

Durham Catholic District School Board
Catholic Education: Learning & Living in Faith



REGULAR BOARD MEETING

AGENDA

Monday, April 23, 2018

7:30 p.m.

Catholic Education Centre



Catholic Education Centre, 650 Rossland Road West, Oshawa, Ontario L1J 7C4
Main Telephone Number: (905) 576-6150; Toll Free: 1-877-482-0722
Main Fax Number: (905) 576-0953 - Board Web Site: www.dcdsb.ca

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Durham Catholic District School Board

REGULAR BOARD MEETING

Monday, April 23, 2018

Open Session 7:30 p.m.

Durham Catholic District School Catholic Education Centre
650 Rossland Road West, Oshawa, L1J 7C4

OPEN SESSION AGENDA

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| A. <u>CALL TO ORDER</u> | |
| a.1 Motion to Move In Camera (7:00 p.m.) | |
| a.2 National Anthem (7:30 p.m.) | All Saints CSS Students |
| a.3 Acknowledgement of Traditional Territory | |
| a.4 Memorials and Prayer | Student Trustees |
| a.5 Roll Call and Apologies | |
|
B. <u>APPROVAL OF AGENDA</u> | |
| b.1 Changes to printed agenda | |
| b.2 Approval of Agenda | |
|
C. <u>ANNOUNCEMENTS</u> | |
| c.1 Announcement from the In Camera Session of the Board Meeting | |
| c.2 Healthy School Award Recognition – Durham Region Health Department | |
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D. <u>NOTICES OF MOTIONS</u> | |
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E. <u>DECLARATIONS OF INTEREST</u> | |
| e.1 Declaration of conflict of interest | |
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F. <u>ACTIONS TO BE TAKEN</u> | |
| f.1 Approval and Signing of Minutes of the Open Session of the Regular Board Meeting of March 19, 2018 | 4 |
| f.2 Business Arising from the Open Session of the Regular Board Meeting of March 19, 2018 | |

G. PRESENTATION

- g.1 Durham Catholic Children's Foundation Annual Report 2017 – Stan Karwowski, Chair,
Board of Directors, Durham Catholic Children's Foundation
- g.2 Updated Multi-Year Budget Framework – Ryan Putnam, Superintendent of Business

H. DELEGATION

I. CONSIDERATION OF MOTION

- i.1 Motion to be read in Open Session from the In Camera Session of
the Board Meeting of April 23, 2018

J. UNFINISHED BUSINESS FROM PREVIOUS MEETINGS

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- I.4.3 Director's Verbal Report

I.5 Chair's Report

- I.5.1 Chair's Verbal Report
- I.5.2 Student Trustees Verbal Report

M. CORRESPONDENCE

N. INQUIRIES AND MISCELLANEOUS

O. PENDING ITEMS

P. ADJOURNMENT

Q. CLOSING PRAYER

Student Trustee



Durham Catholic District School Board

MINUTES of the **OPEN SESSION** of the Regular Board Meeting of the Durham Catholic District School Board which was held in the Catholic Education Centre, 650 Rossland Road West, in Oshawa on Monday, March 19, 2018.

Trustees Present

T. Chapman, Chair
M. Forster, Vice Chair
T. Corless
K. LeFort
J. McCafferty
J. Oldman
P. Pulla (teleconference)
J. Rinella (teleconference)

Staff Present

A. O'Brien, Director
T. Barill
J. Bastarache
J. Bowyer
B. Camozzi
M. Gray
M. Hammond
T. Keay
R. Leclair
J. McVeigh
L. Morgulis
J. Mullins
G. O'Reilly
R. Rodriguez

Student Trustees

A. Paul
M. Malkin

A. OPEN SESSION CALL TO ORDER

Chair Chapman called the Open Session to order at 7:00 p.m.

a.1 MOTION TO MOVE IN CAMERA

Motion No. B2018-03-19-01

Motion to Move In Camera

Moved by K. LeFort seconded by J. McCafferty

"THAT the Durham Catholic District School Board Meeting move into In Camera Session."

Carried

RESUMPTION OF OPEN SESSION (7:45 p.m.)

Chair Chapman called the Meeting to order and welcomed all in attendance.

a.2 NATIONAL ANTHEM – O CANADA

St. Joseph (Oshawa) Catholic School instrumental band opened the meeting with O Canada and a harmonic composition before prayers.

a.3 ACKNOWLEDGEMENT OF TRADITIONAL TERRITORY

Chair Chapman acknowledged Traditional Lands and Territory.

a.4 MEMORIALS AND PRAYERS

Student Trustees Paul and Malkin offered the opening prayer.

ITEM a.3 ROLL CALL AND APOLOGIES

Trustee Pulla and Trustee Rinella attended by teleconference.

B. APPROVAL OF AGENDA

ITEM b1. CHANGES TO THE PRINTED AGENDA

None

ITEM b.2 APPROVAL OF AGENDA

Motion No. B2018-03-19-02

Approval of Agenda

Moved by J. Oldman seconded by M. Forster

“THAT the Durham Catholic District School Board approve the agenda of the Monday, March 19, 2018 Regular Board Meeting as printed.”

Carried

C. ANNOUNCEMENTS**c.1. ANNOUNCEMENTS FROM THE IN CAMERA SESSION OF THE REGULAR BOARD MEETING OF FEBRUARY 26, 2018**

Vice Chair Forster made the following announcements:

RETIREMENTS

<u>Name</u>	<u>Current Position</u>	<u>Effective</u>
Cynthia Holliday	Teacher, St. Joseph CS (Osh)	June 30, 2018
Michael W. Ward	Teacher, St. Wilfrid CS	February 28, 2018

ELEMENTARY PRINCIPAL PLACEMENT (ACTING)

for the period Tuesday, April 3, 2018 to Friday, June 29, 2018

<u>Name</u>	<u>Current Position:</u>	<u>New Position:</u>
Geraldine Borg	Vice Principal, St. Christopher CS	Acting Principal, St. Paul CS

PLACEMENT OF ELEMENTARY VICE PRINCIPAL (ACTING)

for the period Tuesday, April 3, 2018 to Friday, June 29, 2018

<u>Name</u>	<u>Current Position:</u>	<u>New Position:</u>
Catherine Patterson	Program Support Teacher, St. Christopher CS	Acting Vice Principal St. Christopher CS

C.1 RECOGNITION OF ST. BERNADETTE CATHOLIC SCHOOL – RECIPIENT OF DR. BETTE M. STEPHENSON AWARD

St. Bernadette Catholic School community received the Dr. Bette M. Stephenson Recognition of Achievement. This award recognizes school communities across the province that have made effective use of Education Quality and Accountability Office (EQAO) data to support their students and create strategies that helped to strengthen student achievement. This year, the focus of the program was on the growth of literacy skills among students with special education needs.

C.2 FR. FENELON CATHOLIC SCHOOL GLOBAL GANDHI PROGRAM PARTNERSHIP

Principal at Father Fénelon Catholic School, Mike O'Neill, shared a recent announcement about the school's partnership with the Global Gandhi Peace Program. Father Fénelon is the first school in Canada to join this program, which has modules of learning around the theme of non-violence, peace, compassion and empathy. This initiative was announced during the Prime Minister's recent visit to India, as Prime Minister Trudeau took some time to watch a video which Father Fénelon's Social Justice Club created to launch the program.

D. NOTICES OF MOTIONS

None.

E. DECLARATION OF INTEREST

None.

F. ACTIONS TO BE TAKEN

APPROVAL AND SIGNING OF MINUTES – FEBRUARY 26, 2018 REGULAR BOARD MEETING

Motion No. B2018-03-19-03

Approval and Signing of Minutes

Moved by J. Oldman seconded by K. LeFort

“THAT the Durham Catholic District School Board approve the Minutes of the Open session of the February 26, 2018 Regular Board Meeting.”

Carried

**BUSINESS ARISING FROM THE OPEN SESSION OF THE REGULAR BOARD
MEETING OF FEBRUARY 26, 2018**

Trustee Corless asked for clarification regarding the name of the school currently reflected in the Minutes as “Unnamed North Oshawa School.” Director O’Brien indicated that the naming process will occur through a School Naming Policy, including trustees, staff and parish representative.

G. PRESENTATIONS

g. 1 SHARELIFE

Coordinator of Schools and Employee Campaigns, Tim Lee Loy, and Advisory Board Member for ShareLife, John Ecker, extended thanks on behalf of the ShareLife charitable community through personal stories of hope and charity. They presented a plaque of appreciation to DCDSB for 100% participation by its schools for the past 11 years. Mr. Lee Loy thanked students, staff, and trustees for their leadership in embracing ShareLife for over a decade, bringing the Gospel to marginalized societies and extend thanks to students, staff and families for making a difference. Chair Chapman extended her thanks to Mr. Lee Loy and Mr. Ecker for their presentation.

**g.2 TOGETHER FOR ALL EQUITY ACTION PLAN AND TOGETHER FOR HOPE
POVERTY ACTION PLAN**

Superintendent of Equity and Inclusive Education, Janine Bowyer, and Principal, St. Bernadette Catholic School, Susie Lee-Fernandes, presented an overview of the Together for All Equity and Inclusive Education Action Plan which addresses the broad goals outlined in the Ministry of Education’s Equity Action Plan within the context of DCDSB. Together for All is based on the following key initiatives:

School and classroom practices;

- Leadership, governance and human resources practices;
- Data collection, integration and reporting; and
- Organizational culture change.

Superintendent Bowyer noted that one of the key actions of Together for All was to engage Durham Catholic schools and the community as partners in the creation of the Together for Hope Action Plan to ensure that all students have equitable access to rich learning experiences, especially those who have been impacted by poverty. The focus for the first year is Priority Neighbourhood schools.

g.2 TOGETHER FOR ALL EQUITY ACTION PLAN AND TOGETHER FOR HOPE POVERTY ACTION PLAN – continued

Trustee Corless asked about Ministry approved funds for this initiative. Superintendent Bowyer noted that although there are not specific Ministry funds to address poverty, we use an equitable distribution of our school budgets to address the needs of our schools in our priority neighbourhood and pockets of poverty across the Board (e.g. Children's Foundation bursary). Chair Chapman inquired about increasing teachers' efficacy and parent engagement. Superintendent Barill noted that teachers and students work and learn together, to build confidence so that teachers can explore those with same thought process; and report challenges and successes. Principal Lee-Fernandes indicated that a survey is sent to families and the data is assessed by school administration. She added that input through side-walk conversations play are also key.

g.3 INTERNATIONAL EDUCATION

Superintendent of Education, International Education, Michael Gray, shared the framework on student recruitment from an international education perspective. The four goals from the Ministry of Education's Strategy for international education include:

1. Future-oriented learning for Ontario students.
 2. High quality programs/services for K-12 international students studying in Ontario.
 3. Opportunity for sharing/developing Ontario education expertise.
 4. Pathway to post-secondary education, work and living in Ontario.
- Superintendent Gray provided an update on international student recruitment in terms of the 2017-2018 budget, service delivery model, strategic focus, and recruitment activities.

Trustee LeFort inquired about recruitment in terms of students adjusting to life in Canada. Superintendent Gray noted that working with a home-stay provider allows for proper vetting. Chair Chapman asked about the impetus for the Program. Director O'Brien advised that it was the expectation of the Ministry of Education Adult Education Strategy, and added that international students often choose Durham for various reasons including its safety record, education achievement record and university partnerships. Trustee Corless inquired about partnership with embassies and consulates. Superintendent Gray noted that partnerships included countries in South America and Asia.

H. DELEGATION

None

I. CONSIDERATION OF MOTION

**i.1 MOTIONS TO BE READ IN OPEN SESSION FROM THE IN CAMERA SESSION
OF THE BOARD MEETING OF MARCH 19, 2018**

Vice Chair Forster deemed the Motions read from the In Camera session of the March 19, 2018 Board meeting.

J. UNFINISHED BUSINESS FROM PREVIOUS MEETINGS

None

K. COMMITTEE REPORTS

k.1.1 IPRC REPORT FOR FEBRUARY 2018

Motion No. B2018-03-19-04

IPRC Report for February 2018

Moved by K. LeFort seconded by J. Oldman

“THAT the Durham Catholic District School Board accept the IPRC Report for the month of February 2018.”

Carried

k.1.2 SPECIAL EDUCATION ADVISORY COMMITTEE MEETING – MARCH 6, 2018

Motion No. B2018-03-19-05

Special Education Advisory
Committee Meeting – March 6,
2018

Moved by K. LeFort seconded by J. Oldman

“THAT the Durham Catholic District School Board accept the report of the March 6, 2018 Special Education Advisory Committee meeting.”

Carried

k.2. MATTERS REFERRED FROM COMMITTEE

None

L. STAFF REPORTS

I.1. STUDENT SERVICES/SAFE SCHOOLS

I.1.1 TOGETHER FOR ALL EQUITY ACTION PLAN AND TOGETHER FOR HOPE POVERTY ACTION PLAN

Motion No. B2018-03-19-06

Together for All Equity Action
Plan and Together for Hope
Poverty Action Plan

Moved by K. LeFort seconded by J. Oldman

“THAT the Durham Catholic District School Board receive and file as information the Together for All Equity Action Plan.”

Carried

“THAT the Durham Catholic District School Board receive and file as information the Together for Together for Hope Poverty Action Plan.”

Carried

I.2 INTERNATIONAL EDUCATION

I.2.1 INTERNATIONAL EDUCATION

Motion No. B2018-03-19-07

International Education

Moved by J. Oldman seconded by M. Forster

‘THAT the Durham Catholic District School Board receive and file the report regarding international education as part of the Passport to Excellence Program.”

Carried

I.3 POLICY DEVELOPMENT

I.3.1 POLICIES AND ADMINISTRATIVE PROCEDURES

Motion No. B2018-03-19-08

Policies and Administrative
Procedures

Moved by M. Forster seconded by T. Corless

“THAT the Durham Catholic District School Board receive and file as information the Current Roster of Policies and Administrative Procedures – March 19, 2018.”

Carried

Motion No. B2018-03-19-09

Policies and Administrative
Procedures

Moved by M. Forster seconded by T. Corless

“THAT the Durham Catholic District School approve the First Reading of the Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools Policy (PO601).”

Carried

Motion No. B2018-03-19-10

Policies and Administrative
Procedures

Moved by M. Forster seconded by T. Corless

“THAT the Durham Catholic District School Board approve the First Reading of the revised Anaphylactic Students (Protection of) Policy (PO608).”

Carried

Motion No. B2018-03-19-11

Policies and Administrative
Procedures

Moved by M. Forster seconded by T. Corless

“THAT the Durham Catholic District School receive and file as information the revised Anaphylactic Students (Protection of) Administrative Procedure (AP608-1).”

Carried

I.3.1 POLICIES AND ADMINISTRATIVE PROCEDURES – continued

Motion No. B2018-03-19-12

Policies and Administrative
Procedures

Moved by M. Forster seconded by T. Corless

“THAT the Durham Catholic District School Board approve the First Reading of the revised Asthma Friendly Schools Policy (PO615).”

Carried

Motion No. B2018-03-19-13

Policies and Administrative
Procedures

Moved by M. Forster seconded by T. Corless

“THAT the Durham Catholic District School receive and file as information the revised Asthma Friendly Schools Administrative Procedure (AP615-1).”

Carried

I. 4 FACILITIES SERVICES

I.4.1 INTERNATIONAL /FOREIGN STUDENT FEES 2018/2019

Motion No. B2018-03-19-14

International/Foreign Student
Fees 2018/2019

Moved by P. Pulla seconded by T. Corless

“THAT the Durham Catholic District School Board receive as information, the Foreign Student Fees 2018/2019 Report dated March 19, 2018.”

Carried

Motion No. B2018-03-19-15

International/Foreign Student
Fees 2018/2019

Moved by P. Pulla seconded by T. Corless

“THAT the Durham Catholic District School Board establishes Foreign Student Fees in the amount of \$12,500 for an elementary student and \$13,750 for a secondary school student for the 2018/2019 school year.”

Carried

I.4.2 LONG TERM ACCOMMODATION PLAN 2018-2022 UPDATEMotion No. B2018-03-19-16Long Term Accommodation Plan
2018-2022 Update

Moved by J. Oldman seconded by T. Corless

“THAT the Durham Catholic District School Board receive as information the report entitled Long Term Accommodation Plan 2018-2022 Update dated March 19, 2018.”

Carried**I.4.3 DRAFT REVISED PUPIL ACCOMMODATION REVIEW GUIDELINES**

Trustee Pulla inquired on the number of changes to the Guidelines. Superintendent Camozzi advised that there were minimal changes.

Motion No. B2018-03-19-17Draft Revised Pupil
Accommodation Review
Guidelines

Moved by K. LeFort seconded by P. Pulla

“THAT the Durham Catholic District School Board receive as information, the Draft Revised Pupil Accommodation Review Guidelines Report dated March 19, 2018.”

Carried**I.5 DIRECTOR’S REPORT****I.5.1 DIRECTOR’S VERBAL REPORT**

Director O’Brien welcomed students, staff and families upon returning from March Break, acknowledging our Catholic learning community’s continued pursuit of deepening our Lenten journeys through prayer, fasting and almsgiving.

Director O’Brien thanked Deacon Dominic for organizing prayer services in the Chapel of St. Francis of Assisi throughout this Lenten season. She also thanked school chaplains, staff and parish communities for joining students and families in prayer and other Lenten activities.

The Director acknowledged the St. Bernadette Catholic School community in Ajax for being recognized with the Dr. Bette M. Stephenson Recognition of Achievement. “The school’s leadership and collaboration is an exemplary model on how EQAO data can be used to improve student well-being and achievement,” she said.

Director O’Brien extended an invitation to all to join DCDSB staff for the next Feasting on Faith event on Wednesday, April 5, featuring Father Tom Rosica as guest speaker with his reflection on service in the teaching of Pope Francis, from an insider’s

I.5.1 DIRECTOR'S VERBAL REPORT - continued

perspective. Father Rosica founded the Salt and Light television station and is a member of the Vatican's communication office.

The Director noted that tickets for the annual Foundation Gala on May 3, 2018 can be purchased online at durhamcatholicfoundation.ca. Those who purchase by April 6 will be entered into the Early Bird prize draw to win an iPad donated by LifeTouch Canada. She also encouraged families to sign up online for the Community Run for Hope in support of the Foundation. The 4K Run or Walk takes place on Sunday, May 27 starting and finishing at Monsignor Paul Dwyer Catholic High School. Moving into Holy Week, Director O'Brien noted that Durham Catholic schools will be filled with prayerful activities in anticipation of the resurrection of Jesus. She extended best wishes to all students, staff and families for a faith-filled Easter.

I.6 CHAIR'S REPORT**I.6.1 CHAIR'S VERBAL REPORT**

Chair Chapman acknowledged volunteers across all Durham Catholic learning communities. As part of National Volunteer Week in April, the annual Durham Catholic Parent Involvement Committee Volunteer Awards Ceremony will take place on April 17. "We look forward to honouring our Distinguished Catholic Volunteers from each of our schools in recognition of the vital role they play in making our schools a safe and welcoming environment," Chair Chapman said.

The Chair also acknowledged DCDSB student leaders for their role in initiating the Student Senate's Lenten Walk of Faith which began on February 28 as secondary students shared a spiritual journey, handing over a special cross to each high school. She thanked the Student Senate for their leadership and guidance in organizing and setting an example of faith and unity for their peers.

The Indigenous Education Advisory Circle Meeting was held on Friday, February 23rd, 2018. With the Truth and Reconciliation Committee Calls to Action, Indigenous Education is an emerging priority in our Board and the Chair was pleased to attend as representative for members of the Board. This community group is made up of our Indigenous partners who advise us in matters related to our Indigenous population and enhances our understanding of indigenous cultures, history, and future paths.

Chair Chapman invited the Board of Trustees and all members of our Durham Catholic learning community to participate in a special milestone celebration on April 25 at St. Mark the Evangelist Catholic School as they mark the 25th anniversary of the school.

