



uno

uno

U

unofficial

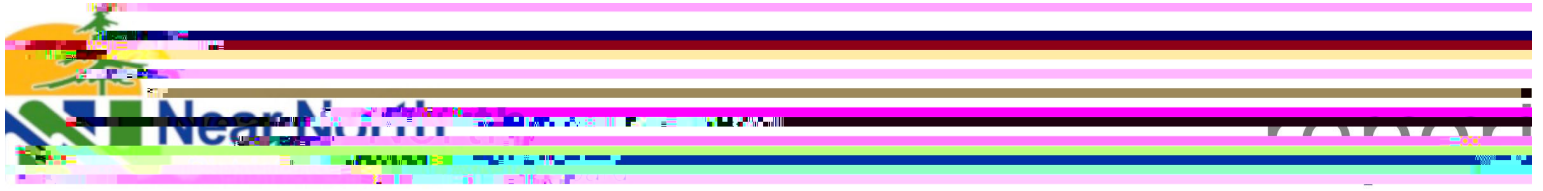


PD Opportunities Calendar

Title:	February 2022 Trustee Professional Development Opportunities Calendar
Scheduled Opportunities	<p>OPSBA has posted a number of previously recorded OPSBA professional development sessions on their website.</p> <p>These opportunities include all workshops and keynote addresses from the 2022 Public Education Symposium, found here:</p> <p>https://www.opsba.org/events-and-publications/public-education-symposium/</p>

Ongoing

Closing Date	Project	Location	Bidders Submitting Bids	Awarded to	Net Award	Tax	Total	Rational
December 17, 2021	NNDSB 2022-006 HVAC Upgrades, F.J McElligott Sec. School	370 Pine Street Mattawa	Venasse Building Group					



Title:	Supporting Students with Prevalent Medical Conditions – Administrative Guideline
Contact:	Superintendent Gay Smylie
Date Submitted:	February 15, 2022

	<p>Executive Council received and approved a report recommending the consolidation of various administrative guidelines to create one document that would meet the requirements as set forward in PPM 161. This consolidation included the following Administrative Guidelines:</p> <ul style="list-style-type: none"> Administration of Medication Anaphylaxis Epilepsy Seizure Disorder Management
Information:	<p>“Supporting Students with Prevalent Medical Conditions” Administrative Guideline contains specific, detailed information regarding anaphylaxis, asthma, diabetes, and epilepsy. Each prevalent medical condition has its own section that includes information on definitions/terminology; education, training, response and resources; special considerations; and a plan of care.</p> <p>Following a 30-day consultation period, the administrative guideline was revised and then submitted to the Harrison Pensa legal team for review. All recommendations were accepted and incorporated into the administrative guideline. Not only does this ensure that the administrative guideline is compliant with PPM 161, but that all practices outlined are well-informed and constitute provincial best practices.</p>
Recommendation:	<p>That the Board of Trustees accept the final consolidated administrative guideline.</p>

Near North District School Board is committed to ensuring a safe, accepting and healthy learning environment that supports student well-being, including the well-being of students with prevalent medical conditions. Students with health and medical needs will be empowered in this environment, as confident and capable learners, to reach their full potential for self-management of their medical condition(s), according to their Plan of Care.

The purpose of this guideline is to ensure that there is a collaborative approach to student medical conditions. Collaborative partners include the student, parent(s)/guardian(s), principal/vice-principal, school staff and health care professionals. This collaboration is to ensure a full understanding of the medical condition, supports, clarity of roles and communication associated with the student's individual Plan of Care.

Staff training and familiarity with a student's prevalent medical condition

- 13.0 [Liability](#)
- 14.0 Prevalent Medical Conditions
 - 14.1 [Anaphylaxis](#)
 - 14.1.1 Definitions/Terminology

1.0 **INFORMATIVE LEGISLATION**

the student and his/her family.

Emergency Medical Services: also known as EMS, ambulance or paramedic services, provide urgent pre

Plan of Care: a form that contains individualized information on a student with a prevalent medical condition.

Prevalent Medical Condition: for the purposes of this document, is limited to anaphylaxis, asthma, diabetes, and epilepsy (seizure disorder).

Principal: refers to the Principal, Vice-Principal and/or Principal designate.

School: all school and school-board activities, including field trips, overnight excursions, board-sponsored sporting events, and board-operated before- and after- school programs for children aged 4 to 12 years.

School board(s) and board(s): district school boards and school authorities, in this case Near North District School Board

School staff: all school staff who work in direct contact with students, including occasional staff.

Self-Management: a continuum where a student's cognitive, emotional, social and physical capacity and stage of development are determinants of their ability to confidently and independently manage their medical condition(s). The student's journey to reach their full potential along the self-management continuum is not linear and can require varying levels of support over time. A student's capacity for self-management may be compromised during certain medical incidents, and additional support will be required.

Status Epilepticus: is a state of prolonged seizure (longer than 30 minutes) or repeated seizures without time for recovery and can happen with any type of seizure.

Students: children in Kindergarten through to Grade 12.

Target Range: is the acceptable range of values for a student's blood glucose level.

inform the school of their child's medical condition(s) upon registration (or when diagnosed) and participate in the creation of the Plan of Care for their child alongside the Principal;

Plan of Care Appendices

Appendix A: Anaphylaxis Plan of Care

Appendix B: Asthma Plan of Care

Appendix C: Diabetes Plan of Care

Appendix D: Epilepsy Plan of Care

6.0 COMMUNICATION STRATEGIES/PRIVACY AND CONFIDENTIALITY

Due to the nature and severity of prevalent medical conditions, communication strategies must be clear and widely distributed across the School Board while maintaining student privacy. The Principal will establish a communication plan at the start of the school year to share information about students with prevalent medical conditions with parents, students, employees, volunteers, coaches, and where appropriate, food service providers, transportation providers and child care providers following consultation with the student's parent(s).

General communication about the prevalent medical conditions can be handled through board/school communication vehicles such as letters home to all parents, or through the school newsletter, board/school website, parent information nights and other school presentations.

The student's Plan of Care will identify those individuals in direct contact with the student during the course of their educational experience (including occasional teachers and volunteers) who will need training and/or information on the student's prevalent medical condition.

Near North District School Board will comply with applicable privacy legislation and obtain parental consent in the individual Plan of Care prior to sharing student health information with school staff or other students. Parents and school staff should be informed of the measures to protect the confidentiality of students' medical records and information.

7.0 DAILY ROUTINES

Support will be provided to students with prevalent medical conditions in order to facilitate their routine or daily management of activities in school.

This includes, but is not limited to, supporting inclusion by allowing students with prevalent medical conditions to perform daily or routine management activities in a school location (e.g. within the classroom, gymnasium, library, schoolyard; on a school bus; at a field trip location), as outlined in their Plan of Care.

8.0 SCHOOL TRIPS

When taking a student with prevalent medication condition(s) off school property, it is important that there is communication with the parent(s) and the third party operator (where applicable) to develop a careful and clear plan of expectations to meet the needs of the student.

8. In situations where the teacher/supervisor is providing 'in the area supervision' (i.e. they are supervising an area in which direct lines of sight between supervisor and student are not always possible), assign a 'buddy' to the student with a prevalent medical condition. The 'buddy's' responsibility is to assist the student and to access the teacher supervisors in case of an emergency.

9. Take a suitable means of communication (e.g. cell phone) on the trip and/or ensure that an easily accessible phone is available at the site.

10. Ensure that the parent/guardian provides an excursion kit consisting of any prescribed medication

medical condition as outlined in the student's individual Plan of Care and are trained in prevention strategies to minimize risks, recognize the symptoms of a medical emergency and know the steps to follow when dealing with a medical emergency or student with a prevalent medical condition.

