



SECTION D). SCHOOL ENVIRONMENT AND SAFETY

This section of the Academy's policy covers off school environment and safety touching on the following:

1. *Student Abuse and Neglect*
2. *Student Health*
3. *Harassment and Bullying Prevention*
4. *Compliance and Risk Management*
5. *School Emergencies*
6. *Gender Expression and Gender Dysphoria*
7. *Anaphylaxis*
8. *Potable Water Testing*
9. *School Bus Emergency Evacuation and Drills*

D1). Student Abuse and Neglect

Every student has a right to a life free of abuse, neglect and violence. Child abuse is a serious societal issue. As “service providers”, everyone at Saint John Paul II Academy must be aware of signs of child abuse or neglect and know how to respond to them.

Guiding Principles

- The safety and well-being of children are the paramount considerations
- Children are entitled to be protected from abuse, neglect, harm or threat of harm
- A family is the preferred environment for the care and upbringing of children and the responsibility for the protection of children rests primarily with the parents
- If, with available support services, a family can provide a safe and nurturing environment for a child, support services should be provided
- The child's views should be taken into account when decisions relating to a child are made
- Kinship ties and a child's attachment to the extended family should be preserved if possible
- The cultural identity of Aboriginal children should be preserved
- Decisions relating to children should be made and implemented in a timely manner

Policy: Saint John Paul II Academy policies prohibit any form of child abuse, neglect or violence. The *Child, Family and Community Service Act* requires anyone who has reason to believe that a child has been, or is likely to be at risk, has a legal duty to make a report to a child welfare worker, or directly to the police, if a child is in immediate danger.

- A. At the beginning of each school year, the school principal will review with all school personnel the following 3 documents:
 - a. *“BC Handbook for Action on Child Abuse and Neglect”* (BC Ministry of Children and Family Development)
 - b. *“Responding to Child Welfare Concerns”* (BC Ministry of Children and Family Development)



- c. *“Supporting our Students: A Guide for Independent School Personnel Responding to Child Abuse”* (Office of the Inspector of Independent Schools BC)
- B. The school principal is designated as the ‘*Appointed School Official (ASO)*’ and a second ASO is appointed by the principal to act as a back-up in accordance with *Supporting Our Students: A Guide for Independent School Personnel Responding to Child Abuse (revised 2014)*.
 - C. Schools will protect personal information regarding child abuse, neglect or violence against improper or unauthorized disclosure and use.
 - D. School personnel will report suspected child abuse, neglect or violence immediately. Everyone who has a reason to believe that a child has been, or is likely to be physically harmed, sexually abused or exploited, or neglected by a parent, or otherwise in need of protection as set out in Section 13 of the Child, Family and Community Service Act is legally responsible under section 14 of that Act to report promptly to a social worker. School personnel, who are uncertain about their duty to report, will consult with a social worker who can discuss the options and course of action.
 - E. School personnel will inform the principal (or the president in the event that the principal is the alleged offender or another school official in the event that the principal and the president are the alleged offenders) as soon as possible.
 - F. School personnel will co-operate with the resulting investigation.
 - G. School personnel will support students who have experienced child abuse, neglect or violence.

Procedure: Anyone who suspects a child is being abused or neglected, has the legal duty to report the concern to a local child welfare worker (contact information is available on page 12 of *The B.C. Handbook for Action on Child Abuse and Neglect*). If it is after hours or in the case of uncertainty about who to contact, call the Helpline for Children toll free at 310-1234 (area code not required) at any time of the day or night. The caller’s name is not required. **If the child is in immediate danger, call 911.**

Summary of Roles and Responsibilities

Parents/ Guardians: have the primary responsibility to protect their children. Where parents are unwilling or unable to care for a child or protect the child from harm, the Ministry of Children and Family Development (MCFD) is authorized to intervene.

MCFD: has the lead responsibility for responding to suspected child abuse and neglect. In cases involving aboriginal children the Ministry delegates authority to the Aboriginal Child and Family Services Agency, which provide services to aboriginal communities.

Police respond when a child is in immediate danger and investigate suspected cases of criminal offence.

Service providers must be aware of signs of possible child abuse or neglect and respond to any concern about a child’s safety or well-being.



Appointed School Official and Alternate Appointed School Official: The school principal and a second member of staff appointed by the principal will act as the Appointed School Official and the Alternate Appointed School Official, who may be required to:

- investigate on behalf of the school authority
- ensure a safe school environment during investigations
- consult with the child welfare worker and/or police
- ensure that no school employee interferes with any investigations
- communicate with parents with respect to actions taken by the school authority
- report to the British Columbia College of Teachers and/or the Inspector of Independent Schools when the School Authority dismisses, suspends or otherwise disciplines a certified teacher (Independent School Act section 7; Inspector's Order 1 1/92, Discipline Reporting Order) and
- refer student(s) for counselling

In the event that the suspicion of abuse involves the principal directly the matter is to be raised with the Alternate Appointed School Official who will look to report to the appropriate authority.

Anyone who has reason to believe that a child may be at risk, and the child's parents are unwilling or unable to protect the child, has a legal duty to report to a child welfare worker. The duty to report overrides any duty to protect the privacy of clients, patients, students or staff with the exception of solicitor-client privilege or confidentiality provisions of the federal *Youth Criminal Justice Act*.

Appendix A – Legislation

Child, Family and Community Service Act

The *Child, Family and Community Service Act (CFCSA)* is the legislative authority for child welfare in British Columbia. Its fundamental guiding principle is that the safety and well-being of children are the paramount considerations. The *CFCSA* is available [online](#).

Part 3, Section 13 of the "*Child, Family and Community Service Act 1996*" (amended 2002) quoted below clarifies when protection is needed and the duty to report child protection concerns.

Section 13 (1) A child needs protection in the following circumstances:

- a. if the child has been, or is likely to be, physically harmed by the child's parent
- b. if the child has been, or is likely to be, sexually abused or exploited by the child's parent
- c. if the child has been, or is likely to be, physically harmed, sexually abused or sexually exploited by another person and if the child's parent is unwilling or unable to protect the child
- d. if the child has been, or is likely to be, physically harmed because of neglect by the child's parent
- e. if the child is emotionally harmed by i) the parent's conduct, or ii) living in a situation where there is domestic violence by or towards a person with whom the child resides



- f. if the child is deprived of necessary health care
- g. if the child's development is likely to be seriously impaired by a treatable condition and the child's parent refuses to provide or consent to treatment
- h. if the child's parent is unable or unwilling to care for the child and has not made adequate provision for the child's care
- i. if the child is or has been absent from home in circumstances that endanger the child's safety or well-being
- j. if the child's parent is dead and adequate provision has not been made for the child's care
- k. if the child has been abandoned and adequate provision has not been made for the child's care
- l. if the child is in the care of a director or another person by agreement and the child's parent is unwilling or unable to resume care when the agreement is no longer in force.

1.1). For the purpose of subsection (1) (b) and (c) but without limiting the meaning of "sexually abused" or "sexually exploited", a child has been or is likely to be sexually abused or sexually exploited if the child has been, or is likely to be, encouraged or helped to engage in prostitution, or coerced or inveigled into engaging in prostitution.

(2) For the purpose of subsection (1) (e), a child is emotionally harmed if the child demonstrates severe a). anxiety, b). depression, c). withdrawal, or d). self-destructive or aggressive behaviour.

Criminal Code of Canada

The *Criminal Code* provides the justice system with the legal authority to enforce criminal law as it applies to the abuse and neglect of children. It establishes criminal offences, procedures for investigation, and prosecution and sanctions for offenders. The *Criminal Code* is available [online](#).

Appendix B – Glossary / Definitions

A number of the terms used in this policy have specific meanings in the context of the British Columbia child welfare system. These are defined below to help ensure clarity and support a collaborative response to suspected child abuse and neglect.

