



Background

Staff members are expected to act responsibly as reasonable parents would when a student becomes ill or injured at school or on a school-sponsored activity.

Procedures

1. Administrators, staff and volunteers shall take all reasonable precautions to prevent accidents 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. The Principal shall ensure that the school is equipped with first aid supplies and equipment that are accessible to staff at all times.
4. Staff handling any body fluids shall ensure that they take precautions to protect themselves and others from the spread of infection – refer to Administrative Procedure 161 Appendix A – Communicable Diseases Precautions.
5. The Principal shall ensure that school staff is made aware of basic first aid procedures and the names of persons on staff with first aid training.
6. Accident insurance shall be made available to students and their parents.
7. At the commencement of the school year, the Principal shall ensure that parents advise school staff and bus drivers of their child's medical problems so that the adults responsible for the welfare of students can take reasonable precautions and remedies if necessary.
8. When a student is ill or injured, staff shall ensure that she is comfortable and safe before leaving the student for the purpose of summoning additional help. If possible, the staff member is to stay with the student and have another person seek assistance.
9. Staff members are expected to take appropriate action to provide medical assistance as would be expected of any reasonable adult.

10. Staff may summon emergency personnel and may accompany students to a medical facility.
11. Under no circumstances will staff give legal consent for medical treatment of students in their charge. In the event that medical treatment is required immediately, the staff member shall:
 - 11.1 Defer to the opinion of the medical practitioner;
 - 11.2 Advise the Principal or designate of the problem and the recommendation of the medical practitioner; and
 - 11.3 Continue attempts to contact the parents.
12. If consideration is given to sending home an ill or injured student, the Principal or designate shall:
 - 12.1 Contact the parents or emergency contact and ensure that the student is escorted home or to a designated location; or
 - 12.2 Keep the student at school if unable to contact the parents or emergency contact.
13. Within twenty-four (24) hours after the occurrence of an accident during school hours or at a school sponsored activity, the Principal shall complete an Injury/Illness Form which shall be retained on file at the school, and provide a copy to the Secretary-Treasurer. The Secretary-Treasurer will notify the school's insurance provider.


Reference:

Education Act, s. 11, 27, 52, 53, 54, 68, 196, 197
Emergency Medical Aid Act



**CALGARY
GIRLS
CHARTER
SCHOOL**

**AP315
ILLNESS/INJURY AT SCHOOL
APPENDIX A: STUDENT/TEACHER
ACCIDENT/INCIDENT REPORT**

 CALGARY GIRLS CHARTER SCHOOL		Student/Teacher Accident/Incident Report			AF315A
		Year	Month	Day	
The following particulars of an accident/incident are being reported: (Please provide all information requested. Please Print Legibly.)					
Name of the injured Student:		Date of Birth:		Grade:	
Accident/Incident Location:		Date of Accident/Incident:		Time:	
Parent/Guardian:			Notified? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Home Address:		Telephone:	Postal Code:		
Please describe how the accident/incident happened (include what activity the individual was doing at the time of the incident (e.g. type of sport, field trip, recess, lunch, PE, etc.):					

Please explain what signs and symptoms the individual displayed (e.g. pain, difficulty breathing, headache, difficulties in movement/range of motion, lack of circulation/sensation/ability to weight bear) and if there were any changes during treatment:					

What comments/instructions were given by the parent/guardian upon being contacted?					

What injury did the person sustain/was suspected? (e.g. broken arm, wound, chipped tooth)					

What type of treatment was administered at the school? By whom? Was the individual moved from the location of injury? If so, how?					

Further medical attention sought? Unknown		What type?:			
Please indicate the type of transportation (if any) used: <input type="checkbox"/> Student stayed at school <input type="checkbox"/> Ambulance <input type="checkbox"/> Parent					
<input type="checkbox"/> Other (describe): _____					
Name of hospital/clinic individual taken to: _____					
Please list any witnesses to the accident/incident:					

Corrective action taken to prevent recurrence of this accident? By whom?					

Name of Person Preparing This Report:		Name of Supervisor at the time of accident/incident:			
Name of Principal:		Signature of Principal:			
What follow up is required? What follow up has been done? (To be completed next day)					

In accordance with the School Act, Insurance Act, and FOIPPA, this information is being collected in order to provide information to the Calgary Girls' School Insurers. This information will be used to see if the candidate(s) meet the criteria and will be treated in accordance with the privacy protection provisions of the FOIP Act.					