The School Board will continue to ensure that Near North schools have current staff members with up to date first aid certification.

Using evidence-based resources (e.g., [Prevalent Medical Conditions portal via EduGAINS](#)) and following consultation with appropriate stakeholders, the School Board will determine the scope of training required to support the implementation of prevalent medical condition procedures, as well as the mode of delivery of the training and privacy considerations.

The scope of training related to supporting students with prevalent medical conditions must include:

- strategies for preventing risk of student exposure to triggers and causative agents
- strategies for supporting inclusion and participation in school
- recognition of symptoms of a medical incident and medical emergency
- information on school staff supports, in accordance with School Board policy
- medical incident and emergency response; and
- documentation procedures (e.g. collecting and sharing medical information)

11.0 SAFETY CONSIDERATIONS

There are a number of safety considerations to be managed when implementing policies on prevalent medical conditions. These considerations are necessary to ensure the safety of students with prevalent medical conditions and the students and staff who come into contact with them. Some students with these conditions will be required to carry, store and administer medication.

- Students will be allowed to carry their medication(s) and supplies, as outlined in the Plan of Care;
- School staff will support the storage (according to the item's recommended

all students and visitors to reduce the environmental factors that may induce anaphylaxis in students.

The 'Administration of Medication Procedures Manual' developed by Near North District School Board is in place to guide stakeholders.

In accordance with the requirements of the *Child and Family Services Act, 1990*, where School Board employees have reason to believe that a child may be in need of protection, School Board employees must call the _____ and file a formal report.

12.0 REPORTING

Subject to relevant privacy legislation, the Near North District School Board will collect data regularly, including but not limited to, data on the number of students with prevalent medical conditions at their schools, and should monitor the number of occurrences of medical incidents and medical emergencies, as well as circumstances surrounding these incidents. The School Board will use these data as part of their cyclical policy reviews and to report to the Ministry of Education.

School policies will also include expectations for school staff regarding the documentation of any medication administered to students, including students with prevalent medical conditions. The maintenance of such documentation must be in keeping with the School Board records and information management policies as well as Personal Health Information Protection Act (PHIPA) and Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) requirements.

13.0 LIABILITY

The Good Samaritan Act, passed in 2001, protects individuals from liability with respect to voluntary emergency medical or first aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

2. (1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in acting or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.

(2) Subsection (1) applies to,

14.1 Anaphylaxis

Principals, Vice-Principals and school staff shall assist in attempting to reduce environmental risks for anaphylactic students, as well as encourage parents and visitors to participate in reducing environmental risks for anaphylactic students. The Principal shall specify a means of ensuring that all community users of the school facilities are aware of any restrictions on food use and the reason for these restrictions. Principals cannot and

exclusive list.

Early recognition of symptoms and immediate treatment could save a person's life. Signs and symptoms to be aware of include:

Skin

Employees will be preauthorized to administer medication or supervise a pupil while he or she takes medication in response to an anaphylactic reaction if the school has up-to-date treatment information and the consent of the parent/guardian, or pupil as applicable. If an **employee** has reason to believe that a pupil is experiencing an anaphylactic reaction, the employee will administer an epinephrine auto-injector or

observation as decided by the emergency department physician (generally about 4 - 6 hours).

5. Call emergency contact person; e.g. parent(s)/guardian(s).

Resources

[Epi Pen Training](#)

2) If the parent(s)/guardian(s) still refuses to provide the school with epinephrine auto-injectors and/or refuses to allow their child to carry an epinephrine auto-injector, the Principal shall:

- suggest the parent(s)/guardian(s) contact Food Allergy Canada to discuss the refusal,
- seek permission of parent(s)/guardian(s) to discuss the refusal with their physician or nurse practitioner; and
- consult with the Superintendent of Schools regarding next steps.

3) If attempts to resolve non-compliance persist, the Principal shall:

- send a letter to the student's parent(s)/guardian(s) outlining the risk to their child and have the letter signed and returned to the school,
- inform teachers and others who have contact with this student that they will not be carrying an epinephrine auto-injector;
- in consultation with the Superintendent of the School, the Principal will create a local plan to ensure that epinephrine auto-injectors are available for students when parent(s)/guardian(s) have refused to provide and/or have their child carry an epinephrine auto-injector; and
- ensure that a notation is made on the student's Anaphylaxis Plan of Care. Suggested notation on the Anaphylaxis Plan of Care would read "*As a result of parent(s)/guardian(s) refusal to provide their child with epinephrine auto-injectors and/or ensure that their child carry an epinephrine auto-injector as per School Board policy, this P*".

Anaphylaxis Plan of Care:

seek permission of parent(s)/guardian(s) to discuss the refusal with their physician or nurse practitioner; and
consult with the Superintendent of Schools regarding next steps.

3) If attempts to resolve non-compliance persist:

send a letter to the student's parent(s)/guardian(s) outlining the risk to their child and have the letter signed and returned to the school,

inform teachers and others who have contact with this student that they will not be carrying a reliever inhaler; and

ensure that a notation is made on the student's Asthma Plan of Care. Suggested notation on the Asthma Plan of Care would read "*As a result of*

parent(s)/guardian(s) refusal to provide their child with a reliever inhaler and/or ensure that their child carry a reliever inhaler, this Plan has been created to support

”.

Asthma Plan of Care: [Appendix B1](#)

14.3 Diabetes

The Principal will communicate with the student, parent(s)/guardian(s) and/or community care allies, the expectations for safe storage and disposal of medication and medical supplies, including the safe disposal of sharps. Parent(s)/guardian(s) are expected to provide the school with all supplies required for the ongoing management of their child's diabetes at school.

14.3.1 Definitions/Terminology

[Blood glucose control](#)

[Diabetes](#)

[Diabetes Medical Team](#)

[Hyperglycemia](#)

[Hypoglycemia](#)

[Insulin](#)

[Target Range](#)

14.3.2 Education, Training, Response and Resources

Education

Diabetes is a disease in which the body either cannot produce insulin or cannot properly use the insulin it produces. There are two types of diabetes: Type 1 and Type 2.

Type 1 diabetes is an autoimmune disease and is also known as insulin-dependent diab

diabetes the following strategies are to be in place:

1. The school has a process in place to identify the student with Type 1 or Type 2 diabetes to the lunch supervisor, (staff members, noon hour supervisor, occasional teacher).
2. The Principal verifies that the lunch supervisor (staff members, noon hour supervisor, occasional teacher) has been trained in recognizing the symptoms of a low blood sugar and knows the procedures in managing a low blood sugar reaction and/or emergency response procedures.
3. Classes may use student monitors who can assist the lunch supervisor. Where appropriate, student monitors are to be in-serviced on their role and provided with direction to access the supervising adult immediately when the need arises.
5. The identified student(s) with Type 1 or Type 2 diabetes, where appropriate, may be assigned an eating 'buddy' to access the lunch supervisor immediately in case of an incident.
6. Where age appropriate, students in the class may be taught how to contact the office using the classroom communication system in case of an emergency.
7. Lunch supervisor informs diabetic student of his/her location of supervision (e.g. identifies the classrooms and/or hallway he/she will be supervising).
8. The following has been reviewed with the diabetic student:
 - Have their monitoring kit with them, at all times
 - Recognize signs of low blood sugar
 - Inform lunch supervisor when they feel unwell/experiencing low blood sugar
 - Eat all the food as outlined in their prescribed diet and/or as prepared by their parents/guardians.

Blood Sugar Testing

Blood sugar testing is a means of monitoring the blood sugar balance. When at school, blood sugar may be tested before meals, before/during/after exercise and when feeling 'low' (refer to the student's [Diabetes Plan of Care](#) for specific testing times). Blood sugar levels will change with eating (before and after), physical activity, stress, or illness.

