIFICATION OF GROUPS AND ORGANIZATIONS PROCESSING FEES & RATES

CLASSIFICATION	DESCRIPTION	FEES	2021/2022	
			Fee with Ministry Grant**	Fees without Ministry Grant*
A	<p><b>Board or School Sponsored Activities including:</b></p> <p><del>Board or School events, Catholic School Council, School Dances, School Sporting Activities, Continuing Education, Trustee meetings and Family of Schools events</del></p>	<p>Processing</p> <p><b>Per Use Fees***</b></p> <p>Facility Equipment</p> <p><b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT Utility Fee Gym/Cafe</p>	<p>No charge</p> <p>\$31.50 \$42.00 \$ 5.05</p>	<p>No charge</p> <p>\$42.00 \$56.00 \$10.10</p>
B	<p><b>Catholic Church</b> Services, Masses and Religious Instruction <del>Glasses provided by local Parish and affiliated with the Archdiocese:</del></p> <p><b>Catholic Church Service Groups including:</b> <b>Catholic Women's League, Knights of Columbus, Catholic Youth</b> Groups, Catholic Children's Aid Society, Share Life.</p>	<p>Processing</p> <p><b>Per Use Fees***</b></p> <p>Facility Equipment</p> <p><b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT Utility Fee Gym</p>	<p>No charge</p> <p>\$31.50 \$42.00 \$ 5.05</p>	<p>No charge</p> <p>\$42.00 \$56.00 \$10.10</p>
C	<p><b>Negotiated Agreements</b> for Defined Space Requirements to include:</p> <p><del>Colleges and Universities (School Yr. only), Election Polling Stations, Partnerships, Film Productions and Community Planning &amp; Partnerships.</del></p>	As per agreement		

<del>C-1</del>	<b>Non-Profit Child Care Programs</b> approved by the Board (Operating during school breaks)	Processing  <b>Per Use Fees***</b> Facility Equipment  <b>Weekday hourly custodial overtime fee</b>	\$35.00	\$50.00  Schedule E Schedule C &  <del>D</del> \$42.00
<del>D</del> (no longer included in <del>D-1</del> )	<b>Non-profit Children and Youth Programs</b> to include:  Scouts, Guides, Brownies, Cubs, Cadets	Processing  <b>Per Use Fees***</b> Facility Equipment  <b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT Utility Fee—Gym/Cafe	\$35.00  \$0.00 \$0.00  \$31.50 \$42.00 \$ 5.05	\$50.00  \$15.15 Schedule C & D  \$42.00 \$56.00 \$10.10
<del>D-1</del>	<b>Non-profit Children and Youth Recreational Programs</b> to include: Sports activities sponsored by Service Groups. (Voluntary Supervision)	Processing  <b>Per Use Fees***</b> Facility Equipment (see Schedule C & D)  <b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT Utility Fee—Gym/Cafe	\$35.00  \$12.65  \$31.50 \$42.00 \$ 5.05	\$50.00  \$15.15  \$42.00 \$56.00 \$10.10
<del>D-2</del>	<b>Non-profit Children and Youth Recreational Programs</b> operated by Municipalities and Institutions, Religious, Cultural, Service and Ratepayers Groups to include: Municipal Parks and Recreation, YMCA, YWCA, Lions, Kiwanis, Block Parents, Red Cross,	Processing  <b>Per Use Fees***</b> Facility—Gym Facility—Classroom Equipment (see Schedule C & D)  <b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT	\$35.00  \$20.23 \$5.08  \$31.50 \$42.00	\$50.00  \$22.73 \$7.58  \$42.00 \$56.00