Appointed School Official (ASO) and Alternate Appointed School Official (AASO): the school principal acts as the Appointed School Official; the Alternate Appointed School Official is appointed by the principal as a back-up. In the event that the suspicion of abuse involves the Appointed School Official (ie, principal) the Alternate Appointed School Official is to be made aware of this immediately to report to the appropriate authority.

Aboriginal: includes the Indian, Inuit and Métis peoples.

Caregiver: a person who is legally responsible for a child's day-to-day care, for example, a foster parent.

Child: anyone under the age of 19 in British Columbia (see *Child, Family and Community Service Act (CFCSA)*).

Child welfare worker: a person delegated under the *CFCSA* to provide child welfare services, including responses to suspected child abuse and neglect.



Delegated Aboriginal Child and Family Services Agency: an organization that provides culturally-appropriate services to aboriginal children and families, and whose child welfare workers have delegated authority under *CFCSA* to provide child welfare services, including responses to suspected child abuse and neglect.

Director: a person designated by the Minister of Children and Family Development under the *CFCSA*. The Director may delegate any or all of his/her powers, duties and responsibilities under the *Act*.

Emotional Abuse: the most difficult type of abuse to define and recognize. It may include ignoring or habitually humiliating the child or withholding life-sustaining nurturing. It involves acts or omissions likely to have serious negative emotional impacts. Emotional abuse may occur separately from or with other forms of abuse and neglect. It includes the emotional harm caused by witnessing domestic violence.

Emotional harm: when emotional abuse is chronic and persistent, it can result in emotional harm to the child. Under the *CFCSA* a child is defined as emotionally harmed if they demonstrate severe anxiety, depression, withdrawal, self-destructive or aggressive behaviour.

Neglect: neglect is failure to provide for a child's basic needs. It involves an act of omission by the parent or guardian, resulting in (or likely to result in) harm to the child. Neglect may include failure to provide food, shelter, basic health care, supervision or protection from risks, to the extent that the child's physical health, development or safety is, or is likely to be, harmed.

Parent or Guardian: the mother or father of a child; a person to whom custody of the child has been granted by a court order or agreement; a person with whom the child resides and who stands in place of the child's mother or father.

Physical Abuse: physical abuse is a deliberate physical assault or action by a person that results in, or is likely to result in, physical harm to a child. It includes the use of unreasonable force to discipline a child or prevent a child from harming himself/herself or others.

Service provider: employees and volunteers of the Saint John Paul II Academy.

Sexual Abuse: sexual abuse is when a child is used (or likely to be used) for the sexual gratification of another person.

Sexual Exploitation: sexual exploitation is a form of sexual abuse that occurs when a child engages in a sexual activity, usually through manipulation or coercion, in exchange for money, drugs, food, shelter or other considerations.

D2). Student Health

To promote the health of students, Saint John Paul II Academy works with the Ministry of Health, the medical health professionals of the relevant regional health authority. In accordance with the BC Health Act (Schools) Saint John Paul II Academy shall have procedures in place that cover communicable disease control (immunization and pandemics), prevention of infection from blood-borne viruses, school management of students infected with blood borne pathogens, and prevention and management of anaphylaxis in a school setting. In addition, Saint John Paul II Academy is required to be free of all tobacco and vapour products both within and on school premises.



Procedure

1. *Communicable Disease Control - Immunization*

- The immunization program provided by Vancouver Coastal Health (VCH) and Fraser Health Authorities is aimed at maintaining adequate levels of protection in school populations against major vaccine-preventable diseases.
- The school administrator will:
 - Distribute immunization information and consent forms (VCH, FHA and Saint John Paul II Academy information is distributed as necessary);
 - Collect completed forms for the community health nurse (to be handed over to the community nurse once collected);
 - Provide a safe environment in the school for delivery of the immunization program.
- The Parent/Guardian will:
 - Provide immunization records when a student registers in the school for the first time.
 - Provide a completed consent form for the student for all immunizations (consent form will indicate yes or no).
- The Student will:
 - Return signed parental consent forms to the school (no student can give personal consent for an immunization).
 - Attend designated immunization areas in an orderly manner.

2. *Communicable Disease Control – Pandemics*

In the event of a pandemic, the Academy will be guided by directives set out by the Provincial Health Authority as well as Ministry of Education in how best to prevent the spread of the communicable disease in order to protect student health and ensure continuity of learning for all students. Based on the directives received the administration of the Academy will determine the most appropriate course of action to take covering:

- Preventive measures put in place to contain and reduce the spread of the communicable disease in question
- A continuity of learning plan for students and staff
- A communications plan for families and staff

3. *Prevention of Infection from Blood-Borne Viruses (HIV, HEP B, HEP C)*

- Use gloves at all times to avoid contact with blood or body fluids.
- Dispose of dressings and materials used to cleanse wounds in a plastic bag lined covered receptacle.
- Use approved disinfectant for blood spills.
- Provide a puncture-proof sharps container to discard contaminated objects.

4. *Students Infected with Blood Borne Pathogens*

- Mandatory disclosure of infection is not required; assume that anyone
- could be infected with blood borne pathogen.



- Follow all Ministry of Health Guidelines in prevention of infection.
- Follow local health authorities' (VCH & Fraser Health) guidelines on flu infection in the school (i.e. 10% of school population absent due to illness reporting procedure).

5. *Prevention and Management of Anaphylaxis in the School Setting (see also section 8 below)*

- Although most anaphylactic children learn to administer their own medication by about age 8, individuals of any age may require help during a reaction due to rapid progression of the symptoms. Therefore, adult supervision is required.
 - Provide training for all staff members in the use of the epinephrine injector.
 - Telephone 911 and inform that a child is having an anaphylactic reaction.
 - Telephone parents/guardians.
 - Have a staff member accompany the child to the hospital if parent not available or not immediately present to receive the child at the hospital.
 - Location of Epinephrine:
 - Epinephrine injectors provided by the parent/guardian should be kept in a covered and secure area (unlocked) known to all staff.
 - As soon as students are old enough they should carry their own injectors.
 - Review school emergency procedures for each anaphylactic student with staff and parents/guardians annually and as directed by a physician.

6. *Children with Medical Conditions*

- Children with medical conditions such as seizures, asthma or diabetes are to have a care plan in place. The Community Health nurse can be a source of information and assistance in effecting a plan. For additional diabetes resources for schools refer to the BC Children's Hospital Endocrinology website.

Roles and Responsibilities

Parents'/ Guardians' Role

- a. Make the school aware of their child's medical condition and provide updates if this condition changes.
- b. Assist the school in completing a care plan for their child.
- c. Provide appropriate medications both for management and emergency and determine a plan with the school about where and how these should be kept and administered.

School's Role

- a. Keep a record of students who have identified medical conditions.
- b. Ensure that care plans for students with medical conditions are updated regularly.
- c. Consult with the Community Health nurse if you have questions about a care plan for a student. (see relevant health authority website – plan forms available for download.)



Administration of Medication: In the case of ongoing administration or self-administration of medication or provision of a health care procedure, a plan with parental consent is to be in place with accompanying medical documents and/or support.

In the case of the administration or self-administration of medication (Tylenol, Advil, etc.), parental permission is to be provided.

If medication is required while a student is attending school, an administrator or any person designated by him/her shall administer or supervise the self-administration of medication. If required, the community health nurse will train a person(s) in the administration of medication or health care procedure.

No person shall perform any medical or health care procedure or administration of a medication that endangers the well-being of a student or subjects that person to risk of injury or liability of negligence. (The exception is in the case of a life-threatening emergency).