Sometimes the blood sugar fluctuates for no apparent reason. Good management means avoiding very high or very low blood sugar levels and keeping as close to 'target range' as possible. Student 'target ranges' are determined by their doctor and are in the student's [Diabetes Plan of Care](#).

Knowing blood sugar levels will:

- Help the student understand the balance of food, medication, insulin and exercise
- Help the doctor adjust medication, insulin and food

of time such as for phys. ed. class.

Staff responsibilities while supporting a student with insulin administration:

To provide a safe and appropriate location.

School staff do NOT provide insulin syringe injections or push the button on the insulin pump (bolus).

If a student's insulin pump beeps, allow them to contact parents/guardians to problem solve issues related to the pump.

Fast Acting Sugar

Fast acting sugar is to be taken by the student to prevent or treat low blood sugar (e.g. 6oz juice; or 5-6 Life Savers; or 3 glucose tablets). Students must be permitted to take fast acting sugar anywhere, and at any time on school property, on buses, or during school sanctioned activities. The fast acting sugar supplies are to be provided by the parents.

Staff responsibilities for supporting the student in accessing fast acting sugar:

Severe Low Blood Sugar

Hypoglycemia - Glucagon Injection:

When the blood sugar level gets so low that the student is unable to take his/her fast acting sugar orally because they are unresponsive, unconscious or having a seizure the treatment is for an injection of Glucagon. Glucagon is a hormone made in the pancreas that quickly raises blood sugar. Glucagon is given as an injection like insulin by parent/guardian or trained EMS paramedics. **School Staff do NOT Administer Glycogen Injections.**

The correct emergency response of school staff is to Call 911 immediately and inform Emergency Services that the student has Type 1 or Type 2 diabetes.

Emergency Medical Services personnel will require the following, if available:

- Student's name, date of birth, emergency contact information
- Medical history – available on the student's [Diabetes Plan of Care](#)
- Observations about what the student was doing prior to the event
- Medications and any treatment prior to EMS arrival.

Children with diabetes sometimes experience high blood sugar. Hyperglycemia is NOT an emergency situation, unless the student is vomiting, and it may require accommodations in the classroom.

High Blood Glucose may develop as a result of one or more of the following:

1. Too much food;
2. Less than the usual amount of activity (indoor recess);
3. Growth spurts;
4. Stress;
5. Not enough insulin; and/or
6. Illness Symptoms. The earliest and most obvious symptoms are increased thirst and urination. Other: dry mouth, blurred vision, and drowsiness.

Allow the student to check their blood sugar since symptoms of high blood sugar can be confused with symptoms of low blood sugar. A blood sugar of >14 is usually considered too high but refer to the student's [Diabetes Plan of Care](#) for individual parameters. Allow the student to drink water at their desk and to have open bathroom privileges. Do not use exercise to lower blood sugars as this can potentially make the blood sugar go higher

Children with diabetes are no more susceptible to infection or to illness than their classmates. Their attendance record should be normal. When children with diabetes become ill with the usual fevers and other childhood sicknesses the blood glucose balance is likely to be upset

14.4 Epilepsy

Epilepsy is a disorder of the central

3. Illness
4. Poor diet
5. Menstrual cycle
6. Change in weather
7. Televisions, videos, flashing lights (including flickering overhead lights)
8. Inactivity

15.0

Administration of Medication Forms must be completed in any of the following circumstances:

When it is essential for a student to take medication during regular school hours in order to attend school (determine if it will be Staff or Self-Administration in consultation with parents/guardians and determined by Principal).

When prescribed medication is required to respond to an emergency (determine if it will be Staff or Self-Administration) ~~or both~~, as determined by Principal).

NOTE: If parent(s)/guardian(s) or responsible designates will be administering medication

APPENDIX A1 - Anaphylaxis Plan of Care

PREVALENT MEDICAL CONDITION **Anaphylaxis**
Plan of Care

STUDENT INFORMATION

DAILY/ROUTINE ANAPHYLAXIS MANAGEMENT

SYMPTOMS

A STUDENT HAVING AN ANAPHYLACTIC REACTION MIGHT HAVE ANY OF THESE SIGNS AND SYMPTOMS:

Skin system: hives, swelling (face, lips, tongue), itching, warmth, redness.

Respiratory system (breathing): coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing.

Gastrointestinal system (stomach): nausea, vomiting, diarrhea, pain or cramps.

Cardiovascular system (heart): paler than normal skin colour/blue colour, weak pulse, passing out, dizziness or lightheadedness, shock.

Other: anxiety, sense of doom (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste.

EARLY RECOGNITION OF SYMPTOMS AND IMMEDIATE TREATMENT COULD SAVE A LIFE.

Avoidance of an allergen is the main way to prevent an allergic reaction.

Food Allergen(s): eating even a small amount of a certain food can cause a severe allergic reaction.

Food(s) to be avoided:

Designated eating area inside the school building:

Insect Stings: (Risk of insect stings is higher in warmer months. Avoid areas where stinging insects nest or congregate. Destroy or remove nests, cover or move trash cans, keep food indoors.)

School Trips: ensure that the parent/guardian provides an excursion kit consisting of any prescribed medications as outlined in the student's Plan of care, and that the medication be in a clearly marked container with an additional 50% supply in case of emergency. The excursion kit, for anaphylaxis, along with the Plan of Care, should include Epi-pens, emergency contact information and a cell phone (if applicable)

Additional Considerations for School Trips:

Other information/Safety Measures:



EMERGENCY PROCEDURES

IF ANY OF THE FOLLOWING OCCUR:

Continuous coughing

Trouble breathing

Chest tightness

Wheezing (whistling sound in chest)

(* Student may also be restless, irritable and/or quiet.)

TAKE ACTION:

STEP 1: Immediately use fast-acting reliever inhaler (usually a blue inhaler). Use a spacer if provided.

HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

Healthcare provider may include: Physician, Nurse Practitioner, Registered Nurse, Pharmacist, Respiratory Therapist, Certified Respiratory Educator, or Certified Asthma Educator.

DAILY/ROUTINE: DIABETES

INSULIN INJECTION

Student does not take insulin at school.

Student takes insulin at school.

Insulin is given by:

Student

Student with supervision

Parent(s)/Guardian(s)

Trained Individual

All students with Type 1 diabetes use insulin. Some students will require insulin during the school day, typically before meal/nutrition breaks.

Location of insulin:

Required times for insulin:

Before school:

Morning Break:

Lunch Break:

Afternoon Break:

Other (Specify):

Parent(s)/Guardian(s) responsibilities:

School responsibilities:

Student responsibilities:

Outside Agency responsibilities:

INSULIN PUMP DELIVERY

Student must be able to eat per daily schedule. Supervision will be required Yes No

All students with Type 1 diabetes use insulin. Some students will require insulin during the school day, typically before meal/nutrition breaks.

Student must be able to eat per daily schedule. Supervision will be required Yes No

SCHOOL TRIPS

The excursion kit, for diabetes, along with the Plan of Care, should

Ensure that the parent/guardian provides an excursion kit consisting of any prescribed medications as outlined in the student's Plan of care, and that the medication be in a clearly marked container with an additional 50% supply in case of emergency.

Consent for Student to Carry and Self-Administer Diabetes Medication

We agree that

(student name)

can carry prescribed medications and delivery devices to manage diabetes while at school and during school-related activities.

can self-administer prescribed medications and delivery devices to manage diabetes while at school and during school-related activities.

requires assistance with administering prescribed medications and delivery devices to manage diabetes while at school and during school-related activities.