	Non-Profit Cultural Institution	Utility Fee—Gym Utility Fee—Classroom	\$ 5.05 \$ 1.04	\$10.10 \$ 2.02
D-3	<b>Non-profit Adult Recreational Activities</b>	Processing  <b>Per Use Fees***</b> Facility Equipment (see Schedule C & D)  <b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT Utility Fee—Gym/Cafe	\$35.00  \$31.63  \$31.50 \$42.00 \$ 5.05	\$50.00  \$37.88  \$42.00 \$56.00 \$10.10
E	<b>Community Group or Organization</b> Religious, Cultural, Service and Ratepayers Groups, Institutions, and recognized Political Organizations (Federal/Provincial/Municipal)  Individuals or Groups providing Services and Programs for the community and charging participation or user fees (Paid Supervision) Including: Music, Dancing, Arts, Drama and Gymnastics Glasses	Processing  <b>Per Use Fees***</b> Facility (see Schedule B) Equipment (see Schedule C & D)  <b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT Utility Fee—Gym/Cafe Utility Fee—Classroom	N/A    \$42.00 \$56.00 \$10.10 \$ 2.02	\$50.00    \$42.00 \$56.00 \$10.10 \$ 2.02
F	<b>Commercial Enterprises</b>	Processing  <b>Per Use Fees***</b> Facility (see Schedule B) Equipment (see Schedule C & D)  <b>Weekend hourly fees:</b> Sat Custodial OT Sun Custodial OT Utility Fee—Gym/Cafe Utility Fee—Classroom	N/A    \$42.00 \$56.00 \$10.10 \$ 2.02	\$50.00    \$42.00 \$56.00 \$10.10 \$ 2.02

~~\* Prices will increase annually by the Consumer Price Index~~

~~\*\* This column outlines the current discounted fees that are in effect while the Ministry of Education offers the Community Use of Schools Grant.~~

~~\*\*\* Per Use is a two hour time period, 6:00 p.m. — 8:00 p.m. or 8:15 p.m. to 10:15 p.m. per single gym.~~

~~Note: Custodial overtime fees are based on the current collective agreement and may be subject to change.~~

## SCHEDULE B

### FACILITIES RENTAL RATES PER 4 HOUR USE

<del>SCHOOL AND BOARD FACILITIES RENTAL RATES*</del>	<del>CLASS E</del>	<del>CLASS F</del>
<del>Classroom – per use (4hrs.)</del> <del>Meeting Room – Ed. Centre per use (4hrs.)</del>	<del>\$88.77</del> <del>\$88.77</del>	<del>\$147.94</del> <del>\$147.94</del>
<del>Gymnasium – Single Elem. per use (4 hrs.)</del> <del>Gymnasium – Double Elem. per use (4 hrs.)</del>	<del>\$147.94</del> <del>\$189.38</del>	<del>\$266.31</del> <del>\$295.89</del>
<del>Gymnasium – Single Sec. per use (4 hrs.)</del> <del>Gymnasium – Double Sec. per use (4 hrs.)</del> <del>Gymnasium – Triple Sec. per use (4 hrs.)</del> <del>Boardroom – Education Centre per use (4 hrs.)</del>	<del>\$147.94</del> <del>\$207.12</del> <del>\$295.89</del> <del>\$266.31</del>	<del>\$266.31</del> <del>\$414.25</del> <del>\$532.60</del> <del>\$532.60</del>
<del>Cafeteria – Secondary (excluding kitchen) per use (4hrs)</del>	<del>\$266.31</del>	<del>\$621.37</del>
<del>Lecture Rm. – Secondary per use (4 hrs.)</del>	<del>\$147.94</del>	<del>\$266.31</del>
<del>Library – Elementary or Secondary per use (4 hrs.)</del>	<del>\$147.94</del>	<del>\$266.31</del>
<del>Special Rooms or Areas per use (4 hrs.)</del>	<del>Minimum \$295.89 as determined at the time of application for permit</del>	

~~\*Rental rates are for space in York Catholic District School Board facilities during regular operating hours when staffed by Custodians.~~

~~For use of space beyond these hours, Custodians and/or Security is required on-site and is subject to additional charges.~~

