

Guidelines for Supporting Students in School who have a Do Not Attempt Resuscitation (DNAR) Order

Context

The Nova Scotia Department of Education recognizes and endorses the basic right of all students to full and equal participation in education. Providing health care support services to students while they are in the public school system to enable them to attend school is a shared responsibility among schools, parents, students, and health care professionals.

When a student attends school with a medical plan that includes a Do Not Attempt Resuscitation (DNAR) order, these Guidelines will support school staff in following the DNAR order, if asked to do so by the parent/guardian, and if the required documentation has been provided to the school in advance, for the student's cumulative record.

A Do Not Attempt Resuscitation Order (DNAR) is a medical directive that is written to direct care in the event of cardio-respiratory compromise. The order will provide information on what interventions may be helpful in a life threatening event (and may include what interventions not to provide i.e. the administration of cardiopulmonary resuscitation (CPR), the administration of medication, artificial ventilation (including mouth-to-mouth and bag-valve-mask), and the use of defibrillation as appropriate). For the purpose of these Guidelines, the terms "Allowing Natural Death (AND)" and "Do Not Resuscitate (DNR)" may be used interchangeably.

These guidelines have been developed in collaboration with the Pediatric Palliative Care Service, school board Student Services staff, and the Student Services Division of the Nova Scotia Department of Education. The guidelines strive to enable the provision of better coordinated care, allowing the values, goals, priorities, cultural and spiritual perspectives of the student and his/her family to be respected. These guidelines will also provide support and direction for school staff.

General Expectations

- The parent/guardian will lead the conversation in situations where there is a DNAR order in place for a student; the parent/guardian will inform the school of the DNAR order, and

the school will convene a program planning team meeting as soon as possible to discuss the details and develop an Individual Health Care Plan and an Individual Emergency Health Care Plan.

- School staff will follow the medical DNAR order provided there is a copy of the order signed by the physician filed in the student's cumulative record. In addition, the parent/guardian, student (as appropriate), the school principal and when determined necessary by the school board, a health care professional must sign the student's Individual Health Care Plan and Individual Emergency Health Care Plan authorizing school staff to follow the DNAR order during school hours/extracurricular events.
- School staff will be provided with information from the parent/guardian and health care professional(s) (as appropriate) that will define their roles and responsibilities in the event the student experiences cardio-respiratory compromise at school. All actions and expectations for school staff will be written on an Individual Health Care Plan and Individual Emergency Health Care Plan developed by the student's program planning team. A copy of the medical DNAR order must be placed in the student's cumulative record at the school.

Expectations for School Boards and Schools

- Ensure that the medical plan of care for the student, developed by the health care team and provided by the parent/guardian is placed in the student's cumulative record at school. The medical plan of care must be accessible in the event of an emergency. The medical plan of care will include the child's name, date of birth, health card number, hospital identification number, diagnosis and will be signed by a physician. It will clearly outline what actions should be done in the event of cardio-respiratory compromise: this may include medications or oxygen, and comfort measures. It will also include what actions will not be pursued, and the rationale for these restriction(s).
- Develop a school based Individual Health Care Plan and Individual Emergency Health Care Plan in collaboration with the parent(s)/guardian(s); the plans will be specific to the student's medical condition and will identify the roles and responsibilities of school staff during school hours. The Individual Health Care Plan and Individual Emergency Health Care Plan will include and reflect the DNAR order. The Individual Health Care Plan and Individual Health Care Emergency Plan must be signed by the student's parent/guardian, and/or student (as appropriate), the school principal and when determined necessary by the school board, a health care professional. These plans should, when possible, be developed prior to the opening day of school. Students who have a DNAR order and arrive during the school year, or those who transfer to the school, will have an Individual Health Care Plan and Individual Emergency Health Care Plan developed as soon as possible.
- Organize a meeting with all staff who will have direct contact with the student during the school day as early as possible after the medical plan of care is made known to the school. This meeting will include school staff as determined by the principal, the parent(s)/guardian(s), the student if applicable, and a health care professional if

necessary. This meeting will review the medical plan of care, roles and responsibilities of school staff in the event of cardio-respiratory compromise, give an opportunity to staff to express their feelings, concerns and ask any questions they may have.

- Inform all school staff, lunch supervisors and bus drivers of students who have a DNAR order in place and review the medical plan of care in the event of cardio-respiratory compromise.
- Establish a plan to promptly inform substitute teachers (in the substitute teacher's plan package), student teachers, and volunteers, as appropriate and review the medical plan of care in the event of cardio-respiratory compromise/distress.
- Inform school staff of their responsibility to provide paramedics with a copy of the DNAR order authorized by a physician when 9-1-1 is called.
- Review the student's Individual Health Care Plan and Individual Emergency Health Care Plan annually or more frequent if requested by the parent/guardian.
- Ensure all relevant information pertaining to the student's medical condition and DNAR order is sent to the new school, in the event that the student transfers to another school.
- Establish a school plan to provide follow up support for students and school staff who may have witnessed a student in cardio-respiratory distress where a DNAR order was followed.

Expectations for parent(s)/guardian(s)

- Provide the school with a medical plan of care developed by the health care team that includes the student's name, date of birth, health card number, hospital identification number, and diagnosis. It will outline what actions should be taken in the event of cardio-respiratory compromise. It will also include what actions should not be pursued, and the rationale for these restriction(s). The medical plan of care, which includes the DNAR order, must be signed by a physician.
- Participate in the development of the Individual Health Care Plan and Individual Emergency Health Care Plan that reflects the DNAR order, in collaboration with the individual program planning team. The Individual Health Care Plan and Individual Emergency Health Care Plan must be signed by the parent/guardian, and/or student, (as appropriate), the school principal, and when determined necessary by the school board, a health care professional, in order for school staff to be authorized to follow the DNAR order.
- Provide information to the school as required to support the needs of their child's medical condition while at school.
- Participate as a member of the individual program planning team annually, or more frequently if needed, to review the student's Individual Health Care Plan and Individual Emergency Health Care Plan.

Notes to accompany DNAR Guidelines

The following terms are used in the DNAR Guidelines:

- (1) A **“Do Not Attempt Resuscitation (DNAR) order”** is a *medical directive* signed by a physician. Whenever a DNAR order is developed, it is a component of a Medical Plan of Care for the patient.
- (2) A **“Medical Plan of Care”** is a plan for an individual developed by a *health care team* (includes physicians, nurses and other health care professionals). A medical plan of care does not include or require a parent’s signature.
- (3) An **“Individual Health Care Plan”** is the plan *developed by the school’s individual program planning team* for a student’s ongoing daily support, and includes parents, and the student as appropriate as members of the team. This plan is signed by the parent (and student if appropriate). The template for this plan is on TIENET, and is a component of the Department of Education’s Student Information System (SIS) for schools.
- (4) An **“Individual Emergency Health Care Plan”** is the school’s emergency plan for the student, and is also *developed by the school’s individual program planning team*. If the student has a DNAR order and the parents have presented the order for the school to follow in the event of cardio-respiratory compromise/distress, the DNAR order is included as part of the Individual Emergency Health Care Plan for the student. This plan is signed by the parent (and student, if appropriate). The template for this plan is on TIENET, and is a component of the Department of Education’s Student Information System (SIS) for schools.
- (5) An **“Individual Health/Emergency Care Plan”** is a combined Individual Health Care Plan and Individual Emergency Health Care Plan for students who need both plans. The template for this plan is on TIENET, and is a component of the Department of Education’s Student Information System (SIS) for schools.

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