It is the responsibility of the parent/guardian to notify the Principal if there is a need to change the Plan of Care during the school year and to inform the school of any change of medication or delivery device.

This medication cannot be administered beyond the expiry date.

Steps for Hyperglycemia:

1. Allow student free use of bathroom
2. Encourage student to drink water only
3. Inform the parent/guardian if BG is above __

Symptoms of Severe Hyperglycemia (Notify parent(s)/guardian(s) immediately)

- Rapid, Shallow Breathing Vomiting Fruity Breath

Steps to take for Severe Hyperglycemia:

1. If possible, confirm hyperglycemia by testing blood glucose
2. Call parent(s)/guardian(s) or emergency contact

For Pump Use: correct with insulin bolus: Yes No

AUTHORIZATION/PLAN REVIEW

LIST INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

Is there a designated staff responsible for the implementation of this plan of care? Yes No

If yes, include name:

Other Individuals To Be Contacted Regarding Plan Of Care:

Before-School Program Yes No

After-School Program Yes No

School Bus Driver/Route # (If Applicable)

Other:

This plan remains in effect for the 20__ 20__ school year without change and will be reviewed on or before:

. (It is th/68 1 429.43 391.38 Tm0 G[])TJETQq367.65 382.38 222.35 21 26B5 307.6 556.72 2





AUTHORIZATION/PLAN REVIEW

LIST INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

Is there a designated staff responsible for the implementation of this plan of care? Yes No
If yes, include name:

Other Individuals To Be Contacted Regarding Plan Of Care:

Before-School Program Yes No

After-School Program



School Bus Driver/Route # (If

APPENDIX E1

SELF ADMINISTRATION OF MEDICATION

It is the responsibility of parents/guardians to administer medication to their children. Treatment regimens should, where possible, be adjusted to avoid administration of medication during school hours. When this is not possible, students should be encouraged to accept the maximum responsibility for the self-administration of medication.

**REQUEST FOR ADMINISTRATION OF MEDICATION
(PLEASE TYPE OR PRINT INFORMATION)**

A. Student Information

Name		Date of Birth	
Age			

Medication must be supplied in the original, clearly labeled container from a registered dispensary. It must include:

The student's name;

Date of issue;

Name of the medication;

The name of the registered dispensary;

The prescribed dosage and

Medication must be supplied in the original, clearly labeled container from a registered dispensary. It must include:

The student's name;

Date of issue;

Name of the medication;

The name of the registered dispensary;

The prescribed dosage and frequency;

Period of use; and

The name of the prescribing licensed physician or nurse practitioner.

I/We hereby request that the Near North District School Board, its employees or agents, as outlined, administer the above procedure/medication to my/our child. The Near North District School Board employees are expected to support the student's daily or routine management, and respond to medical incidents and medical emergencies that occur during school, as outlined in board policies and procedures.

I / W e acknowledge that the employees of the Near North District School Board, who will

APPENDIX E3

Medication Administration Chart

Student's Name: _____ Birth Date: _____

Parent(s)/Guardian(s)' Telephone#: _____

School: _____ Grade: _____

Designate Name & Initials: _____ Substitute Name & Initials: _____

Medication: _____ Dosage: _____

Times to be Administered: _____

Directions for Ingestion: _____

Dates or conditions in which Medication is to be

DAILY/ROUTINE

Student is able to manage their condition and care independently and does not require any special care from the school.

Yes No

ROUTINE:

ACTION:

NUTRITION BREAKS

Student requires supervision during meal times to ensure completion.

Student can independently manage his/her food intake.

Reasonable accommodation must be made to allow student to eat all of the provided meals

BASIC FIRST AID: CARE AND COMFORT

First aid procedure(s):

Does student need to leave classroom after a medical incident? Yes No

If yes, describe process for



BOARD REPORT

Title:	Recommendation to Board from Charity Works Committee to establish an NNDSB Foundation
Contact:	Superintendent of Business Seija Van Haesendonck



Title:	COVID-19 Update
Contact:	Superintendent Timothy Graves
Date Submitted:	February 9, 2021
Mandate:	NNDSB is committed to promoting public confidence in education through timely, accurate, effective, and transparent communication of Board initiatives, vision, and goals. This report provides an update on COVID-19 management for the Board of Trustees.

Background:

Child Vaccine Clinics

We have recently been working alongside our Health Unit to support Child Vaccine Clinics in our schools. A highly successful clinic was held at Woodland Public School on January 20th from 4-7 PM. As we continue to support some of our rural areas and neighborhoods with access to clinics, we have dates scheduled at Parry Sound Public School (February 15th), Land of Lakes Public School (February 17th), and Evergreen Heights Education Centre (February 23rd). On Monday, February 7th, all Near North District School Board families with children between the ages of 5 and 11 years old were sent a link to a survey from the North Bay Parry Sound Health Unit. The survey will provide the Health Unit with further information to assist them in their planning of future vaccine clinics for this age group. We continue to promote all child vaccine clinics through our

School and Childcare Screening Tool

On Monday, February 7th, the [School and Child Care Screening Tool](#) was updated to align with changes to [COVID-19 Integrated Testing & Case, Contact and Outbreak Management Interim Guidance: Omicron Surge](#). Key updates include a clarification of isolation

Bay | ITETQ154385-WBT/52f1 0 0 1 1910874m 8E30C0089053
 contact Students and staff are still required to use this tool each day before attending school. Currently, teachers4 38iB1Dp0nirndimorkiy

not to participate, they are presumed positive and should isolate immediately and follow updated testing guidance. Once they have been issued their initial RAT kit, additional RAT kits will only be provided to students and staff when they return from an unplanned absence or dismissal at school/childcare and require more tests in the event of another episode of absence.

Secondary Update

Secondary schools returned to a traditional semester system (four course per day) on January 31st. We recognize the exemplary work of school staff throughout the octomester model. An initial review of semester one student achievement data indicates that our students continued to be successful in the chosen pathway throughout the octomester model. School teams have adapted and modified student success programs in support of these results. Secondary schools continue to offer a variety of student success approaches, such as grad coaches, cooperative education, SHSM to support student achievement through this transition and beyond.

Athletics/ Extracurricular

Despite the COVID restrictions and staffing shortages, we were able to offer a full slate of fall activities in secondary schools. All of the winter sports started their season and are at various points when the pause happened. Low-contact sports, volleyball, curling, cross country skiing and alpine skiing have resumed practices and are looking forward to competition. Current ministry restrictions prohibit high contact extra curriculums such as basketball and hockey in schools. Like many districts, the NDA (Nipissing District Athletics) has decided to focus on providing full schedules of local play for the winter season as OFSSA has canceled winter championships.

Mixed cohorts band using wind instruments are still prohibited at this time.

The NNDSB is grateful for the ongoing support of the North Bay Parry Sound District Health Unit in establishing and revising COVID-19 protocols. We are looking forward to an updated COVID-19 school guidance document from the Ministry of Education in the coming weeks.

Title:	[REDACTED]
Date Submitted:	Board Meeting February 15, 2022

Welcome February is recognized as Black History Month in Canada. It is a time to celebrate Black culture and history and to applaud the achievements and significant contributions Black Canadians have made to build this country into the diverse, welcoming and strong nation it is today. Every February,

Event Updates

Special Recognition Days

This month NNDSB is pleased to acknowledge special recognition days for their educational value, and connection to the Board's mission, vision, and strategic plan. The following are a few examples noted this month, in addition to those shared as part of other board communications. Meaningful ways individual schools have recognized each day are featured on school websites and included in the monthly Chair/ Director newsletter, Near North Matters.

