



Policy: Medical Issues

Policy Number: ECB

Policy Type: Support Services

Policy

Hanover School Division recognizes that many students attending schools require medication or treatment for the management of medical needs. There are, as well, rare occasions when emergency procedures are required in life threatening situations, including but not limited to, acute allergic reactions (anaphylaxis), asthmatic attacks and response to low blood sugar emergencies.

The Hanover School Division, in partnership with the South Regional Health Authority (RHA), follows the Unified Referral and Intake System (URIS) protocol as outlined by Manitoba Health (2006). Upon school registration, parent(s) or guardian(s) declare the health care needs of their students. The URIS protocol is followed and student referrals are forwarded to the RHA URIS nurse for approval. Once approved by the RHA URIS nurse, an Individual Health Care Plan (IHCP) or an Emergency Response Plan (ERP) is developed with the parent and forwarded to the school, with consent to release medical and personal health information to school personnel, as required.

All school personnel, including teachers, educational assistants, administrators and Student Services personnel, receive annually the URIS large group training on routine health care procedures. The routine health care procedures include: (1) responding to acute allergic reactions (anaphylaxis); (2) asthmatic attacks; (3) seizure management; and (4) low blood sugar emergencies (diabetes). Additional medical interventions may be included, dependent upon individual student needs.

Guidelines

1. URIS Service Classifications

1.1. Group A Health Care Procedures.

- 1.1.1. Group A interventions are complex procedures that require the clinical judgment, skill and knowledge of a registered nurse. Children who require assistance to accomplish Group A health care procedures are eligible to receive URIS support. Children classified as Group A often (but not always) have a long term disability and require support from a medical assistive device or technology for at least part of the day. This technology replaces or augments a vital bodily function without which the child would be at risk of further disability or death.
- 1.1.2. Group A health care procedures that are eligible for URIS support are: ventilator care; tracheostomy care; suctioning (tracheal/pharyngeal); nasogastric tube care or feeding; complex administration of medication, i.e., via infusion pump, nasogastric tube or venous injection; central or peripheral venous line intervention; and, other clinical interventions requiring judgment and decision making by a medical or nursing professional. (Appendix A for glossary of terms and procedures)

1.2. Group B Health Care Procedures.

- 1.2.1. Group B interventions are health care routines that can be safely delegated to non health care personnel trained and monitored by a registered nurse. Children who require assistance to accomplish Group B health care procedures are eligible to receive URIS support. Children with Group B health care needs are a very diverse group. They may be physical or mentally disabled or require assistive technology or have temporary or lifelong medical conditions that require specialized health care.
- 1.2.2. Group B health care procedures that are eligible for support are: clean intermittent catheterization; condom application for urinary drainage; gastronomy care and feeding; emptying an ostomy bag or changing an established appliance; suctioning (oral or nasal); responding to

seizures; administration of sublingual lorazepam; assistance with blood glucose monitoring requiring specific action based on results; responding to low blood sugar emergencies; administration of preset oxygen; administration of adrenaline auto injector (epi-pen); administration of medication orally (requiring measurement), instillation (eye/ear drops), topical (ointment or therapeutic dressing) or inhalation (bronchodilator); and other health care routines required for the child and approved by the URIS nurse (Appendix A for glossary of terms and procedures).

2. Identification of health care or medical needs

- 2.1. Student specific information regarding medical and health issues are gathered during the school registration process.
- 2.2. The parent completes and signs the URIS application, which includes consent for release of medical information, and returns this application to the school.
- 2.3. The school forwards all URIS applications to the URIS Coordinator at Student Services. The URIS Coordinator is responsible for all administrative and clerical duties associated with referrals and ensures all referrals are completed accurately and forwarded to the RHA.
- 2.4. The RHA URIS nurse approves and prioritizes the applications.
- 2.5. For all approved applications, an Individual Health Care Plan (IHCP) will be developed by the URIS nurse and returned to the URIS Coordinator.

3. Development of the Individual Health Care Plan (IHCP) and Emergency Response Plan (ERP)

- 3.1. All children with Group A or B health care needs who require assistance to support attendance and participation in school must have a written IHCP.
- 3.2. The URIS nurse, in consultation with the parent, develops an IHCP and forwards this information to the URIS Coordinator at Student Services.
- 3.3. IHCPs are reviewed annually. More frequent review will occur as needs are identified or indicated by school or parent. Updated IHCPs are forwarded to the URIS Coordinator.
- 3.4. Parents/ guardians will be asked to sign the IHCP form for their child. If a parent / guardian refuses to sign the IHCP, this will be documented in the Pupil file.
- 3.5. In the event of a medical emergency, the school will activate their school's Emergency Response Plan, which includes contacting local medical emergency personnel, i.e., ambulance and 911.

4. Staff Training and Student Specific Training

- 4.1. The URIS nurse provides all training, both annual group training sessions and student specific training sessions to school personnel.
- 4.2. The URIS nurse will discuss annually divisional training needs with the Assistant Superintendent of Student Services.
- 4.3. Arrangements for school group training and student specific training are made through the URIS Coordinator at Student Services.
- 4.4. Annual group training is required for all staff when the school has one or more students with medical or health care needs related to asthma, anaphylaxis, seizures and diabetes.
- 4.5. For students with more complex medical and health care needs as outlined in the IHCP (e.g., gastronomy care and feeding or catheterization), the URIS nurse will provide student specific training sessions annually. Group B procedures will not be implemented by any school staff without current student specific training. Alternate arrangements will be made with the parent or guardian in the event that school staff can not be trained by the URIS nurse in a timely manner.
- 4.6. School staff (teachers and educational assistants) to receive student specific training will be designated by the principal in consultation with the Assistant Superintendent of Student Services.
- 4.7. URIS Coordinator at Student Services will maintain a current list of all school personnel who receive large group training and student specific training.

5. Communication

- 5.1. Any parent whose child is eligible for URIS support will be provided with the information that explains the URIS program and application process. This information is provided to the schools by the URIS Coordinator at Student Services.

- 5.2. Current information and application forms are available electronically on Hanover School division's Public Folders or from Student Services.
- 5.3. The URIS Coordinator at Student Services will maintain accurate records and databases of students and trained staff. These records are forwarded to the provincial URIS committee, when requested.

6. Dispensing Medication

- 6.1. School personnel will not dispense any "over the counter" medication, (e.g., Tylenol) to any student.
- 6.2. If a student requires assistance with a short term medication regime, prescription or "over the counter", the Administration of Medication to Students SS-8 is to be followed. The Administration of Medication Permission Form is to be completed by the parent/guardian and kept in a secure spot in the school office.
- 6.3. Safe storage protocols for all medications, prescription and "over the counter", are to be followed as outlined in Workplace, Safety, and Health.

Date Policy Created:	
Date of last Review:	November 4, 2025
Reference(s):	Additional Information: Former Policy B23, SS-8 Administration of Medication to Students Unified Referral and Intake System (URIS) Operational Plan, Manitoba Health, 2006
Related Forms:	Appendix A: Glossary of terms and procedures Appendix B: URIS referral procedures