The Chair noted a number of public meetings coming up – open house sessions as part of the Boundary Review regarding the new Unnamed North Oshawa Catholic School; as well as meetings at St. Marguerite d'Youville and St. John the Evangelist Catholic School with respect to the new building replacement for St. Marguerite d'Youville. Information has been shared with families and the community.

The Chair encouraged everyone to continue their service and social justice initiatives in schools and communities throughout the rest of the Year of Service; and extended best wishes to all Durham Catholic families and friends for a Blessed Holy Week and Easter weekend.

I.5.2 STUDENT TRUSTEES' REPORT

Student Trustee Malkin and Paul advised that the Student Senate will be partnering with PickWaste (a community initiative that was started by youths in Pickering) for a clean-up day in May. They noted that Student Senate's initiative include a non-uniform day to support building a water well in Tanzania. The Student Trustees reminded Trustees that they are welcomed to join them on their Walk of Faith.

CORRESPONDENCE

Motion No. B2018-03-19-18

Correspondence

Moved by J. Oldman seconded by K. LeFort

“THAT the Durham Catholic District School Board receive and file as information the following correspondence:
- Letter to Member of Parliament, Erin O'Toole from Chair Tricia Chapman regarding Canada Summer Jobs Program.”

Carried

p. ADJOURNMENT

Motion No. B2018-03-19-19

Adjournment

Moved by T. Corless, seconded by J. Oldman

“THAT the Durham Catholic District School Board adjourn the Regular Board Meeting of Monday, March 19, 2018.”

Carried

Tricia Chapman, Chair of the Board
Durham Catholic District School Board

Anne O'Brien, Director of the Board
Durham Catholic District School Board

(10:00 p.m.)

V. Kunar, Recording Secretary



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **I.P.R.C. Report for March 2018**

Origin: Janine Bowyer, Superintendent of Education – Student Services

RECOMMENDATION

Moved by _____, seconded by _____

“THAT the Durham Catholic District School Board accept the I.P.R.C. report for the month of March 2018.”

RATIONALE

I.P.R.C. REPORT FOR MARCH

Number of Pupils Referred to I.P.R.C.:	0
Number of Pupils Identified as Exceptional:	1
Number of Pupils Reviewed by I.P.R.C.:	1

FROM SEPTEMBER 2017 TO JUNE 2018

Total Number of Pupils Referred to I.P.R.C.:	0
Total Number of Pupils Identified as Exceptional:	7
Total Number of Reviews:	10
Total Number of Parent Requested Deferments:	0

AOB/JB:cc

MEMORANDUM

RECOMMENDATION

“THAT the Durham Catholic District School Board accept the report of the April 10, 2018 Special Education Advisory Committee meeting.”

As per attached minutes.

AOB:JB:cc
Attach.



Durham Catholic District School Board

MINUTES of the **SPECIAL EDUCATION ADVISORY COMMITTEE** meeting of Durham Catholic District School Board which was held in the North Board Room of the Catholic Education Centre, 650 Rossland Road West, in Oshawa on **Tuesday, April 10, 2018.**

Present

L. Smart (Chair)
V. Adamo
C. Nosseir
M. LePage
J. McCafferty
L. Cook

Staff

J. Bowyer
R. Putnam
H. Killoran
C. Baetz
S. Phoenix

With Regrets

D. Mullane
A. Shiels

Absent

S.E.A.C. Representatives

B. Larson, APSSP
C. Plouffe, OECTA Secondary
M. Lacy, Principal/Vice Principal Association

CALL TO ORDER

Item a.1 Memorials and Prayer

Chair Smart called the meeting to order at 7:35 p.m. and offered the opening prayer. She welcomed everyone to the meeting.

ANNOUNCEMENTS

CONSIDERATIONS OF MOTIONS

DECLARATIONS OF INTEREST

Item e.1 Declaration of Conflict of Interest

None

PRESENTATIONS

Item g.1 Special Education Budget

R. Putnam

Superintendent Putnam provided an overview of the Multi-Year Budget Framework and advised that it has been a positive year. Although there are some system pressures, the overall budget is very supportive of special education.

Item g.2 **Together for All: Equity and Inclusive Education
Three Year Action Plan****J. Bowyer**

Superintendent Bowyer presented the Durham Catholic District School Board's Together for Hope and Together for All Three-Year Action Plans. The Together for All is the Board's three-year Equity and Inclusive Education action plan. The plan sets out clear goals and priorities in the next three years and clearly states the actions for this school year. One of the goals for this year was the development of a three year plan to address students and families impacted by poverty. The plan is entitled Together for Hope. Superintendent Bowyer provided copies of each action plan to the Committee members for their review and feedback, if any and responded to questions as they arose.

DELEGATIONS

None

NOTICES OF MOTIONS

None

UNFINISHED BUSINESS FROM PREVIOUS MEETINGS

None

STAFF REPORTS**Item k.1** **Coordinator's Report – H. Killoran**

"So you want to be a PST"

We hosted a session for teachers interested in learning more about the role of the Program Support Teacher on March 28. We had 15 enthusiastic participants attend. As part of the posting process, we will be interviewing for PST rosters at the end of this month.

World Autism Awareness Day

Elementary and Secondary schools recognized World Autism Awareness Day on Tuesday, April 3rd. Program Support Teachers were asked to share the Autism Awareness packages with their schools, which were provided by the DCART members. Age appropriate activities and videos were presented to the students. Each school has decorated their unique and creative Light It Up Blue Display in the front foyer and they look great! A prize will be given to the most creative display.

Item k.1 **Coordinator's Report – H. Killoran** (cont'd)

Autism Pilot

Participants are half-way through the 19 modules and have been learning new skills in ABA. Professional Learning Community sessions are being developed to reflect the new learning and how to integrate these concepts into the IEP, by sharing best practices within the participants' school communities.

Friendship Lab

Our after school social skills development program, "The Friendship Lab" is now in its fourth week at two sites, Sir Albert Love CS and St. Francis de Sales CS. This program targets friendship-making and perspective-taking skills for students with an autism spectrum disorder.

PEERS

We are now offering a social skills program for students in Gr. 7-12+. The program runs out of Father Leo J. Austin once a week and runs until the end of June. Currently, we have 10 students in the program for 1.5 hour sessions.

Mental Health Update

Children's Mental Health Week will take place from May 7-13 this year. As in previous years, a Resource Package is being developed and will be available to schools in advance of the week.

Item k.2 **Superintendent's Report - J. Bowyer**

The budget process is well underway as Superintendent Putnam shared in his budget overview.

2018/19 school year budget was very supportive of special education:

- Money to support mental health workers in secondary schools – this money must be spent on professional staff; we will be looking at increasing our compliment of SW in order to provide more time for each of our secondary schools
- Money to support multi-disciplinary teams – awaiting the technical memo to see how this money can be spent. We will be looking to increase our support to DCART and BRT
- Money to address waitlists for assessments was announced as an application-based program; we will be waiting for more information on what this will look like – money to be delivered over three years
- Increase to the Behaviour Expertise Amount – to include ABA training amounts - small amount of money; but appreciated
- Increase in the allocation to Special Incident Portion amounts for next year – to recognize the increase costs in staffing; maximum amount is going to increase by 40% (\$27,000 to \$38,016)

Item k.2 **Superintendent's Report - J. Bowyer** (cont'd)

- Increase in the Safe and Accepting Schools amount – to recognize the work we need to do with our staff on Mental Health and Well Being, Safe and Accepting Schools, Healthy Schools and Equity and Inclusive Education.
- Continuation of the after school social skills development program for students with a diagnosis of ASD
- Continuation of our ABA Pilot for educational assistants; programming had gone very well
- Preparing for success in High School -guidance counsellors in grade 7 and 8 to help students prepare for their transition to high school

Violent Threat Risk Assessment training is taking place this week. Traumatic Events System training is also occurring this week for any principal who hasn't been trained and the remainder of our vice-principals. This training will help schools understand the impact of traumatic event on systems (classes, schools, boards, communities, etc.)

ASSOCIATION REPORTS**Learning Disabilities Association of Durham Region – L. Smart**

Monthly LDA Durham Meeting: Sagonaska Provincial Demonstration School

LDA Ontario in partnership with Integra presenting Partnering with Schools for Student Success: Effective Parent Advocacy. Seven sessions online

University Of Toronto Transition Day

Grandview Children's Centre – C. Nosseir

Spring Into Literacy Conference - Saturday 21 April 2018

<https://grandviewkids.ca/programs-services/programs/speech-language-pathology/spring-into-literacy/>

Let's Get Active and Active Start programs

These programs are designed for clients with intellectual disabilities including autism, with a focus on physical literacy and social participation skills. Want to register? Visit: <https://gccrecreation.grandviewcc.ca/Programs.aspx>

Registraton is now open for Little Critter Summer Camp programs, 3:1 ratios, located at Grandview Oshawa <https://gccrecreation.grandviewcc.ca/Programs.aspx>

ASSOCIATION REPORTS (cont'd)

Special Olympics – L. Cook

Special Olympics Spring Sports Program registration. Oshawa
Sunday April 29, 2018 11 a.m.-1 p.m.
Glen Stewart Clubhouse

Ajax – ARC Industries, Thursday May 3 6:00-8:00 p.m.

Email for more info: greaterdurham.info@specialolympicsontario.ca

Cystic Fibrosis Canada – Durham Chapter – M. LePage

April 15 – Outrun CF – go to outruncf.ca for info

June 7 – Strokes for Life Golf Tourney (Oshawa Golf & Curling Club)

May – Cystic Fibrosis Awareness Month

May 27 – Walk to make CF History (Canada's Wonderland)

CORRESPONDENCE

None

INQUIRIES AND MISCELLANEOUS

None

PENDING ITEMS

None

ADJOURNMENT

The meeting adjourned at 8:57 p.m.

CLOSING PRAYER

The closing prayer was offered by V. Adamo

Lynne Smart
Chair, Special Education Advisory Committee

Janine Bowyer
Superintendent of Education

Recording Secretary: Candice Cavalier



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Durham Catholic Parent Involvement Committee

Date: March 27, 2018

Re: **Durham Catholic Parent Involvement Committee
– March, 2018**

Origin: Rosemary Leclair, Superintendent of Education – Durham Catholic Parent Involvement Committee

RECOMMENDATIONS

Moved by _____, seconded by _____

<p>“THAT the Durham Catholic District School Board accept the written report from the Durham Catholic Parent Involvement Committee Meeting of Thursday, March 22, 2018.”</p>
--

RATIONALE

As per the attached minutes.

AOB/RL/lj



Durham Catholic District School Board

MINUTES of the **OPEN SESSION** of the **DURHAM CATHOLIC PARENT INVOLVEMENT COMMITTEE MEETING** of the Durham Catholic District School Board which was held at Catholic Education Centre, North & South Boardroom, 650 Rossland Road West, Oshawa, on **Thursday, March 22, 2018.**

Committee Members

Melissa Bevan
 Adedowin Adesemowo
 Candice Belmontes-
 Deonarayan
 Tom Brennan
 Camilla Brown
 Theresa Corless
 Nancy Henry
 Natalie John
 Babajide Ogundare
 Caroline Ogundare
 Amanda Roffey
 Cynthia Scott -
 (teleconference)
 Chris Szent-Ivany

Regrets

Linda Dodson-Trchala
 Rose LoPresti
 Trevor Aitcheson
 Judy Bear
 Erin Groat
 Hannah Kent
 Ken Lyons
 Kamille Rambally
 Josephine-Dora Spitale
 Andrea Sullivan

Staff Present

Rosemary Leclair
 Lori Jones

CALL TO ORDER

Item a.1

OPENING PRAYER

Acting Vice-Chair Bevan opened with the Acknowledgement of Traditional Territory and C. Szent-Ivany offered the Opening Prayer.

Item a.2

WELCOME AND COURTESIES

Acting Vice-Chair Bevan called the meeting to order at 8:02 p.m. and welcomed all committee members to the March 22, 2018 meeting.

APPROVAL OF AGENDA

Item b.1 **APPROVAL OF AGENDA**

Motion No. DCPIC2018-03-22-01 **Approval of Agenda**

Moved by T. Brennan, seconded by C. Belmontes-Deonarayan

“THAT the Durham Catholic Parent Involvement Committee approve the March 22, 2018 Durham Catholic Parent Involvement Committee Meeting Agenda as printed.”

Carried

ANNOUNCEMENTS

Item c.1 The next Durham Catholic Parent Involvement Committee meeting will be held Thursday, April 12, 2018.

ACTIONS TO BE TAKEN

Item d.1 **APPROVAL AND SIGNING OF THE MINUTES OF THE OPEN SESSION OF THE DURHAM CATHOLIC PARENT INVOLVEMENT COMMITTEE MEETING OF November 9, 2017**

Motion No. DCPIC2018-03-22-02 **Approval of Minutes**

Moved by C. Brown seconded by A. Adesemwo

“THAT the Durham Catholic Parent Involvement Committee approve the Minutes of the February 15, 2018 Durham Catholic Parent Involvement Committee Meeting.”

PRESENTATION

Item e.1 “Strategies to Support Mathematics Teaching and Learning”

Superintendent Leclair introduced Teaching and Learning Numeracy Consultants Mike Jacobs and Dan Allen. M. Jacobs and D. Allen provided an overview of the research of Peter Liljedahl (Simon Fraser University) to promote “thinking classrooms” in the schools. Through the Teaching and Learning Department, this work has been shared with the leadership teams of the Board in every school and has been found to be impactful in improving student engagement and achievement in mathematics. Committee members engaged in hands-on learning in order to demonstrate a number of the strategies.

REPORTS/INFORMATION/DISCUSSION ITEMS

F.1 **Standing Items**

Item f.1.1 **CHAIR'S REPORT**

Superintendent Leclair gave update on behalf of Chair Dodson-Trchala. The Ontario Association of Parents in Catholic Education (OAPCE) has reached out to our committee to ask if we would be interested in hosting a Fall Symposium in the Durham region. Superintendent Leclair asked the committee if we would be interested in doing so, and the consensus was that the DCPIC would be happy to host an OAPCE Fall Symposium in Fall 2018.

Item f.1.2 **TRUSTEE REPORT**

Trustee Corless updated on the boundary review for the new unnamed North Oshawa school which is to be built on the East side of Bridle Road. Three public open houses have been scheduled during the month of March at Father Venini Catholic School and a website and dedicated e-mail address have been established to collect community input. See dcdsb.ca for more detailed information.

At the Board Meeting last Monday there was a wonderful presentation on the Board's strategy for Equity and Inclusive Education, entitled "Together for All" and the Board's Poverty Action Plan entitled "Together for Hope". Trustee Corless encouraged the DCPIC to play a role in supporting the work that is happening to promote equity for all students and families in our Board.

St. Mark the Evangelist Catholic School in Whitby will be having their 25th Anniversary on April 25, 2018.

Trustee Corless invited Nancy Henry to speak to the Committee on "First Book Canada" an organization that provides free books for children to help marginalized students develop literacy skills. N. Henry to forward information to Superintendent Leclair for distribution to Principals in priority neighbourhood schools.

Trustee Corless wished all the DCPIC members and families many blessing this Easter, as we celebrate the hope that is offered through the death and resurrection of Christ.

Item f.1.3 **RESOURCE REPORT**

Superintendent Leclair gave an update on the plan already underway to celebrate Catholic Education Week, taking place on May 6-11, 2018. The theme this year is

Renewing the Promise, and each school community will celebrate through the 5 daily sub-themes of Remembering the Promise, The Promise is Within You, Praying the Promise, Living the Promise and Proclaiming the Promise.

Superintendent Lecair handed out the Directors Annual Report for the 2016/2017: A Year of Community. This report outlines some of the milestones and achievements the Board accomplished last year, along with a reflection on the progress achieved in the academic and corporate goals. DCPIC is highlighted on page 38 under the theme of "Serving in Partnership".

A reminder to purchase a ticket to attend the 5th Annual Durham Catholic Children's Foundation Gala to be held this year on Thursday, May 3rd at the Jubilee Pavillion. Trustee Corless suggested the DCPIC consider purchasing a table for the evening which benefits every school community and in order to allow people an opportunity to attend.

Item f.1.4 PRO GRANT SUB-COMMITTEE REPORT

Superintendent Leclair gave update on behalf of Josephine-Dora Spitale. The Digital Story-Telling project is progressing well. Our story-teller has has multiple meetings with each family that volunteered to be part of the project and she is moving on to the production stage. Digital story-telling costs to date total \$6,960.00. J. Spitale requested that the committee provide additional funding beyond the \$12,500.00 allocated through the Regional PRO-Grant funding should there be cost over-runs on this line of the budget. Committee members were also invited to provide any PRO-Grant ideas for the 2018/2019 school year to J. Spitale via e-mail.

Item f.1.5 COMMUNICATIONS SUB-COMMITTEE REPORT

C. Belmontes-Deonarayan noted that the DCPIC Spring Newsletter is underway. A parent survey will be going out and information back by June 1, 2018. Please send any submissions for the newsletter asap to send Candice via Sharepoint email.

Item f.1.6 SCHOOL COUNCIL OUTREACH SUB-COMMITTEE REPORT

C. Brown updated committee on progress in planning the Distinguished Catholic Volunteer Awards Ceremony to be held April 17th, 2018 at Monsignor Paul Dwyer Catholic High School. All schools have submitted their nominees and planning is well underway. The order of speakers is being finalized and budget remains on target.

Item f.1.7 FAITH FORMATION SUBCOMMITTEE REPORT

Currently there is no Chair for this subcommittee. Interested Committee Members were asked to please email Lori Jones.

Item f.1.8 POLICY SUBCOMMITTEE REPORT

Deferred.

Item f.1.9 **BUDGET SUBCOMMITTEE REPORT**

Superintendent Leclair provided the budget update on behalf of Rose LoPresti.

ADJOURNMENT

The DCPIC meeting adjourned at 8:37 p.m. Chris Szent-Ivany offered the closing prayer.

Motion No. DCPIC2018-03-22-03 **Adjournment**

Moved T. Brennan. Seconded by all.

“THAT the Durham Catholic Parent Involvement Committee meeting of Thursday, March 22, 2018, adjourn.”

Carried

Linda Dodson-Trchala
Chair, Durham Catholic Parent
Involvement Committee

Rosemary Leclair
Superintendent of Education

Recording Secretary: Lori Jones



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Durham Catholic Parent Involvement Committee

Date: April 19, 2018

Re: **Ad Hoc Committee – March 21, 2018**

Origin: Rosemary Leclair, Superintendent of Education – Durham Catholic Parent Involvement Committee

RECOMMENDATIONS

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board accept the written report from the Ad Hoc Committee of Wednesday, March 21, 2018."
--

RATIONALE

As per the attached minutes.

AOB/RL/lj



Durham Catholic District School Board

MINUTES of the **OPEN SESSION** of the **AD HOC COMMITTEE** Meeting of the Durham Catholic District School Board which was held in the Catholic Education Centre, 650 Rossland Road West, in Oshawa on Wednesday, March 21, 2018.

Trustees Present

T. Chapman, Chair
T. Corless, Vice Chair
J. McCafferty
P. Pulla (teleconference)
J. Rinella

Staff Present

A. O'Brien, Director

A. OPEN SESSION CALL TO ORDER

Director O'Brien called the meeting to order at 7:00 p.m.

a.1 MEMORIALS AND PRAYERS

Director O'Brien offered the opening prayer.

a.2 ROLL CALL AND APOLOGIES

Trustee Pulla attended by teleconference.

B. NOMINATIONS FOR CHAIR

The Director opened the floor for nominations for the position of Chair of the Ad Hoc Committee

Nominee	Moved by	Seconded by	Willing to Stand?
T. Chapman	J. Rinella	T. Corless	Yes

Motion No. AHC2018-03-21-01

Election of Chair

Moved by J. Rinella, seconded by T. Corless

"THAT the Ad Hoc Committee of the Durham Catholic District School Board appoint Trustee Tricia Chapman as Chair of the Ad Hoc Committee."

Carried

The Director of Education then called three times for further nominations. Nominations were then declared closed. Trustee Chapman assumed the Chair.