Head Injuries: All head injuries are to be reported and a written report filed. The parent/guardian is to be informed and made aware of the injury. A student with a head injury is to be monitored for symptoms of possible concussion.

Smoke and Vapour Product-Free Environments: The Tobacco and Vapour Products Control Act prohibits all persons from smoking or using tobacco or holding lighted tobacco in a school building. All vehicles and grounds shall be smoke and vapour product free. A person must not smoke or use tobacco, or hold lighted tobacco, or be in possession of a vapour product device in or on school property. A person must not use an e-cigarette, or hold an activated e-cigarette, in or on school property.

D3). Harassment and Bullying Prevention

The foundation of Catholic teaching about life and relationships is respect for the human person. “The quality of men rests essentially on their dignity as persons and the rights that flow from it.”¹ For this reason all persons must be protected from all forms of abuse, neglect, bullying, harm or threat of harm. Saint John Paul II Academy is committed to providing and promoting a learning environment that enables every student to feel safe, accepted and respected.

Saint John Paul II Academy works continuously to develop strategies that make students feel valued, respected and connected within their school community, while remaining consistent with the teaching of the Catholic Church. This includes the protection of a student’s physical safety, social connectedness, inclusiveness as well as protection from all forms of bullying, regardless of their gender, race, culture, religion, sexual orientation or gender identity and expression.

¹ Catechism of the Catholic Church, no. 1935.



Definition: Bullying is a pattern of repeated actions targeted at a person in a deliberate manner, intended to reduce the perceived power that person has over the situation or to harm that person. All acts of bullying have the characteristics of being dehumanizing, intimidating, humiliating, threatening, and evoke fear of physical harm or emotional distress in the person being targeted.

Bullying encompasses a wide range of behaviours in a relationship between a dominant and a less dominant person or group where:

- an imbalance of the perceived power is manifest through aggressive actions
- physical or psychological (verbal and social) abuse occurs
- negative interactions occur directly (face-to-face) or indirectly (gossip, exclusion)
- negative actions occur with intent to harm, which can include some or all of the following:
 - a. physical actions such as punching, kicking, biting and initiating unwanted sexual touching, can hurt the person's body, damage belongings or make the person feel badly about himself or herself;
 - b. verbal actions such as threats, name calling, insults, racial and cultural slurs or inappropriate jokes and/or comments; this includes sexual harassment; that is, when a person or group hurts another person by taunting or discussing sensitive sexual issues, creating sexual rumours or messages, and making derogatory comments on a person's perceived sexual identity;
 - c. social exclusion such as spreading rumours, ignoring, gossiping, excluding.
- negative actions are repeated and/or the intensity or the duration of the actions establishes the bully's dominance over the person. The person thus becomes a victim of injustice.
- information and communication technologies are used physically to threaten, verbally harass or socially exclude an individual or group.

Saint John Paul II Academy will have in place protocols that outline roles, responsibilities and procedures for staff, students, and other adults (including parents) that address bullying.

Procedure: Working with administrators, teachers, support staff, parents and student body, Saint John Paul II Academy will develop a written bullying prevention protocol that includes the following elements:

Education, Awareness and Prevention

- education and awareness on bullying including ways to recognize its pattern and characteristics versus normal peer conflict
- instruction to students that emphasizes respect and compassion for others and age appropriate behaviours to prevent or respond to bullying
- instruction to students on their responsibility to report and take an active stand against acts of bullying including reference to the school's code of conduct as it relates to bullying

Reporting

- steps students and staff will take to respond to allegations of bullying



- efforts that track incidents of bullying at the school (bullying, cyber-bullying, harassment including student-to-student sexual harassment, intimidation, threatening or violent behaviour)
- how reported incidents will be dealt with and monitored

Responding to Bullying

- efforts that outline clear and logical consequences for those who bully, that provides support for those being bullied and intervention with students who bully
- informing the parents/ guardians of children involved in a bullying incident, engaging their support and collaboration to seek a resolution
- in deciding a course of action Saint John Paul II Academy weighs the consequences by age and maturity of the individuals involved, the degree of harm done, incidences of past or continuing pattern(s) of behaviour, the relationship between the parties involved and the context in which the incident(s) occurred

Saint John Paul II Academy remains committed to taking all reasonable steps to prevent retaliation by a person(s) against a student who has made a complaint of a breach in policy.

D4). Compliance and Risk Management

Fostering a strong compliance and risk management culture in how Saint John Paul II Academy is administered recognizes the various legal and regulatory requirements under which an independent school operates in the province. Broadly these regulations include those stipulated in/by:

- the Independent School Act of British Columbia
- Child, Family and Community Service Act of British Columbia
- various regulations set out and updated from time to time by the Ministry of Education and other government ministries including but not limited to the Ministry of Children and Family Development, Ministry of Justice
- the local public health authority
- regulations set out under the Employment Standards Act of British Columbia
- regulations outlined in the Workers Compensation Act - Occupational Health and Safety Regulation and WorkSafe BC
- The Societies Act of British Columbia
- Motor Vehicle Act
- Canada Revenue Agency

Saint John Paul II Academy will ensure that a robust system of oversight is in place to monitor conformance with the relevant applicable legislation.



D5). School Emergencies

In order to ensure the safety and well-being of the students and employees of Saint John Paul II Academy, it is imperative that the Academy is well prepared for emergencies. Saint John Paul II Academy will develop and maintain school emergency plans.

Procedure: Saint John Paul II Academy has adopted *“Responding to School Emergencies,”* a procedural manual published by the Society of Christian Schools as the resource to be used in dealing with emergency situations. The school Principal is responsible for becoming familiar with the manual and putting an effective emergency plan in place. Saint John Paul II Academy will:

- a. Have a Crisis Plan and a Crisis Management Team in place.
- b. Have an Emergency Plan and Emergency Response Team in place.
- c. Inform staff, parents, and the Saint John Paul II Society Board of the plans.

D6). Gender Expression and Gender Dysphoria

Saint John Paul II Academy strives to provide learning environments that are safe, welcoming, inclusive and affirming of the uniqueness of every student created in God’s image and likeness. The aim of a Catholic school is to promote the spiritual, physical and intellectual development of students in a loving learning environment.

To ensure that all members of Catholic school communities work together in an atmosphere of safety and respect for the dignity of all students, Saint John Paul II Academy has adopted policies for the safety, health and educational needs of all students, including those with gender dysphoria.²

Catholic Teaching

The Catholic Church teaches care and compassion for every person, regardless of age, race, or sexual orientation. Everyone is to be treated with dignity and respect.³

The Catholic Church’s belief in the dignity of the person teaches us to address the true human needs of our students to be free from hatred, to be loved, to be supported by the Catholic school community in living the Gospel. Respect for the human person proceeds by way of respect for the principle that

² Gender Dysphoria is defined in the *Diagnostic and Statistical Manual (DSM-5)* as the “distress that may accompany the incongruence between one’s experienced or expressed gender and one’s assigned gender”. The diagnostic criteria for gender dysphoria in children are set out in the DSM-5, which criteria is “marked incongruence between one’s experienced/expressed gender and assigned gender, of at least 6 months’ duration ... associated with clinically significant distress or impairment in social, school, or other important areas of function.”

³ CISVA, *Persons with Same-sex Attraction: Pastoral and Educational Considerations*, 2008; cf. *Catechism of the Catholic Church* nos. 1929, 1930 and 1931.



"everyone should look upon their neighbour (without any exception) as 'another self,' above all bearing in mind their life and the means necessary for living it with dignity".⁴

The Catholic faith, informed by biblical theology and the official teachings of Church authority, teaches that the body and soul of the human being are so united that sexual identity is rooted in biological identity as male or female.⁵ Thus, in Catholic Church teaching, sexual identity is considered "a reality deeply inscribed in man and woman."⁶ This means that the Catholic Church teaches that gender is given by God and that the body reveals the divine plan. As such, humans are not free to choose or change their sexual identity⁷.

