

ADMINISTRATIVE PROCEDURE NO. 320

STUDENT INCIDENTS, ILLNESS OR INJURY AT SCHOOL

Background

The safety and well-being of students is of primary importance. This Administrative Procedure provides guidelines for response if a student is involved in an incident, is injured or becomes ill while in the care and custody of the school or on a school-sponsored activity.

Guidelines

1. Administrators, staff and volunteers shall take all reasonable precautions to prevent incidents from occurring to students under their care and supervision.
2. Potential hazards to students shall be reported to the Principal as soon as possible.
3. Educate staff in medical emergency response procedures for dealing with student illness or injury incidents by reviewing this Administrative Procedure with them.
4. The Principal shall ensure the school is equipped with first aid supplies and equipment that are accessible to staff at all times.
5. Staff who handle any body fluids shall ensure that they take precautions to protect themselves and others from the spread of infection.
6. The Principal shall ensure an appropriate number of staff are trained in first aid as per Alberta's Occupational Health and Safety Code: [Schedule 2 - First Aid](#) and post a record of Trained First Aiders (Reference First Aid Program forms) in key locations (e.g., front office, in immediate proximity to the first aid supplies, first aid room, CTS labs). The record must include the names and qualifications of all first aid personnel who can be called upon where circumstances warrant, to render first aid assistance. Signs shall also be posted identifying location of first aid supplies and equipment.
7. The Principal shall ensure that school staff are made aware of basic first aid procedures and post the names of persons on staff with current first aid training.
8. At the commencement of the school year, Principals shall request that parent/legal guardians have made school staff and bus drivers aware of any specific medical problems of their children and any reasonable precautions and remedies that an adult would be expected to administer. Refer to Administrative Procedure No. 321 - Student Medical Conditions, Allergies and Medication for more information.
 - a. Appendix A - Students' Medical Release Form (Form 26) must be kept up-to-date and retained in the school office, should be consulted. The form contains

information relating to any pre-existing medical condition, such as allergies, diabetic condition, epilepsy, heart condition, etc.

9. In determining a course of action where student safety or wellbeing is concerned, the rule of thumb should always be to “err on the side of caution”.
10. When a student is ill or injured, staff shall ensure that the student is comfortable and safe before leaving the student to summon additional help. If possible, the staff member is to stay with the student and have another person summon assistance.
 - a. Students are not to be left in infirmary/first aid rooms without supervision.
11. Staff are expected to take any action to provide assistance as would be expected of any reasonable adult.
12. The Principal, or designate, shall notify the parents/guardians as soon as possible in the event of a serious student accident. The name of the parent/guardian communicated with shall be recorded on Appendix B - Student Accident/Medical Emergency Report Form (Form 25).
13. If consideration is given to sending an ill or injured student home, the Principal or designate shall:
 - a. Contact the parents/legal guardians or emergency contact and ensure the student is escorted home or to a designated location; or
 - b. Keep the student at school if unable to contact parents/legal guardians or emergency contact.

Emergency Procedures

1. Every student injury shall be referred for assessment to one of the first aid certified individuals whose name appears on the posted Trained First Aider list.
2. Where, in the judgment of the Principal or designate, it is necessary for a student to be taken to a medical facility, the Principal or designate shall attempt to contact the parent/legal guardian immediately, if time permits, or as soon as possible after medical assistance has been obtained including calling 911 for EMS to attend. Internal medication should not be given to any student.
3. If the parent/legal guardian cannot be immediately contacted, the Principal or designate shall:
 - a. Advise the medical facility of the student’s arrival;
 - b. Arrange for the transportation of the student to the medical facility;
 - c. Attend or arrange for another staff’s attendance with the student at the medical facility;

- d. Remain with the student until:
 - i. Relieved by the parent/legal guardian;
 - ii. Relieved by another staff member
 - iii. The student is discharged by the medical facility; or
 - iv. Advised by the medical facility that there is no further need to remain as the treatment and safety of the child have been undertaken by the medical facility.
 - e. Upon arrival at the medical facility, advise those in authority that he or she is not the legal guardian of the student.
 - f. Refrain from providing any consent for medical treatment of the student because of consent for medical treatment is to be resolved among the medical facility, the parent/legal guardian and the child; and
 - g. Continue efforts to contact the parent/legal guardian and advise the parent/legal guardian as soon is reasonably possible.
4. When medical care is arranged for by supervising staff other than the Principal, the Principal is to be informed as soon as possible of the action taken.
 5. Student Accident Insurance shall be made available to students and their parents/legal guardians.
 6. The Principal, or designate, shall advise the Superintendent or designate as soon as possible by phone if a student has been seriously injured.

