

	Administrative Procedure	
	Subject	Administering Medications and Medical Treatment to Students
	AP Code	312

Background

The school recognizes that some students may require:

- Essential oral and/or injectable medication on a regular basis.
- Essential oral and/or injectable medication in an emergency.
- Essential procedures on a regular basis.

An “essential medication” is a physician-prescribed medication that must be scheduled during regular school hours and is necessary for the student’s health or well-being.

An “emergency situation” includes those times when a physician-prescribed medication or procedure for a pre-existing diagnosed medical condition must be administered to ensure life safety.

An “essential procedure” is a physician-prescribed procedure that must be scheduled for administration to a student during regular school hours and is necessary for the student’s health or well-being.

Examples of an essential procedure could include, but are not limited to:

- Gastronomy feeds
- Catheterization
- Suctioning
- Response to seizures, asthma, or anaphylaxis
- Blood glucose monitoring
- Response to low blood sugar

Procedures

1. An “essential support aid” is specific equipment prescribed by a physician which cannot be provided by the school, and which is necessary to address the specific medical restrictions of a student. An essential support aid includes the plural of an essential support aid.
 - 1.1. An essential medication or essential procedure may be given during school hours to a student at a location designated by the school, by an employee approved by the principal, or designate, upon request in writing from that student’s parent or guardian provided such request is supported by a statement (in accordance with the following procedures from the physician prescribing the essential medication or essential procedure). An essential medication may not be given, and/or an essential procedure may not be administered, upon the request of the student or parent alone.
 - 1.2. Students unable to attend a school for health-related reasons, or where the school cannot provide sufficient qualified resources within its operations to ensure the health or safety of a student, may be offered educational services through a hospital-based, online, or tutor-based program.

2. A request for the giving of essential medication and/or the administration of an essential procedure must be supported by a statement from the physician prescribing the essential medication or procedure, which statement must include, but is not limited to the following:
 - 2.1. The specific medical restrictions to be addressed.
 - 2.2. The essential medication and/or the essential procedure prescribed to address the specific medical restrictions.
 - 2.3. Confirmation that giving of the essential medication and/or the administration of the essential procedure:
 - 2.3.1. Must take place during school hours to address the medical restrictions; and
 - 2.3.2. For medical reasons, cannot take place or be administered solely outside of school hours.
 - 2.4. The amount, dosage, and frequency of the giving of the essential medication.
 - 2.5. The frequency of the administration of the essential procedure.
 - 2.6. A detailed description of any equipment or device required in the giving of the essential medication and/or the administration of the essential procedure and detailed instruction setting forth and describing all steps to be followed and done in the giving of the essential medication and/or the administration of the essential procedure.
 - 2.7. The duration of the giving of the essential medication and/or the essential procedure.
 - 2.8. Instructions as to the handling and/or storage of essential medication and/or equipment or devices required to be used in such giving.
 - 2.9. Instructions as to the handling and/or storage of equipment or devices required in the administration of the essential procedure.
 - 2.10. A statement that the essential medication can be safely given and/or the essential procedure can be safely administered by a non-medical person.
 - 2.11. Such further and other matters which the prescribing physician considers necessary or relevant in the circumstance.
3. A request to use an essential support aid at school must be made in writing to the principal and must provide the reasons and the benefits of the request.
 - 3.1. The request must be supported by a statement from the physician prescribing the support, which statement must include, but is not limited to, the following:
 - 3.1.1. The specific medical restrictions to be addressed by the essential support aid;
 - 3.1.2. Confirmation that the aid is medically necessary to address the specific medical restrictions of the student; and
 - 3.1.3. Confirmation that the essential support aid must:
 - 3.1.3.1. Be in place and used during school hours in order to address the medical restrictions;
 - 3.1.3.2. For medical reasons, cannot be in place or used solely outside of school hours;
 - 3.1.3.3. A detailed description of any equipment or device required and detailed instructions setting forth and describing all steps to be followed and done in the administration or use of the essential support aid;
 - 3.1.3.4. The duration of the support required; and
 - 3.1.3.5. Such further and other matters which the prescribing physician considers necessary or relevant in the circumstance.
4. Any request for an essential medication and essential procedure or an essential support aid must be approved by the principal before the medication, procedure, or support is permitted.

