



**MOOSONEE DISTRICT
SCHOOL AREA BOARD**

ADMINISTRATIVE PROCEDURE STUDENTS: NO. 319	
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ASTHMA FRIENDLY SCHOOL: RYAN’S LAW

PURPOSE

The Moosonee District School Area Board is committed to creating a safe learning environment that will reduce the risk for students with diagnosed asthma in accordance with Ryan’s Law (Ensuring Asthma Friendly Schools), 2015.

The safety of students with a medical condition such as asthma is a shared responsibility of the Board, family, health care providers, and community partners. This administrative procedure will ensure that appropriate communication and planning has taken place, with the goal of minimizing risk and being equipped to intervene and respond in the event of an asthma emergency.

DEFINITIONS

Asthma: According to the Ontario Lung Association, asthma 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—for example, poor air quality, mold, dust, pollen, viral infections, animals, smoke, and cold air. Symptoms of asthma are variable and can include coughing, wheezing, difficulty breathing, shortness of breath, and chest tightness. The symptoms can range from mild to severe and sometimes could be life threatening.

For the purposes of this procedure, the following words have the following definitions:

Emergency Medication: Emergency medication refers to medication that is administered by a staff member to a student at the time of an asthma exacerbation—for example, a reliever inhaler or stand-by-medication.

Medication: Medication refers to medications that are prescribed by a health care provider and, by necessity, may be administered to a student or taken by the student during school hours or school-related activities.

Parents: A reference to “parents” in this administrative procedure refers to one or both parents, as applicable, and to a guardian or guardians.

Principal: A reference to the “principal” in this administrative procedure also refers to a person designated by the principal for a particular task. The principal retains responsibility.

PROCEDURES**1. Role of the Moosonee District School Area Board**

The Moosonee District School Area Board shall make every reasonable effort to:

- a) ensure that all staff members and others who are in direct contact with students on a regular basis receive education about asthma;
- b) reduce the risk of exposure to asthma triggers in classrooms and common school areas;
- c) ensure that school staff members are aware of which students within the school population have been diagnosed with this condition;
- d) ensure access to necessary asthma medications; and
- e) outline the procedures necessary to intervene and respond in the event of an asthma emergency. [See Appendix A: Signs of an Asthma Episode]

2. Role of Parents

- 2.1. In order for the staff to respond appropriately, it is crucial for parents to keep the school principal fully informed of the student’s asthma and the medication which has been prescribed to address the condition.
- 2.2. The parents of the student who has been diagnosed with asthma are expected to:
 - a) inform the school principal of the child’s asthma at the beginning of each school year regardless of whether the child is a new student or not;
 - b) inform the school principal of any changes to the child’s asthma and/or medication that will affect the child’s school routine, performance, or ability to participate in school activities;
 - c) provide an up-to-date emergency contact name and telephone numbers;
 - d) provide information to the school about their child’s asthma medication;
 - e) provide the school with an up-to-date inhaler (two are recommended), clearly labelled with the child’s name, prescription details, and expiry date;
 - f) provide a Medic Alert™ bracelet or equivalent for their child as appropriate;
 - g) provide their child with a fanny pack/body pouch for carrying the inhaler to ensure that the child has the medication readily available on the bus, while at school, on out of school programs, or at other school events and activities;
 - h) complete and return to the school Form ADMIN 319-01 Authorization for Administration of Medication for Asthma for their child;
 - i) assist in the development of the child’s Student Asthma Management Plan;
 - j) provide the school principal with a recent photograph of their child to be included with the Student Asthma Management Plan [Form ADMIN 319-02]; and
 - k) with the collaboration of their health care provider, teach their child to:
 - recognize the first symptoms of asthma
 - communicate clearly when the child feels asthma starting
 - know the Student Asthma Management Plan
 - know where the inhaler(s) are kept and who can get the inhaler(s)
 - carry their own inhaler(s) in a fanny pack/body pouch (if permission has been given by the parents and the appropriate forms have been completed)
 - take as much responsibility as possible for the child’s own safety, including recognizing different types of triggers and avoiding them when possible

- take responsibility for the location of the inhaler at all times where the student is allowed to carry his or her asthma medication to ensure that the inhaler is not used by another student.
[See Appendix B—Asthma Communication with Parents]

3. **Role of the Principal**

3.1. Student Registration

- a) The principal of the school shall identify students with asthma at the time of registration or following diagnosis, and gather necessary asthma-related information from the parents.
- b) At the beginning of each school year, the principal shall update the medical information of each student enrolled in the school to determine if new medical conditions have developed and/or if existing medical conditions have changed.