In the Catholic faith, a person's biological sex and his/her gender are treated as one and the same. For the purposes of this policy, the term "gender dysphoria," is used to describe the condition experienced by some who feel that their gender is different from their biological sex.

Specific Policies

Saint John Paul II Academy has implemented this Policy to ensure compliance with provincial legislation, as well as with fundamental rights and freedoms, including those set out in the BC *Human Rights Code* and the Canadian *Charter of Rights and Freedoms*.

Specifically, this Policy's purpose is to:

- a. Support and affirm the dignity of all students in every aspect of school life;
- b. Improve the understanding of the lives of all students and find ways to increase respect for the dignity of each other in ways appropriate to the Catholic school setting;
- c. Provide training consistent with the Catholic faith for all teachers and other staff with respect to gender dysphoria and gender expression;⁸ and
- d. Provide resources in addition to the Human Growth and Development resources, consistent with Catholic Church teaching, to support students who experience gender dysphoria or who wish to express their gender identity other than in conformity with prevailing gender norms.

Administrative Strategies

Saint John Paul II Academy will provide opportunities for staff to increase their knowledge and skills in promoting respect for human rights, respecting diversity, and understanding issues of gender dysphoria and gender expression in relation to the Catholic faith and the surrounding society, and addressing discrimination in schools.

⁴ Ibid.

⁵ Cf. *Catechism of the Catholic Church*, nos. 364, 365, 2332, 2333, 2393.

⁶ Congregation for the Doctrine of the Faith, "Letter to the Bishops of the Catholic Church on the Collaboration of Men and Women in the Church and in the World" (2004), no. 8. cf. *Catechism of the Catholic Church* no. 2393: "By creating the human being man and woman, God gives personal dignity equally to the one and the other. Each of them, man and woman, should acknowledge and accept his [and her] sexual identity."

⁷ Pope Francis, Address to the Polish Bishops (27 July 2016).

⁸ For the purposes of this Policy, the term "gender expression" is defined as the manner in which one expresses their gender, which may be conforming or non-conforming with prevailing gender stereotypes. Gender expression specifically does not include any form of gender transitioning and is not the same as "gender presentation".



Saint John Paul II Academy has adopted concrete initiatives developed by CISVA for educating students, staff and parents regarding gender dysphoria and gender expression. Such initiatives have been developed in consultation with individuals qualified in the areas of counselling, pastoral support and Catholic theology for students on topics of gender expression and/or gender dysphoria. Examples of such initiatives are inclusion in the religious and health curriculum. All initiatives are consistent with the teachings of the Catholic Church and, to that end, any materials are pre-approved by the Archbishop.

With respect to any issues concerning bullying, staff should refer to the student Code of Conduct and the provincial Catholic Anti-Bullying policies available at www.cisva.bc.ca/BullyFreeSchool.

Gender non-Conforming Behaviours vs. Gender Transitioning

When considering appropriate administrative strategies for accommodating gender expression and gender dysphoria in students, it is important to distinguish between “gender transitioning” and “gender non-conforming behaviours”.

“Gender transitioning” is a process of actions by which an individual seeks to change one’s gender presentation⁹ in a stable or permanent way to accord with the person’s internal sense of his or her gender identity.

The Catholic school has a responsibility for the spiritual development of its students. Gender transitioning is contrary to Catholic Church teaching, and therefore the Catholic school cannot support any transitioning actions.¹⁰

A Catholic school should always focus on the best interests of the student when considering a request for accommodation. The accommodations outlined below are not considered to be promoting transitioning.

“Gender non-conforming behaviour” is a form of gender expression that refers to behaviours outside of typical gender stereotypes or “norms”. Saint John Paul II Academy recognizes that what constitutes “gender non-conforming behaviour” depends to a great extent on the social and cultural context. Similarly, the extent of conformity of one’s behaviours with one’s sex is not absolute and often changes according to age. A student may engage in a variety of gender non-conforming behaviours without definitively altering his or her gender presentation to that of the opposite sex.

Accommodations for Students

Requests for accommodations

Gender identity issues are complex, delicate and highly personal. Students with gender dysphoria, or whose gender expression is non-conforming, are often in a vulnerable psychological and spiritual condition. Parent(s)/ guardian(s) of such students are understandably concerned about the

⁹ For the purposes of this Policy, the term “gender presentation” is defined as the gender that a person presents themselves to be, or shows themselves as.

¹⁰ Cf. *Catechism of the Catholic Church* nos 2333, 2393, *Charter for Health Care Workers*, n. 66, footnote 144.



psychological and physical well-being of their child while at school. Similarly, siblings may be in need of additional support or counselling.

Any educator approached with a request for accommodation should respond with sensitivity, respect and compassion. The educator should explain that requests for accommodation will require consultation with and support from school administration and confirm that the student and parents wish to proceed.

Regardless of whether a formal request for accommodation is submitted, steps should be taken, where appropriate, to ensure that counselling and support is made available to the student and their family. Where a request for accommodation is received on the basis of gender dysphoria or gender expression, administrative staff should respond in a prompt and supportive manner, and in accordance with the principles outlined in this policy.

A request for accommodation on the basis of gender dysphoria shall be submitted to the School Principal by that student's parent/guardian using the "Request for Accommodation" form attached to this Policy (see Annex A below).

All requests for accommodation must be promptly forwarded by the Principal to the President. The President in consultation with the Principal will determine the level of response by the Case Management team ensuring at all times the privacy of the individuals concerned.

Upon receipt of the Request for Accommodation, the school will convene a Case Management Team meeting with the family to discuss and develop an accommodation plan. The Case Management Team will generally consist of the principal, personal counsellor, campus ministry coordinator, chaplain (if available), sponsor teacher and staff member if needed. Once an accommodation plan has been formalized, a second meeting should be convened within 6 months to review progress.

Privacy Protections

At all times, the privacy rights of the student involved are paramount. Any information that must be disclosed for the purposes of accommodations outlined in this Policy must only be disclosed on a need-to-know basis and in accordance with any other legal obligations.¹¹

The President or his/her appointee, is responsible for determining what, if any, information is provided to staff, students or parent(s)/ guardian(s) in order to facilitate a request for accommodation, as well as the appropriate manner in which to provide that information.

Parent(s)/ guardian(s), staff and students should be notified in a manner that respects the dignity of the student involved.

¹¹ see e.g. the *Independent School Act* and s.9 of the *Independent School Regulation*, B.C. Reg. 262/89, for the rules on disclosure of a student's record. See also the *Personal Information and Protection of Privacy Act*.



Specific Accommodations - Tier I

The following accommodations are available in Tier 1.

1) Privacy and Confidentiality

Students have the right to discuss their experience of gender dysphoria openly.

Administration or school personnel should not disclose information that may reveal that a student is gender dysphoric to other parent(s)/ guardian(s), students or staff, unless legally required to do so, or unless the parent(s)/ guardian(s) of the student have expressly authorized such disclosure.

Where a student approaches a teacher or administrator of the school directly to discuss their experience of gender dysphoria, and where the teacher or administrator suspects that the student has not revealed their experience of gender dysphoria to his or her parent(s)/ guardian(s), the school shall keep such information strictly confidential. The school shall not disclose any information obtained from a student except where otherwise required by law and the standards and ethical codes of relevant professional bodies.

The student shall be encouraged to share their experience with their parents / guardian(s) and advised that any request for accommodation must be submitted by their parent(s)/ guardian(s).