- 4.1. In the case of a request for an essential procedure or essential support, the principal must consult with the director before giving approval for the request.
 - 4.2. The principal or designate shall ensure that the school is approved by the director to administer the requested service.
5. The parent or guardian shall be required to execute and deliver to the principal or designate a consent and release agreement in the form set forth in the Administration of Essential Medication and/or Essential Procedures (AP312.1). A new consent and release agreement must be completed:
 - 5.1. For each school year; and
 - 5.2. If there is a change in the legal custody of the student.
6. The parent/guardian must provide:
 - 6.1. Updated medical information required under this procedure on a regular basis and at a minimum of once per year; and
 - 6.2. Updates of all other information required under this procedure whenever changes to such information occur.
7. The parent or guardian of the student shall deliver the essential medication and/or equipment, or device for the administration of an essential procedure, to the principal or designate.
8. The principal or designate shall ensure that safeguards are taken within the school to safely handle and store essential medication, including the safe handling and storage of any equipment or device required to give the essential medication and/or administer the essential procedure.
9. Employees of the school requested to give an essential medication to a student and/or administer an essential procedure shall be provided the training and any prescribed information necessary to complete the task.
10. Employees of the school shall not be required to give an essential medication to a student or to administer an essential procedure except with the prior consent of such employee, which consent cannot be demanded or required, and must be given freely and voluntarily, however:
 - 10.1. Employees of the school who are required to provide supports as part of their position description, who choose not to provide consent, may be reassigned as necessary.
11. The school does hereby covenant and agree, with each and every employee of the school giving essential medication and/or administering an essential procedure or having responsibility for administering this procedure, that the school will at times hereafter save harmless and keep indemnified such employee and his or her estate from and against all costs, expenses, losses, and damages which may be incurred by or by reason of any action or proceeding which shall or may be threatened, brought or instituted against such employee for or in respect of the giving of an essential procedure or any other matter or thing relative thereto including the administration of this procedure.
 - 11.1. This indemnification shall ensure to the benefit of such employee and his or her estate and shall be binding upon the division.
 - 11.2. Incidental to this indemnification agreement, the school agrees to maintain and keep in force public liability insurance in such amount as will enable, or assist, it to satisfy the provisions of this agreement.

- 11.3. The passage of the foregoing procedure by the division shall be deemed to be execution and delivery of this indemnity agreement by the division in favour of those covered thereby.
12. Prior to any school excursion, the teacher is to:
 - 12.1. Communicate to the parent/guardian the nature of the excursion.
 - 12.2. Determine the needs of the child with the parent/guardian.
 - 12.3. Develop, in consultation with the parent/guardian and the principal, an emergency plan that is specific to the excursion.
13. Medication in an emergency
 - 13.1. In response to a parent's or guardian's identification of those students who may require emergency attention because of a severe allergic reaction, the principal is to:
 - 13.1.1. Require the parent/guardian to provide the school with an appropriate and current ANAKIT or EPIPEN bearing an expiration date.
 - 13.1.2. Prepare, in consultation with parent/guardian and physician, a written action plan. Among other details, the action plan is to address directions for students who are required to carry a current ANAKIT or EPIPEN bearing an expiration date in their possession.
 - 13.1.3. Make school-based employees aware of the identity of the student(s).
 - 13.1.4. Arrange an in-service for all school-based employees, together with parent(s) and student(s), regarding the written action plan and the administration of the ANAKIT or EPIPEN.
 - 13.2. In response to a parent's or guardian's identification of those students who may require emergency attention because of a seizure, low blood sugar, or other emergencies arising from pre-existing diagnosed medical conditions, the principal is to:
 - 13.2.1. Require from the child's doctor or specialist, a set of instructions outlining procedures to follow in the case of an emergency;
 - 13.2.2. Ensure that staff are aware of these procedures; and
 - 13.2.3. Ensure that as medications or the condition of the child change, the medical professionals review and update the procedures for emergency situations.
 - 13.3. Prior to any school excursion, the teacher is to comply with the procedures outlined in this section.
14. In all cases, when an employee of the school administers medication or a medical procedure to a student, the details are to be recorded in the prescribed Medication/Procedure Administration Log.