3.2. Parent Authorization

When informed by the parents that a student has been diagnosed with asthma and may require the administration of asthma medication, the principal shall request that the parents complete Form ADMIN 319-01 Authorization for Administration of Medication for Asthma.

3.3. Administration of Medication

If Form ADMIN 319-01 Authorization for Administration of Medication for Asthma indicates that the student requires the administration of asthma medication during the school day, the school principal shall:

- a) ensure that the medication is already labelled to indicate the name of the student, the name of the medication, and the expiry date;
- b) obtain at least one reliever inhaler from the parents (two are recommended);
- c) ensure that the student has easy access to his or her prescribed reliever inhaler(s) or medications;
- d) with informed, written consent from the parents, arrange to have one reliever inhaler on the student’s person (e.g.; fanny pack) at all times;
- e) if necessary, arrange to have a second reliever inhaler in a safe, secure location (e.g.; school office) or if the student does not have the medication on his or her person, in the classroom; and
- f) ensure that any medication which has reached its expiry date is returned to the parents and replaced by up-to-date medication.

3.4. Student Asthma Management Plan

- a) The school principal must meet with the parents to develop an individual Student Asthma Management Plan based on the recommendation of the student’s health care provider.
- b) The principal must complete Form ADMIN 319-02 Student Asthma Management Plan, in consultation with the parents. Parents will be provided with a copy of the Plan. This plan will be reviewed on an annual basis.
- c) The Student Asthma Management Plan shall include the following information:
 - student’s name, grade, and classroom;
 - known asthma triggers;
 - monitoring strategies;

- emergency procedures;
 - appropriate treatment;
 - location of the reliever inhaler(s); and
 - a current photograph of the child.
- d) The principal will obtain permission from the parents to notify the staff (and bus driver if applicable) and visually identify the asthmatic student via posting of the Student Asthma Management Plan within the school. The principal will ensure that all staff members are aware of the location of the Plan and medications.

3.5. Record Retention

The school principal shall ensure that the following information/forms are completed and stored in the Ontario Student Record (OSR):

- current information about the student’s medical condition;
- Form ADMIN 319-01 Authorization for Administration of Medication for Asthma;
- Form ADMIN 319-02 Student Asthma Management Plan;
- Form ADMIN319-03 Individual Student Log of Adult Administered Medication; and an up-to-date emergency contact list.

3.6. Documentation

The principal shall ensure that each time a staff person assists a student with the administration of the reliever inhaler the incident will be recorded on Form ADMIN 319-03 Individual Student Log of Adult Administered Medication.

3.7. Prevention and Planning

The principal shall take steps to create a supportive, safe environment for students with asthma, including:

- a) arranging general asthma awareness and education sessions for the school on an annual basis through activities such as a presentation, or access to asthma websites [e.g.; www.asthmainschools.com];
- b) providing opportunities for regular staff education with regards to identifying and managing worsening asthma, proper used of inhalers, and identifying and managing asthma triggers;
- c) sharing information about asthma with parents, e.g.; in a school newsletter; [See Appendix B—Asthma Communication with Parents]
- d) monitoring for asthma triggers on an ongoing basis and taking action to reduce exposure to asthma triggers whenever possible; [See the asthma trigger checklist on the Student Asthma Management Plan Form]
- e) scheduling extensive building repairs or cleaning at times that reduce the possibility of exposing students and staff to dust, fumes, and other irritants;
- f) creating and supporting the expectation that students with asthma should be participating in physical activities to the best of their abilities, including recess and physical education; and
- g) ensuring that when a student with asthma is involved in an out-of-school learning experience, the student has a reliever inhaler on his or her person and
- h) that the supervising teacher has a second reliever inhaler as well as a cell phone to be used in emergency situations.