B. NOMINATIONS FOR VICE CHAIR

Chair Chapman opened the floor for nominations for the position of Vice Chair of the Ad Hoc Committee

Nominee	Moved by	Seconded by	Willing to Stand?
T. Corless	J. McCafferty	T. Chapman	Yes

Motion No. AHC2018-03-21-02

Election of Vice Chair

Moved by J. Rinella, seconded by T. Corless

“THAT the Ad Hoc Committee of the Durham Catholic District School Board appoint Trustee Theresa Corless as Vice Chair of the Ad Hoc Committee.”

Carried

The Chair then called three times for further nominations. Nominations were then declared closed.

B. APPROVAL OF AGENDA**ITEM b1. CHANGES TO THE PRINTED AGENDA**

None

ITEM b.2 APPROVAL OF AGENDA

Motion No. AHC2018-03-21-03

Approval of Agenda

Moved by J. McCafferty seconded by T. Corless

“THAT the Durham Catholic District School Board approve the agenda of the Wednesday, March 21, 2018 Ad Hoc Committee Meeting as printed.”

Carried

E. DECLARATION OF INTEREST

None.

BUSINESS**f.1 A REVIEW OF THE RECORDING PROCESS AND PUBLISHED CONTENTS OF MINUTES IN SCHOOL BOARDS**

Secretary O'Brien thanked Trustees for the opportunity to continue to grow our practice on Minute Taking. She noted that Minutes of the Board are audited by the Ministry of Education annually and consistently been approved and well received. She advised that further consultation with external legal Counsel resulted in assurance that the Board's Minutes currently capture and support the transactions of the Board however, as Secretary, she remains open to transparency and ongoing dialogue. Executive Officer of Governance, Vijaya Kunar, provided a summary of the review of the Minutes from the 31 English Public and 29 English Catholic School Boards in Ontario:

- 4 not available/contact Director's Office to access
- 9 School boards = only Motions
- 5 School boards = more detailed than DCDSB
- 0 School board = verbatim Minutes
- Remaining 42 = about the same/less than DCDSB

Trustees reviewed copies of the Minutes from various school boards.

Chair Chapman asked committee members to focus on the objectives of the Minutes and ways to define the objectives.

Trustee Pulla noted that as a Board, trustees have latitude to request the inclusion of salient points to indicate if there were debates or discussions pertaining to motions being approved/not approved. He added that trustees should be identified versus summarized.

Trustee Corless indicated that trustees' names should be included in areas of discussion and provided examples. She added that audio recordings should be available.

Trustee Rinella asked about the purpose of the Minutes and provided examples of the pros and cons on the process of determination on what was viable to include in the Minutes. He added that with the aid of audio recording, all discussions will be captured.

Trustee McCafferty highlighted examples of the public sector Minutes supported by video recordings. He added that Trustees' can request a recorded vote in the interest of specifying individual if they were for/against a motion.

Chair Chapman noted that pertinent information should be included. She added it would be beneficial to include more discussion for historical information as well as engaging stakeholders in the transactions of the Board. Chair Chapman suggested that the inclusion of trustees' names not only reflect the debate but pays respect to the voice of minority and not only the majority of the vote. The Chair also reminded trustees that they can submit their individual report of activities/events they attended to be included in the Chair's report.

f.1 A REVIEW OF THE RECORDING PROCESS AND PUBLISHED CONTENTS OF MINUTES IN SCHOOL BOARDS - continued

Director O'Brien noted that in addition to the Chair and Vice Chair review of the Minutes prior to approval, all trustees' have leverage to amend Minutes at the Board meeting. She added that some presentations are required and are transactional, and usually supported by a board motion. Director O'Brien circulated school board Minutes from across the Province. Significant time was dedicated to reviewing these. Suggested corrections include:

- Bulleted reports
- Identify trustee's name and agenda item number
- Chair to include individual trustees report under Chair report

Chair Chapman thanked the members of the Ad Hoc committee for their input and suggestions.

Secretary O'Brien and Trustees agreed to incorporate some of the recommendations into Minutes going forward, and to revisit in a year.

p. ADJOURNMENT

Motion No. AHC2018-03-21-04

Adjournment

Moved by J. Rinella, seconded by J. McCafferty

“THAT the Durham Catholic District School Board adjourn the Regular Board Meeting of Wednesday, March 21, 2018.”

Carried

Tricia Chapman, Chair
Durham Catholic District School Board

Anne O'Brien, Director of the Board
Durham Catholic District School Board

(9:05 p.m.)

V. Kunar, Recording Secretary



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **Finance Committee Minutes: Public Consultation Session – April 9, 2018**

Origin: Ryan Putnam, Superintendent of Business & CFO

RECOMMENDATION:

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive as information the minutes of the April 9, 2018 Finance Committee Public Consultation Session."

RATIONALE:

See attached.

AOB:RP:br
Attachment



Durham Catholic District School Board

MINUTES of the **PUBLIC CONSULTATION SESSION** of the **FINANCE COMMITTEE** which was held at the Catholic Education Centre on Monday, April 9, 2018.

Present

M. Forster (Vice Chair)
J. Rinella (Alternate)
P. Pulla (Teleconference)

Staff

A. O'Brien
J. Bowyer
M. Gray
R. Putnam
M. Hammond

Regrets

T. Corless (Chair)

A. CALL TO ORDER

M. Forster called the meeting to order at 7:01 p.m.

a.1 Memorials and Prayers

J. Rinella offered the opening prayer.

a.2 Roll Call and Apologies

Noted above.

B. APPROVAL OF AGENDA

b.1 Changes to the Printed Agenda

None.

b.2 Approval of Agenda

Motion No. FC-2018-04-09-01

Approval of Agenda

Moved by J. Rinella, seconded by P. Pulla

"THAT the Finance Committee approve the April 9, 2018 agenda."

Carried

C. ANNOUNCEMENTS

None.

D. NOTICE OF MOTIONS

None.

E. DECLARATIONS OF INTEREST

None.

F. ACTIONS TO BE TAKEN

None.

G. PRESENTATIONS

None.

H. DELEGATIONS**h.1 Public Consultation Input**

Vice Chair Forster invited the first delegate(s) to come forward:

N. Dunning representing the Association of Professional Student Services Personnel (APSSP).

Ms. Dunning provided an overview of the services provided by APSSP and advocated for additional services in the area of Speech and Language Pathology, specifically at the Secondary panel, and continuation of the ABA Facilitator role.

Vice Chair M. Forster extended appreciation to Ms. Dunning (and APSSP by extension) for participating in the public input process and highlighting the supports and services that are needed by students.

Vice Chair Forster invited the second delegate(s) to come forward:

L. Clarke and M. LeCourt representing Middle Management.

Ms. Clarke and Ms. LeCourt provided an overview of the Essential Services by Department/Portfolio: Human Resources, Directors Office, FS/OMAC, ICT, Student Services, DSTS, Teaching and Learning, Continuing Education and Business Services.

Vice Chair Forster extended appreciation to Ms. Clarke and Ms. LeCourt (and Middle Management by extension) for participating in the public input process and highlighting the essential services provided by the Middle Management group.

Director O'Brien thanked all delegates for their presentations.

J. REPORTS/DISCUSSION ITEMS

None.

J. ADJOURNMENT

Motion No. FC-2018-04-09-02

Adjournment 7:42 p.m.

Moved by J. Rinella, seconded by T. Chapman

“THAT the April 9, 2018 meeting of the Finance Committee be adjourned.”

Carried

The meeting adjourned at 7:42 p.m.

K. CLOSING PRAYER

Closing prayer was offered by T. Chapman.

M. Forster, Vice Chair, Finance Committee

R. Putnam, Resource, Finance Committee

Recording Secretary: B. Rotondi



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **Finance Committee Minutes – April 11, 2018**

Origin: Ryan Putnam, Superintendent of Business & CFO

RECOMMENDATION:

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive as information the minutes of the April 11, 2018 Finance Committee Meeting."

RATIONALE:

See attached.

AOB:RP:br
Attachment



Durham Catholic District School Board

MINUTES of the **FINANCE COMMITTEE** meeting which was held at the Catholic Education Centre on Wednesday April 11, 2018.

Present

M. Forster (Vice Chair)
P. Pulla (Teleconference)
J. Rinella (Alternate)

Regrets

T. Corless (Chair)

Staff

A. O'Brien
R. Putnam
T. Barill
J. Bowyer
B. Camozzi
M. Gray
R. Leclair
J. Mullins
G. O'Reilly
R. Rodriguez
M. Hammond

A. CALL TO ORDER

Vice Chair Forster called the meeting to order at 7:00 p.m.

a.1 Memorials and Prayers

Vice Chair Forster welcomed everyone in attendance and offered the opening prayer.

a.2 Roll Call and Apologies

Noted above.

B. APPROVAL OF AGENDA

b.1 Changes to the Printed Agenda

None.

b.2 Approval of Agenda

Motion No. FC-2018-04-11-01

Approval of Agenda

Moved by J. Rinella, seconded by P. Pulla

"THAT the Finance Committee approve the April 11, 2018 agenda."

Carried

C. ANNOUNCEMENTS

None.

D. NOTICE OF MOTIONS

None.

E. DECLARATIONS OF INTEREST

None.

F. ACTIONS TO BE TAKEN

- f.1 Motion No. FC-2018-04-11-02 Approval of Minutes - February 12, 2018

Moved by J. Rinella, seconded by P. Pulla

“THAT the Finance Committee approve the Minutes of the February 12, 2018 Finance Committee meeting.”

Carried

- f.2 Business Arising from the Minutes of February 12, 2018

None.

- f.3 Motion No. FC-2018-04-11-03 Approval of Minutes – April 9, 2018

Moved by J. Rinella, seconded by P. Pulla

“THAT the Finance Committee approve the Minutes of the April 9, 2018 Finance Committee Budget Consultation Session.”

Carried

- f.4 Business Arising from the Minutes of April 9, 2018

None.

G. STAFF REPORTS/DISCUSSION ITEMS

- g.1 Updated Multi-Year Budget Framework

Superintendent Putnam presented the Updated Multi-Year Budget Framework highlighting projected enrolment, 17/18 in-year cost pressures and 18/19 anticipated cost pressures including benefits transition, replacement costs, transportation and Employment Standards Act legislated changes. The first draft of the 2018/2019 Estimates will be presented in May with final budget approval in June 2018.

Motion No. FC-2018-04-11-04 Updated Multi-Year Budget Framework

Moved by J. Rinella, seconded by P. Pulla

“THAT the Finance Committee receive as information the Updated Multi-Year Budget Framework as presented by staff on April 11, 2018.”

Carried

g.2 **MOTION TO MOVE TO IN-CAMERA SESSION (8:05 p.m.)**

Motion No. FC-2018-04-11-05

Motion to Move into In-Camera Session

Moved by J. Rinella, seconded by P. Pulla

“THAT the Finance Committee meeting of April 11, 2018 move into In-Camera Session.”

Carried

RESUMPTION OF OPEN SESSION (9:21 p.m.)

H. **ADJOURNMENT**

Motion No. FC-2018-04-11-06

Adjournment

Moved by J. Rinella, seconded by P. Pulla

“THAT the April 11, 2018 meeting of the Finance Committee be adjourned.”

Carried

The meeting adjourned at 9:22 p.m.

K. **CLOSING PRAYER**

Closing prayer was offered by R. Putnam.

M. Forster, Vice Chair, Finance Committee

R. Putnam, Resource, Finance Committee

Recording Secretary: B. Rotondi



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **Updated Multi-Year Budget Framework**

Origin: Ryan Putnam, Superintendent of Business & CFO

RECOMMENDATION:

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive as information the Updated Multi-Year Budget Framework as presented by staff on April 23, 2018."

RATIONALE:

As reported to Trustees in February there are a number of factors beyond the Board's control which can significantly impact the budget. Such factors include student enrolment, employee benefits, multi-year service contracts, absence related costs and legislative requirements such as the Employment Standards Act. In recent years the Province has imposed significant costs onto School Boards either by way of labour negotiations or through legislation. Staff will present an updated 5 year forecast of the Board's overall financial position which includes best estimates of future cost pressures, student enrolment projections and potential measures required to ensure the Board maintains a balanced Multi-Year Budget Framework which addresses the financial pressures currently facing the Board while maintaining necessary investments in student well-being and achievement in support of the Board's Strategic Plan. The Updated Multi-Year Budget Framework was reviewed in detail with the Finance Committee on April 11, 2018 and the Audit Committee on April 16, 2018 and is being presented at the April 23, 2018 Board meeting so all Trustees are aware of the Board's current financial position and future challenges.

RSP:br



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **2017/2018 Second Quarter Budget Status Report**

Origin: Ryan Putnam, Superintendent of Business & CFO
Marie Hammond, Comptroller of Finance

RECOMMENDATION:

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive as information the 2017/2018 Second Quarter Budget Status Report for the period ending February 28, 2018."

RATIONALE:

Attached is the 2017/2018 Second Quarter Budget Status Report. The report was reviewed in detail with the Audit Committee on April 16, 2018. The report provides an overview of actual and anticipated results as of February 28, 2018. Also contained within the report is the mid-year forecast of the anticipated year-end operating position.

AOB/RP/MH:br
Attachment



Excellence | Equity | New Evangelization

Durham Catholic District School Board

Catholic Education: Learning & Living in Faith



2017/2018

Second Quarter Budget Status Report for the period ending February 28, 2018



Our Mission

We are called to celebrate and nurture the God-given talents of each student as we serve with excellence in the light of Christ.

Our Vision

Each student in our Catholic learning community embodies excellence and equity by embracing the Ontario Catholic School Graduate Expectations – to be:

- a discerning believer;
- an effective communicator;
- a reflective, creative and holistic thinker;
- a self-directed, responsible lifelong learner;
- a collaborative contributor;
- a caring family member; and
- a responsible citizen.

Our Catholic Values

Faith, evangelizing ourselves and others through scripture, sacrament, prayer and action in service with the home, school and parish.

Hope, giving witness to the belief that we can become who we are called to be.

Love, being present to others with care, compassion, solidarity, community and joy.

Peace, creating opportunities for contemplation, spirituality, reconciliation and forgiveness.

Wisdom, listening and responding to the Holy Spirit.

Inclusion, ensuring a sense of belonging by promoting the dignity and worth of each human life.

Excellence, building on God's grace to achieve our earthly and eternal vocations.

Creativity, celebrating diverse and innovative expressions of God's gifts.

Service, seeking out and responding to local and global needs with prudence, fortitude, humility and charity.

Stewardship, shepherding God's creation and resources for the common good.

Responsibility, demonstrating accountability and fidelity in our thoughts, words and deeds.

Justice, acting and serving with integrity in communion with the Gospel and teachings of Jesus.

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2017/2018 Budget Highlights

- Alignment with key Strategic Plan goals and priorities
- Reflects public consultation and stakeholder input
- Ongoing investment in Religion and Faith Formation resources
- Continuation of Advancing Communication strategies
- Additional Student Services and Special Education supports
- Continuation of Safe and Healthy Schools initiatives
- Advances the Student Well-Being and Achievement mandate
- Provides Pathways to Success opportunities for all students
- Continuation of the Ministry of Education's Province-wide Math Strategy
- Allocation of resources to support Equity and Indigenous Studies
- Provides Staff Development and Capacity Building opportunities
- 21st Century Learning strategies and Emerging Technology initiatives
- Conversion of two Secondary School Libraries to Learning Commons
- Creation of three Elementary School Learning Commons
- Resourcing of after school Transportation and French programs
- Continuation of expanded French and Music program offerings
- Enhancement and intensification of International Student programs
- Reflects ongoing implementation of the Long Term Accommodation Plan
- Includes new location for Oshawa Continuing Education programs
- Allocation of School Administrators based on equity factors
- Allocation of School Support Staff based on equity factors
- Reflects Provincial Discussion Table Staffing investments
- Compliant with Ministry funding enveloping requirements
- Compliant with Ministry legislated class size requirements
- Requires use of operating reserve to offset one-time benefit costs
- Maintains basic level of reserves for contingency purposes

Attachment 1**Projected Average Daily Enrolment**

	2017/2018	2016/2017	Variance	% Change
Elementary	14,600	14,573	27	0.2%
Secondary	6,359	6,494	(135)	(2.1%)
Total	20,959	21,067	(108)	(0.5%)

The Board has been experiencing a decline in enrolment in the elementary panel for several years which has now stabilized and the decline is now flowing through the secondary panel. This phenomenon was due to shifting demographics in the Province as a result of a decline in birth rates, immigration patterns into Canada, and inter-provincial migration from Ontario. Declining enrolment is a challenge not only for our Board but for all Boards in the Province.

Essentially a reduction in the number of pupils has multiple effects:

- The majority of the Board's operating grants are generated on a per pupil basis. Therefore, a reduction of students reduces revenue.
- The Board has been experiencing enrolment decline in some geographic areas while other geographic areas have expanded greatly. As a result, there is excess space in one area and the need to expand in another, although overall enrolment is decreasing.
- The effects of declining enrolment are complicated as expectations within the system are that of expansion and furthering of service.

Looking ahead the Board is anticipating significant development in North Oshawa, West Whitby and North Pickering (Seaton Lands) which will generate an increase in enrolment in both panels year over year beginning in September 2018. By 2025 the Board is projecting a total enrolment in excess of 25,000 students.

Attachment 2

2017/2018 Budgeted Ministry Revenue

1) Ministry Grants (GSN)**a) Operating**

Pupil Foundation Grant	\$114,650,839
School Foundation	15,047,706
Special Education	29,441,975
Languages	4,163,083
Distant and Supported Schools	300,153
Learning Opportunities Grant	4,592,877
Continuing Education	2,085,135
Administration and Governance	6,521,829
Teacher Qualification and Experience	24,007,204
ECE Qualification and Experience	1,429,314
Student Transportation	8,668,662
School Operations	19,903,330
Temporary Accommodation	954,532
Community Use of Schools	286,837
Declining Enrolment Assistance	687,483
Safe Schools	359,276
New Teacher Induction Program	118,563
First Nation Supplement	292,947
Subtotal – Operating Grants	<u>\$233,511,745</u>

b) Capital

Capital Priorities	\$7,639,713
Child Care Construction	3,534,232
Child and Family Centres Funding	1,008,340
Full Day Kindergarten Funding	1,008,340
Greenhouse Gas Reduction Projects	544,982
Community Hubs Projects	668,707
Ministry Funded Debenture Payments	6,683,107
School Renewal	2,969,665
School Condition	8,640,858
Subtotal – Capital Grants	<u>\$32,697,944</u>

Total – Ministry Grants (GSN)	<u>\$266,209,689</u>
--------------------------------------	-----------------------------

Attachment 2

2017/2018 Budgeted Other Revenue

2) Other Revenue	
a) Operating	
Ministry of Education (Non-GSN)	\$2,245,737
Recoveries – Secondments	634,735
Government of Canada	462,837
Other Provincial Agencies	960,476
Community Use of Schools	350,000
Continuing Education Fees	200,000
International Students	418,750
Partnership Agreements	450,000
Other Revenue	109,155
School Generated Funds	6,700,000
Technology Equalization Fund	500,000
Operating Reserve Fund	1,000,000
Subtotal – Other Operating	<u>\$14,031,690</u>
b) Capital	
Arts and Media Program	\$5,589,000
Multi-Year Technology Program	1,138,000
Education Development Charges	<u>2,000,000</u>
Subtotal – Other Capital	<u>\$8,727,000</u>
Total - Other Revenue	<u>\$22,758,690</u>
TOTAL 2017/2018 BUDGETED REVENUE	<u>\$288,968,379</u>

Attachment 3

Summary of Revenue as at February 28, 2018

	Budget	Received	Anticipated	Variances
a) Operating				
Ministry Grants (GSN)	\$233,511,745	\$125,279,294	\$125,279,294	\$0
Other Ministry (Non-GSN)	2,245,737	1,814,836	1,814,836	0
Ministry Settlement Payments	0	600,938	0	600,938
Secondments (Recoveries)	634,735	0	0	0
Government of Canada	462,837	249,102	249,102	0
Other Provincial Agencies	960,476	682,026	682,026	0
Community Use of Schools	350,000	184,689	175,000	9,689
Continuing Education Fees	200,000	134,897	100,000	34,897
International Students	418,750	468,608	418,750	49,858
Partnership Agreements	450,000	470,012	450,000	20,012
Other Revenue	109,155	86,273	74,155	12,118
School Generated Funds	6,700,000	4,488,455	4,488,455	0
Technology Equalization Fund	500,000	0	0	0
Operating Reserve Fund	1,000,000	0	0	0
Subtotal	<u>\$247,543,435</u>	<u>\$134,459,130</u>	<u>\$133,371,618</u>	<u>\$727,512</u>
b) Capital				
Ministry Grants (GSN)	\$32,697,944	\$2,927,851	\$2,927,851	\$0
Board Funded Capital Projects	5,589,000	0	0	0
Multi-Year Technology Program	1,138,000	0	0	0
Education Development Charges	2,000,000	614,990	1,000,000	(385,010)
Subtotal	<u>\$41,424,944</u>	<u>\$3,542,841</u>	<u>\$3,927,851</u>	<u>(\$385,010)</u>
TOTAL	<u>\$288,968,379</u>	<u>\$138,001,971</u>	<u>\$137,659,469</u>	<u>\$342,502</u>

The majority of the Board's revenue sources are cash flowed based on a pre-determined schedule of remittances such as: the Ministry monthly grant payment; installments based on other Ministry funding transfer payment agreements; secondments billed at the end of the term; Government of Canada scheduled payments; monthly or ongoing other revenue sources such as cafeteria commissions and community use of schools; monthly EDC payments from the municipalities; and transfers from reserve funds during the year end process. As a result, there should not be much, if any, variance between actual and anticipated as most payments are known in amount and are to be received on a fixed schedule. The Ministry Settlement Payments revenue variance of \$600,938 shown above is the result of a transfer payment that was provided during the year to cover payments to certain employee groups as a result of a Ministry agreement. The corresponding payment is shown in the Board's expenditures. The remaining operating variance of approximately \$125,000 is attributable to positive results in areas actively promoted by the Board such as Community Use of Schools, Continuing Education, International Education and Partnerships. The capital variance of \$385,010 in the above table is a result of timing differences in the collection of EDC revenues which will eventually flow to the EDC Reserve at year end.