Feb. 8 – Safer Internet Day

On this day, stakeholders around the world come together to make the internet a safer and better place, especially for children and young people. To support the safety and well-being of NNDSB students, staff were invited

Exploitation and Cyberbullying", an online panel presented by Public Safety Canada. The event focused on difficult topics youth, parents, and caregivers face today–

Trustee Bill Steer

NOPSBA Regional Meeting - Friday, January 28, 2022

Janet Edwards, OPSBA Associate Director of Labour Relations, consulted with the group following the trustee consultation regarding bargaining priorities and scope of matters to be bargained centrally. A document was screen shared with trustees asking three questions about quarantine/paid leave, hiring practices, and a list of central bargaining subjects. Trustees participated in a facilitated discussion about the questions and the collective feedback will be shared with the Labour Relations team. The Labour Relations team will consolidate the responses and bring them back through the Board of Directors in February.

these are ideas for new and different ways for OPSBA to advocate and operate.

Feedback is summarized here:

- We at OPSBA must focus on climate change. Flexibility of funding necessary too we need this in the North (Steer)
- Reference to OPSBA Equity Audit -- priorities about equity and anti-racism as a whole. This should be a priority.
- word. Stronger language and more of an effort in this regard.
- Reference to Project Compass equity work is critical to ongoing future of OPSBA.
- We have to be honest and upfront when it comes to equity we have to realize that what fits in Toronto does not necessarily fit in the North or other areas and be aware that demographics need to be considered,

NNDSB - Board Update as attached.

Northern Region Meeting - April 9, 2022 (Virtual)

Education Labour Relations and Human Resources Conference - April 28, 2022 (Virtual)

Annual General Meeting - June 9-

Student Teacher Handbook 2022



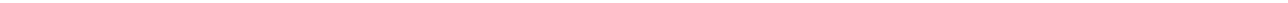
ONTARIO SCHOOL BOARDS
ASSOCIATION

Leading Education's Future

Cost Transfer book 2022









At the table, students pass the voice of student decisions both in action, they help keep students informed about important decisions that affect them.

The OPVATA initiative committee is excited to develop a project whose purpose is to help county vocational schools offer support to students. This book was produced by members of the committee and students who are members of the Public Opinion Council.



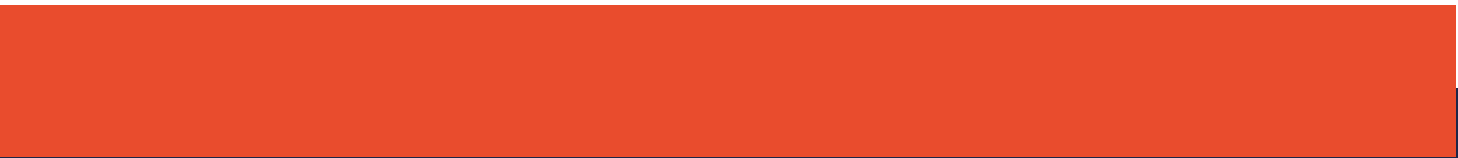
Leasing

Empty rectangular box with a thin red border and a vertical red line on the left side.

Leasing

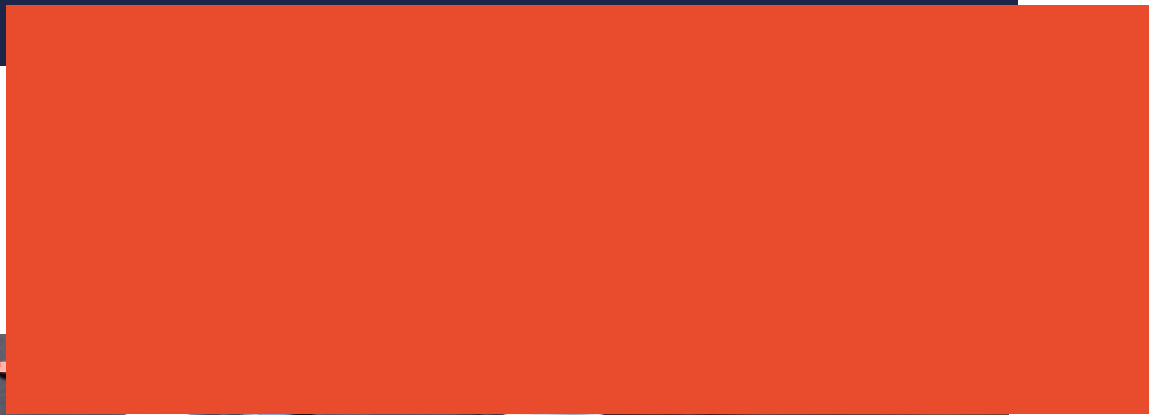
Empty rectangular box with a thin red border and a vertical red line on the left side.





Definition of h:







Learn 10 of 100 Tips

100 Tips

95 100 105 110 115 120 125 130 135 140 145 150 155 160 165 170 175 180 185 190 195 200 205 210 215 220 225 230 235 240 245 250 255 260 265 270 275 280 285 290 295 300 305 310 315 320 325 330 335 340 345 350 355 360 365 370 375 380 385 390 395 400 405 410 415 420 425 430 435 440 445 450 455 460 465 470 475 480 485 490 495 500 505 510 515 520 525 530 535 540 545 550 555 560 565 570 575 580 585 590 595 600 605 610 615 620 625 630 635 640 645 650 655 660 665 670 675 680 685 690 695 700 705 710 715 720 725 730 735 740 745 750 755 760 765 770 775 780 785 790 795 800 805 810 815 820 825 830 835 840 845 850 855 860 865 870 875 880 885 890 895 900 905 910 915 920 925 930 935 940 945 950 955 960 965 970 975 980 985 990 995