## SCHEDULE C

## EQUIPMENT & FURNITURE RENTAL RATES

(on a per basis)

	<b>CLASS C1-D3</b>		<b>CLASS E**</b>	<b>CLASS F**</b>
<b>EQUIPMENT OR FURNITURE</b>	<b>With Grant</b>	<b>Without Grant</b>		
<u>Chairs</u> — rate per 100 chairs does not include setup or removal	\$17.09	\$29.59	\$53.26	\$76.93
<u>Tables</u> — rate for each table does not include setup or removal	\$1.36	\$2.36	\$5.92	\$8.88
<u>P.A. Systems</u>	\$20.51	\$35.51	\$59.16	\$94.69
<u>Stage Lighting</u> — Secondary School*	\$20.51	\$35.51	\$71.01	\$94.69
<u>Gym Risers and Bleachers</u>	\$17.09	\$29.59	\$52.49	\$76.93
<u>Tarps</u> — floor covering for gym floor	\$51.27	\$88.77	\$177.54	\$266.31
Other Equipment — upon approval and subject to conditions as set out by the Principal or the Board	Rated to be determined at the time of application.			

\*Permit holder is required to arrange through the school for stage lighting technician.

Extensive setup or breakdown is subject to additional charges.

\*\* Classification E & F — Ministry of Education Community Use of Schools Grant is not applicable to these classifications.

## SCHEDULE D

## SPORTS EQUIPMENT RENTAL RATES

	<b>C1-D3 With Grant</b>		<b>C1-F Without Grant**</b>	
<b>Sports Equipment Type</b>	<b>Single Use</b>	<b>Multiple Use</b>	<b>Single Use</b>	<b>Multiple Use</b>
Basketball Hoops	<del>\$3.42</del>	<del>\$34.18</del>	\$5.92	<del>\$59.18</del>
Standards	<del>\$3.42</del>	<del>\$34.18</del>	\$5.92	<del>\$59.18</del>
Standards and Nets	<del>\$5.46</del>	<del>\$44.43</del>	\$9.46	<del>\$76.93</del>
Goals	<del>\$3.42</del>	<del>\$51.27</del>	\$5.92	<del>\$88.77</del>
Mats (up to 5 mats)	<del>\$6.84</del>	<del>\$51.27</del>	\$11.84	<del>\$88.77</del>

~~\*Weekend use of sports equipment is subject to rates based on a two-hour increment, single gym, per diem basis.~~

~~\*\* Classification E & F — Ministry of Education Community Use of Schools Grant is not applicable to these classifications.~~

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### SCHEDULE E

### ALL NON-PROFIT SCHOOL BREAK PROGRAMS

<b>Exclusive use of space during school breaks</b>	
Glassroom/Portable	\$23.67 per day
Gymnasium — elementary	\$47.34 per day
Gymnasium (single) — secondary	\$47.34 per day
Gymnasium (double) — secondary	\$76.93 per day
Gymnasium (triple) — secondary	\$94.69 per day

### ALL PROFIT SCHOOL BREAK PROGRAMS

<b>Exclusive use of space during school breaks</b>	
Glassroom/Portable	\$35.51 per day
Gymnasium — elementary	\$71.01 per day
Gymnasium (single) — secondary	\$71.01 per day
Gymnasium (double) — secondary	\$115.40 per day
Gymnasium (triple) — secondary	\$142.03 per day

#### **SCHEDULE E NOTES:**

Summer rental rates are limited to the following time restrictions:

- (i) Licenced before & after child care programs may operate starting July, ending mid August but are subject to staff and space availability as well as the Board's summer maintenance and cleaning programs. Any extensions to the end of August are subject to approval on an individual basis and additional costs will apply to prepare the school for September opening.
- (ii) Non-profit children & youth recreational summer programs offered by municipalities and service groups are limited to a 6-week duration starting beginning of July, ending mid August and are subject to staff and space availability as well as the Board's summer maintenance and cleaning programs.
- (iii) Summer surcharge of \$1100.00 per week is applicable.