Ambulance Procedures

1. If a student appears to have suffered a serious injury and moving the student might lead to more adverse consequences, the Principal or designate shall summon an ambulance immediately.
 - a. The person calling 911 for emergency service, should know the following information to tell the Dispatcher:
 - i. The nature of the incident;
 - ii. Precise location, including address and access routes (e.g., closest cross street, entrance to come to, etc.);
 - iii. The phone number of the location;
 - iv. The cell number of a person near the injured student.
 - b. Direct a staff member to meet the ambulance outside so they can direct them to the location of the injured student.

2. An ambulance is also to be summoned if a student is suffering from a possibly life threatening condition (e.g., anaphylactic shock, seizure, asthma attack, serious respiratory problems, etc.).
3. Parents will be billed directly for the ambulance costs and may make a claim for reimbursement. Refer to the Division's [Student Accident Insurance](#) for more information.
4. Blows to the head or abdomen may not result in readily observable injury; however, such blows are always to be treated as potentially serious.
 - a. Students who have received such blows are to be kept under continuous careful observation until medical attention is obtained for the student.
 - b. The parent/legal guardian is to be advised of the situation and of the action taken.
 - c. Concussion protocols are to be implemented when appropriate. Refer to Administrative Procedure No. 325 Concussion Protocol.
 - i. Coaches, or school supervisory staff, will be required to remove from play any athlete who exhibits signs or symptoms of concussion and follow the Concussion Protocol which includes the athlete will not be permitted to return until he or she has received written medical clearance from a doctor.
5. Emergency treatment of specific conditions such as diabetes is to be handled in accordance with direction provided by the parent/legal guardian, or physician, or in accordance with the emergency provisions specified in Administrative Procedure No. 321 Student Medical Conditions, Allergies and Medications, and contact with the parent/legal guardian is to be made as soon as possible.
 - a. School staff should not administer drugs to an injured student unless it is essential to preserve the life or physical well-being of the student.
6. The Principal shall require every employee involved in obtaining medical services for the student to describe in detail the circumstances of any incident requiring the provisions of medical services, paying careful attention to time(s) and observation of the student through the Student Accident/Medical Emergency Report Form (Form 25) online on RISC.

Emotional Trauma Incident

1. When a traumatic event occurs, the Principal or designate will maintain the leadership role at the school site, and he or she shall:
 - a. Immediately contact and consult with the Superintendent of Schools or designate.

- b. A Trauma Event Team will be assembled with, but not inclusive or exclusive to the following members:
- Superintendent of Schools
 - Associate Superintendent of Inclusive Learning
 - Director of Inclusion
 - The Director of Inclusion will be the Trauma Event Team Lead
 - Division Mental Health Consultant
 - Appropriate Model for Student Support team members
 - School Administration
 - School Counsellor(s)
 - Family School Enhancement Counsellor(s)
 - Community mental health experts
- c. Once the Principal has initiated contact with the Superintendent of School or designate, he or she will consult with the Traumatic Events Lead for the remainder of the process.
- d. Responsibilities of Traumatic Events Lead will be:
- i. In team, assess the impact of the trauma;
 - ii. Deploy appropriate internal and external resources to the site;
 - iii. Consult and collaborate with senior administration, managers, school administrators and others as deemed appropriate;
 - iv. Debrief traumatic response.
- e. Responsibilities of the Trauma Event Team under the direction of the Director of Inclusion, in a timely manner:
- i. Assist the Administration to develop a traumatic response plan;
 - ii. Provide in-class support for students and staff;
 - iii. Offer age appropriate lesson plans regarding trauma, loss and/or grief;

- iv. Depending on the situation, parents in the school community need to be notified.
 - v. Provide administrative and school staff support to assist in managing the trauma, which may include any duties related to the regular operation of the school;
 - vi. Provide strategies for students with special needs during times of loss and tragedy;
 - vii. Provide information and resources in consideration of diverse cultural populations during trauma, loss and/or grief;
 - viii. Connect schools and families to appropriate community agencies for immediate or long term support.
 - ix. Provide information sheet for parents to give parents with school and community resources that are available (i.e. Kids Help Phone APP, Kids Helpline, Mental Health 245 Hour Access, School/Board/Support Workers/Counselors Information, Bully Hotline, etc.).
- f. In coordination with the parent/legal guardian, establish a return to school plan for the student.
 - g. Ensure that support is given to the family with regards to possible insurance assistance if they choose to access the school division policy.

Emotional Trauma

When a child incurs an illness or injury at school, to address the potential social-emotional impact, the school counselor will assess the situation and the student's needs. If deemed necessary, the Counsellor will consult with the Division's Mental Health Consultant, as a member of the Model of Student Support (MS2) team. School staff will assist the parent/legal guardian in accessing outside agency support if required.

Reporting Procedures

1. The Principal, or designate shall advise the Superintendent or designate as soon as possible by phone if a student has been seriously injured.
2. The Principal or designate shall conduct an investigation into all cases where serious injuries to a student have occurred from an incident in order to determine the root cause of the incident, any contributing factors identified and what can be done to prevent similar occurrences in the future.