Attachment 4

2017/2018 Budgeted Expenditures

a) Operating	
Salaries and Benefits	\$211,900,265
Student Transportation	6,777,320
Facilities Services	7,448,627
School Budgets	2,216,188
Information Technology	3,311,103
Academic Services	5,694,733
Business Administration	702,664
Human Resources and Administrative Services	516,515
Mileage and Travel Allowances	536,640
Director's Office and Board Administration	242,859
Legal and Professional Services	364,109
Trustees and Student Representatives	212,017
Staff Development and Capacity Building	799,395
Corporate Communications	121,000
School Generated Funds	6,700,000
Subtotal – Operating	<u>\$247,543,435</u>
b) Capital	
Unnamed North Oshawa CES	\$11,168,903
Child Care Centres	1,517,552
Child and Family Centres	504,170
School Renewal Program	2,969,665
School Condition Program	8,640,858
Greenhouse Gas Reduction Projects	544,982
Community Hubs Projects	668,707
Debenture Principal Payments	4,195,465
Debenture Interest Payments	2,487,642
Arts and Media Program	5,589,000
Multi-Year Technology Program	1,138,000
Transfer to EDC Reserve	2,000,000
Subtotal – Capital	<u>\$41,424,944</u>
TOTAL 2017/2018 Budgeted Expenditures	<u>\$288,968,379</u>

Attachment 5

Summary of Expenditures as at February 28, 2018

	2017/2018 Budget	Actual Expenditures	%	Anticipated	%	Variance
a) Monthly Expenditure Report						
Operating	\$247,543,435	\$126,660,406	51.2%	\$124,773,014	50.4%	(\$1,887,392)
Non-Operating/Capital	<u>41,424,944</u>	<u>10,502,210</u>	25.4%	<u>10,894,424</u>	26.3%	<u>392,214</u>
Total	\$288,968,379	\$137,162,616	47.5%	\$135,667,438	46.9 %	(\$1,495,178)

Prior to quarterly reporting, a monthly expenditure report was provided to Trustees each month in the open session agenda. A summary version for the second quarter ended February 2018 is provided as Attachment 6 within this report. The categories used in the monthly expenditure report represent the expenditure classifications reported to the Ministry of Education. However, the Board's expenditures can also be viewed by cost centre and area of responsibility as presented below.

	2017/2018 Budget	Actual Expenditures	%	Anticipated	%	Variance
b) Cost Centres						
Wages & Benefits	\$211,900,265	\$106,640,303	50.3%	\$105,364,325	49.7%	(\$1,275,978)
Schools	2,216,188	1,742,343	78.6%	1,662,141	75.0%	(80,202)
Departments	26,726,982	14,011,710	52.4%	13,480,498	50.4%	(531,212)
School Generated						
Funds	6,700,000	4,266,050	63.7%	4,266,050	63.7%	0
Non-Operating/Capital	<u>41,424,944</u>	<u>10,502,210</u>	25.4%	<u>10,894,424</u>	26.3%	<u>392,214</u>
Total	\$288,968,379	\$137,162,616	47.5%	\$135,667,438	46.9%	(\$1,495,178)

As per detailed analysis in Attachments 7 through 10 the Board's normalized year to date expenditures are compared with anticipated results. In particular Attachment 7 breaks down the wage variance into four components and Attachment 9 provides analysis regarding the year-to-date results for each of the individual departments. In addition, Attachment 10 outlines the spending patterns experienced in the Capital/Non-Operating area of the budget. Anticipated expenditures are based on two core components: anticipated consumption rate of annual ongoing operating costs (i.e. - utilities); and anticipated stage of completion of various individual operating and capital related projects and initiatives. Based on the year-to-date results, staff is forecasting that actual year end operating expenses will exceed budget by approximately \$2,300,000 (as per the analysis and related commentary on Attachments 7 and 9). An in-year budget solution has been established and affected by Administrative Council to ensure there is no further use of the Board's operating reserve, as outlined on Attachment 11.

Attachment 6

Monthly Expenditure Report as at February 28, 2018

Expenditure Category	\$ Annual Budget	\$ YTD Expenditure	% Expended YTD
Teachers	\$140,614,088	\$70,757,919	50.32
Educational Assistants	15,931,493	9,217,083	57.85
Early Childhood Educators	4,979,146	2,693,838	54.10
Textbooks & Materials	5,740,853	3,160,876	55.06
Computers	2,066,779	1,036,882	50.17
Paraprofessional	8,099,931	3,871,813	47.80
Staff Development	1,538,199	551,532	35.86
<i>Total Classroom (1)</i>	<i>178,970,489</i>	<i>91,289,943</i>	<i>51.01</i>
Principals & Vice Principals	9,973,359	5,088,760	51.02
School Secretaries & Supplies	5,823,725	2,802,918	48.13
Coordinators & Consultants	2,931,553	1,463,727	49.93
School Operations	22,754,724	12,031,098	52.87
Continuing Education	4,720,720	2,213,640	46.89
Pupil Transportation	7,097,844	3,052,819	43.01
Trustees & Student Reps	165,615	71,212	43.00
Supervisory Officers	2,037,082	917,366	45.03
Board Administration	6,368,324	3,462,873	54.38
School Generated Funds	6,700,000	4,266,050	63.67
<i>Total Non-Classroom (2)</i>	<i>68,572,946</i>	<i>35,370,463</i>	<i>51.58</i>
<i>Total Operating (1 + 2 = 3)</i>	<i>247,543,435</i>	<i>126,660,406</i>	<i>51.17</i>
<i>Non-Operating & Capital (4)</i>	<i>41,424,944</i>	<i>10,502,210</i>	<i>25.35</i>
Total Expenditures (3 + 4)	\$288,968,379	\$137,162,616	47.47%

Attachment 7

Summary of Wages and Benefits as at February 28, 2018

	Budget	Actual	%	Anticipated	%	Variance
Wages – Academic	\$136,181,745	\$68,627,128	50.4%	\$68,407,916	50.2%	(\$219,212)
Wages – Support	41,586,887	21,560,935	51.8%	21,441,335	51.6%	(119,600)
Supply Teachers	3,514,837	2,261,997	64.4%	1,793,654	51.0%	(468,343)
Benefits	<u>30,616,796</u>	<u>14,190,243</u>	46.3%	<u>13,721,420</u>	44.8%	<u>(468,823)</u>
	<u>\$211,900,265</u>	<u>\$106,640,303</u>	50.3%	<u>\$105,364,325</u>	49.7%	<u>(\$1,275,978)</u>

Anticipated expenditures are based on the following: teaching wages 13 pays out of 26 with EA's and ECE's at 13 pays out of 22; non-teaching wages 12 pays out of 26; supply costs 99 days out of 194; and while statutory benefit deductions occur with payroll many employees have already reached maximum annual CPP and EI contributions by September thereby reducing the consumption rate through the second quarter of the fiscal year for this area of the budget.

In reviewing the above chart there are significant cost pressures in supply teacher costs relating to teacher sick leave and earned leave plans. The variance in academic and support wages is a result of replacement costs for employee groups other than supply teachers (which has its own expenditure line). The variance in the Benefits category is a result of additional Provincial benefit plan transition costs which have surfaced as a result of the delays in certain groups moving to the Employee Life and Health Trusts. Looking ahead to year end, supply teacher costs are expected to continue at the same rate for the rest of the school year creating an anticipated \$1,000,000 year end cost pressure. The replacement cost variance of \$300,000 for the other employee groups is considered one-time and is not forecast to continue at the current rate. Benefit transition costs of approximately \$500,000 are considered to be one-time with anticipated additional year end WSIB and employee future benefit expenses of \$300,000 still to come resulting in a total anticipated year end benefits cost pressure of \$800,000. As such, overall actual year end wages and benefits is forecast to exceed budget by approximately \$2,100,000.

Attachment 8

Staffing Summary: Payroll versus Budget as at February 28, 2018

	Budget	Payroll	Variance
Teachers			
Elementary Teachers	861.37	861.37	0.00
Secondary Teachers	446.33	446.33	0.00
Coordinators/Consultants	24.00	24.00	0.00
Principals/Vice-Principals			
Elementary/Secondary	76.00	76.00	0.00
Non-Teaching			
Director of Education	1.00	1.00	0.00
Supervisory Officers	8.00	8.00	0.00
Middle Management	37.00	36.00	1.00
Non-Union	17.00	17.00	0.00
Chaplains/Faith Animator	8.00	8.00	0.00
Student Services	41.80	41.80	0.00
Educational Assistants	285.50	285.50	0.00
Early Childhood Educators	96.00	95.00	1.00
Custodial Maintenance	184.00	184.00	0.00
Secretarial/Clerical	111.00	111.00	0.00
Trustees	8.00	8.00	0.00
Secondments	5.33	5.33	0.00
Total	2,210.33	2,208.33	2.00

Attachment 9

**Summary of Departmental Expenditures
as at February 28, 2018**

	Budget	Actual	%	Anticipated	%	Variance
Student Transportation	\$6,777,320	\$3,301,968	49%	\$3,388,660	50%	\$86,692
Facilities Services	7,448,627	4,558,993	61%	4,329,213	58%	(229,780)
Information Technology	3,311,103	1,619,187	49%	1,655,552	50%	36,365
Academic Services	5,694,733	2,041,618	36%	2,189,227	38%	147,609
Business Services	702,664	652,722	93%	659,880	94%	7,158
Human Resources & Administrative Services	516,515	174,160	34%	154,975	30%	(19,185)
Mileage and Travel Allowances	536,640	189,667	35%	223,600	42%	33,933
Director's Office and Board Administration	242,859	103,378	43%	121,430	50%	18,052
Legal and Professional Services	364,109	161,195	44%	151,712	42%	(9,483)
Ministry Settlement Payments	0	600,938	0%	0	0%	(600,938)
Trustees and Student Representatives	212,017	150,427	71%	137,810	65%	(12,617)
Staff Development and Capacity Building	799,395	394,462	49%	407,939	51%	13,477
Corporate Communications	121,000	62,995	52%	60,500	50%	(2,495)
Total	\$26,726,982	\$14,011,710	52%	\$13,480,498	50%	(\$531,212)

The Ministry Settlement Payments of \$600,938 resulted from a fully funded Ministry agreement with certain employee groups as outlined on Attachment 3. A one-time cost pressure has been identified in Facilities Services as winter conditions resulted in a negative expenditure variance of approximately \$200,000. Otherwise, the various departments essentially offset each other for typical expenditure consumption. The calculated departmental variances as shown in the above schedule are a result of timing differences in relation to estimated utilization rates. It is anticipated that each Superintendent will manage their expenditures within the budget allocations as amended in the in-year budget solution (as outlined in Attachment 11) in order to generate the savings required to offset forecasted Wages, Benefits and Facilities Services cost pressures.

Attachment 10

Summary of Capital/Non-Operating Expenditures as at February 28, 2018

	Budget	Actual	%	Anticipated	%	Variance
Unnamed North Oshawa CES	\$11,168,903	\$223,703	2%	\$558,445	5%	\$334,742
Child Care Centres	1,517,552	142,907	9%	151,755	10%	8,848
Child and Family Centres	504,170	31,256	6%	50,417	10%	19,161
Greenhouse Gas Reduction Projects	544,982	421,102	77%	490,484	90%	69,382
Community Hubs Projects	668,707	446,477	67%	334,354	50%	(112,123)
Debenture Payments	6,683,107	3,341,553	50%	3,341,553	50%	0
School Renewal Program	2,969,665	1,401,173	47%	1,247,259	42%	(153,914)
School Condition Program	8,640,858	2,565,520	30%	2,592,257	30%	26,737
Arts and Media Program	5,589,000	802,855	14%	558,900	10%	(243,955)
Multi-Year Technology Program	1,138,000	510,674	45%	569,000	50%	58,326
Transfer to EDC Reserve	2,000,000	614,990	31%	1,000,000	50%	385,010
Total	\$41,424,944	\$10,502,210	25%	\$10,894,424	26%	\$392,214

In addition to the above, the Board purchased a school site in the amount of \$15,075,294 in the Town of Ajax. This transaction will be fully funded by the Education Development Charges (EDC) reserve and future EDC funds as they are collected from developers and remitted by the various Municipalities on behalf of the Board in accordance with the Board's EDC By-law.

Attachment 11

Operating Reserve Funds Continuity Schedule

Balance as per 2016/2017 Financial Statements	\$2,621,442
Used to Balance 2017/2018 Revised Estimates	(1,000,000)
Change in Planned Use Based on Mid-Year Forecast*	NIL
Anticipated Balance Available for Future Use	\$1,621,442

The Reserve for Working Funds is the only operating reserve fund available to the Board for use towards balancing the budget. The Board's annual reliance on reserves has diminished over the last several years and the Board was successful in establishing a balanced budget in 2017/2018 with the exception of a one-time draw to support the transition of employee benefits to the Provincial Employee Life and Health Trusts. Reserve funds are finite and it is a best practice, whenever possible, to maintain a modest reserve fund for use towards one-time initiatives, to offset minor fluctuations, and to address any unforeseen situations that may arise in the future.

*As noted within the report there are a number of expenditure categories which are forecast to exceed budgeted levels for various reasons. Many of the cost pressures are one-time in nature and are not anticipated to continue for the remainder of the year. However, some of the pressures are expected to continue for the remainder of the year and into next year and as such will need to be accounted for in the budget for next year and beyond. In terms of the current year forecast, Administrative Council has identified and affected an in-year solution that will offset the projected cost pressures of \$2,300,000 such that there is no additional use of reserves in 2017/2018 other than what was originally planned. The solution essentially involves deferring a number of larger system purchases which are typically made in the summer to the fall. In addition, any remaining non-essential departmental and professional development spending has been curtailed for the remainder of the year. Looking ahead, any of the cost pressures which are considered ongoing will need to be addressed in the 2018/2019 budget process in order to avoid a recurrence of the budget variances which have surfaced during the 2017/2018 school year.

Attachment 12

Summary of Cash Position and Investment Options

Month	Bank Balance		
	High	Low	Avg
September 2017	\$16,393,360	(\$10,059,806)	\$5,683,214
October 2017	\$21,479,658	(\$1,329,666)	\$13,843,055
November 2017	\$11,003,726	(\$9,658,038)	\$3,006,247
December 2017	\$16,103,960	(\$9,279,483)	\$4,188,354
January 2018	\$11,398,518	(\$4,059,529)	\$4,115,450
February 2018	\$4,211,293	(\$13,933,891)	\$975,239
Average	\$13,431,753	(\$8,053,402)	\$5,301,927

The Board's investment policy requires consideration of the following principles when determining its cash management strategy: achieve optimum rate of return; avoid borrowing if self-financing is possible; and ensure maximum security of funds. To this end the Board maintains all of its funds at one of the tier one major financial institutions. The Board continues to consolidate all of its operating and reserve funds into a single account to maximize interest earnings potential and to minimize overdraft charges or short-term financing costs.

As noted on Attachment 10, the Board purchased property in the Town of Ajax in the amount of \$15,075,294 in October 2017 which accounts for the change in the average bank balance for November and subsequent months. Staff is in the process of reviewing the Board's land purchase and capital programs cash flow requirements to ensure the operating and capital credit facilities (currently \$30 million respectively) meet anticipated future needs.

Another observation is the activity taking place in the account during the course of a month whereby the average monthly high is a positive \$13.4 million and the average monthly low is a negative \$8.1 million. This is due specifically to timing differences between the receipt of revenue and the payout of expenditure. From a revenue perspective the Board receives its Ministry grant installments once a month and receives its tax installments once a quarter from the Municipalities. However, expenditures follow a much more even and consistent stream with weekly payments to vendors and bi-weekly payroll for Board employees. As such there are peaks and troughs within the account each month.

Overall the Board experienced an increase in its operating cash position of \$839,355 since the beginning of the year, due to the fact that more funds were received (\$138,001,971 as per Attachment 3) than disbursed (\$137,162,616 as per Attachment 5). This positive result does not represent an operating surplus for the year but rather is simply a cash flow surplus due to the timing of certain funds being received in advance of the related expenditure. As the year progresses this trend will reverse itself and ultimately the Board's overall cash position should present a change from the prior year equivalent to the amount of reserves used to balance the budget less the net effect of any property transactions (such as the site purchase noted above).



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **Policies and Administrative Procedures**

RECOMMENDATIONS

Roster of Policies and Administrative Procedures

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive and file as information the Current Roster of Policies and Administrative Procedures – April 23, 2018."

Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools Policy

Moved by _____, seconded by _____

"THAT the Durham Catholic District School approve the First Reading of the Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools Policy (PO601)."

Anaphylactic Students (Protection of) Policy

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board approve the Second Reading of the revised Anaphylactic Students (Protection of) Policy (PO608)."

To: Board of Trustees
Re: Policies and Administrative Procedures
Date: April 23, 2018

Page 2

Anaphylactic Students (Protection of) Administrative Procedure

Moved by _____, seconded by _____

“THAT the Durham Catholic District School receive and file as information the revised Anaphylactic Students (Protection of) Administrative Procedure (AP608-1).”

Asthma Friendly Schools Policy

Moved by _____, seconded by _____

“THAT the Durham Catholic District School Board approve the Second Reading of the revised Asthma Friendly Schools Policy (PO615).”

Asthma Friendly Schools Administrative Procedure

Moved by _____, seconded by _____

“THAT the Durham Catholic District School receive and file as information the revised Asthma Friendly Schools Administrative Procedure (AP615-1).”

RATIONALE

As per attached.

AOB/BC
Attach.