## YORK CATHOLIC DISTRICT SCHOOL BOARD

BOARD POLICY	
<i>Policy Section</i>	<b>Governance</b>
<i>Policy Number</i>	<b>106</b>
<i>Former Policy Number</i>	<b>803</b>
<i>Total Pages</i>	<b>13</b>
<i>Original Approved Date</i>	<b>May 1969</b>
<i>Subsequent Approval Dates</i>	<b>May 1988, June 22, 1999, January 2003, March 2008, February 25, 2014 November 29, 2016 January 31, 2017 June 15, 2021 March 29, 2022</b>

### DELEGATIONS TO THE BOARD

#### 1. PURPOSE

The Board recognizes that *all stakeholders* need to have a voice in the decision making process of the Board and to have their concerns heard. This policy is intended to provide the guidelines under which the above may occur. This policy is consistent with all applicable legislation, including the *Education Act*, The *Ontario Human Rights Code*, *Municipal Freedom of Information and Protection of Privacy Act* (MIFIPPA), and *Occupational Health and Safety Act* (OHSA).

#### 2. OBJECTIVE

The York Catholic District School Board values the input **that** members of the community may provide ~~into issues~~ where they have a particular concern or interest subject to approved guidelines. Therefore, it is the policy of the York Catholic District School Board that delegations to the Board enable members of the community to give timely input on items to be discussed on a Board Agenda.

#### 3. PARAMETERES

In the interest of engaging our communities, the Board is committed to providing stakeholders with opportunities to provide input and/or feedback that supports or informs Board decision-making through delegations received at Regular, Special Meetings of the Board or Committee Meetings. All delegations may be made in person or virtually.

#### In an Effort to Conducting Efficient Board Meetings:

All approved delegations will be heard and Trustees may ask questions for clarification purposes only. There will be no engagement or debate between the Board of Trustees, Board staff and the official spokesperson of the delegation.

Where the matter brought before the Board requires a decision, the Board will

notify the official spokesperson through written communication of the decision, or of the date of the meeting at which a decision is to be made.

Upon receipt of a public request to make a delegation in accordance with the parameters outlined in this policy, the Executive Committee of the Board will:

- i) Review the request and determine whether the presentation will be heard. (Presentations contrary to directives by the Ministry of Education, Ministry of Labour, Ministry of Health and our local and provincial Health Units will not be heard).
- ii) Determine if the approved delegation request will be heard before the whole Board, in a private session of the Board, referred to a committee of the Board, or referred to the Director of Education to determine appropriate action(s).

All delegates must submit a written copy of their deputation (**verbatim speech**) and presentation to the Administrator to the Director and Trustee Services by end of Saturday (11:59 pm) prior to the scheduled Board meeting. If supporting information is not submitted within the timeline, the delegation will be removed from the agenda.

## **DELEGATIONS TO THE BOARD: PUBLIC PRESENTATIONS**

3.1 Delegates may be heard at Committee meetings on an item on the agenda or concerning matters within the Committee's term of reference. The topic of deputation will determine at which Committee the delegate will be heard.

3.1.2 The Administrator to the Director and Trustee Services shall notify the Delegate of the Committee meeting in which the agenda item shall be presented.

~~3.12 An individual or delegation wishing to make a presentation to the Board shall process the request through the Administrator to the Director and Trustee Services who will provide direction and a copy of Form Admin. 29(a) which must be fully completed and received at least **seven (7) days prior to the date of the meeting.**~~

3.2 An individual or delegation wishing to make a presentation to the Board shall submit Form Admin. 29(a) [see attached] to the Administrator to the Director and Trustee Services. Form Admin 29(a) must be fully completed and received at least **seven (7) days prior to the date of the meeting.**

3.23 An individual or delegation wishing to make a presentation to the Board requesting the development of a proposed policy or the revision of an existing policy must also complete and submit Appendix 4 (Rationale for the Development, Review or Revision of a Policy) of Policy 101: Meta Policy: Policy Management and Governance along with Form Admin. 29(a) to the Administrator to the Director and Trustee Services as outlined in parameter 3.42.