2) Legal Name Change

Upon receipt of a written request by a student's parent(s)/ guardian(s) using the form included with this policy document below, Saint John Paul II Academy will change a student's official record to reflect a change in legal name. Saint John Paul II Academy will require supporting legal documentation to confirm that the name has been officially changed under the *Name Act*, R.S.B.C. 1996, ch. 328.

3) Washroom Accessibility

Schools shall provide access to a private washroom for use by any student who desires increased privacy.

4) Change Room Accessibility

Saint John Paul II Academy shall make available a private changing area for the use of any student who is uncomfortable using the common changing facility, whether such discomfort is related to gender dysphoria, gender expression, or another reason.

Upon receipt of a written request by a student's parent(s)/ guardian(s) in the attached form, a student will be provided with the available accommodation that best meets the needs and privacy concerns of all students involved.

Based on availability and appropriateness to address privacy concerns, such accommodations could include, but are not limited to, a separate changing schedule (either utilizing the change room before or after the other students); or use of a nearby private area (e.g., a restroom or a nurse's office).

5) Physical Education Class and Intramurals



All students should be able to participate in physical education classes and team sports in a safe, inclusive, affirming, and respectful environment.

Physical education activities and intramurals shall not be segregated by sex, unless there are safety concerns.

Specific Accommodation - Tier II

All Tier II Accommodations require submission of a formal written request for accommodation and must be submitted to the President. The President will establish a Case Management Process.

The Case Management Process involves collaboration, as appropriate, among educators, medical professional(s), clergy, other professionals with experience in gender dysphoria, the family and the student.

The Case Management Process shall be guided by the best interests of the child.

A Case Management Plan will be developed, which has the goal of providing a unique set of accommodations based on the particular student's situation.

The Case Management Plan should indicate a clear sense of anticipated actions and adopted strategies for accommodation, as well as short- and long-term timelines for review, evaluation and modification.

1) Common/Preferred Names and pronouns

In order to request a change in preferred or common name or pronoun, the President will require a written request by a student's parent(s)/ guardian(s) in the attached form.

A court-ordered name change is not required, and the student does not need to change his or her official records for this provision to be extended to them.

In general, all school forms and databases should be updated to ensure that a student's preferred or chosen name can be accurately recorded on class lists, timetables, student files, identification cards, etc. The student's gender recorded on the student record shall accord with the gender registered on the student's birth certificate at birth.

2) Transferring a Student to another School

Whenever possible, administrators should aim to keep students who engage in gender non-conforming behaviours or who experience gender dysphoria at their original school site. School transfers should not be an administrator's first response and should only be considered when necessary for the protection or personal welfare of the student, or when requested by the student or the student's parent(s)/ guardian(s). The student or the student's parent(s)/ guardian(s) must consent to any such transfer. The problem is often not the student, but a lack of knowledge and understanding of gender dysphoria and gender expression by students or staff, and of ensuing harassment. These must be addressed at the school level.



In the event that a student's family does elect to transfer schools, then any Case Management Plan will accompany the student to the new school.

3) Dress Codes

In order to request a change or accommodation to the prescribed school uniform, the Superintendent will require a written request by a student's parent(s)/ guardian(s) in the attached form.

4) Competitive Athletics and other activities

For any accommodations with respect to participation in competitive athletic activities or otherwise gender-segregated activities, the school will require a written request by a student's parent(s)/ guardian(s) in the attached form.

Participation in such activities will be resolved on a case-by-case basis and are subject to any additional informational/documentary requirements or restrictions established by the applicable sports league (for example, BC School Sports), or organization.

5) Overnight Field trips

Upon receipt of a written request by a student's parent(s)/ guardian(s) in the attached form, staff shall make reasonable efforts to provide an accommodation that can best address any privacy concerns of the student.

Resolving Conflict

If a dispute arises with regard to a request for accommodation, the dispute shall be resolved in a manner that involves the parent(s)/ guardian(s) and student (as appropriate) in the decision-making process.

The principles of ensuring for reasonable accommodation, maximizing inclusiveness, and addressing the best interests of the student and the other students in the school, including the spiritual development of the student, shall be the guiding framework used to assist in the collaborative decision-making process. Where the parent(s)/ guardian(s), who requested the accommodations, are not satisfied with a decision by the President with respect to each request for accommodation, the first step is for the parent(s)/ guardian(s) to apply to have the decision reconsidered by the President. The parent(s)/ guardian(s) shall promptly notify the President, in writing, of their request for a reconsideration, the basis for the request, what aspects of the decision they are seeking to have reconsidered, and shall submit any additional material or information in support of their request for a reconsideration. The President will be responsible for reviewing the additional information for the purposes of reconsidering the decision, and may, for that purpose, meet with the parent(s)/ guardian(s), request additional information from the parent(s)/ guardian(s), or engage the Case Management Process. The President will notify the parent(s)/ guardian(s) of his/her decision, confirming, reversing or modifying the initial decision, in a prompt manner.

If the parent(s)/ guardian(s) requesting the accommodation are not satisfied with the decision of the President following the reconsideration, the parent(s)/ guardian(s) may file a written appeal of the



decision to the Saint John Paul II Society Board of Directors. The Board of Directors will strike a sub-committee, consisting of, at minimum, a lay person, a Pastor and a professional educator, to investigate the concerns and determine how to best resolve the conflict. The sub-committee will present its findings to the Saint John Paul II Society Board of Directors, which will then issue a formal decision on the appeal.

Where the parent(s)/ guardian(s) are not satisfied with the determination of the Board of Directors and wish to make a further appeal of that determination, the parent(s)/ guardian(s) shall contact the Independent Schools Ombudsperson.

D7). Anaphylaxis

The administration of the Saint John Paul II Academy recognizes that it has a duty of care to students who are at risk from life-threatening allergic reactions while under school supervision. The Academy also recognizes that this responsibility is shared among the students, parents, the school system and health care providers.

The purpose of this policy is to minimize the risk to students with severe allergies to potentially life-threatening allergens without depriving severely allergic students of normal peer interactions or placing unreasonable restrictions on the activities of other students in the school.

This policy is designed to ensure that students at risk are identified, strategies are in place to minimize the potential for accidental exposure, and staff and key volunteers are trained to respond in an emergency situation.

Policy: While Saint John Paul II Academy cannot guarantee an allergen-free environment, it will take reasonable steps to provide an allergy-aware environment for students with life-threatening allergies.

Saint John Paul II Academy shall develop a plan to implement the steps outlined below:

- a. a process for identifying anaphylactic students;
- b. a process for keeping a record with information relating to the specific allergies for each identified anaphylactic student;
- c. a process for establishing a student emergency procedure plan, to be reviewed annually, for each identified anaphylactic student to form part of the student's record;
- d. procedures for storing and administering medications, including procedures for obtaining preauthorization for employees to administer medication to an anaphylactic student; and
- e. an education and communication plan to inform the whole school community of their roles and responsibilities with respect to creating an allergen-aware environment.

1. Description of Anaphylaxis



Anaphylaxis is a sudden and severe allergic reaction, which can be fatal, requiring immediate medical emergency measures be taken.

Signs and symptoms of a severe allergic reaction can occur within minutes of exposure to an offending substance. Reactions usually occur within two hours of exposure, but in rarer cases can develop hours later. Specific warning signs as well as the severity and intensity of symptoms can vary from person to person and sometimes from reaction to reaction in the same persons.