Current Roster of Policies and Administrative Procedures 2017-2018

DEPARTMENT	TITLE	POLICY/ADMIN.PROCEDURE	IDENTIFIED	DRAFTING	ADMIN. COUNCIL	BOARD -1 st READING (P) -FOR INFO. (AP)	BOARD -2 ND READING (P) -FOR INFO. (AP)	LEGAL COUNSEL INPUT	BOARD -3 rd READING (P) -FOR INFO (AP)	DISTRIBUTION
						COMMUNITY INPUT				
GOVERNANCE	Board Award of Merit	PO209	X							
	Board Award of Merit	AP209-1	X							
OPERATIONS	Records Management	AP	X	X						
	Anti-Spam	PO444	X	X						
	Anti-Spam	AP444-1	X	X						
	Ontario Student Record (on hold pending MOE direction)	PO418	X							
	Ontario Student Record (on hold pending MOE direction)	AP418-1	X							
	Modified Calendar		X							
	Communicable Diseases	PO446	X	X						
	Communicable Diseases	AP446-1	X	X						
	Fire Safety	AP414-1	X	X	X	X				
PROGRAM & INSTRUCTION	Catholic Education	PO517	X	X						
	Family Life Education	AP517-1	X	X						
	Student Excursions and/or Exchanges for Educational Purposes	PO512	X	X						
	Student Excursions and/or Exchanges for Educational Purposes	AP512-1	X	X						

HUMAN RESOURCES	Disability Management	PO312	X	X	X	X	X			
	Disability Management	AP312-1	X	X	X	X	X			
	Substance Abuse Prevention/Intervention	AP312-2	X	X	X	X				
	Employee Conflict of Interest	PO317	X	X	X	X	X			
	Employee Conflict of Interest	AP317-1	X	X	X	X	X			
	Application to the Leadership Position of Curriculum Chair	AP325-1	X	X						
	Application to the Leadership Position of Consultant/Coordinator	AP325-2	X	X	X	X				
	Workplace Harassment and Workplace Sexual Harassment (Annual Review)	PO320	X							
	Workplace Harassment and Workplace Sexual Harassment (Annual Review)	AP320-1	X							
	Workplace Violence (Annual Review)	PO324	X	X						
	Workplace Violence Prev - General (Annual Review)	AP324-1	X	X						
	Workplace Violence Prev – Students	AP324-2	X	X						
	Occupational Health and Safety (Annual Review)	PO318	X							
	Hearing Protection	AP318-1	X	X	X	X				
	Drone Safety	AP318-6	X	X	X	X	X			
	Indoor Environmental Quality (IEQ)	AP318-7	X	X	X	X				
	Staffing	PO328	X	X	X	X	X			
	Personnel File: Review by Employee	AP328-1	X	X	X	X	X			
	Teacher Recruitment and Hiring	AP328-2	X	X	X	X				

	Employees Running for, and/or Elected to Public Office	PO301	X	X	X	X	X			
	Teacher Transfers	AP328-3	X	X	X	X				
	Allocation of Teaching Staff	AP328-4	X	X	X	X				
	Staff Absence: Severe Weather Conditions	AP328-5	X	X	X	X	X			
	Transitional Work Program	AP328-6	X	X						
STUDENT CONDUCT & SAFETY	Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes and/or Epilepsy in Schools)	PO601	X	X	X					
	Student Attendance (Annual Review)	PO613	X							
	Student Attend. – Elem. (Annual Review)	AP613-1	X							
	Student Attend. – Sec. (Annual Review)	AP613-2	X							
	Asthma Friendly Schools	PO615	X	X	X	X				
	Asthma Friendly Schools	AP615-1	X	X	X	X				
	Anaphylactic Students (Protection of)	PO608	X	X	X	X				
	Anaphylactic Students (Protection of)	AP608-1	X	X	X	X				
STUDENT SERVICES	Inclusion	PO804	X	X	X	X	X	X		
	Incorporating Applied Behavioural Analysis Methods for Students with Autism Spectrum Disorder	AP804-1	X	X	X	X				
	Safe Physical Interventions For Student Behaviours Causing a Risk of Injury	AP804-2	X	X						



Durham Catholic District School Board

"The Board"

Policy

Title: Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools	Policy #: PO601
Policy Area: Student Conduct and Safety Source: Superintendents of Education-Policy Development, Student Services Date Approved: Revised:	

1.0 Introduction

The Durham Catholic District School Board believes in supporting students with prevalent medical conditions in order that these students fully access school in a safe, accepting, and healthy learning environment which includes supporting their well-being. In addition, the Board believes in empowering students with prevalent medical conditions to be confident and capable learners who can reach their full potential for self-management of their medical conditions, according to their plan of care.

2.0 Definitions

Anaphylaxis (pronounced anna-fill-axis) is a serious and possibly life-threatening allergic reaction that requires immediate recognition and intervention. Symptoms can vary from person to person and may include:

- **Skin:** hives, swelling (face, lips, and tongue), itching, warmth, redness
- **Breathing (respiratory):** coughing, wheezing, shortness of breath, chest pain/tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing
- **Stomach (gastrointestinal):** nausea, pain/cramps, vomiting, diarrhea
- **Heart (cardiovascular):** paler than normal/blue skin colour, weak pulse, passing out, dizziness or light-headedness, shock
- **Other:** anxiety, sense of "doom" (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste

Asthma – as defined by the Ontario Lung Association, is a very common chronic (long-term) lung disease that can make it hard to breathe. People with asthma have sensitive airways that react to triggers. There are many different types of triggers such as, poor air quality, mold, dust, pollen, viral infections, animals, smoke and cold air. The symptoms can cause mild to severe reactions and be fatal.

2.0 **Definitions** (cont'd)

Common asthma symptoms include:

- Shortness of breath;
- Wheezing (whistling sound from inside the chest);
- Difficulty breathing;
- Chest tightness; and
- Coughing.

Epilepsy – results from sudden bursts of hyperactivity in the brain; this causes “seizures” which vary in form, strength, and frequency, depending on where in the brain abnormal activity is found. Epilepsy is the diagnosis and seizures are the symptom. If a person has two (2) or more seizures that are not related to another condition, that person will be diagnosed as having epilepsy.

Good Samaritan Act In 2001, the Ontario government passed this legislation to protect individuals from liability with respect to voluntary emergency medical or first-aid services. Subsections 2(1) and (2) of this Act state the following with regard to individuals:

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

(2) Subsection (1) applies to,
...(b) an individual ...who provides emergency first aid assistance to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.

Immunity – in relation to the Act to protect students diagnosed with Asthma (Ryan’s Law), immunity means “no action or other proceeding for damages shall be commenced against the employee for an act or omission done or omitted by the employee in good faith in the execution of any duty or power under this Act”.

In relation to the Act to protect students diagnosed with Anaphylaxis (Sabrina’s Law), immunity means “no action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee’s gross negligence”.

Medical Incident – a circumstance that requires an immediate response and monitoring, since the incident may progress to an emergency requiring contact with Emergency Medical Services.

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

Prevalent Medical Conditions – for the purposes of this policy refer to the medical conditions of students in schools who have asthma, diabetes, epilepsy, and/or anaphylaxis as diagnosed by a medical doctor or nurse practitioner.

2.0 **Definitions** (cont'd)

Type 1 Diabetes –a chronic condition where the pancreas stops producing insulin, a hormone that helps the body control the level of glucose (sugar) in your blood. The body produces glucose, and also gets it from foods that contain carbohydrates, such as bread, potatoes, rice, pasta, milk and fruit. Without insulin, glucose builds up in the blood instead of being used by your cells for energy. A lack of insulin can cause both short-term and long-term health problems. Symptoms of undiagnosed type 1 diabetes include:

- Increased thirst;
- Increased urination;
- A lack of energy; and
- Weight loss.

Type 2 Diabetes – can also affect children and youth, but it is more common in adults. With type 2 diabetes, the body does not respond well to insulin, and the pancreas cannot produce enough insulin to compensate. Type 2 diabetes can often be managed through changes to diet and lifestyle, as well as with oral medications (pills). Some children with type 2 diabetes may need insulin injections.

3.0 **Purpose**

The purpose of this policy is to provide a framework and direction to align administrative procedures that support students with prevalent medical conditions who have been diagnosed with asthma, diabetes, epilepsy and/or anaphylaxis.

4.0 **Application/Scope**

This policy applies to all students with prevalent medical conditions as defined from junior kindergarten to grade twelve (12) or age twenty-one (21) within the Durham Catholic District School Board.

5.0 **Principles**

- 5.1 The Durham Catholic District School Board recognizes that supporting students with prevalent medical conditions is complex. A whole-school approach with caring is needed where education and community partners, including health care professionals, have important roles to play in promoting student health and safety and in fostering and maintaining healthy and safe learning environments.
- 5.2 The Board believes that in supporting students with prevalent medical conditions, it does so within a culture of collaborative professionalism that is grounded in a trusting environment where schools, the Board, the Ministry and employee groups create the necessary conditions to learn with, and from, each other.

6.0 **Procedures**

6.1 The **Board** shall:

- 6.1.1 support students with prevalent medical conditions by ensuring that this policy articulates the expected roles and responsibilities of parents/guardians and school staff as well as the roles and responsibilities of the students themselves.
- 6.1.2 require that schools communicate the roles and responsibilities to parents/guardians, students and school staff.
- 6.1.3 provide training and resources on prevalent medical conditions on an annual basis.

6.2 **Parents/Guardians**, as primary caregivers of their child, shall:

- 6.2.1 be active participants in supporting the management of their child's medical condition (s) while their child is in school.
- 6.2.2 educate their child about their medical condition (s) with support from their child's health care professional, as needed.
- 6.2.3 guide and encourage their child to reach their full potential for self-management and self-advocacy.
- 6.2.4 inform the school in a timely manner upon diagnoses of their child's medical condition(s) and co-create the Plan of Care for their child with the principal or the principal's designate.
- 6.2.5 communicate changes to the Plan of Care, such as changes to the status of their child's medical condition(s) or changes to their child's medical condition (s) or changes to their child's ability to manage the medical condition(s) , to the principal or principal's designate upon learning of the change from the medical practitioner.
- 6.2.6 confirm annually to the principal or the principal's designate that their child's medical status is unchanged.
- 6.2.7 initiate and participate in meetings to review their child's Plan of Care.
- 6.2.8 supply their child and/or the school with sufficient quantities of medication and supplies in their original, clearly labelled prescription containers, as directed by a health care professional and as outlined in the Plan of Care, and track the expiration dates if they are supplied.
- 6.2.9 seek medical advice from a medical doctor, nurse practitioner, or pharmacist, where appropriate.

6.0 **Procedures (cont'd)**

6.3 **Students With Prevalent Medical Conditions**

Depending on their cognitive, emotional, social, and physical stage of development, and their capacity for self-management, students are expected to actively support the development and implementation of their Plan of Care.

6.3.1 **Students** should:

6.3.1.1 take responsibility for advocating for their personal safety and well-being that is consistent with their cognitive, emotional, social, and physical stage of development and their capacity for self-management.

6.3.1.2 participate in the development of their Plan of Care.

6.3.1.3 participate in meetings to review their Plan of Care.

6.3.1.4 carry out daily or routine self-management of their medical condition to their full potential, as described in their Plan of Care (e.g., carry their medication and medical supplies; follow school board policies on disposal of medication and medical supplies).

6.3.1.5 set goals on an ongoing basis for self-management of their medical condition, in conjunction with their parent(s) and health care professional(s).

6.3.1.6 communicate with their parents/guardians and school staff if they are facing challenges related to their medical condition(s) at school.

6.3.1.7 wear medical alert identification that they and/or their parents/guardians deem appropriate.

6.3.1.8 if possible, inform school staff and/or their peers if a medical incident or a medical emergency occurs.

6.0 **Procedures (cont'd)**

6.4 **School Staff** should:

- 6.4.1 follow Board policies and provisions in their collective agreements related to supporting students with prevalent medical conditions in schools.
- 6.4.2 participate in training on prevalent medical conditions, at a minimum annually, as required by the school board.
- 6.4.3 share information on a student's signs and symptoms with other students, as outlined in the Plan of Care and authorized by the principal in writing.
- 6.4.4 follow school board strategies that reduce the risk of student exposure to triggers or causative agents in classrooms, common school areas, and extracurricular activities, in accordance with the student's Plan of Care.
- 6.4.5 support a student's daily or routine management, and respond to medical incidents and emergencies per board policies and school protocols.
- 6.4.6 support inclusion by allowing students with prevalent medical conditions to perform daily or routine management activities in a school location (e.g. classroom), as outlined in their Plan of Care, while being aware of confidentiality and the dignity of the student.

6.5 The **Principal**, in addition to the responsibilities outlined under 'School Staff', should:

- 6.5.1 communicate with parents/guardians and appropriate staff the process for parents/guardians to notify the school of their child's medical conditions(s), as well as the expectation for parents/guardians to co-create, review and update a Plan of Care with the principal or designate. This process should be communicated to parents/guardians, at a minimum
 - During the time of registration
 - Each year during the first week of school
 - When a child is diagnosed and/or returns to school during a diagnosis
- 6.5.2 co-create, review, or update the Plan of Care for a student with a prevalent medical condition with the parent(s)/guardians, in consultation with school staff (as appropriate) and with the student (as appropriate).
- 6.5.3 maintain a file with the Plan of Care and supporting documentation for each student with a prevalent medical condition.

6.0 Procedures (cont'd)

- 6.5.4 provide relevant information from the student's Plan of Care to school staff and others who are identified in the Plan of Care (e.g. food service providers, transportation providers, volunteers, occasional staff, coaches, and facilitators of co-curricular and extra-curricular activities, who will be in direct contact with the student), including any revisions that are made to the plan.
- 6.5.5 communicate with parents/guardians in medical emergencies, as outlined in the Plan of Care.
- 6.5.6 encourage the identification of staff who can support the daily or routine management needs of students in the school with prevalent medical conditions, while honouring the provisions within their collective agreements.
- 6.5.7 co-operate with school staff when requests are made for information related to storage of medication, administration of medication and updated medical information.
- 6.5.8 participate in training on prevalent medical conditions, at a minimum annually, as required by the school board.
- 6.5.9 have processes in place to provide for student transitions between grades, new schools and placements.

7.0 Sources

- Education Act, R.S.O. 1990
- PPM 161 Supporting Children and Students with prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes and/or Epilepsy) in Schools 2017
- **Food Allergy Canada:** <http://foodallergy.ca/resources/print-materials/>
Allergy Aware: www.allergyaware.ca (Free online courses about food allergy and anaphylaxis for school, child care and community settings).
Sabrina's Law: <https://www.ontario.ca/laws/statute/05s07>
Healthy Schools, Ministry of Education:
<http://www.edu.gov.on.ca/eng/healthyschools/medicalconditions.html>
- **Asthma Canada:** <https://www.asthma.ca>
The Lung Association – Ontario: www.lungontario.ca/resources
www.ryanslaw.ca
Lung Health Information Line: 1-888-344-LUNG (5864)
Ryan's Law: <https://www.ontario.ca/laws/statute/15r03>
- **Diabetes at School:** <http://www.diabetesatschool.ca/>
- **Epilepsy Ontario:** <http://epilepsyontario.org/>

8.0 Related Policies and Administrative Procedures

Protection of Students - PO607
Anaphylactic Students (Protection of) - PO608
Anaphylactic Students (Protection of) - AP608-1
Asthma Friendly Schools - PO615
Asthma Friendly Schools - AP615-1

9.0 Plan of Care Appendices

- I. Anaphylaxis
- II. Asthma
- III. Diabetes
- IV. Epilepsy



I. PREVALENT MEDICAL CONDITION — ANAPHYLAXIS

Plan of Care

STUDENT INFORMATION

Student Name _____ Date Of Birth _____

Ontario Ed. # _____ Age _____

Grade _____ Teacher(s) _____

Student Photo (optional)

EMERGENCY CONTACTS (LIST IN PRIORITY)

NAME	RELATIONSHIP	DAYTIME PHONE	ALTERNATE PHONE
1.			
2.			
3.			

KNOWN LIFE-THREATENING TRIGGERS

CHECK (✓) THE APPROPRIATE BOXES

☐ Food(s): _____ ☐ Insect Stings: _____

☐ Other: _____

Epinephrine Auto-Injector(s) Expiry Date (s): _____

Dosage: ☐ EpiPen® Jr. 0.15 mg ☐ EpiPen® 0.30 mg Location Of Auto-Injector(s): _____

☐ Previous anaphylactic reaction: **Student is at greater risk.**

☐ Has asthma. **Student is at greater risk.** If student is having a reaction and has difficulty breathing, give epinephrine before asthma medication.

☐ Any other medical condition or allergy? _____

DAILY/ROUTINE ANAPHYLAXIS MANAGEMENT

SYMPTOMS

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

- **Skin system:** hives, swelling (face, lips, tongue), itching, warmth, redness.
- **Respiratory system** (breathing): coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing.
- **Gastrointestinal system** (stomach): nausea, vomiting, diarrhea, pain or cramps.
- **Cardiovascular system** (heart): paler than normal skin colour/blue colour, weak pulse, passing out, dizziness or lightheadedness, shock.
- **Other:** anxiety, sense of doom (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste.

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

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

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

Food(s) to be avoided: _____

Safety measures: _____

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

Designated eating area inside school building _____

Safety measures: _____

Other information: _____

EMERGENCY PROCEDURES

(DEALING WITH AN ANAPHYLACTIC REACTION)

ACT QUICKLY. THE FIRST SIGNS OF A REACTION CAN BE MILD, BUT SYMPTOMS CAN GET WORSE QUICKLY.

STEPS

1. Give epinephrine auto-injector (e.g. EpiPen®) at the first sign of a known or suspected anaphylactic reaction.
2. Call 9-1-1. Tell them someone is having a life-threatening allergic reaction.
3. Give a second dose of epinephrine as early as five (5) minutes after the first dose if there is no improvement in symptoms.
4. Follow direction of emergency personnel, including transport to hospital (ideally by ambulance), even if symptoms are mild or have stopped. The reaction could worsen or come back, even after treatment. Stay in the hospital for an appropriate period of observation as decided by the emergency department physician (generally about 4 - 6 hours).
5. Call emergency contact person; e.g. Parent(s)/Guardian(s).

HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

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

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

★ This information may remain on file if there are no changes to the student's medical condition.

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Other individuals to be contacted regarding Plan Of Care:

Before-School Program ☐ Yes ☐ No _____

After-School Program ☐ Yes ☐ No _____

School Bus Driver/Route # (If Applicable) _____

Other: _____

This plan remains in effect for the 20__ — 20__ school year without change and will be reviewed on or before: _____. (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year.)

Parent(s)/Guardian(s): _____ Date: _____
Signature

Student: _____ Date: _____
Signature

Principal: _____ Date: _____
Signature



II. PREVALENT MEDICAL CONDITION — ASTHMA

Plan of Care

STUDENT INFORMATION

Student Name _____ Date Of Birth _____

Ontario Ed. # _____ Age _____

Grade _____ Teacher(s) _____

Student Photo (optional)

EMERGENCY CONTACTS (LIST IN PRIORITY)

NAME	RELATIONSHIP	DAYTIME PHONE	ALTERNATE PHONE
1.			
2.			
3.			

KNOWN ASTHMA TRIGGERS

CHECK (✓) ALL THOSE THAT APPLY

<input type="checkbox"/> Colds/Flu/Illness	<input type="checkbox"/> Change In Weather	<input type="checkbox"/> Pet Dander	<input type="checkbox"/> Strong Smells
<input type="checkbox"/> Smoke (e.g., tobacco, fire, cannabis, second-hand smoke)	<input type="checkbox"/> Mould	<input type="checkbox"/> Dust	<input type="checkbox"/> Cold Weather
<input type="checkbox"/> Pollen	<input type="checkbox"/> Other (Specify) _____		
<input type="checkbox"/> Physical Activity/Exercise			
<input type="checkbox"/> At Risk For Anaphylaxis (Specify Allergen) _____			
<input type="checkbox"/> Asthma Trigger Avoidance Instructions: _____			
<input type="checkbox"/> Any Other Medical Condition Or Allergy? _____			

RELIEVER INHALER USE AT SCHOOL AND DURING SCHOOL-RELATED ACTIVITIES

☐ When student is experiencing asthma symptoms (e.g., trouble breathing, coughing, wheezing).