mp & of h
T r t h
co cili t io
ommissio
T





Instituto
Trópicos

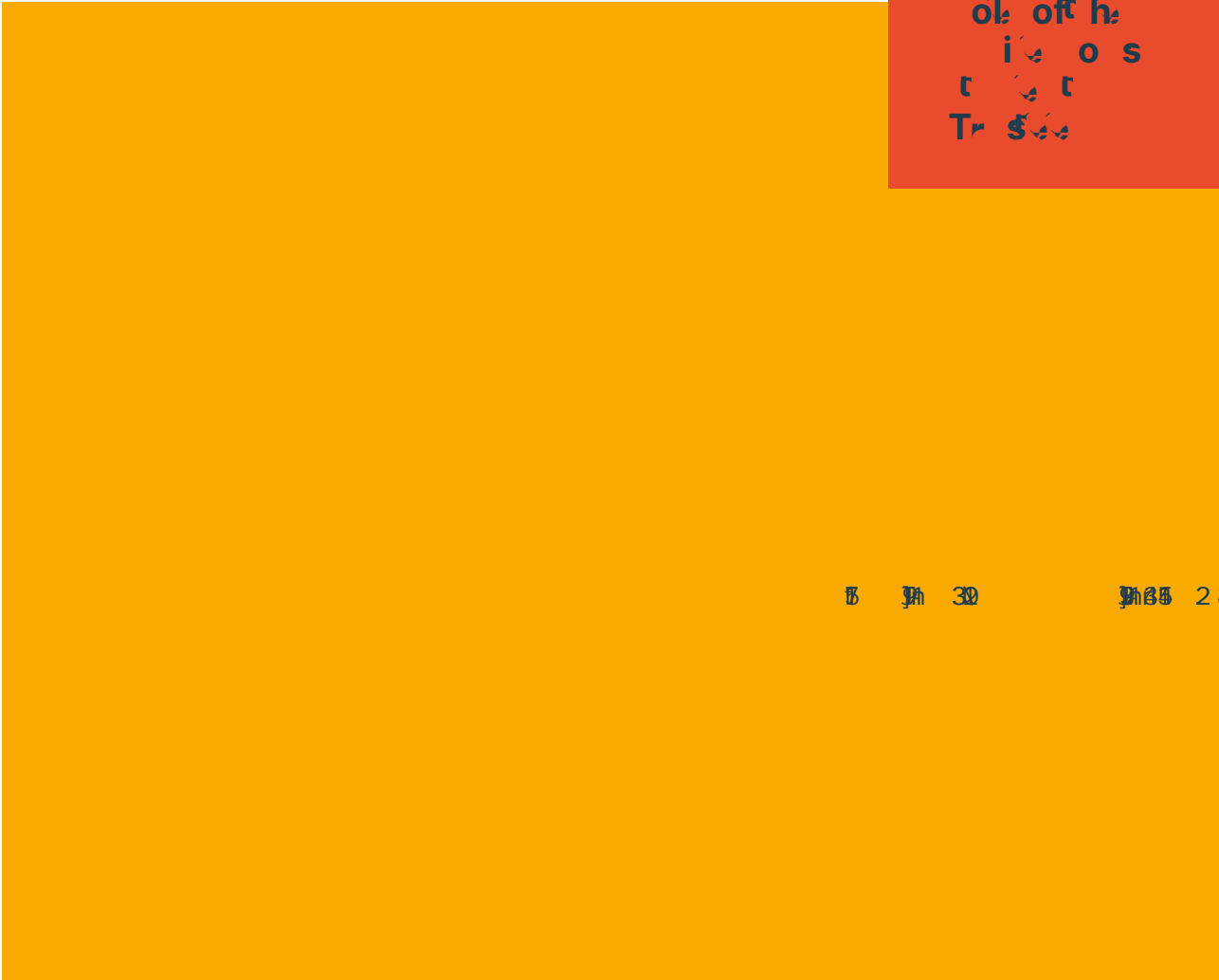


ios
t
Tr \$ S S





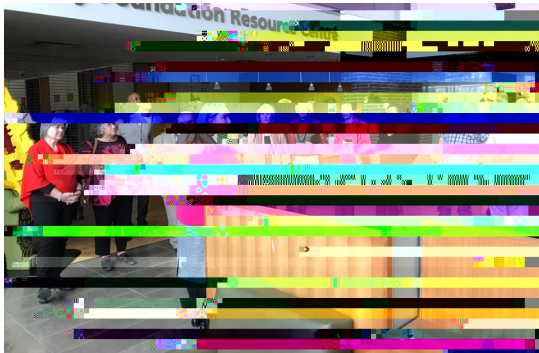
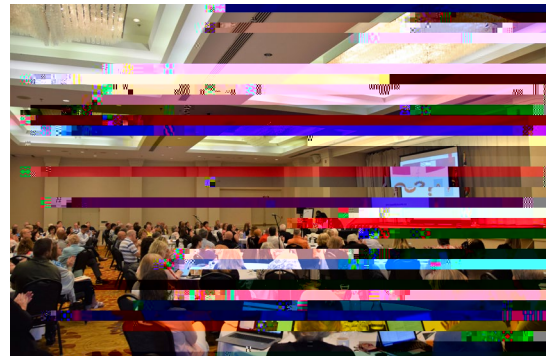
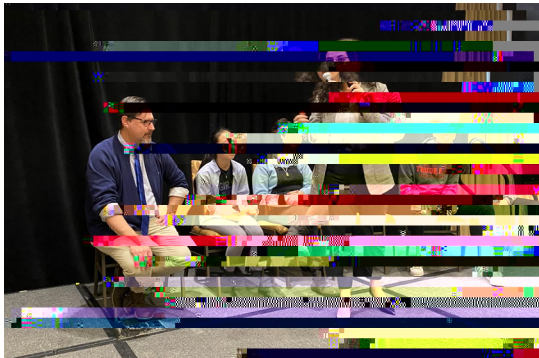
The role
of the
institutions
that
Trust

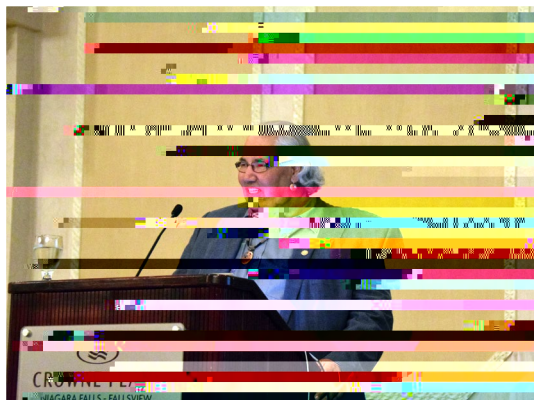
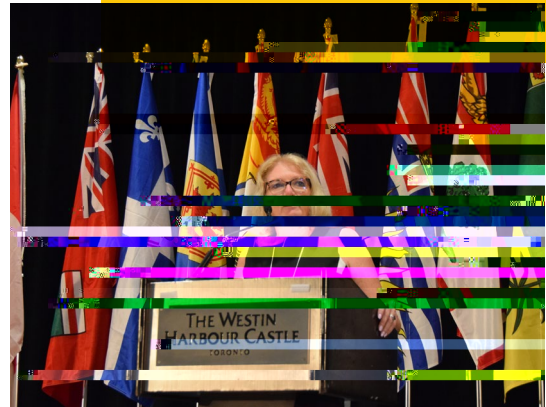
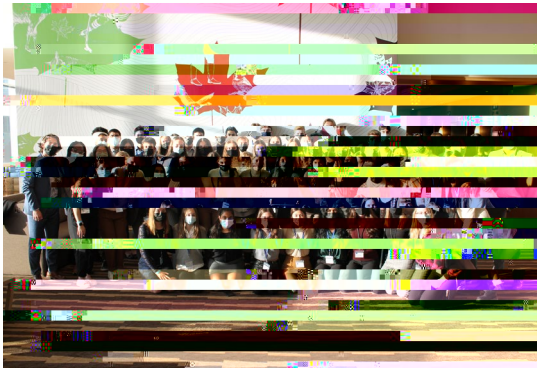


2015 2016 2017

2018 2019 2020







Additional Resources

The Ontario Ministry of Education

The Ontario Education Act

OP & AS Initiatives Overview

Ontario Education Services Operations Trust's Professional Development Program

Transition from the Ontario School System: A Discussion Paper

The Objectives for Ontario O-TA A-OSIO Outcome

The Role of OTCs



CODE

Coterminous Boards

EDU

Elementary Level

EQAO

GSN

IEP

6 8

GSNGSN

01327113 10 153 Td 1503330200765130362025

.