~~3.3-4~~ An individual or delegation wishing to make a presentation to the Board related to a specific Pupil Accommodation Review shall only be received by the Board of Trustees

at a Special Meeting of the Board in accordance with Board Policy 713: *Pupil Accommodation Review of Schools*.

- 3.45 No more than three (3) delegations will be approved for any Regular Board meeting by the Executive Committee of the Board.
- 3.56 During the budget development process, the Board explicitly solicits stakeholder input and as such, more than three delegations may be approved by the Executive Committee for Board meetings in May and June.
- 3.67 At the discretion of the Chair, additional delegations may be added to a Board agenda in the event of a time sensitive situation.
- 3.78 The Chair reserves the discretion to defer a request for a presentation.
- 3.89 Following approval to hear the presentation, before the full Board or a committee of the Board, the spokesperson for the group (or individual) shall be notified of the meeting date and time and shall be apprised of the expectations for the presentation.
- 3.910 Up to two (2) individuals may serve as spokespersons for any delegation, and no other members of the delegation shall address the Board, except by request of a Trustee and permission of the Chair.
- ~~3.9.1 Written material in support of the presentation, including PowerPoint, will be provided to Trustees by end of day Saturday (11:59pm) prior to the scheduled Board meeting.~~
- ~~3.9.2 If supporting information is not submitted within the timeline, the delegation will be removed from the agenda and presented at a future Board meeting.~~
- 3.4011 A maximum of *ten (10)* minutes per delegation is allowed to make a presentation. The Chair may choose to extend the time.
  - 3.11.1 If there are numerous delegation requests on a particular matter, the Executive Committee reserves the right to reduce the delegation time to 5 minutes and/or call a special board meeting to hear the delegations.
- 3.142 All delegation presentations must agree to be livestreamed during the meeting.
- 3.13 Virtual accommodations shall be provided to delegates upon request.
- 3.14 Delegates shall present concerns in a constructive manner and maintain a level of decorum which will allow meetings to proceed effectively. Delegates are not permitted to make negative or derogatory personal references.
  - 3.14.1 During a deputation, should the delegate use offensive language or the name/title/ position of any person in a negative, critical or derogatory manner, directly or indirectly, the Chair of the meeting shall advise the delegate to refrain from using pejorative language. Should it continue, the Chair has the authority to terminate the delegate's presentation.

## DELEGATIONS TO THE BOARD: PRESENTATION OF A PETITION

- 3.16 An individual or delegation wishing to present a petition as part of their delegation to the Board shall present a written copy of the petition to the Administrator to the Director and Trustee Services at least fifteen (15) minutes prior to the start of the Board Meeting. Receipt of the petition will be noted by the Chair on behalf of the Board and noted in the minutes of the meeting by the recording secretary .
- 3.16.1 For the purpose of a virtual presentation the original petition must be to the Catholic Education Centre prior to the meeting to the Administrator to the Director and Trustee Services.
- 3.17 An individual or delegation wishing to present a petition to the Board related to a specific Pupil Accommodation Review shall only be received by the Board of Trustees at a Special Meeting of the Board in accordance with Board Policy 713: *Pupil Accommodation Review of Schools*.
- 3.18 Petitions shall contain original signatures only, written directly on the face of the petition, along with printed names, addresses, postal codes and email addresses.
- 3.18.1 Electronic petitions shall not be accepted.
- 3.19 If a Trustee wishes to present a petition to the Board on behalf of their community, they should process it through the Executive Committee for placement on a Board agenda.