☐ Other (explain):

Use reliever inhaler _____ in the dose of _____
(Name of Medication) (Number of Puffs)

Spacer (valved holding chamber) provided? ☐ Yes ☐ No

Place a (✓) check mark beside the type of reliever inhaler that the student uses:

☐ Airomir ☐ Ventolin ☐ Bricanyl ☐ Other (Specify) _____

☐ Student requires assistance to **access** reliever inhaler. Inhaler must be **readily accessible**.

Reliever inhaler is kept:

☐ With _____ – location: _____ Other Location: _____

☐ In locker # Locker Combination:

☐ Student **will carry** their reliever inhaler **at all times** including during recess, gym, outdoor and off-site activities.

Reliever inhaler is kept in the student's:

☐ Pocket

☐ Backpack/fanny Pack

☐ Case/pouch

☐ Other (specify): _____

Does student require assistance to **administer** reliever inhaler? ☐ Yes ☐ No

☐ Student's **spare** reliever inhaler is kept:

☐ In main office (specify location): _____ Other Location: _____

☐ In locker #: _____ Locker Combination: _____

CONTROLLER MEDICATION USE AT SCHOOL AND DURING SCHOOL-RELATED ACTIVITES

Controller medications are taken regularly every day to control asthma. Usually, they are taken in the morning and at night, so generally not taken at school (unless the student will be participating in an overnight activity).

Use/administer _____ In the dose of _____ At the following times: _____
(Name of Medication)

Use/administer _____ In the dose of _____ At the following times: _____
(Name of Medication)

Use/administer _____ In the dose of _____ At the following times: _____
(Name of Medication)

EMERGENCY PROCEDURES

IF ANY OF THE FOLLOWING OCCUR:

- Continuous coughing
- Trouble breathing
- Chest tightness
- Wheezing (whistling sound in chest)

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

TAKE ACTION:

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

STEP 2: Check symptoms. Only return to normal activity when all symptoms are gone. If symptoms get worse or do not improve within 10 minutes, this is an **EMERGENCY!** Follow steps below.

IF ANY OF THE FOLLOWING OCCUR:

- Breathing is difficult and fast
- Cannot speak in full sentences
- Lips or nail beds are blue or grey
- Skin or neck or chest sucked in with each breath

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

THIS IS AN EMERGENCY:

STEP 1: IMMEDIATELY USE ANY FAST-ACTING RELIEVER (USUALLY A BLUE INHALER). USE A SPACER IF PROVIDED.

Call 9-1-1 for an ambulance. Follow 9-1-1 communication protocol with emergency responders.

STEP 2: If symptoms continue, use reliever inhaler every 5-15 minutes until medical attention arrives.

While waiting for medical help to arrive:

- ✓ Have student sit up with arms resting on a table (do not have student lie down unless it is an anaphylactic reaction).
- ✓ Do not have the student breathe into a bag.
- ✓ Stay calm, reassure the student and stay by his/her side.
- ✓ Notify parent(s)/guardian(s) or emergency contact.

HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

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

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

★ This information may remain on file if there are no changes to the student's medical condition.

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Other Individuals To Be Contacted Regarding Plan Of Care:

Before-School Program ☐ Yes ☐ No _____

After-School Program ☐ Yes ☐ No _____

School Bus Driver/Route # (If Applicable) _____

Other: _____

This plan remains in effect for the 20__— 20__ school year without change and will be reviewed on or before: _____. (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year).

Parent(s)/Guardian(s): _____ Date: _____
Signature

Student: _____ Date: _____
Signature

Principal: _____ Date: _____
Signature



III. PREVALENT MEDICAL CONDITION — TYPE 1 DIABETES

Plan of Care

STUDENT INFORMATION

Student Name _____ Date Of Birth _____

Ontario Ed. # _____ Age _____

Grade _____ Teacher(s) _____

Student Photo (optional)

EMERGENCY CONTACTS (LIST IN PRIORITY)

NAME	RELATIONSHIP	DAYTIME PHONE	ALTERNATE PHONE
1.			
2.			
3.			

TYPE 1 DIABETES SUPPORTS

Names of trained individuals who will provide support with diabetes-related tasks: (e.g. designated staff or community care allies.) _____

Method of home-school communication: _____

Any other medical condition or allergy? _____

DAILY/ROUTINE TYPE 1 DIABETES MANAGEMENT

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

☐ Yes

☐ No

☐ If Yes, go directly to page five (5) — Emergency Procedures

ROUTINE	ACTION
<p>BLOOD GLUCOSE MONITORING</p> <p><input type="checkbox"/> Student requires trained individual to check BG/ read meter.</p> <p><input type="checkbox"/> Student needs supervision to check BG/ read meter.</p> <p><input type="checkbox"/> Student can independently check BG/ read meter.</p> <p><input type="checkbox"/> Student has continuous glucose monitor (CGM)</p> <p>★ Students should be able to check blood glucose anytime, anyplace, respecting their preference for privacy.</p>	<p>Target Blood Glucose Range _____</p> <p>Time(s) to check BG: _____</p> <p>_____</p> <p>Contact Parent(s)/Guardian(s) if BG is: _____</p> <p>Parent(s)/Guardian(s) Responsibilities: _____</p> <p>_____</p> <p>School Responsibilities: _____</p> <p>_____</p> <p>Student Responsibilities: _____</p>
<p>NUTRITION BREAKS</p> <p><input type="checkbox"/> Student requires supervision during meal times to ensure completion.</p> <p><input type="checkbox"/> Student can independently manage his/her food intake.</p> <p>★ Reasonable accommodation must be made to allow student to eat all of the provided meals and snacks on time. Students should not trade or share food/snacks with other students.</p>	<p>Recommended time(s) for meals/snacks: _____</p> <p>Parent(s)/Guardian(s) Responsibilities: _____</p> <p>_____</p> <p>School Responsibilities: _____</p> <p>_____</p> <p>Student Responsibilities: _____</p> <p>Special instructions for meal days/ special events: _____</p> <p>_____</p>

ROUTINE	ACTION (CONTINUED)
<p>INSULIN</p> <p><input type="checkbox"/> Student does not take insulin at school.</p> <p><input type="checkbox"/> Student takes insulin at school by:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Injection <input type="checkbox"/> Pump</p> <p><input type="checkbox"/> Insulin is given by:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Student <input type="checkbox"/> Student with supervision <input type="checkbox"/> Parent(s)/Guardian(s) <input type="checkbox"/> Trained Individual</p> <p>* All students with Type 1 diabetes use insulin. Some students will require insulin during the school day, typically before meal/nutrition breaks.</p>	<p>Location of insulin: _____</p> <p>Required times for insulin: _____</p> <p><input type="checkbox"/> Before school: <input type="checkbox"/> Morning Break:</p> <p><input type="checkbox"/> Lunch Break: <input type="checkbox"/> Afternoon Break:</p> <p><input type="checkbox"/> Other (Specify): _____</p> <p>Parent(s)/Guardian(s) responsibilities: _____</p> <p>School Responsibilities: _____</p> <p>Student Responsibilities: _____</p> <p>Additional Comments: _____</p>
<p>ACTIVITY PLAN</p> <p>Physical activity lowers blood glucose. BG is often checked before activity. Carbohydrates may need to be eaten before/after physical activity. A source of fast-acting sugar must always be within students' reach.</p>	<p>Please indicate what this student must do prior to physical activity to help prevent low blood sugar:</p> <p>1. Before activity: _____</p> <p>2. During activity: _____</p> <p>3. After activity: _____</p> <p>Parent(s)/Guardian(s) Responsibilities: _____</p> <p>School Responsibilities: _____</p> <p>Student Responsibilities: _____</p> <p>For special events, notify parent(s)/guardian(s) in advance so that appropriate adjustments or arrangements can be made. (e.g. extracurricular, Terry Fox Run)</p>

ROUTINE	ACTION (CONTINUED)
<p>DIABETES MANAGEMENT KIT</p> <p>Parents must provide, maintain, and refresh supplies. School must ensure this kit is accessible all times. (e.g. field trips, fire drills, lockdowns) and advise parents when supplies are low.</p>	<p>Kits will be available in different locations but will include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Blood Glucose meter, BG test strips, and lancets <input type="checkbox"/> Insulin and insulin pen and supplies. <input type="checkbox"/> Source of fast-acting sugar (e.g. juice, candy, glucose tabs.) <input type="checkbox"/> Carbohydrate containing snacks <input type="checkbox"/> Other (Please list) _____ <p>Location of Kit: _____</p>
<p>SPECIAL NEEDS</p> <p>A student with special considerations may require more assistance than outlined in this plan.</p>	<p>Comments:</p>

EMERGENCY PROCEDURES**HYPOGLYCEMIA – LOW BLOOD GLUCOSE****(4 mmol/L or less)****DO NOT LEAVE STUDENT UNATTENDED**

Usual symptoms of Hypoglycemia for my child are:

- | | | | |
|---|--|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Shaky | <input type="checkbox"/> Irritable/Grouchy | <input type="checkbox"/> Dizzy | <input type="checkbox"/> Trembling |
| <input type="checkbox"/> Blurred Vision | <input type="checkbox"/> Headache | <input type="checkbox"/> Hungry | <input type="checkbox"/> Weak/Fatigue |
| <input type="checkbox"/> Pale | <input type="checkbox"/> Confused | <input type="checkbox"/> Other _____ | |

Steps to take for Mild Hypoglycemia (student is responsive)

1. Check blood glucose, give _____grams of fast acting carbohydrate (e.g. ½ cup of juice, 15 skittles)
2. Re-check blood glucose in 15 minutes.
3. If still below 4 mmol/L, repeat steps 1 and 2 until BG is above 4 mmol/L. Give a starchy snack if next meal/snack is more than one (1) hour away.

Steps for Severe Hypoglycemia (student is unresponsive)

1. Place the student on their side in the recovery position.
2. Call 9-1-1. Do not give food or drink (choking hazard). Supervise student until emergency medical personnel arrives.
3. Contact parent(s)/guardian(s) or emergency contact

HYPERGLYCEMIA — HIGH BLOOD GLOCOSE**(14 MMOL/L OR ABOVE)**

Usual symptoms of hyperglycemia for my child are:

- | | | |
|---|---|---|
| <input type="checkbox"/> Extreme Thirst | <input type="checkbox"/> Frequent Urination | <input type="checkbox"/> Headache |
| <input type="checkbox"/> Hungry | <input type="checkbox"/> Abdominal Pain | <input type="checkbox"/> Blurred Vision |
| <input type="checkbox"/> Warm, Flushed Skin | <input type="checkbox"/> Irritability | <input type="checkbox"/> Other: _____ |

Steps to take for Mild Hyperglycemia

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

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

- | | | |
|---|-----------------------------------|--|
| <input type="checkbox"/> Rapid, Shallow Breathing | <input type="checkbox"/> Vomiting | <input type="checkbox"/> Fruity Breath |
|---|-----------------------------------|--|

Steps to take for Severe Hyperglycemia

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

HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

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

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

★ This information may remain on file if there are no changes to the student's medical condition.

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Other individuals to be contacted regarding Plan Of Care:

Before-School Program ☐ Yes ☐ No _____

After-School Program ☐ Yes ☐ No _____

School Bus Driver/Route # (If Applicable) _____

Other: _____

This plan remains in effect for the 20__ — 20__ school year without change and will be reviewed on or before: _____ (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year.)

Parent(s)/Guardian(s): _____ Date: _____
Signature

Student: _____ Date: _____
Signature

Principal: _____ Date: _____
Signature



IV. PREVALENT MEDICAL CONDITION — EPILEPSY

Plan of Care

STUDENT INFORMATION

Student Name _____ Date Of Birth _____

Ontario Ed. # _____ Age _____

Grade _____ Teacher(s) _____

Student Photo (optional)

EMERGENCY CONTACTS (LIST IN PRIORITY)

NAME	RELATIONSHIP	DAYTIME PHONE	ALTERNATE PHONE
1.			
2.			
3.			

Has an emergency rescue medication been prescribed? ☐ Yes ☐ No

If yes, attach the rescue medication plan, healthcare providers' orders and authorization from the student's parent(s)/guardian(s) for a trained person to administer the medication.

Note: Rescue medication training for the prescribed rescue medication and route of administration (e.g. buccal or intranasal) must be done in collaboration with a regulated healthcare professional.

KNOWN SEIZURE TRIGGERS

CHECK (✓) ALL THOSE THAT APPLY

- | | | |
|--|--|--|
| <input type="checkbox"/> Stress | <input type="checkbox"/> Menstrual Cycle | <input type="checkbox"/> Inactivity |
| <input type="checkbox"/> Changes In Diet | <input type="checkbox"/> Lack Of Sleep | <input type="checkbox"/> Electronic Stimulation
(TV, Videos, Florescent Lights) |
| <input type="checkbox"/> Illness | <input type="checkbox"/> Improper Medication Balance | |
| <input type="checkbox"/> Change In Weather | <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Any Other Medical Condition or Allergy? _____ | | |

DAILY/ROUTINE EPILEPSY MANAGEMENT

DESCRIPTION OF SEIZURE (NON-CONVULSIVE)	ACTION:
	(e.g. description of dietary therapy, risks to be mitigated, trigger avoidance.)
DESCRIPTION OF SEIZURE (CONVULSIVE)	ACTION:

SEIZURE MANAGEMENT

Note: It is possible for a student to have more than one seizure type.
Record information for each seizure type.

SEIZURE TYPE	ACTIONS TO TAKE DURING SEIZURE
<p>(e.g. tonic-clonic, absence, simple partial, complex partial, atonic, myoclonic, infantile spasms)</p> <p>Type: _____</p> <p>Description: _____</p>	
<p>Frequency of seizure activity: _____</p> <p>_____</p>	
<p>Typical seizure duration: _____</p>	

BASIC FIRST AID: CARE AND COMFORT

First aid procedure(s): _____

Does student need to leave classroom after a seizure? ☐ Yes ☐ No

If yes, describe process for returning student to classroom: _____

BASIC SEIZURE FIRST AID

- Stay calm and track time and duration of seizure
- Keep student safe
- Do not restrain or interfere with student's movements
- Do not put anything in student's mouth
- Stay with student until fully conscious

FOR TONIC-CLONIC SEIZURE:

Protect student's head
 Keep airway open/watch breathing
 Turn student on side

EMERGENCY PROCEDURES

Students with epilepsy will typically experience seizures as a result of their medical condition.

Call 9-1-1 when:

- Convulsive (tonic-clonic) seizure lasts longer than five (5) minutes.
- Student has repeated seizures without regaining consciousness.
- Student is injured or has diabetes.
- Student has a first-time seizure.
- Student has breathing difficulties.
- Student has a seizure in water
- ★ Notify parent(s)/guardian(s) or emergency contact.

HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

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

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

★ This information may remain on file if there are no changes to the student's medical condition.

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Other Individuals To Be Contacted Regarding Plan Of Care:

Before-School Program ☐ Yes ☐ No _____

After-School Program ☐ Yes ☐ No _____

School Bus Driver/Route # (If Applicable) _____

Other: _____

This plan remains in effect for the 20__ — 20__ school year without change and will be reviewed on or before: _____. (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year).

Parent(s)/Guardian(s): _____ Date: _____
Signature

Student: _____ Date: _____
Signature

Principal: _____ Date: _____
Signature



Durham Catholic District School Board

"The Board"

Policy

No Changes

Title: Anaphylactic Students (Protection of)	Policy #: PO608
Policy Area: Student Conduct and Safety	
Source: Superintendent of Education – Student Services	
Date Approved: February 27, 2006	
Dates of Amendment: May 12, 2014 (Interim); December 8, 2014	

1.0 Introduction

Anaphylaxis is a serious allergic reaction that is rapid in onset and may cause death. While fatalities are rare, when appropriate action is taken and immediate emergency medical assistance is obtained, anaphylaxis must **always** be considered a medical emergency requiring immediate treatment.

Signs and symptoms of a severe allergic reaction can occur within minutes of exposure to an allergen (a substance capable of causing an allergic reaction). In rarer cases, the time frame can vary up to several hours after exposure. The most common allergens include certain foods and insect stings. Less common causes include medications, latex, and exercise.

Symptoms of anaphylaxis generally include one or more of these four body systems: skin, respiratory, gastrointestinal and/or cardiovascular. Breathing difficulties and low blood pressure are the most dangerous symptoms and both can lead to death if untreated. Anaphylaxis is an unpredictable condition as signs and symptoms can vary from one person to the next and from one episode to another in the same person.

Epinephrine is the first line treatment for anaphylaxis. This life-saving medication helps to reverse the symptoms of a severe allergic reaction by opening the airways, improving blood pressure, and increasing the heart rate. It is recommended that epinephrine be given at the start of a known or suspected anaphylactic reaction. In normally healthy individuals, epinephrine will not cause harm if given unnecessarily. There are currently two epinephrine auto-injectors available in Canada: EpiPen® and Allerject™.

There are six key recommendations in the emergency management of anaphylaxis, including:

1. Epinephrine is the first line medication which should be used for the emergency management of a person having a potentially life-threatening allergic reaction.

1.0 **Introduction** (Cont'd)

2. Antihistamines and asthma medications should not be used as first line treatment for an anaphylactic reaction.
3. All individuals receiving emergency epinephrine must be transported to hospital immediately (ideally by ambulance) for evaluation and observation.
4. Additional epinephrine should be available during transport to hospital. A second dose of epinephrine may be administered within 5 to 15 minutes after the first does is given **if** symptoms have not improved.
5. Individuals with anaphylaxis who are feeling faint or dizzy because of impending shock should lie down unless they are vomiting or experiencing severe respiratory distress.
6. No person experiencing anaphylaxis should be expected to be fully responsible for self-administration of an epinephrine auto-injector

Individuals at risk of anaphylaxis are advised to carry an epinephrine auto-injector at all times when age appropriate. Additionally, they should wear medical identification, such as a MedicAlert® bracelet, which clearly identifies their allergy. Regular practice with an auto-injector trainer allows the allergic person and others to become familiar with the administration technique. In the school setting, this applies to all staff who are in regular contact with the student at risk.

Research is underway to better understand anaphylaxis. At present, the severity of reactions cannot be predicted. Therefore, it is not possible to identify which patients are most at risk for severe allergic reactions. Until there is a cure, avoidance of the allergen(s) is the only way to prevent an anaphylactic reaction. Measures can be taken to reduce, but not completely eliminate, the risk of exposure. In the school setting, this requires the cooperation of the school community, including students at risk, their parents or guardians, and school staff. This idea of sharing the responsibility of anaphylaxis management applies to other settings as well.

Anaphylaxis emergency plans can help to create safer environments for allergic individuals. School anaphylaxis plans help to reduce the risk of exposure to allergens and prepare school communities for an emergency situation.

Allergen-free schools are not within the mandate of this policy. Such an undertaking would be difficult to control and provide a false sense of security for those students most needing protection.

The Board, principals, teachers and parents play an important role in providing a safe environment for anaphylactic students. It is essential that all schools are aware of the issues facing students with anaphylaxis, have developed strategies to minimize the risk of an allergic reaction, and are equipped to respond appropriately in the event of an emergency.

Ensuring the safety of anaphylactic students within a school setting is highly dependent on the cooperation of the entire school community. To minimize the risk of exposure to allergens and to respond effectively in the event of an emergency, parents/guardians, students and school personnel must all understand and discharge their responsibilities.

2.0 **Definitions**

An **adult student** is a student who is eighteen years of age or over.

An **anaphylactic student** is a student who is living with anaphylaxis.

Anaphylaxis (pronounced anna-fill-axis) is a serious and possibly life-threatening allergic reaction that requires immediate recognition and intervention. Symptoms can vary from person to person and may include:

- **Skin:** hives, swelling (face, lips, and tongue), itching, warmth, redness
- **Breathing (respiratory):** coughing, wheezing, shortness of breath, chest pain/tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing
- **Stomach (gastrointestinal):** nausea, pain/cramps, vomiting, diarrhea
- **Heart (cardiovascular):** paler than normal/blue skin colour, weak pulse, passing out, dizziness or light-headedness, shock
- **Other:** anxiety, sense of “doom” (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste

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

An **employee** is anyone who is on the Board payroll, except for a Trustee of the Board.