4. **Role of All Staff Members**

4.1. All staff members shall:

- a) participate in training sessions about asthma;
- b) remain vigilant concerning circumstances or events which may constitute a situation for students at risk to experience an asthma episode, and report these to the principal;
- c) respond to an asthma episode and ensure that the reliever inhaler is administered immediately; [See Appendix A: Signs of an Asthma Episode]
- d) if there is no improvement within 5-10 minutes after taking the reliever inhaler, ensure that a call is made to 9-1-1 and the student’s parents; and
- e) record the incident on Form ADMIN 319-03 Individual Student Log of Adult Administered Medication after the medication has been administered.

4.2. All staff members have immunity under The Act to Protect Pupils with Asthma. The Act states: “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.”

5. **Role of Teachers**

In addition to the duties described in Section 4 above, teachers are also expected to:

- a) assist in the development of a Student Asthma Management Plan for each student diagnosed with asthma;
- b) ensure that the student is following the Student Asthma Management Plan;
- c) report any variances from the Student Asthma Management Plan to the principal;
- d) support the student with asthma to access the reliever inhaler when needed;
- e) ensure that the identified student is carrying a reliever inhaler on his or her person during all out-of-school learning experiences;
- f) ensure that an additional reliever inhaler and a cell phone are available during all out-of-school learning experiences;
- g) review with classes the steps to take if someone is experiencing worsening asthma;
- h) monitor the presence of materials within the classroom which may trigger an asthmatic reaction in the identified student;
- i) take action to reduce a student’s exposure to asthma triggers whenever possible
- j) e.g. chalk dust, freshly cut grass, furry animals, pollen, poor air quality, strong smelling markers, very cold or very hot temperatures, and viral infections [Encourage frequent hand washing to decrease the spread of infection]; and
- k) use preventative measures to allow participation in exercise and/or physical activity, including a warm-up period use of the reliever inhaler 10-15 minutes prior to the activity [if indicated on the Student Asthma Management Plan] and understand how to handle symptoms associated with exercise.

6. **Students**

Depending on the physical and mental capabilities of the student and the informed consent of the parents, the student with asthma has the responsibility to:

- a) tell teachers, other staff members, and friends about their asthma;
- b) tell occasional teachers, school bus drivers, and volunteers about their asthma and where to find the reliever inhaler;

- c) always carry a reliever inhaler on their person;
- d) follow the instructions of the physician and parents; and
- e) know how and when to use asthma medication safely, including:
 - making sure their name is on the medication container
 - not sharing medication with friends
 - knowing when the medication is empty
 - telling parents and teachers every time medication is used
 - telling a teacher if help is required to take medication
 - wearing a Medic Alert™ bracelet or equivalent, when provided by the parent
 - knowing what triggers asthma and makes it worse, and having a plan for handling asthma triggers
 - telling teachers when asthma is bothering them

REFERENCE DOCUMENTS

Legal:

Education Act, Section 265 Duties of Principal: Attention to the Health of Pupils
 Ontario Regulation 298 Operation of Schools, section 20 Duties of Teachers
 Guideline OSR—Ontario Student Record (OSR) Guideline, clause 3.1.5 Special Health Information
The Act to Protect Pupils with Asthma
Ryan’s Law, 2015 (Ensuring Asthma Friendly Schools)
Health Protection and Promotion Act
Ontario Human Rights Code
Municipal Freedom of Information and Protection of Privacy Act
 Ministry of Education Policy/Program Memorandum No. 81 Provision of Health Support Services in School Settings

Board:

Board Policy GOV-07-0 Equity and Inclusive Education
 Administrative Procedure 304 School Registration Requirements
 Administrative Procedure 310 Ontario Student Record (OSR)
 Administrative Procedure 330 Administration of Medication / Medical Procedures
 Form ADMIN 319-01 Authorization for Administration of Medication for Asthma
 Form ADMIN 319-02 Student Asthma Management Plan
 Form ADMIN 319-03 Individual Student Log of Adult Administered Medication

Resources for the Staff:

Asthma Society of Canada www.asthma.ca
 Ontario Physical Health & Education Association www.ophea.net