The following chart lists common allergens and their sources:

Foods which are common sources of anaphylactic reaction	Other possible sources in prepared foods	Non-food sources
<ul style="list-style-type: none"> • Peanuts/peanut butter/peanut oil: the most prevalent among students • Tree nuts: hazelnuts, walnuts, pecans, almonds, cashews • Sesame seeds & sesame oil • Cow’s milk and dairy products • Eggs • Fish • Shellfish • Wheat • Soy • Bananas, avocados, kiwis and chestnuts for children with latex allergies 	<ul style="list-style-type: none"> • Cookies • Cakes • Cereals • Granola bars • Candies 	<ul style="list-style-type: none"> • Play dough (may contain peanut butter) • Scented crayons and cosmetics • Peanut-shell stuffing in “bean bags” and stuffed toys • Wild bird seed, sesame • Insect venom (bees, wasps, hornets, yellow-jackets) • Rubber latex (gloves, balloons, erasers, rubber spatulas, craft supplies, balls) • Vigorous exercise • Plants such as poinsettias for children with latex allergies • Perfumes and scented products

It has been estimated that more than 600,000 or 1% to 2% of Canadians are at risk of anaphylaxis (from food and insect allergy), and that up to 6% of young children less than three years of age are at risk. In the school age population, it is estimated that between 2-4% of children are at risk of anaphylactic reactions to foods.

An anaphylactic reaction can involve **any** of the following symptoms, which may appear alone or in any combination, regardless of the triggering allergen:

- **Skin:** hives, swelling, itching, warmth, redness, rash
- **Respiratory (breathing):** wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay fever-like symptoms (runny itchy nose and watery eyes, sneezing), trouble swallowing
- **Gastrointestinal (stomach):** nausea, pain/cramps, vomiting, diarrhoea
- **Cardiovascular (heart):** pale/blue colour, weak pulse, passing out, dizzy/light-headed, shock
- **Other:** anxiety, feeling of “impending doom”, headache, uterine cramps in females



Because of the unpredictability of reactions, early symptoms should never be ignored, especially if the person has suffered an anaphylactic reaction in the past. If an allergic student expresses any concern that a reaction might be starting, the student should always be taken seriously. When a reaction begins, it is important to respond immediately, following instructions in the student's Student Emergency Procedure Plan. The cause of the reaction can be investigated later.

The following symptoms may lead to death if untreated:

- breathing difficulties caused by swelling of the airways; and/or
- a drop in blood pressure indicated by dizziness, light-headedness or feeling faint/weak.

Identifying Individuals at Risk

At the time of registration, using space provided on the school's registration form, parents are asked to report on their child's medical conditions, including whether their child has a medical diagnosis of anaphylaxis. Parents will be provided with medical forms and a Student Emergency Procedure Plan. If they have identified that their child has a medical diagnosis of anaphylaxis, they will be required to fill out this form in the manner described below.

It is the responsibility of the parent/guardian to:

- Inform the school principal when their child is diagnosed as being at risk for anaphylaxis.
- At the time of registration (yearly), complete medical forms and the Student Emergency Procedure Plan which includes a description of the child's allergy, emergency procedures, contact information, and consent to administer medication. This form should be completed in consultation with the child's physician.
- Provide the school with updated medical information whenever there is a significant change related to their child.
- Inform service providers of programs delivered on school property by non-school personnel of their child's anaphylaxis and care plan, as these programs are not the responsibility of the school.

The school will contact anaphylactic students and their parents to encourage the use of medical identifying information (e.g. MedicAlert® bracelet). The identifying information could alert others to the student's allergies and indicate that the student carries an epinephrine auto-injector. Information accessed through a special number on the identifying information can also assist first responders, such as paramedics, to access important information quickly.

Record Keeping – Monitoring and Reporting

For each identified student, the school principal will keep the Student Emergency Procedure Plan on file. It is the school principal's responsibility to collect and manage the information on students' life threatening health conditions and to review that information annually.



The school principal will also monitor and report information about anaphylactic incidents to the President in aggregate form (to include number of at-risk anaphylactic students and number of anaphylactic incidents) at a frequency and in a form as directed by the President.

Emergency Procedure Plans

Student Level Emergency Procedure Plan

The Student Emergency Procedure Plan must be completed by a student's parents / guardians and physicians on a yearly basis. The Student Emergency Procedure Plan will include at minimum:

- the diagnosis;
- the current treatment regimen;
- who within the school community is to be informed about the plan – e.g. teachers, volunteers, classmates;
- current emergency contact information for the student's parents/guardians;
- a requirement for those exposed to the plan to maintain the confidentiality of the student's personal health information;
- information regarding the parent's / guardian's responsibility for advising the school about any change/s in the student's condition; and
- information regarding the school's responsibility for updating records.

With parental permission, a copy of the plan will be placed in readily accessible, designated areas such as the classroom and office.

School Level Emergency Procedure Plan

Saint John Paul II Academy will develop a School Level Emergency Procedure Plan describing the steps to take in the event of a reaction. This plan must include the following elements:

- Administer the student's auto-injector (single dose) at the first sign of a reaction. The use of epinephrine for a potentially life-threatening allergic reaction will not harm a normally healthy child, if epinephrine was not required. Note time of administration.
- Call emergency medical care (911 – where available)
- Contact the child's parent/guardian
- A second auto-injector may be administered within 5 to 15 minutes after the first dose is given if symptoms have not improved (i.e. the reaction is continuing, getting worse, or has recurred).
- If an auto-injector has been administered, the student must be transported to a hospital (the effects of the auto-injector may not last, and the student may have another anaphylactic reaction).
- One person stays with the child at all times.
- One person goes for help or calls for help.

The school principal, or designated staff, must ensure that emergency plan measures are in place for scenarios where students are off-site (e.g. bringing additional single dose auto-injectors on field trips).

Provision and Storage of Medication: Students at risk of anaphylaxis who have demonstrated maturity



should carry one auto-injector with them at all times and have a back-up auto-injector stored at the school in a central, easily accessible, unlocked location. For students who have not demonstrated maturity, their auto-injector(s) will be stored in a designated school location(s).

The location(s) of student auto-injectors must be known to all staff members and caregivers.

Parents / guardians will be informed that it is the parents' / guardians' responsibility:

- to provide the appropriate medication (e.g. single dose epinephrine auto-injectors) for the anaphylactic student;
- to inform the school where the anaphylactic student's medication will be kept (i.e. with the student, in the student's classroom, and/or other locations);
- to inform the school when they deem the student competent to carry their own medication/s , and it is their duty to ensure their child understands they must carry their medication on their person at all times;
- to provide a second auto-injector to be stored in a central, accessible, safe but unlocked location;
- to ensure anaphylaxis medications have not expired; and
- to ensure that they replace expired medications.

Allergy Awareness, Prevention and Avoidance Strategies

Awareness: The school principal shall develop a Communication Plan that includes the following key elements:

- A request that parents and students make respectful choices
- Information educating parents and students on the potentially lethal outcomes of severe allergies and the specific allergens known to be a concern at the school
- A focus on the importance of hand washing
- A request to discourage teasing.

The school principal shall ensure:

- That all school staff and persons reasonably expected to have supervisory responsibility of school-age students receive training annually in the recognition of a severe allergic reaction and the use of single dose auto-injectors and standard emergency procedure plans.
- That all members of the school community including substitute employees, employees on call, student teachers and volunteers have appropriate information about severe allergies including background information on allergies, anaphylaxis and safety procedures.
- With the consent of the parent / guardian, the principal and the classroom teacher must ensure that the student's classmates are provided with information on severe allergies in a manner that is appropriate for the age and maturity level of the students, and that strategies to reduce teasing and bullying are incorporated into this information.



Posters which describe signs and symptoms of anaphylaxis and how to administer a single dose auto-injector should be placed in relevant areas. These areas may include classrooms, office, staff room, lunch room and/or the cafeteria.

Avoidance/Prevention: While parents / guardians may ask that allergens be banned from the school as part of a prevention plan, such a request cannot be reliably implemented. There is no legal responsibility in any jurisdiction to reduce the risk of exposure to allergens to zero, and Saint John Paul II Academy cannot assume responsibility for providing an “allergen-free” environment.