References

Date Adopted

September 1, 2024

Revised

July 2, 2026

	Administrative Procedure	
	Subject	Student Prescribed Medication Form
	AP Code	312.1

Complete this form if your child has a medical condition requiring prescribed medication on a regular or emergency basis.

STUDENT INFORMATION	
Surname:	Given Name(s):
Birthdate (YYYY-MM-DD):	Grade:

MEDICATION INFORMATION & INSTRUCTIONS		
All medication must have the proper instructions for administering, handling, and storage.		
Medication Name:	Dosage:	Expiry Date:
Prescribing Doctor's Name:	Phone:	
Instructions:		

ALLERGY & PRE-EXISTING EMERGENCY CONDITIONS
Food/Insect Stings/Other:
Check all that apply: ☐ History of Anaphylaxis ☐ Asthma ☐ Seizure Disorder ☐ Diabetes

PARENT ACKNOWLEDGEMENT/AUTHORIZATION		
I/we will provide medication and updated medical information annually and when changes occur.		
I/we authorize school staff to administer the described medication and acknowledge they are not medical professionals.		
		
<table border="1"> <tr> <td>Parent/Guardian Signature:</td> <td>Date (YYYY-MM-DD):</td> </tr> </table>	Parent/Guardian Signature:	Date (YYYY-MM-DD):
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SCHOOL APPROVAL		
		
<table border="1"> <tr> <td>Principal/Designate:</td> <td>Date (YYYY-MM-DD):</td> </tr> </table>	Principal/Designate:	Date (YYYY-MM-DD):
Principal/Designate:	Date (YYYY-MM-DD):	

	Administrative Procedure	
	Subject	Student Prescribed Medical Procedure Form
	AP Code	312.2

Complete this form if your child has a medical or health condition that requires prescribed procedures on a regular or emergency basis.

STUDENT INFORMATION	
Surname:	Given Name(s):
Birthdate (YYYY-MM-DD):	Grade:

MEDICAL CONDITION & SUPPORT NEEDS
Medical Restrictions:
Behaviour or Medical Needs:
Triggers:
Indicators/Symptoms:
Required Support Aid/Equipment:
Instructions for Care:

ALLERGY & PRE-EXISTING EMERGENCY CONDITIONS
Food/Insect Stings/Other:
Check all that apply: ☐ History of Anaphylaxis ☐ Asthma ☐ Seizure Disorder ☐ Diabetes

PHYSICIAN AUTHORIZATION**(if staff are required to administer a prescribed procedure)**

Physician Name:	Physician Phone:
Prescribed Procedure:	
Medical Purpose:	
Duration:	Frequency:
Administration Instructions:	
Required Equipment:	
Storage & Handling Instructions:	
I confirm the procedure described above must be administered only during school hours and will not be administered outside school hours. I also confirm a non-medical person can safely administer the procedure.	
	
Physician Signature:	Date (YYYY-MM-DD):

PARENT ACKNOWLEDGEMENT/AUTHORIZATION

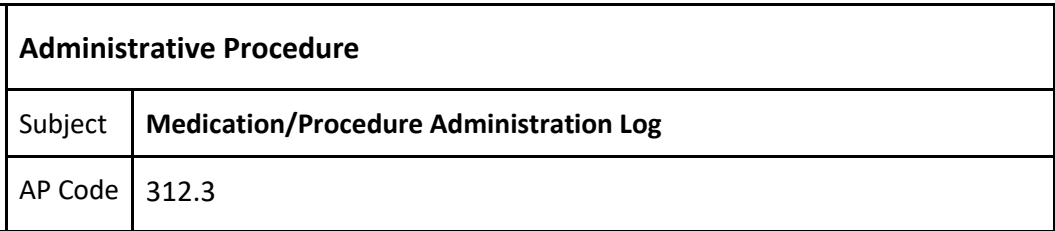
I/we will provide updated medical information annually and when changes occur.

I/we authorize school staff to administer the described procedure and acknowledge they are not medical professionals.

	
Parent/Guardian Signature:	Date (YYYY-MM-DD):

SCHOOL APPROVAL

	
Principal/Designate:	Date (YYYY-MM-DD):

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