An **EpiPen® and Allerject™ Auto-Injector** is a disposable drug delivery system with a spring-activated, concealed needle. It is designed for emergency self-administration or for administration by an adult to a child to provide rapid, temporary, convenient first-aid to individuals sensitive to a potentially fatal allergic reaction. The EpiPen® is available in two forms, EpiPen® Jr. (0.15 mg) and EpiPen® (0.30 mg), and is prescribed depending on the weight of the individual. EpiPen® Jr. is meant for individuals weighing 15 kg (33 lbs) or less, while any student over 15 kg uses the regular EpiPen®. The Allerject™ is available in two forms, Allerject™ (0.15 mg) and Allerject™ (0.30 mg)

Epinephrine or adrenaline is the drug used in an EpiPen® and Allerject™ Auto-Injector to counteract an anaphylactic reaction.

Immunity – in relation to the Act to protect students diagnosed with Anaphylaxis (Sabrina's Law), immunity means “*no action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee's gross negligence*”.

Plan of Care – is a multi-page form that contains individualized information about a student with a prevalent medical condition.

3.0 **Purpose**

The purpose of this policy is to provide principals, teachers, parents and students with a framework to support students with life-threatening allergies through prevention strategies and/or an appropriate emergency response.

4.0 **Application/Scope**

This policy applies to all employees of the Board who have direct involvement with students and to students who have a known life-threatening allergy or who may exhibit signs of distress that could appear to be such a reaction.

5.0 **Principles**

5.1 The Board believes that:

- 5.1.1 all students have the right to be educated in an environment that is as free as possible of substances that could cause a life-threatening allergic reaction;
- 5.1.2 parents and school staff must work together within the scope and mandate of this policy to implement strategies that minimize the occurrence of life-threatening allergic reaction;
- 5.1.3 while an allergy-free environment cannot be guaranteed, preventative strategies including, but not limited to imposed restrictions can greatly minimize the occurrence of a life-threatening allergic reaction;
- 5.1.4 current and up-to-date information shared by parents, guardians and students is critical to developing a student-specific emergency response to a life-threatening allergic reaction;
- 5.1.5 staff have a duty and responsibility to respond to an anaphylactic reaction that includes, but is not limited to, the administration of medication by an EpiPen® or Allerject™ Auto-Injector and the engagement of paramedical services;

5.2 The Board shall:

- 5.2.1 develop and implement strategies that reduce the risk of exposure to anaphylactic causative agents in classrooms, common school areas and on approved excursions and activities;
- 5.2.2 disseminate as part of a communication plan, information on life-threatening allergies to parents, students and employees of the Board;
- 5.2.3 establish a plan for providing appropriate basic and refresher training to all employees and volunteers who are in direct and regular contact with students that includes recognition and treatment of anaphylaxis, prevention strategies and emergency response procedures, including emergency administration of the EpiPen® or Allerject™ Auto-Injector as required;

5.0 **Principles (cont'd)**

5.2 The Board shall: (cont'd)

- 5.2.4 maintain a log of all training provided under this policy and its attendant administrative procedures that includes the date of the training sessions and the names of all employees and volunteers trained.

5.3 The Director shall:

- 5.3.1 issue administrative procedures to support this policy and to amend them thereafter as the need may arise.

5.4 Principals shall:

- 5.4.1 develop in co-operation with parents/guardians of anaphylactic students and anaphylactic students an individual plan for each student who has a known anaphylactic allergy;
- 5.4.2 request annually from parents/guardians and students up-to-date details of life- threatening allergies;
- 5.4.3 maintain a plan of care for each anaphylactic student that includes current treatment and/or any prescriptions and instructions from the pupil's physician or nurse and a current emergency contact list.

5.5 Parents/Guardians and adult students shall:

- 5.5.1 inform school officials forthwith of any life-threatening allergic condition and ensure that the information in the student's file, including but not limited to the medication that the student is taking is up-to-date and includes signed consent to disclose;
- 5.5.2 pre-authorize the administration of medication in response to an anaphylactic reaction provided that the school has up-to-date treatment medication and any applicable consent from the parent or guardian;
- 5.5.3 co-operate with school staff, after being informed of a life threatening condition, from bringing or sending to school any products, including but not limited to food items which are known to cause an anaphylactic reaction for any student.

5.6 Employees:

- 5.6.1 shall administer an EpiPen® or Allerject™ Auto-Injector or their medication as prescribed to a student whom they believe to be experiencing a life-threatening allergic reaction, provided that the appropriate pre-authorization and signed consent are filed in the student's individual file;

5.0 **Principles (cont'd)**

5.6 Employees: (cont'd)

5.6.2 may administer an EpiPen® or Allerject™ Auto-Injector or their medication as prescribed to a student whom they believe to be experiencing a life-threatening allergic reaction even if there is no pre-authorization;

5.6.3 are immune to action for damages within the limits defined in the attendant legislation:

“No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee’s gross negligence.”

6.0 **Sources**

- Education Act, R.S.O. 1990, Chapter E.2, Section 301(2)
- PPM 161 Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools 2017
- An Act to Protect Anaphylactic Pupils, 2005
- Sampson H. et al. Second Symposium on the Definition and Management of Anaphylaxis: Summary Report – Second National Institute of Allergy and Infectious Disease/Food Allergy and Anaphylaxis Network Symposium Journal of Allergy and Clinical Immunology 2006; 117(2) 391-397.
- Sicherer SH, Simons FE; American Academy of Pediatrics, Section on Allergy and Immunology. Self-injectable Epinephrine for First-Aid Management of Anaphylaxis. Pediatrics 2007; 119: 638-646.
- Lieberman P. et al. The diagnosis and management of anaphylaxis: an updated practice parameter. Journal of Allergy and Clinical Immunology 2005; 115: S483-523.
- Pumphrey RSH. Fatal posture in anaphylactic shock. Journal of Allergy and Clinical Immunology August 2003 (Letters to the Editor).

7.0 **Related Policies and Administrative Procedure**

- Anaphylactic Students (Protection of) (AP608-1)
- Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools (PO601)



Durham Catholic District School

Board "The Board"

Administrative Procedure

No Changes

Title: Anaphylactic Students (Protection of)	Procedure #: AP608-1
Administrative Area:	Student Conduct and Safety
Policy Reference:	Anaphylactic Students (Protection of) (PO608)
Date Approved:	February 27, 2006
Dates of Amendment:	May 12, 2014 (Interim); December 8, 2014

1.0 **Purpose**

The purpose of this administrative procedure is to support the implementation of the Protection of Anaphylactic Students Policy (PO608) and provide a framework for the prevention of anaphylactic reactions and an emergency response to life-threatening allergic reactions.

2.0 **Definitions**

An **adult student** is a student who is eighteen years of age or over. An **anaphylactic student** is a student who is living with anaphylaxis.

Anaphylaxis (pronounced anna-fill-axis) is a serious and possibly life-threatening allergic reaction that requires immediate recognition and intervention. Symptoms can vary from person to person and may include:

- **Skin:** hives, swelling (face, lips, and tongue), itching, warmth, redness
- **Breathing (respiratory):** coughing, wheezing, shortness of breath, chest pain/tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing
- **Stomach (gastrointestinal):** nausea, pain/cramps, vomiting, diarrhea
- **Heart (cardiovascular):** paler than normal/blue skin colour, weak pulse, passing out, dizziness or light-headedness, shock
- **Other:** anxiety, sense of "doom" (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste

2.0 **Definitions** (cont'd)

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

An **employee** is anyone who is on the Board payroll, except for a Trustee of the Board.

An **EpiPen® and Allerject™ Auto-Injector** is a disposable drug delivery system with a spring-activated, concealed needle. It is designed for emergency self-administration or for administration by an adult to a child to provide rapid, temporary, convenient first-aid to individuals sensitive to a potentially fatal allergic reaction. The EpiPen® is available in two forms, EpiPen® Jr. (0.15 mg) and EpiPen® (0.30 mg), and is prescribed depending on the weight of the individual. EpiPen® Jr. is meant for individuals weighing 15 kg (33 lbs) or less, while any student over 15 kg uses the regular EpiPen®. The Allerject™ is available in two forms, Allerject™ (0.15 mg) and Allerject™ (0.30 mg)

Epinephrine or adrenaline is the drug used in an EpiPen® and Allerject™ Auto-Injector to counteract an anaphylactic reaction.

Immunity – in relation to the Act to protect students diagnosed with Anaphylaxis (Sabrina's Law), immunity means "*no action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee's gross negligence*".

Plan of Care – is a multi-page form that contains individualized information about a student with a prevalent medical condition.

3.0 **Procedures**

3.1 The Director shall ensure the development of a communication plan for the dissemination of information with respect to life-threatening allergic reactions, strategies for preventing them and suitable emergency responses includes the availability of critical information on the Board's website.

3.2 Principals shall:

3.2.1 identify all anaphylactic students and make them known to staff as necessary while giving due consideration to the issue of privacy;

3.2.2 collect up-to-date information collected under the Anaphylactic Students (Protection of) Policy (PO608) using the forms supporting this administrative procedure;

3.0 **Procedures** (cont'd)

- 3.2.3 maintain an individual plan (Appendix A) for each student known to have an anaphylactic allergy and ensure that the plan contains:
 - 3.2.3.1 a current emergency contact list;
 - 3.2.3.2 up-to-date medical information including a list of current required medication and appropriate EpiPen® and Allerject™ Auto-Injectors;
 - 3.2.3.3 pre-authorization to administer medications;
 - 3.2.3.4 physician's instructions and a signed reciprocal consent to disclose information with the attending physician;
 - 3.2.3.5 an emergency response plan that includes contingencies for school excursions and activities;
 - 3.2.3.6 parent/guardian or adult student consent to disclose;
 - 3.2.3.7 log of interventions and/or administration of medication;
 - 3.2.3.8 a current photograph of the student
- 3.2.4 complete the allergy alert information on the student management system;
- 3.2.5 review the individual student plan at least yearly prior to the commencement of classes and periodically thereafter as needed;
- 3.2.6 arrange training for the school staff;
- 3.2.7 identify consistent, safe accessible unlocked storage place known to all applicable staff for the EpiPen® and Allerject™ Auto-Injectors;
- 3.2.8 send home a note with all students in class in case of anaphylaxis from food or other agents;
- 3.2.9 ensure all school staff are made aware of and have access to the individual Plans of Care developed under the Anaphylactic Students (Protection of) Policy (PO608) and attendant administrative procedures.
- 3.2.10 inform the school community, all students and all parents/guardians, of the precautions being taken to protect anaphylactic students at the start of each school year and periodically thereafter, and maintain a file of such notification.
- 3.3 Parents/Guardians and adult students shall provide:
 - 3.3.1 specific and detailed information concerning their child's anaphylaxis;
 - 3.3.2 a medic-alert bracelet for their child;
 - 3.3.3 the information required under the Anaphylactic Students (Protection of) Policy (PO608) and its attendant administrative procedures and notify the school of any changes to the student information provided for the individual student plan;

3.0 **Procedures** (cont'd)

- 3.3.4 specific information from a physician regarding the anaphylaxis;
- 3.3.5 physician's instructions for administering medication by EpiPen® or Allerject™ Auto-Injector.
- 3.3.6 up-to-date EpiPen® or Allerject™ Auto-Injectors consisting of a minimum of 2 to address the need to repeat the injection should symptoms not improve or an EpiPen® or Allerject™ Auto-Injector malfunction.
- 3.3.7 the appropriate signed consents to disclose as required under this administrative procedure.
- 3.4 All staff in a school with anaphylactic students shall be in-serviced at the beginning of each school year, on the needs of students with allergic reactions and the use of the EpiPen® or Allerject™ Auto-Injector.
- 3.5 Employees shall attend annually, upon request, the training provided with respect to life-threatening allergic reactions, strategies for preventing them and the appropriate emergency responses.
- 3.6 EpiPen® or Allerject™ Auto-Injectors need to be available in unlocked accessible and secure locations known to all staff including custodians, teachers, educational assistants, secretaries, lunchroom supervisors and others as applicable.
- 3.7 Used EpiPen® or Allerject™ Auto-Injectors shall be disposed in accordance with Board endorsed safety practices.
- 3.8 Where a life-threatening food allergy exists, all attempts must be made to create a safe classroom and lunch area environment. All attempts should be made to keep the allergen(s) out of the student's classroom. Alternate lunch-eating arrangements may be made for students in order to create the safest environment for all.
- 3.9 To ensure a controlled environment, all students should remain in the classroom to eat their snacks and allergens kept out of the classrooms of anaphylactic students.
- 3.10 Staff must ensure that an EpiPen® or Allerject™ Auto-Injector is available to them when any anaphylactic student is on a class trip.
- 3.11 Information about anaphylactic students must be included as part of a teacher's day plan including lesson plans and emergency plans left for supply teachers and/or internal coverage.

4.0 **Sources**

- Education Act, R.S.O. 1990, Chapter E.2
- An Act to Protect Anaphylactic Students, 2005
- Anaphylaxis Canada info@anaphylaxis.ca Resource Information at www.anaphylaxis.ca

5.0 **References**

- Anaphylactic Students (Protection of) (PO608)
- Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools (PO601)

6.0 **Related Forms/Appendices**

- Protection of Anaphylactic Students Individual Student Plan (Form 001)
- Appendix 1 – Anaphylaxis Plan of Care
- Appendix 2 – How to Use EpiPen® and EpiPen Jr.® Auto-Injectors
- Appendix 3 – How to Use Allerject™



I. PREVALENT MEDICAL CONDITION — ANAPHYLAXIS

Plan of Care

STUDENT INFORMATION

Student Name _____ Date Of Birth _____

Ontario Ed. # _____ Age _____

Grade _____ Teacher(s) _____

Student Photo (optional)

EMERGENCY CONTACTS (LIST IN PRIORITY)

NAME	RELATIONSHIP	DAYTIME PHONE	ALTERNATE PHONE
1.			
2.			
3.			

KNOWN LIFE-THREATENING TRIGGERS

CHECK (✓) THE APPROPRIATE BOXES

☐ Food(s): _____ ☐ Insect Stings: _____

☐ Other: _____

Epinephrine Auto-Injector(s) Expiry Date (s): _____

Dosage: ☐ EpiPen® Jr. 0.15 mg ☐ EpiPen® 0.30 mg Location Of Auto-Injector(s): _____

☐ Previous anaphylactic reaction: **Student is at greater risk.**

☐ Has asthma. **Student is at greater risk.** If student is having a reaction and has difficulty breathing, give epinephrine before asthma medication.

☐ Any other medical condition or allergy? _____

DAILY/ROUTINE ANAPHYLAXIS MANAGEMENT

SYMPTOMS

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

- **Skin system:** hives, swelling (face, lips, tongue), itching, warmth, redness.
- **Respiratory system** (breathing): coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing.
- **Gastrointestinal system** (stomach): nausea, vomiting, diarrhea, pain or cramps.
- **Cardiovascular system** (heart): paler than normal skin colour/blue colour, weak pulse, passing out, dizziness or lightheadedness, shock.
- **Other:** anxiety, sense of doom (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste.

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

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

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

Food(s) to be avoided: _____

Safety measures: _____

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

Designated eating area inside school building _____

Safety measures: _____

Other information: _____

EMERGENCY PROCEDURES (DEALING WITH AN ANAPHYLACTIC REACTION)

ACT QUICKLY. THE FIRST SIGNS OF A REACTION CAN BE MILD, BUT SYMPTOMS CAN GET WORSE QUICKLY.

STEPS

1. Give epinephrine auto-injector (e.g. EpiPen®) at the first sign of a known or suspected anaphylactic reaction.
2. Call 9-1-1. Tell them someone is having a life-threatening allergic reaction.
3. Give a second dose of epinephrine as early as five (5) minutes after the first dose if there is no improvement in symptoms.
4. Follow direction of emergency personnel, including transport to hospital (ideally by ambulance), even if symptoms are mild or have stopped. The reaction could worsen or come back, even after treatment. Stay in the hospital for an appropriate period of observation as decided by the emergency department physician (generally about 4 - 6 hours).
5. Call emergency contact person; e.g. Parent(s)/Guardian(s).

HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

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

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

★ This information may remain on file if there are no changes to the student's medical condition.

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Other individuals to be contacted regarding Plan Of Care:

Before-School Program ☐ Yes ☐ No _____

After-School Program ☐ Yes ☐ No _____

School Bus Driver/Route # (If Applicable) _____

Other: _____

This plan remains in effect for the 20__ — 20__ school year without change and will be reviewed on or before: _____. (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year.)

Parent(s)/Guardian(s): _____ Date: _____
Signature

Student: _____ Date: _____
Signature

Principal: _____ Date: _____
Signature

How to use EpiPen® and EpiPen® Jr Auto-injectors.

Remove the EpiPen® Auto-Injector from the carrier tube and follow these 2 simple steps:



- Hold firmly with orange tip pointing downward.
- Remove blue safety cap by pulling straight up. Do not bend or twist.



- Swing and push orange tip firmly into mid-outer thigh until you hear a click.
- Hold on thigh for several seconds.



Built-in needle protection

- When the EpiPen, Auto-injector is removed, the orange needle cover automatically extends to cover the injection needle, ensuring the needle is never exposed.

After administration, patients should seek medical attention immediately or go to the emergency room. For the next 48 hours, patients must stay within dose proximity to a healthcare facility or where they can call 911.

For more information visit EpiPen.ca.

EpiPen™ and EpiPen™ Jr Auto-injectors are indicated for the emergency treatment of anaphylactic reactions in patients who are determined to be at increased risk for anaphylaxis, including individuals with a history of anaphylactic reactions.

The product may not be right for you. Always read and follow the product label.



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E-Pen®, EpiPen® Jr are registered trademarks of a manufacturer licensed exclusively to its wholly owned affiliate
Dey Pharma, LLC of Napa, California. A sub-licensee, Pfizer Canada Inc, Kirkland, Quebec, H9J 2M5
11000041397

EPIPEN.

(Epinéphrine) Auto-Injector 0.1/0.15mg

Trusted for over 25 years.

HOW TO USE ALLERJECT™

Practice With Allerject™ Trainer First

Allerject™ voice assisted auto injectors are indicated for the emergency treatment of anaphylactic reactions in patients who are determined to be at increased risk for anaphylaxis.



1

Pull Allerject™ from the outer case.

Do not go to step 2 until you are ready to use Allerject™. If you are not ready to use, put it back in the outer case.



2

Pull off RED safety guard.

To reduce the chance of an accidental injection, do not touch the black base of the auto-injector, which is where the needle comes out. If an accidental injection happens, get medical help immediately.

NOTE: The safety guard is meant to be tight.

Pull firmly to remove.



3

Place BLACK end AGAINST the MIDDLE of the OUTER thigh (through clothing, if necessary), then press firmly and hold in place for five seconds.

Only inject into the middle of the outer thigh (upper leg). Do not inject into any other location.

NOTE: Allerject™ makes a distinct sound (click and hiss) when you press it against your leg. This is normal and indicates Allerject™ is working correctly.

Seek immediate medical or hospital care.

Replace the outer case and take your used Allerject™ with you to your pharmacist or physician for proper disposal and replacement.

AFTER using Allerject™ seek immediate medical attention

Please consult the Consumer Information leaflet in your product package for complete dosage and administration instructions.

With a severe, long-lasting allergic reaction, you may need to administer an additional dose of epinephrine. More than two sequential doses of epinephrine should only be administered under direct medical supervision.

It is important that you seek immediate medical assistance or go to the emergency room immediately after using Allerject™. Following treatment, the patient must stay within close proximity to a hospital or where they can call 911 for the next 48 hours. To ensure Allerject™ is right for you, always read and follow the label.

How to store Allerject™

Keep your Allerject™ at room temperature. Do not refrigerate. Do not drop. Occasionally inspect your Allerject™ solution through the viewing window. Replace your Allerject™ if it is discolored or contains solid particles (precipitate) or if there are any signs of leakage. The solution should be clear.