Our world is contaminated with potential allergens. Individuals at risk of anaphylaxis must learn to avoid specific triggers. While the key responsibility lies with the students at risk and their families, the school community must participate in creating an “allergy-aware” environment. Saint John Paul II Academy’s approach is to regularly educate the parent community and solicit the co-operation of families, and to set in place procedures that are designed to safeguard the anaphylactic student.

In classrooms of anaphylactic students, special care is taken to avoid exposure to allergy-causing substances. Parents are asked to consult with the teacher before sending in food, toys, balloons, or craft materials to these classrooms. The risk of accidental exposure to a food allergen can be significantly diminished by means of such measures, although it can never be completely eliminated.

Given that anaphylaxis can be triggered by minute amounts of an allergen when ingested, students with food allergies must be encouraged to follow certain guidelines:

- Eat only food which they have brought from home unless it is packaged, clearly labelled and approved by their parents
- Wash hands before and after eating.
- Not share food, utensils or containers.
- Wipe off the desk table area to ensure a clean food space
- Place food on a napkin or wax paper rather than in direct contact with a desk or table
- Do not leave food unattended

Roles and Responsibilities

The safety of students with anaphylaxis depends on the shared responsibility of:

- Anaphylactic student and his/her parents / guardians
- School administrators and staff
- Other parents, students, parent groups, coaches, etc.
- Public health nurse.

Given the severe consequences of anaphylaxis, it is very important for all parties to accept their roles and responsibilities and work together to provide a safe environment in the school, as described below:

School Principal

- Works closely with the parents / guardians of an anaphylactic student



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- Ensures that parents/guardians and students are asked to complete the Student Emergency Procedure Plan upon registration
 - Maintains a file for each anaphylactic student of current treatment and other information, including a copy of prescriptions and instructions from the student's physician and a current emergency contact list
 - Develops a communication plan for the dissemination of information on life-threatening allergies to parents, students and employees
 - Requests that the school community not bring or send allergens to school
 - Notifies all appropriate school personnel of medical concern, treatment and established procedure
 - Reviews procedures with entire staff each September and provides regular training to staff on emergency response measures for anaphylactic event
 - Conducts food safety discussions with all students at the beginning of the year and at regular intervals throughout the year

Teacher

- Displays Student Emergency Procedure Plan and Anaphylaxis Emergency Guide/Guidelines/911 Protocol in the classroom, with parental approval when appropriate based on the age, maturity and responsibility level of the anaphylactic student
- Discusses anaphylaxis with the class, in age-appropriate terms
- Encourages students not to share lunches or trade snacks
- Encourages/organizes celebrations and activities that are not focused on food, or if this is not possible, choose allergen-free foods for classroom events (where necessary and appropriate, in consultation with the parents of the anaphylactic students)
- Establishes procedures to ensure that the anaphylactic student only eats what he/she brings from home
- Reinforces with all students the importance of hand washing before and after eating
- Facilitates communication with other parents
- Enforces school rules about bullying and threats
- Leaves information in an organized, prominent and accessible format for occasional/substitute teachers
- Ensures that epinephrine is taken on field trips
- Ensures that they are up to date on all training and are comfortable administering an auto-injector as necessary

Parents of Anaphylactic Child

- Inform the school of their child's allergies and completes Student Emergency Procedure Plan
- Ensure that their child's file is up to date
- Provide a MedicAlert® bracelet for their child
- Provide the school with two up-to-date auto-injection kits, clearly labeled with the child's name and prescription details; and ensures that the child carries with him or her at least one auto-injector at all times
- Provide their child with safe foods, including for special occasions



- Teach their child
 - About the allergen and its triggers
 - How to recognize the first symptoms of an anaphylactic reaction
 - To know where medication is kept and who can get it
 - To communicate clearly when he or she feels a reaction starting
 - To carry his or her own auto-injector
 - Not to share snacks, lunches or drinks
 - To understand the importance of hand-washing
 - To cope with teasing and being left out
 - To report bullying and threats to an adult in authority

Anaphylactic Student

- Has an age-appropriate understanding of his/her allergy and its triggers
- Learns how to inform others of the allergy and its consequences
- Complies with taking medication as arranged and approved by school principal
- Takes as much responsibility as possible for avoiding allergens
- As age-appropriate, takes responsibility for checking food labels and monitoring food intake
- Washes hands before and after eating
- Learns to recognize symptoms of an anaphylactic reaction and promptly inform an adult as soon as accidental exposure occurs or symptoms appear
- Keeps an auto-injector on their person or close by at all times (where age-appropriate)
- Knows how to use an auto-injector (where age appropriate; staff must recognize that anaphylactic students will likely not be able to self-administer during an anaphylactic reaction)
- Has an increased responsibility for being vigilant around potential allergens, as he/she ages.

Public Health Nurse

- Acts in an advisory capacity to school principal and staff, collaborating and facilitating access to information, training and other resources
- Provides annual training to staff

All Parents

- Respond cooperatively to requests from school to eliminate allergens from packed lunches and snacks, and to avoid bringing shared food into schools that may contain allergens
- Participate in parent information sessions
- Encourage students to respect anaphylactic student and school prevention plans

All Students

- Learn to recognize symptoms of anaphylactic reactions
- Avoid sharing food, especially with anaphylactic students
- Follow school rules about keeping allergens out of the classroom and washing hands
- Refrain from bullying or teasing a student with a food allergy



Training Strategy

A yearly training session on anaphylaxis and anaphylactic shock will be held for all school staff and persons reasonably expected to have supervisory responsibility of students (e.g. food service staff, volunteers, bus drivers, custodians).

Experts (e.g. public health nurses, trained occupational health & safety staff) will be consulted in the development of training policies and the implementation of training. Training will be provided by individuals trained to teach anaphylaxis management. The training sessions will include:

- signs and symptoms of anaphylaxis;
- common allergens;
- avoidance strategies;
- emergency protocols;
- use of single dose epinephrine auto-injectors;
- identification of at-risk students (as outlined in the individual Student Emergency Procedure Plan);
- emergency plans; and
- method of communication with and strategies to educate and raise awareness of parents, students, employees and volunteers about anaphylaxis.

Participants will have an opportunity to practice using an auto-injector trainer (i.e. device used for training purposes) and are encouraged to practice with the auto-injector trainers throughout the year, especially if they have a student at risk in their care.

D8). Potable Water Testing

As required by the Ministry of Education, it is the responsibility of the local school authority to test its drinking water to ensure that its quality complies with water management best practices and the Drinking Water Protection Act. The drinking water supply at Saint John Paul II Academy will be tested every three (3) years by an accredited testing lab to ensure that it is safe and free of lead and other contaminants. (Confirm that it will be at least every three years)

Procedure

The Ministry of Education requires that a school have the following process in place to test its drinking water:

- Contact the nominated testing lab to request bottles for water samples collection together with specific instructions on how to collect the samples.
- Samples should be dispatched to lab immediately upon collection.

Water test results will be communicated to the Ministry of Education and the Fraser Health Authority via the reporting tool below. If the sample results reveal lead levels exceeding a concentration of 0.010



mg/L, the school, in consultation with the Fraser Health Authority, will undertake mitigation strategies which may include:

- Flushing regimes
- Deactivation of water sources and supplemental signage
- Installation of filtration systems
- Plumbing upgrades
- Or other steps that result in reducing the exposure to lead to acceptable levels

If testing finds drinking water concentrations of lead at or above the maximum acceptable level (defined as lead levels not exceeding a concentration of 0.010 mg/L), the school will:

- a. Immediately inform the Independent Schools Branch of the issue
- b. Work collaboratively with the Fraser Health Authority to communicate the results of the tests, the lead content found in drinking water to parents, students and staff by describing the following:
 - rationale for testing lead in drinking water,
 - identify partnership with the Fraser Health Authority to work toward a solution,
 - the results of the sampling,
 - identify mitigation strategies implemented or being considered by the authority, and
 - provide contact information for the authority and the Fraser Health Authority for parents, students and staff to request further information.