## DELEGATIONS TO THE BOARD: PRESENTATIONS RELATED TO A PUPIL ACCOMMODATION REVIEW OF SCHOOLS

- 3.20 All public delegations related to a specific Pupil Accommodation Review shall only be received by the Board of Trustees at the Special Meeting of the Board in accordance with Board Policy 713: *Pupil Accommodation Review of Schools* and this policy.
- 3.21 Members of the public will be given the opportunity to provide feedback on a *Final Staff Report with Community Consultation (Report 2)* through public delegations to the Board of Trustees at a Special Meeting of the Board no later than ten (10) business days after a *Final Staff Report with Community Consultation (Report 2)* is publicly posted.
- 3.22 The Special Meeting of the Board to receive public delegations related to a *Final Staff Report with Community Consultation (Report 2)* shall be announced and advertised publicly by the Board through a range of communication methods and shall be posted on the Board's website.
- 3.23 In accordance with Ministry *Guidelines* and in alignment with Board Policy 713: *Pupil Accommodation Review of Schools*, there is no limit to the number of delegations approved for presentation at the Special Meeting of the Board as it is designated solely to receiving input to a *Final Staff Report with Community Consultation (Report 2)*. There may be occasions where the number of delegation requests received exceeds the time allotment of the Special Meeting of the Board. If this occurs a date and time for the Board to reconvene the Special Meeting of the Board will be confirmed by the Chair of

the Board and communicated to community stakeholders.

- 3.24 An individual or delegation wishing to give input to the Board related to a *Final Staff Report with Community Consultation (Report 2)* may notify the Administrator to the Director and Trustee Services to the Director's Office: Trustee Services at any time prior to the start of the Special Meeting of the Board or notify designated personnel at any time during the Special Meeting of the Board. A copy of Admin 29(c) for completion will be distributed to the individual or delegation.
- 3.25 One person shall serve as spokesperson for a group. Additional written material in support of the presentation may be provided to Trustees at the meeting, but shall be provided to the Administrator to the Director and Trustee Services to the Director's Office for inclusion in the *Final Staff Report with Public Delegations Addendum (Report 3)*.
- 3.26 Each presentation of input shall be limited to a maximum of five (5) minutes.
- 3.27 Feedback received through the presentation of public delegations related to a *Final Staff Report with Community Consultation (Report 2)* shall be included in the *Final Staff Report with Public Delegations Addendum (Report 3)*.

#### **DELEGATIONS TO THE BOARD: PRESENTATIONS ON "IN CAMERA" MATTERS**

- 3.28 Items should be forwarded to the Executive Committee of the Board for consideration.

### **4. RESPONSIBILITIES**

#### **4.1 Executive Committee**

- 4.1.1 To receive, review and approve requests to make a presentation before the Board.

#### **4.2 Director of Education**

- 4.2.1 To oversee compliance with the Delegations to the Board and Input to Agenda Items policy.

#### **4.3 Administrator to the Director and Trustee Services**

- 4.3.1 To manage requests to make a public presentation, present a petition, give input related to an item on the agenda or a pupil accommodation review to the Board.

### **5. DEFINITIONS**

#### **5.1 Delegation**

A formal presentation made to the whole Board at a Regular or Special Meeting of the Board or in a private session of the Board relating to a specific issue or matter as outlined in Section 3: *Parameters* of this policy.

#### **5.2 Petition**

A formal request presented to an Official of the Board pertaining to a defined issue and/or concern. Such requests will be presented in the form of a typewritten document containing original signatures only, written directly on the face of the petition, printed names, addresses, postal codes and email addresses. Email, faxed, or photocopied, or

incomplete petitions ~~are~~ shall not be accepted and will not be presented.

