



Rationale

To promote the health of students, the CISVA works with the Ministry of Health, the medical health professionals of Vancouver Coastal Health and Fraser Health Authorities.

Policy

In accordance with the BC Health Act (Schools) CISVA schools are to have procedures in place that cover communicable disease control (immunization), prevention of infection from blood-borne viruses, school management of students infected with blood borne pathogens, and prevention and management of anaphylaxis in a school setting.

Procedure

1. Communicable Disease Control
 - The immunization program provided by Vancouver Coastal Health (VCH) and Fraser Health Authorities is aimed at maintaining adequate levels of protection in school populations against major vaccine-preventable diseases.
 - The school administrator will:
 - a) Distribute immunization information and consent forms (VCH, FHA, school and/or CISVA information are distributed as necessary);
 - b) Collect completed forms for the community health nurse (to be handed over to the community nurse once collected);
 - c) Provide a safe environment in the school for delivery of the immunization program.
 - The Parent/Guardian will:
 - a) Provide immunization records when a student registers in the school for the first time.
 - b) Provide a completed consent form for the student for all immunizations (consent form will indicate yes or no).
 - The Student will:
 - a) Return signed parental consent forms to the school (no student can give personal consent for an immunization).
 - b) Attend designated immunization areas in an orderly manner.
2. Prevention of Infection from Blood-Borne Viruses (HIV, HEP B, HEP C)
 - Use gloves at all times to avoid contact with blood or body fluids.
 - Dispose of dressings and materials used to cleanse wounds in a plastic bag-lined covered receptacle.
 - Use approved disinfectant for blood spills.
 - Provide a puncture-proof sharps container to discard contaminated objects.
3. Students Infected with Blood Borne Pathogens
 - Mandatory disclosure of infection is not required; assume that anyone



GENERAL SCHOOL ADMINISTRATION

STUDENT HEALTH 406

could be infected with blood borne pathogen.

- Follow all Ministry of Health Guidelines in prevention of infection.
- Follow local health authorities' (VCH & Fraser Health) guidelines on flu infection in the school (i.e. 10% of school population absent due to illness reporting procedure).

4. Prevention and Management of Anaphylaxis in the School Setting

- Although most anaphylactic children learn to administer their own medication by about age 8, individuals of any age may require help during a reaction due to rapid progression of the symptoms. Therefore, adult supervision is required.
 - a) Provide training for all staff members in the use of the epinephrine injector.
 - b) Telephone 911 and inform that a child is having an anaphylactic reaction.
 - c) Telephone parents/guardians.
 - d) Have a staff member accompany the child to the hospital if parent not available or not immediately present to receive the child at the hospital.
 - e) Location of Epinephrine :
 - Epinephrine injectors provided by the parent/guardian should be kept in a covered and secure area (unlocked) known to all staff.
 - As soon as students are old enough they should carry their own injectors.
 - f) Review school emergency procedures for each anaphylactic student with staff and parents/guardians annually and as directed by a physician.

5. Children with Medical Conditions

Children with medical conditions such as seizures, asthma or diabetes are to have a care plan in place. The Community Health nurse can be a source of information and assistance in effecting a plan. For additional diabetes resources for schools refer to the BC Children's Hospital Endocrinology website.

Parents' Role (see VCH Section 13 of School Health Manual)

- a) Make the school aware of their child's medical condition and provide updates if this condition changes.
- b) Assist the school in completing a care plan for their child.
- c) Provide appropriate medications both for management and emergency and determine a plan with the school about where and how these should be kept and administered.



GENERAL SCHOOL ADMINISTRATION

STUDENT HEALTH 406

School's Role (see VCH Section 13 of School Health Manual)

- a) Keep a record of students who have identified medical conditions.
- b) Ensure that care plans for students with medical conditions are updated regularly.
- c) Consult with the Community Health nurse if you have questions about a care plan for a student. (see VCH website – plan forms available for download.)

Administration of Medication

In the case of ongoing administration or self administration of medication or provision of a health care procedure a plan with parental consent is to be in place with accompanying medical documents and/or support.

In the case of the administration or self administration of medication (Tylenol, Advil etc) that is occasional parental permission is to be provided.

If medication is required while a student is attending school, an administrator or any person designated by him/her shall administer or supervise the self administration of medication. If required the community health nurse will train a person/persons in the administration of medication or health care procedure.

No person shall perform any medical or health care procedure or administration of a medication that endangers the well being of a student or subjects that person to risk of injury or liability of negligence. (The exception is in the case of a life threatening emergency).

Head Injuries

All head injuries are to be reported and filed.

Parent/guardian is to be informed and made aware of the injury.

A student with a head injury is to be monitored for symptoms of possible concussion.

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| Reference: BC Health Act Vancouver Coastal Health website (student health –Your Health link) Fraser Health Regional Health Protection Guideline (VCH) Mayo Clinic website (head injuries) 'thinkfirst' Football BC – www.playfootball.bc.ca (concussions) Cross-reference: | Approved: Board of Directors |
| | Date Approved: January 3, 2012 |
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