Ministry of Education Reporting

Saint John Paul II Academy will report the results directly to the Ministry of Education using the following link: <https://forms.gov.bc.ca/education-training/indy-web-form/>

D9). School Bus Emergency Evacuation and Drills

Whereas, in an emergency situation, the objective is getting children off the bus safely in the shortest possible time and in an orderly fashion, it would be unrealistic to expect the student to perform adequately without practice; therefore:

It is the responsibility of the principal to ensure that the bus driver, students and applicable Academy staff, are knowledgeable and have had training in school bus emergency evacuation procedures, in accordance with the jurisdictional safety laws.

- Ensuring that your Driver is trained and familiar with the School bus collision protocol.
- Drivers are to perform practice evacuations to provide the passengers with the training required to safely carry out an emergency evacuation, by using; the front door, the rear door, the emergency exit windows and the combinations of front/rear doors, including the several standard windows, during an evacuation.



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- The emergency evacuation practices are to be conducted at least twice in each school year. The first practice should be conducted prior to November 30.
 - Drivers and/or chaperons are to be trained and familiar with the procedures, and should be knowledgeable in evacuation procedures, which drivers and/or chaperons are to use in instructing their passengers, in the event of an emergency.
 - During an emergency evacuation Drivers and/or chaperons are also expected to instruct students on location and procedures to be followed in removing the emergency window for evacuation.
 - During training the Driver/Instructor will show the students the locations of the emergency equipment, i.e. fire extinguisher, first aid kit, flares and if available the two-way radios or cell phone and all emergency exits available.

Policy: it is the responsibility of Saint John Paul II Academy to ensure that the policy complies with the Ministry of Education Act/Regulations and other school bus related provincial Acts/ Regulations and school policies (i.e. Motor Vehicle Act and Regulations, Passenger Transportation Act and Regulations etc.).

Authorization: The board of directors of Saint John Paul II Academy Society will issue procedures in support of this policy.

Emergency Evacuation Procedures: Typically, students remain on the bus following an accident or during various emergency circumstances. Nevertheless, there will be situations that require the passengers to be immediately evacuated from the bus. Below are four examples:

- fire, or danger of fire
- downed electrical power-lines
- chemicals spill
- the bus unsafe position

General: Evacuation drills should be held on school property and never on a bus route.

- Drivers should stay in the bus during evacuation drills. Be sure the parking brake is set, ignition off, keys removed, and transmission gear in park.
- Do not permit children to take backpacks, lunch boxes, books, etc. with them when they leave the bus.
- The driver appoints two leaders who leave the bus and all students will follow to a safe place at least 35 metres from the bus in an "evacuation drill" and remain there in a group until given further instructions by the leaders .
- Explain the four (4) types of evacuations: Front door; Rear emergency; Emergency windows; and, Combination evacuation.

Front Door Evacuation: Front door evacuation is generally used when there is little or no danger and when time is not a factor (i.e.: if the bus breaks down or similar problem). In considering a front door evacuation drill, the following steps should be used:



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- Stop the bus, set parking brake, and turn off engine (remove key).
 - Stand, face the children, and get their attention, open the door.
 - Give the command: "EMERGENCY DRILL, REMAIN SEATED, FRONT DOOR EVACUATION"
 - The driver appoints two leaders who leave the bus and all students will follow to a safe place at least 35 metres from the bus in an "evacuation drill " and remain there in a group until given further instructions by the leaders.
 - Appointed leaders are to stand outside the front door to count and assist passengers as they leave the bus.
 - Standing between the first occupied seats, the driver or assigned person will then turn and face the front of the bus:
 - Starting with the right-hand seat, tap the shoulder of the student nearest the aisle to indicate that those occupants should move out. Say, "WALK, DON'T RUN; USE HANDRAILS."
 - While the right-hand seat occupants move out; hold your hand before the occupants on the left-hand seat in a restraining gesture.
 - When the students in the right-hand seat have moved forward far enough to clear the aisle, dismiss the occupants of the left-hand seats.
 - Continue the evacuation procedures as described, right to left seats alternately, until the bus is empty.
 - When the last seat is empty, walk to the front of the bus checking to see that everyone is out.
 - After you leave the bus, go to students and advise them of improvements to be made and tell them about the job well-done.

Rear Door Evacuation: Rear door evacuation is usually deployed when a front evacuation is not practical or is impossible (i.e., a collision damaging the entry door, or hazards in the front door). In considering a rear door evacuation drill, the following steps should be used:

- Stop the bus, set parking brake, and turn off engine (remove key).
- Stand, open the door, face the children, and get their attention.
- Give the Command: "EMERGENCY DRILL, REMAIN SEATED, REAR DOOR EVACUATION."
- The driver appoints two students to leave first, stand sideways next to the emergency doors so that the students leaving the bus can use their shoulders as a help down to the ground. Students will crouch/sit down at the back door with their arms extended in front of them to lessen the distance to the ground and to avoid bumping their heads as they exit and step (not jump) out of the bus with the assistance of the leaders. Standing between the last occupied seats, you will then turn and face the back of the bus:
- Starting with the right-hand seat, tap the shoulder of the student nearest the aisle to indicate that those occupants should move out. Say, "WALK, DON'T RUN; USE HANDRAILS."
 - Hold your hand before the occupants of the left-hand seat in a restraining gesture.
 - Ensure that students sit on the floor of the rear before exiting out the back door.
 - When the students in the right-hand seat have moved forward far enough to clear the aisle, dismiss the occupants of the left-hand seats.



- Continue evacuation procedures as described, right and left seats alternately, until the bus is empty.
- When the last seat is empty, walk to the back of the bus checking to see that everyone is out.
- After you leave the bus, go to students and advise them of improvements to be made and tell them about the job well-done.

Emergency Window Evacuation: The school bus driver will demonstrate to all passengers where the emergency exit windows are located and how these are opened. She/he will then instruct all passengers not to open these windows until required to do so.

Emergency Equipment: The school bus driver will show all passengers the location of the fire extinguisher, the first aid kit, flares, and two-way radio (if applicable). In the event the bus driver is injured or incapacitated, it is important to have appointed students who would be able to do the following:

- Turn off ignition switch Set parking brake
- Summon help when and where needed, via two-way radio or cell phone
- Open emergency windows or break out windows if necessary
- Set flags and flares
- Open and close doors, account for all students passing his/her station
- Help small children off the bus
- Cut seat belts if required

Responsibilities: It shall be the responsibility of the Superintendent to ensure that these administrative procedures are followed.

<i>Document History</i>	<i>Approved</i> Society Board 20 October 2020
<i>Revisions</i>	30 March 2023



Annexures

Policy D6 – Gender Expressions and Gender Dysphoria

Annex A

Request for Accommodation

I, _____ (insert parent/guardian’s name), parent/guardian of _____ (insert student’s name), wish to make a formal request for accommodation on the basis of gender dysphoria or gender expression. I request that my child be given the following accommodations:

1. Change of common name from _____ to _____
2. Change of legal name from _____ to _____
(*please provide supporting legal documentation*).
3. Change room accessibility – please specify request:

4. Dress code – please specify request:

5. Participation in sports – please specify request and indicate whether request is being submitted with respect to physical education classes, or competitive or intramural athletics:

6. Field trip accommodation – please specify request:



7. Additional accommodations – please specify request

*Parent's Signature**

Date

Please Print

Parent's Signature

Date

Please Print

*By signing, you provide consent to disclose the form to the school's administration.