## 7. CROSS REFERENCES

### Legislation

YCDSB [Policy 101 Meta Policy: Policy Management and Governance](#)

YCDSB [Policy 713 Pupil Accommodation Review of Schools](#)

### Appendices

[Admin 29\(a\)](#) Public Request to Make a Presentation or Present a Petition

[Admin 29\(c\)](#) Public Request to Make a Presentation Related to a Pupil Accommodation Review

[Appendix 4](#) - Rationale for the Development, Review or Revision of a Policy



## YORK CATHOLIC DISTRICT SCHOOL BOARD

### **PUBLIC REQUEST TO MAKE A PRESENTATION OR PRESENT A PETITION**

**Please Note:**

Each individual/group is allowed a maximum of 10 minutes to make a presentation and to answer questions from Trustees. In the interest of operating efficient Board meetings there will be occasions when delegations shall be limited.

#### **1) INDIVIDUAL MAKING THE REQUEST:**

Name:			
Address:			
Contact Number:		Email Address:	
Name of group being represented (if applicable):			
Name of home school being represented:			
Are you a York Catholic District School Board employee? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Is this request related to a motion and/or decision of the Board? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Agenda Topic:			

#### **2) SPOKESPERSON (not to exceed 3 people)**

Name:			
Address:			
Contact Number:		Email Address:	

Name:			
Address:			
Contact Number:		Email Address:	

Name:			
Address:			
Contact Number:		Email Address:	

**3) SPECIFIC STATEMENT OF ISSUE:**

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**4) SUMMARY OF KEY PRESENTATION POINTS:**

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**5) IF APPLICABLE, YOUR KEY RECOMMENDATIONS/SUGGESTIONS TO ADDRESS THE PROBLEM/ISSUE:**

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Form prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

**I am aware that my delegation presentation will be livestreamed during the Board Meeting.**



## **EQUIPMENT REQUIREMENTS**

If your presentation is in an electronic format (PowerPoint, Slides, Audio, Video) the information you provide will help us support you during the presentation. Please email a copy of the electronic presentation by end of day Saturday (11:59pm) prior to the scheduled Board meeting. Email Presentation to [board.delegations@ycdsb.ca](mailto:board.delegations@ycdsb.ca)

### **Please specify technology requirements needed:**

- ☐ Presentation (PowerPoint, Google Slide, Keynote) **with no audio** and video embedded
- ☐ Presentation (PowerPoint, Google Slide, Keynote) **with audio** and video embedded
- ☐ Internet Needed (Example: playing YouTube video or reference to a website)

Other: \_\_\_\_\_

### **Please Note:**

Presenters should ensure that a completed Admin. 29(a) form is received by the Administrator to the Director and Trustee Services Office at the Catholic Education Centre, 320 Bloomington Road West, Aurora, Ontario, L4G 0M1 by mail or fax (905) 713-1272 at least 7 days in advance of the meeting for a Public Presentation and at least 15 minutes prior to the start of the Board Meeting for a Presentation of a Petition.

### **HIGHLIGHTS OF POLICY 106 — DELEGATIONS TO THE BOARD:**

Presenters should ensure that a completed Admin. 29(a) form is received by the Administrator to the Director and Trustee Services Office at the Catholic Education Centre, 320 Bloomington Road West, Aurora, Ontario, L4G 0M1 by mail or fax (905) 713-1272 at least 7 days in advance of the meeting for a Public Presentation and at least 15 minutes prior to the start of the Board Meeting for a Presentation of a Petition.

Written material (**verbatim speech**) in support of the presentation, including PowerPoint, shall be provided to Trustees by end of day Saturday (11:59pm) prior to the scheduled Board meeting. If supporting information is not submitted within the timeline, the delegation will be removed from the agenda and presented at a future Board meeting.

Presenters who are requesting the development of a proposed policy or the revision of an existing policy as part of their delegation to the Board must also complete and submit Appendix 4 (Rationale for the Development of a Proposed Policy or Revision of an Existing Policy) of Policy 101: Meta Policy: Policy Management and Governance.

Presenters who use the name/title/position of a person in a negative, critical or derogatory manner shall have their presentation terminated. The Chair will direct the presentation to a private meeting of the Board. The presentation shall be processed as per Policy No. 424: Disposition of Complaints About Board Employees.