3. Within 24 hours after the occurrence of an incident during school hours or at a school-sponsored activity, the Principal shall ensure completion of the Student Accident/Medical Emergency Report Form (Form 25).
 - a. Include information from staff who attended the student or dealt with the situation getting as much information as possible including documented witness statements.
 - b. The Principal or designate is to submit the Student Accident/Medical Emergency Report Form (Form 25) electronically online on RISC.
 - i. Designated positions within the Division will receive email notification of the incident once it has been electronically submitted.
 - ii. File completed forms in the Accident Incident Report Binder.
 - iii. Additional information can be submitted to the administrator and/or record keeper and added to the online event file by notifying the Health and Safety Manager or designate.
4. When appropriate, the Principal or designate shall make a follow up call to the parent/guardian to inquire about the student's well being.
5. At the end of each school year, remove records from the Accident/Incident Reports Binder and file sequentially in a school filing system.
6. Administrators and the designated record keeper must ensure the information is kept confidential.

Reference

First Aid Program

OH&S Program Information Bulletin

Risk Management Procedures - Reporting and Recording Accident/Incidents.

APPENDIX A: ADMINISTRATIVE PROCEDURE NO. 321
Form 26 - Medical Release Form

To Authorized School Personnel:

I hereby request and authorize you to give _____
(Dose and medication)
to _____ as prescribed by _____ and I
release school personnel from liability should reactions result from medications. In case of
anaphylactic reaction, follow-up care and transportation are to be as follows:

Parent's Signature

Date

This form will not cover Legal Consent of Treatment once the student is transferred to the hospital.

To Authorized School Personnel:

I prescribe _____ to be given to
_____ by school personnel during the school
hours for reasons stated:

Healthcare Professional's Name
(please print)

Healthcare Professional's Signature

Date

In the case of foster parents, please obtain the signature of an Alberta Family and Social Services representative or official.

Appendix B - Administrative Procedure No. 321 Student Accident/Medical Emergency Report (Form 25)

Event Number: _____

Office Use Only

Please complete this form accurately and **completely**. If you need more space, attach an additional sheet clearly noting the item you are continuing. This form must be completed and submitted online within 24 hours of the incident first being reported.

Part A – Event Information

General

School / Work Site:	
Date of Event:	Time of Event:
Date Reported:	1 st Reported to: i.e. Manager, supervisor
1 st Reported to – First Name:	1 st Reported to - Last Name:

Description of Incident Information: Describe what the person was doing, what happened, how it happened and injury(s) sustained. If applicable include tools, equipment or materials being used, e.g., gym equipment, chemicals.

--

Location

Did an incident occur at School/Site? Circle - Yes or No	Location of Event: e.g., shop, office, grill area, front desk
If off-site, provide location details i.e. address, road/street numbers etc.	

Part B – Involved Person Information

Involved Person (Complete a Multiple Person Form if multiple persons are associated with this event and attached to the report form).

Involved Person is a:	
First Name:	Last Name:
Gender:	Phone Number:
Email Address:	
Date of Birth:	Grade:

Parent/Guardian Information

Was the parent/guardian notified? Circle - Yes or No	Date and Time Notified:
Parent/Guardian 1 st Name:	Parent/Guardian Last Name:

Injuries/First Aid

Description of First Aid: (e.g., Airway Management, CPR, Immobilized, Splint, Tape, Tensor, Ice, Compression, Elevation, Examined, Counselling, Wound Management etc.) Assessment, Rod indicated that while he felt fine, he should go to the hospital - due to family history.	
First Aider's 1 st Name:	First Aider's Last Name:
EMS Called?	Transported by EMS?
EMS Destination:	
Further Medical Attention Sought? Circle - Yes or No	If so, what type? Circle - Doctor, Chiropractor, Dentist Physiotherapist, Other: _____

Type of Injuries

Program:
Activity:
Equipment Involved:

Corrective actions taken, if applicable: **If unsafe acts or conditions are noted steps should be taken immediately for correction.**

Injury/Illness Type	Body Part	Left/Right/NA

Witnesses

Witness (1) First Name:	Witness (1) Last Name:
Email:	Phone:
Witness (2) First Name:	Witness (2) Last Name:
Email:	Phone:

Red Deer Catholic Online Submission Details (office use only)

Submitter's First Name:	Submitter's Last Name:
Email:	Phone:
Supervisor:	
Supervisor's First Name:	Supervisor's Last Name:
Supervisor's Email:	
Date Submitted:	

Report completed by:
(Print name and sign)

Date Signed:

Signature of Manager:
(Print name and sign)

Date Signed:

The information collected will be used for the purpose of obtaining specific detail about an incident/injury. All information collected will be protected and used in compliance with the Freedom of Information and Protection of Privacy (FOIP) Act.