Country level



Division

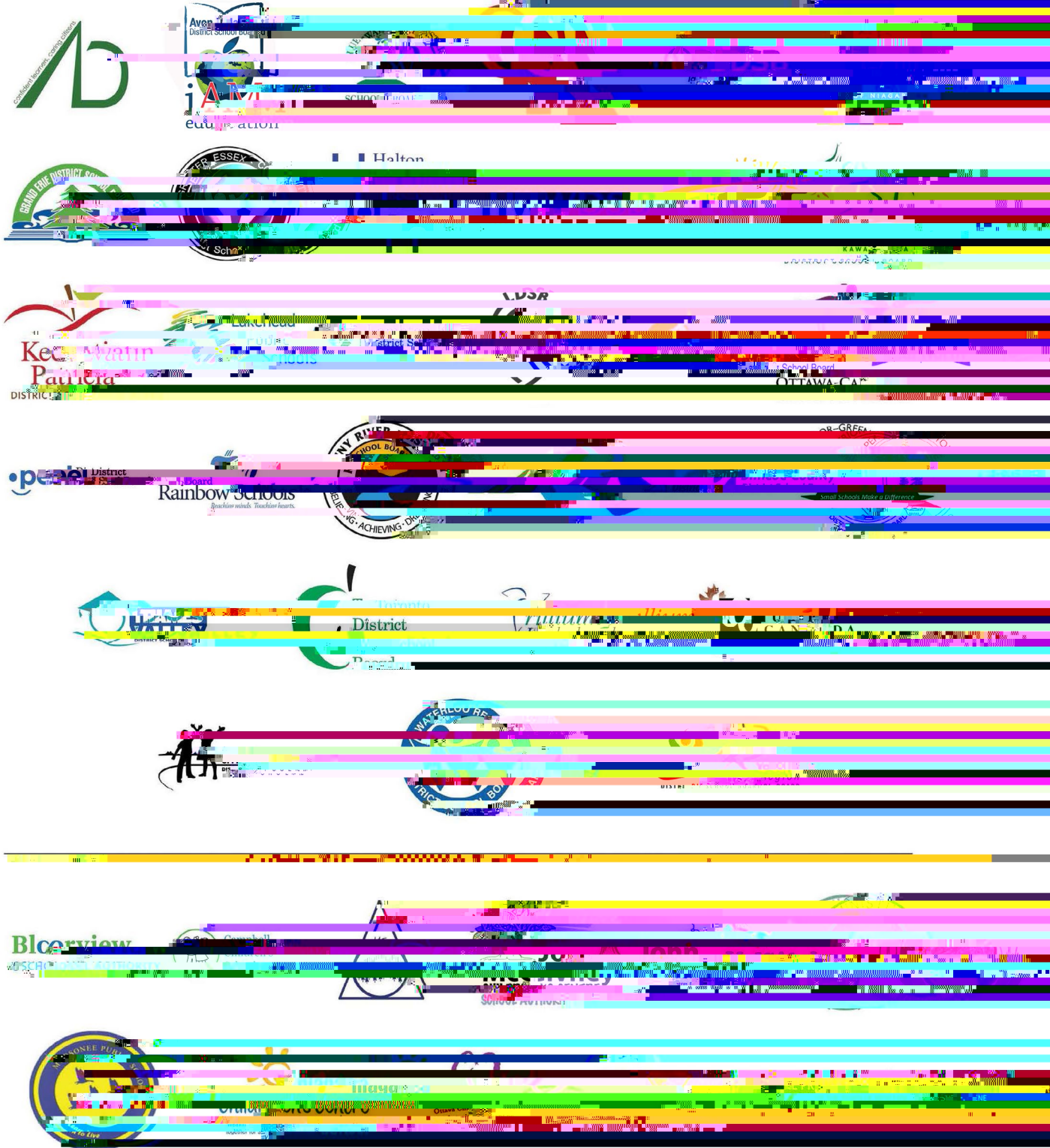




OSTA
Ontario Student Trustees' Association / Association des trustees de l'Ontario

ONTARIO PUBLIC SCHOOL BOARDS ASSOCIATION

Leading Learning's Advocates



Student Trustee Update

Regular Board Meeting

Tuesday, February 15th, 2022

6:00 p.m.

Good evening fellow board members,

Students of the Near North District School Board have been keeping busy and working hard as we begin the second half of the school year. Everyone has been settling in to the rhythm of the shift to the semester model. There has been positive feedback from students regarding this scheduling change, and students in some secondary schools are in hopes for access to lockers soon. Students are enjoying once again the immersive high school experience with clubs, sports and multiple daily classes!

Additionally, many schools including West Ferris and Almaguin have been holding information events for incoming high schools' students. Informational nights were organized featuring details about courses, specialized programs, clubs, high school life, and anything students should know before entering grade nine! In continuation of this, course selections have begun this past week for secondary students with many new and exciting classes and programs across the board such as Indigenous studies, shop classes and specialized physical activity courses as well.

At the beginning of February, schools have had many different initiatives and elements to acknowledge and celebrate black history month. F.J. McElliot, Parry Sound, Almaguin, West Ferris, and Northern have had different adaptations to acknowledge this from music featuring black artists, social media posts consisting of information, announcements, and bulletin boards. At Chippewa Secondary School, students have begun to paint a mural to recognize black history month. There is much more to come in this area later on this month as students learn more about the culture, triumphs, heritage, and adversities of black history in our country.

Upcoming plans for Valentine's Day within the Near North District School Board are being put into action. Some secondary schools are selling candy grams, and sending flowers,

while offering to help with the (11) (m) h)2 (2) (2) (o)TJo-utloA.dpe3l (h ca (1) (ai(11) TJ,o-utle (1)..9)

m yr

!

!"#\$%&' !

!

!

!



!

!

!

4:45 pm – 5:45 pm

C

U

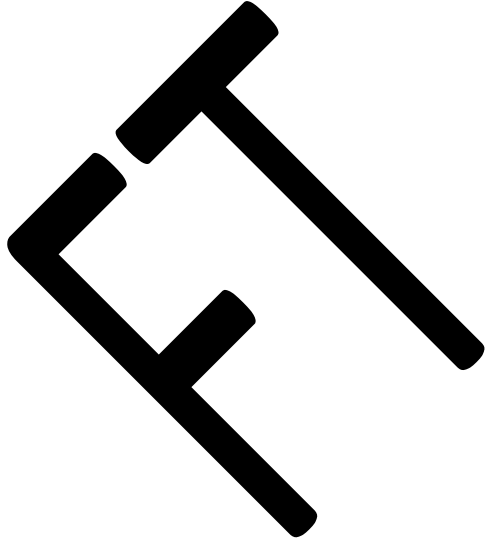
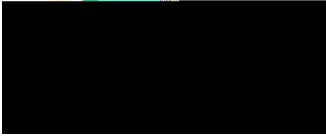
Policy Coordinator, Lily Graydon

5:45 pm – 6:00 pm

!

!

!



	by a Board in their decision
Contact:	Superintendent Gay Smylie
Date Submitted:	February 1 , 2022

Mandate

As per regulation 304 of the Education Act, school boards are required to submit a School Year Calendar by March 1st for the following school year to the Ministry of Education.

A Committee of representatives from the four school boards in our region work together to create a calendar that meets the needs of our students, staff, parents, volunteers and community partners. By working together, the Committee aims to provide consistency across the geographical region and ensure a range of perspectives/needs are taken into account.

The committee must also follow Ministry of Education guidelines, which state that all School Year Calendars must include:

- 194 mandatory instructional days;
- Maximum of seven (7) Professional Activity Days (PA Days);
- Maximum of ten (10) examination days (for secondary schools).

Further, Community Consultation occurs with parents, staff, students and other stakeholders via our School Year Calendar (SYC) survey prior to the calendar’s finalization. The SYC will be submitted to the Ministry of Education pending Board approval, accompanied by a letter signed by the Director of Education.

-making. All four local school boards are mindful of the broad reaching impact the placement of the school year calendar can have on students, parents, staff and volunteers. Committee representatives have taken into account several factors in determining the final calendar.

The 2022-2023 school year will begin on Tuesday, September 6, 2022.

Calendar Considerations:

P.A. Days

We are proposing to continue with 2 Professional Activity Days prior to September 6 (August 31 and September 1) for all staff with a Board

An overview of our P.A. days for the 2022-2023 school year would be:
August 31 and September 1, 2022: MOE and Board initiatives, with a half day of Violence Prevention Training for all ETFO and OSSTF members as per their Collective Agreement.
October 24, 2022: Board and MOE initiatives with a focus on School and Board Improvement Plans (SIPSAWB and BIPSAWB) with a focus on goals related to literacy, numeracy, equity and student well-being. This date was selected to coincide with the Municipal Elections, which will occur on Monday, October 24, 2022.