**YORK CATHOLIC DISTRICT SCHOOL BOARD**



**PUBLIC REQUEST TO MAKE A PRESENTATION RELATED TO A  
PUPIL ACCOMMODATION REVIEW**

**Please Note:**

Each individual/group is allowed a maximum of 5 minutes to present input related to a Pupil Accommodation Review. Input received from presenters will become the property of the Board and will be included as an addendum to Report 3 (refer to Policy 713: School Pupil Accommodation Reviews). This form must be submitted to designated Board personnel for inclusion in the Report immediately following the presentation.

**1) INDIVIDUAL MAKING THE REQUEST:**

Name:			
Address:			
Contact Number:		Email Address:	
Name of home school being represented:			
Identify the applicable geographical area being addressed (insert geographical area): <input type="checkbox"/>			

**2) SPOKESPERSON (an individual or one designated person to represent a group of individuals, if applicable):**

Name:	
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Address:			
Contact Number:		Email Address:	

**3) SPECIFIC STATEMENT OF ISSUE:**

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**4) SUMMARY OF KEY PRESENTATION POINTS:**

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**5) IF APPLICABLE, YOUR KEY RECOMMENDATIONS/SUGGESTIONS TO ADDRESS THE PROBLEM/ISSUE:**

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Form prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

**HIGHLIGHTS Please Note:**

~~A presenter who uses the name/title/position of a person in a negative, critical or derogatory manner shall have their presentation terminated by the Committee Chair.~~

~~A presenter(s) is not required to supply a complete text of their remarks in advance of the meeting. At the presenter's discretion, they may elect to prepare, copy and distribute their text to trustees/staff at the meeting (35 copies).~~

If presenters submit all presentation materials to the Administrator to the Director and Trustee Services, no later than 6 calendar days prior to the scheduled Board Meeting they will be included in the Special Board meeting agenda package.



## YORK CATHOLIC DISTRICT SCHOOL BOARD

### RATIONALE FOR THE DEVELOPMENT, REVIEW OR REVISION OF A POLICY

NAME: \_\_\_\_\_

INDICATE ONE (1) OF THE FOLLOWING: ☐ STAFF  
☐ STAKEHOLDER

**1) THE PURPOSE OF THE PROPOSED OR REVISED POLICY/PROCEDURE:**

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**2) THE OBJECTIVE OF THE PROPOSED OR REVISED POLICY/PROCEDURE - INDICATE HOW THE PROPOSED OR REVISED POLICY WOULD SUPPORT THE BOARD'S MISSION, VISION AND ENHANCE STUDENT/STAFF ACHIEVEMENT AND WELLBEING:**

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**3) INDICATE WHO WOULD BE DIRECTLY OR INDIRECTLY AFFECTED BY THE PROPOSED OR REVISED POLICY? HOW?**

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**4) INDICATE WHO SHOULD BE INVOLVED IN DEVELOPING THE PROPOSED POLICY OR REVISING THE EXISTING POLICY.**

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5) **WHAT WILL BE NEEDED FOR IMPLEMENTATION, EVALUATION, REVIEW PROCESS?**

6) **WHO WILL ORGANIZE ONGOING MONITORING OF THE NEW POLICY AND HOW WILL IT BE EVALUATED?**

7) **WHAT ARE THE IMPLICATIONS ASSOCIATED WITH THE PROPOSED OR REVISED POLICY (i.e. financial, human resources, awareness, other)?**

8) **WHAT ARE THE PROPOSED TIMELINES FOR IMPLEMENTATION?**

9) **ADDITIONAL COMMENTS:**

Signature Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Note:**

York Catholic District School Board Staff are to submit this completed Form to the Policy Steering Committee one week in advance of the next scheduled Committee meeting.

Stakeholders are to submit this completed Form along with the Delegation to Board Form as per the procedures outlined in Policy 106: *Delegations to the Board and Input on Agenda Items*.