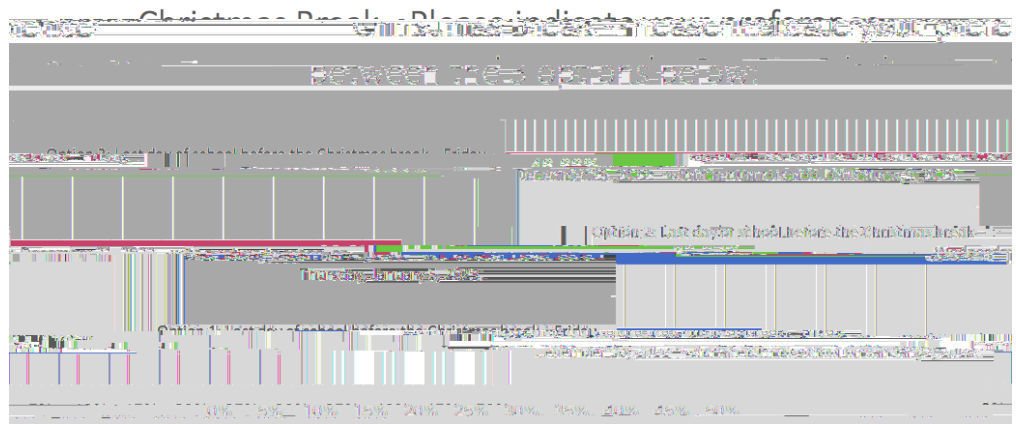
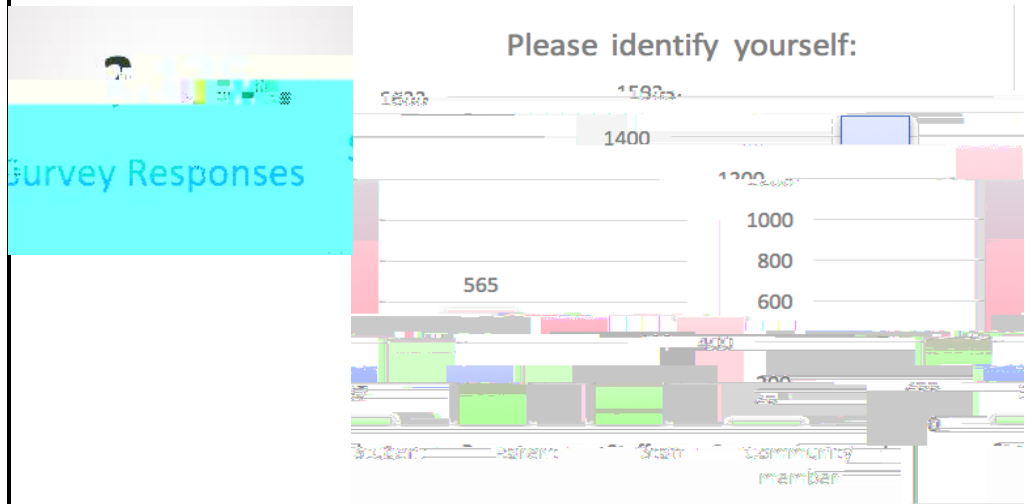
Christmas Break:

Option 1: Last day of school before the Christmas break – Friday, December 16, 2022 – with a return to school on January 2, 2023.

Option 2: Last day of school before the Christmas break – Wednesday, December 21, 2022 – with a return to school on Thursday, January 5, 2023.

Option 3: Last day of school before the Christmas break – Friday, December 23, 2022 – with a return to school on January 9, 2023.

The responses are as follows:







The Capital and Facilities departments are also moving forward with several large projects that are ready for tender, as they were previously approved in 2020-2021 but deferred.

School Renewal Projects

The Ministry provides annual allocations for School Renewal based on enrolment to school boards. -2022 capital allocation for School Renewal is \$2,711,263.

School Condition Improvement Projects

The Ministry has continued to provide school boards with School Condition Improvement funding to address added School Renewal Needs.

number of schools and the facility condition index of each school (recorded in VFA). -2022 capital allocation for School Condition Improvement is \$3,705,656.

Total projects in 2021-2022 being recommended to the Board for consideration and approval at this time amount to approximately \$3,119,800 as per A



Appendix A
Near North District School Board
School Renewal and School Condition Improvement Capital Projects 2021-22

COVID-19 Resilience Infrastructure Stream (CVRIS) – HVAC upgrades

These projects have been funded through CVRIS allocations, but are anticipated to experience funding overages, requiring additional capital funding:

Argyle Public School
F.J. McElligott Secondary School
Ferris Glen Public School
Mattawa District Public School
Phelps Central Public School
West Ferris Secondary School

Other Capital Projects

Evergreen Heights Education Centre universal washroom upgrade

MacTier Public School playground upgrade for accessibility

Mapleridge Public School washrooms upgrade

Parry Sound Public School staircase repair

Silver Birches Public School roof replacement (following completion of HVAC work)

South River Public School engineering work for a parking lot/bus loop upgrade, which

Committee Chair Steer noted the value in establishing a Committee Chair to observe good governance practices and following the direction issued to all committees by Board Chair Aspin. Board Chair Aspin nominated Trustee Steer for the role of MYSP Committee Chair, noting the strong leadership skills he displays and his passion for the MYSP process. Director Myles ech

With this timeline noted, another MYSP Committee meeting is needed to further determine metrics for presentation to the Board prior to the February meeting. Staff directed to canvass schedules for a meeting in 2 weeks.

L. Blaskievich raised consideration for the metrics enveloped into the Director's Annual Report and the 2021 Year in Review documents. It is noted that much work has been done to align department goals to the overall board improvement plans for student achievement and well-being (this is the relationship between the DIPSAWB and the BIPSAWB plans). There are several data points already being gathered that can be built up.

- Chair Aspin noted he was pleased to hear this and provided perspective to note the need to provide an understanding to the Board of Trustees on the

4.0 Next Meeting Date

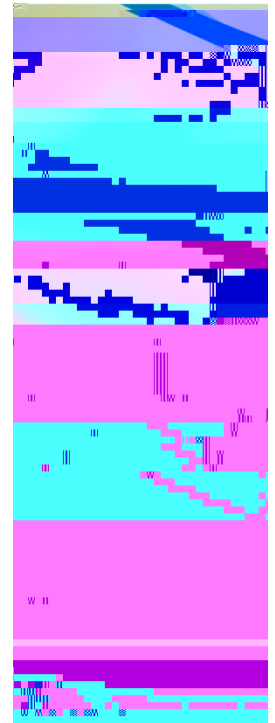
As discussed, the next meeting date of the Multi-Year Strategic Planning Committee will be scheduled at the call of the Committee Chair in two weeks (early February).

5.0 Adjournment

There being no further business to discuss, on January 18, 2022, the Multi-Year Strategic Plan Committee stands adjourned at 11:56 AM, moved by Board Chair Aspin, and seconded by Director Myles.

Minutes: WS/km.

MYSP



During Stage 3: the implementation stage

We experience

Land Acknowledgement by SO Graves

1. **Call to Order** – 1:02 pm

2. **Attendance via Zoom online meeting platform**

Albina Lavictoire (Chair)

Alan Bottomley

Kimberley Gignac

Tim Graves

Laura Hansman

Lisa Paradis

Louise Sargent

Chris Guillemette

Susan Wilson

Candy St. Onge

Guests: Chris Walkling





Unno's



Unno's



Unno's



Unno's