Durham Catholic District School

Board "The Board"

Policy

No Changes

Title: Asthma Friendly Schools	Policy #: PO615
Policy Area: Student Conduct and Safety Source: Superintendent of Education – Policy Development Date Approved: March 29, 2016 Dates of Amendment:	

1.0 Introduction

In accordance with Ryan's Law – *Ensuring Asthma Friendly Schools – 2015*, it is the policy of the Durham Catholic District School Board to establish and maintain a policy for students diagnosed with asthma. Additionally, this policy supports PPM161 Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools 2017.

In respecting the dignity and worth of all people and in keeping with Gospel values, the Board believes that the safety of students with a medical condition such as asthma is a shared responsibility of the board, school, family, health care provider and community partners. This policy outlines the board's commitment to students with asthma.

2.0 Definitions

Asthma – as defined by the Ontario Lung Association, is a very common chronic (long-term) lung disease that can make it hard to breathe. People with asthma have sensitive airways that react to triggers. There are many different types of triggers such as, poor air quality, mold, dust, pollen, viral infections, animals, smoke and cold air. The symptoms can cause mild to severe reactions and be fatal.

Common asthma symptoms include:

- Shortness of breath;
- Wheezing (whistling sound from inside the chest);
- Difficulty breathing;
- Chest tightness; and
- Coughing.

2.0 **Definitions** (cont'd)

Emergency Medication – as defined for this policy refers to medication that is administered by a staff member to a student at the time of an asthma exacerbation, for example, a reliever inhaler or stand-by medication. 'Medication' refers to medications that are prescribed by a health care provider and, by necessity, may be administered to a student, or taken by the student during school hours or school related activities.

Immunity – in relation to *The Act to Protect Pupils with Asthma* states that "No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act."

Plan of Care – is a multi-page form that contains individualized information about a student with a prevalent medical condition.

3.0 **Purpose**

The purpose of this policy will be to outline the board's commitment to students with asthma and provide a framework to support administrative procedure dddd-1 Asthma Friendly Schools that provides direction to school staff for providing assistance to students with asthma.

4.0 **Application/Scope**

This policy applies to all employees of the board who have direct involvement with students who have asthma.

5.0 **Principles**

5.1 The Board believes that:

- 5.1.1 all students have the right to be educated in an environment that is as safe as possible and that students who have asthma have access to their medication as needed.
- 5.1.2 current and up-to-date information shared by parents, guardians and students is critical to developing a student-specific emergency response to an asthma emergency.
- 5.1.3 parents and school staff must work together by communicating regularly and at least annually to review the medical needs of students, which includes but is not limited to, how asthma medication is to be accessed and administered in the event of an asthma exacerbation.

6.0 **Requirements**

6.1 The Board shall:

- 6.1.1 ensure that all students have easy access to their prescribed reliever inhaler(s) medications;
- 6.1.2 identify asthma triggers in classrooms, common school areas and in planning field trips and implement strategies to reduce risk of exposure;

6.0 **Requirements** (cont'd)

6.1 The Board shall: (cont'd)

- 6.1.3 establish a communication plan to share information about asthma to parents/guardians, students, employees and include any other person who has direct contact with a student with asthma;
- 6.1.4 provide asthma education and training opportunities about recognizing and preventing asthma triggers, recognizing when symptoms are worsening and managing asthma exacerbations for all employees and others who are in direct contact with students on a regular basis;
- 6.1.5 require that every school principal establish a process to identify students with asthma at time of registration or following diagnosis and gather necessary asthma related information from the parents/guardians and student;
- 6.1.6 require that every school principal develop an individual student asthma plan of care for each student diagnosed with asthma, based on the recommendation of the student's health care provider;
- 6.1.7 require that every school principal maintain a file for each student diagnosed with asthma. The file may contain personal medical information, treatment plans and/or other pertinent information about the student. If that information is obtained with the consent of the student or the parent/guardian, in accordance with applicable legislation, including relevant privacy legislation. This file shall also include current emergency contact information;
- 6.1.8 require that every school principal inform school board personnel and others who are in direct contact on a regular basis with a student with asthma about the contents of the student's asthma plan of care;
- 6.1.9 review asthma policy as part of its regular policy review cycle;
- 6.1.10 include the asthma policy in the board policies posted on the school and board website.

6.2 The Director of Education shall issue administrative procedures to support this policy and to amend them thereafter as the need may arise.

6.3 Principals shall:

- 6.3.1 identify all students diagnosed with asthma and make them known to staff as necessary while giving due consideration to the issue of privacy;
- 6.3.2 collect up-to-date information from parents/guardians related to a child's diagnosis of asthma.
- 6.3.3 maintain an individual plan of care for each student known to have a diagnosis of asthma and ensure that the plan contains:
 - 6.3.3.1 a current emergency contact list;
 - 6.3.3.2 up-to-date medical information including a list of current required medication and appropriate puffer devices;
 - 6.3.3.3 pre-authorization to administer medications;
 - 6.3.3.4 physician's instructions and a signed reciprocal consent to disclose information with the attending physician;

6.0 **Requirements** (cont'd)

6.3 Principals shall: (cont'd)

- 6.3.3.5 an emergency response plan that includes contingencies for school excursions and activities;
- 6.3.3.6 parent/guardian or adult student consent to disclose;
- 6.3.3.7 log of interventions and/or administration of medication;
- 6.3.3.8 a current photograph of the student
- 6.3.3.9 complete the allergy alert information on the student management system;
- 6.3.3.10 review the individual student plan at least yearly prior to the commencement of classes and periodically thereafter as needed;
- 6.3.3.11 arrange training for the school staff on how to administer asthma medication;
- 6.3.3.12 identify consistent, safe accessible unlocked storage place known to all applicable staff for asthma medication;
- 6.3.3.13 send home a note with all students in class in case of anaphylaxis from food or other agents;
- 6.3.3.14 annually send a letter to parents/guardians requesting that they inform the school immediately if their child(ren) have been diagnosed with asthma and accompanying medical/medication information.

6.4 Teachers shall:

- 6.4.1 in the case of an emergency assist with administering asthma medication to students in their care;
- 6.4.1 call 911 or notify the principal or designate to call 911 in the case of a medical emergency;
- 6.4.2 become familiar with all students in their care who have been diagnosed with asthma.
- 6.4.3 monitor the school's health and safety board or area where students who have been diagnosed with asthma have their pictures and medication information displayed;
- 6.4.4 communicate regularly with parents/guardians in their class who have a child diagnosed with asthma for any updates related to the child's medical care or condition;
- 6.4.5 report to the principal or designate of any student who has experienced an asthmatic exacerbation immediately or as soon as possible.

6.5 Parents/Guardians and adult students shall:

- 6.5.1 inform school officials forthwith of any diagnosis of asthma (or known triggers) for their child and ensure that the information in the student's file, including but not limited to the medication that the student is taking, is up-to-date and that consent has been given for their child to carry their asthma medication;
- 6.5.2 pre-authorize the administration of medication in response to an asthma exacerbation provided that the school has up-to-date treatment medication and any applicable consent from the parent or guardian;
- 6.5.3 co-operate with school staff when requests are made for information related to storage of medication, administration of medication and updated medical information.

7.0 **Sources**

- Ryan's Law, 2015 – *Ensuring Asthma Friendly Schools*
- Education Act, s.265 – Duties of Principal
- Regulation 298 s.20 – Duties of Teachers



Durham Catholic District School Board "The
Board"

Administrative Procedure

No Changes

Title: Asthma Friendly Schools	Procedure #: AP615-1
Administrative Area	Student Conduct and Safety
Policy Reference:	Asthma Friendly Schools (PO615)
Date Approved:	March 29, 2016
Dates of Amendment:	

1.0 **Purpose**

The purpose of this Administrative Procedure is to support the Asthma Friendly Schools Policy PO615 by providing a framework for the requirements for staff to support students diagnosed with asthma. Additionally, this administrative procedure supports PPM 161 Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools 2017.

2.0 **Definitions**

Asthma – as defined by the Ontario Lung Association, is a very common chronic (long- term) lung disease that can make it hard to breathe. People with asthma have sensitive airways that react to triggers. There are many different types of triggers such as, poor air quality, mold, dust, pollen, viral infections, animals, smoke and cold air. The symptoms can cause mild to severe reactions and be fatal.

Common asthma symptoms include:

- Shortness of breath;
- Wheezing (whistling sound from inside the chest);
- Difficulty breathing;
- Chest tightness; and
- Coughing.

Emergency Medication – as defined for this administrative procedure refers to medication that is administered by a staff member to a student at the time of an asthma exacerbation, for example, a reliever inhaler or stand-by medication. 'Medication' refers to medications that are prescribed by a health care provider and, by necessity, may be administered to a student, or taken by the student during school hours or school related activities.

2.0 **Definitions** (cont'd)

Immunity – in relation to *The Act to Protect Pupils with Asthma* states that “No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act.”

Plan of Care – is a multi-page form that contains individualized information about a students with a prevalent medical condition.

3.0 **Procedures**

3.1 The Board shall:

- 3.1.1 ensure that all students have easy access to their prescribed reliever inhaler(s) medications;
- 3.1.2 identify asthma triggers in classrooms, common school areas and in planning field trips and implement strategies to reduce risk of exposure;
- 3.1.3 establish a communication plan to share information about asthma to parents/guardians, students, employees and include any other person who has direct contact with a student with asthma;
- 3.1.4 provide asthma education and training opportunities about recognizing and preventing asthma triggers, recognizing when symptoms are worsening and managing asthma exacerbations for all employees and others who are in direct contact with students on a regular basis;
- 3.1.5 require that every school principal establish a process to identify students with asthma at time of registration or following diagnosis and gather necessary asthma related information from the parents/guardians and student;
- 3.1.6 require that every school principal develop an individual student asthma plan of care for each student diagnosed with asthma, based on the recommendation of the student's health care provider;
- 3.1.7 require that every school principal maintain a file for each student diagnosed with asthma. The file may contain personal medical information, treatment plans and/or other pertinent information about the student. If that information is obtained with the consent of the student or the parent/guardian, in accordance with applicable legislation, including relevant privacy legislation. This file shall also include current emergency contact information;
- 3.1.8 require that every school principal inform school board personnel and others who are in direct contact on a regular basis with a student with asthma about the contents of the student's asthma plan of care;
- 3.1.9 review asthma policy as part of its regular policy review cycle;
- 3.1.10 include the asthma policy in the board policies posted on the school and board website.

3.2 Principals shall:

- 3.2.1 identify all students diagnosed with asthma and make them known to staff as necessary while giving due consideration to the issue of privacy;
- 3.2.2 collect up-to-date information from parents/guardians related to a child's diagnosis of asthma.

3.0 **Procedures** (cont'd)

3.2 Principals shall: (cont'd)

- 3.2.3 maintain an individual plan for each student known to have a diagnosis of asthma and ensure that the plan contains:
 - 3.2.3.1 a current emergency contact list;
 - 3.2.3.2 up-to-date medical information including a list of current required medication and appropriate puffer devices;
 - 3.2.3.3 pre-authorization to administer medications;
 - 3.2.3.4 physician's instructions and a signed reciprocal consent to disclose information with the attending physician;
 - 3.2.3.5 an emergency response plan that includes contingencies for school excursions and activities;
 - 3.2.3.6 parent/guardian or adult student consent to disclose;
 - 3.2.3.7 log of interventions and/or administration of medication;
 - 3.2.3.8 a current photograph of the student
 - 3.2.3.9 complete the allergy alert information on the student management system;
 - 3.2.3.10 review the individual student plan at least yearly prior to the commencement of classes and periodically thereafter as needed;
 - 3.2.3.11 arrange training for the school staff on how to administer asthma medication;
 - 3.2.3.12 identify consistent, safe accessible unlocked storage place known to all applicable staff for asthma medication;
 - 3.2.3.13 send home a note with all students in class in case of anaphylaxis from food or other agents;
 - 3.2.3.14 annually send a letter to parents/guardians requesting that they inform the school immediately if their child(ren) have been diagnosed with asthma and accompanying medical/medication information.

3.3 Teachers shall:

- 3.3.1 in the case of an emergency assist with administering asthma medication to students in their care;
- 3.3.2 call 911 or notify the principal or designate to call 911 in the case of a medical emergency;
- 3.3.3 become familiar with all students in their care who have been diagnosed with asthma.
- 3.3.4 monitor the school's health and safety board or area where students who have been diagnosed with asthma have their pictures and medication information displayed;
- 3.3.5 communicate regularly with parents/guardians in their class who have a child diagnosed with asthma for any updates related to the child's medical care or condition;
- 3.3.6 report to the principal or designate of any student who has experienced an asthmatic exacerbation immediately or as soon as possible;
- 3.3.7 sign off an annually policy and procedure review form that includes the Asthma Friendly Schools policy and procedure.

3.4 Parents/Guardians and adult students shall:

- 3.4.1 inform school officials forthwith of any diagnosis of asthma (or known triggers)
- 3.4.2 for their child and ensure that the information in the student's file, including but not limited to the medication that the student is taking, is up- to-date and that consent has been given for their child to carry their asthma medication;

3.0 **Procedures** (cont'd)

3.4 Parents/Guardians and adult students shall: (cont'd)

- 3.4.3 pre-authorize the administration of medication in response to an asthma exacerbation provided that the school has up-to-date treatment medication and any applicable consent from the parent or guardian;
- 3.4.4 co-operate with school staff when requests are made for information related to storage of medication, administration of medication and updated medical information.

4.0 **Sources**

- Ryan's Law, 2015 – *Ensuring Asthma Friendly Schools*
- Education Act, s.265 – Duties of Principal
- Regulation 298 s.20 – Duties of Teachers

5.0 **Related Policies and Appendices**

- Appendix 1 – Prevalent Medical Condition – Asthma Plan of Care
- Asthma Friendly Schools Policy (PO615)
- Administration of Oral Medication Policy (PO609)
- Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools (PO601)



II. PREVALENT MEDICAL CONDITION — ASTHMA

Plan of Care

STUDENT INFORMATION

Student Name _____ Date Of Birth _____

Ontario Ed. # _____ Age _____

Grade _____ Teacher(s) _____

Student Photo (optional)

EMERGENCY CONTACTS (LIST IN PRIORITY)

NAME	RELATIONSHIP	DAYTIME PHONE	ALTERNATE PHONE
1.			
2.			
3.			

KNOWN ASTHMA TRIGGERS

CHECK (✓) ALL THOSE THAT APPLY

<input type="checkbox"/> Colds/Flu/Illness	<input type="checkbox"/> Change In Weather	<input type="checkbox"/> Pet Dander	<input type="checkbox"/> Strong Smells
<input type="checkbox"/> Smoke (e.g., tobacco, fire, cannabis, second-hand smoke)	<input type="checkbox"/> Mould	<input type="checkbox"/> Dust	<input type="checkbox"/> Cold Weather
<input type="checkbox"/> Pollen	<input type="checkbox"/> Other (Specify) _____		
<input type="checkbox"/> Physical Activity/Exercise			
<input type="checkbox"/> At Risk For Anaphylaxis (Specify Allergen) _____			
<input type="checkbox"/> Asthma Trigger Avoidance Instructions: _____			
<input type="checkbox"/> Any Other Medical Condition Or Allergy? _____			

DAILY/ ROUTINE ASTHMA MANAGEMENT

RELIEVER INHALER USE AT SCHOOL AND DURING SCHOOL-RELATED ACTIVITIES

A reliever inhaler is a fast-acting medication (usually blue in colour) that is used when someone is having asthma symptoms. The reliever inhaler should be used:

- ☐ When student is experiencing asthma symptoms (e.g., trouble breathing, coughing, wheezing).
- ☐ Other (explain):

Use reliever inhaler _____ in the dose of _____
(Name of Medication) (Number of Puffs)

Spacer (valved holding chamber) provided? ☐ Yes ☐ No

Place a (✓) check mark beside the type of reliever inhaler that the student uses:

- ☐
- Airomir
- ☐
- Ventolin
- ☐
- Bricanyl
- ☐
- Other (Specify) _____

- ☐ Student requires assistance to **access** reliever inhaler. Inhaler must be **readily accessible**.

Reliever inhaler is kept:

- ☐ With _____ – location: _____ Other Location: _____
☐ In locker # _____ Locker Combination: _____

- ☐ Student **will carry** their reliever inhaler **at all times** including during recess, gym, outdoor and off-site activities.

Reliever inhaler is kept in the student's:

- ☐ Pocket ☐ Backpack/fanny Pack
- ☐ Case/pouch ☐ Other (specify):

Does student require assistance to **administer** reliever inhaler? ☐ Yes ☐ No

- ☐ Student's **spare** reliever inhaler is kept:

- ☐ In main office (specify location): _____ Other Location: _____
☐ In locker #: _____ Locker Combination: _____

CONTROLLER MEDICATION USE AT SCHOOL AND DURING SCHOOL-RELATED ACTIVITES

Controller medications are taken regularly every day to control asthma. Usually, they are taken in the morning and at night, so generally not taken at school (unless the student will be participating in an overnight activity).

Use/administer _____ In the dose of _____ At the following times: _____
(Name of Medication)

Use/administer _____ In the dose of _____ At the following times: _____
(Name of Medication)

Use/administer _____ In the dose of _____ At the following times: _____
(Name of Medication)

EMERGENCY PROCEDURES

IF ANY OF THE FOLLOWING OCCUR:

- Continuous coughing
- Trouble breathing
- Chest tightness
- Wheezing (whistling sound in chest)

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

TAKE ACTION:

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

STEP 2: Check symptoms. Only return to normal activity when all symptoms are gone. If symptoms get worse or do not improve within 10 minutes, this is an **EMERGENCY!** Follow steps below.

IF ANY OF THE FOLLOWING OCCUR:

- Breathing is difficult and fast
- Cannot speak in full sentences
- Lips or nail beds are blue or grey
- Skin or neck or chest sucked in with each breath

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

THIS IS AN EMERGENCY:

STEP 1: IMMEDIATELY USE ANY FAST-ACTING RELIEVER (USUALLY A BLUE INHALER). USE A SPACER IF PROVIDED.

Call 9-1-1 for an ambulance. Follow 9-1-1 communication protocol with emergency responders.

STEP 2: If symptoms continue, use reliever inhaler every 5-15 minutes until medical attention arrives.

While waiting for medical help to arrive:

- ✓ Have student sit up with arms resting on a table (do not have student lie down unless it is an anaphylactic reaction).
- ✓ Do not have the student breathe into a bag.
- ✓ Stay calm, reassure the student and stay by his/her side.
- ✓ Notify parent(s)/guardian(s) or emergency contact.

HEALTHCARE PROVIDER INFORMATION (OPTIONAL)

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

Healthcare Provider's Name: _____

Profession/Role: _____

Signature: _____ Date: _____

Special Instructions/Notes/Prescription Labels:

If medication is prescribed, please include dosage, frequency and method of administration, dates for which the authorization to administer applies, and possible side effects.

★ This information may remain on file if there are no changes to the student's medical condition.

AUTHORIZATION/PLAN REVIEW

INDIVIDUALS WITH WHOM THIS PLAN OF CARE IS TO BE SHARED

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Other Individuals To Be Contacted Regarding Plan Of Care:

Before-School Program ☐ Yes ☐ No _____

After-School Program ☐ Yes ☐ No _____

School Bus Driver/Route # (If Applicable) _____

Other: _____

This plan remains in effect for the 20__— 20__ school year without change and will be reviewed on or before: _____. (It is the parent(s)/guardian(s) responsibility to notify the principal if there is a need to change the plan of care during the school year).

Parent(s)/Guardian(s): _____ Date: _____
Signature

Student: _____ Date: _____
Signature

Principal: _____ Date: _____
Signature



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: Unnamed North Oshawa Catholic Elementary School Boundary Report

Origin: Bob Camozzi, Superintendent of Education, Facilities Services
Rosemary Leclair, Superintendent of Education, Family of Schools
Lewis Morgulis, Manager of Planning, Admissions & Partnerships

RECOMMENDATIONS

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receives, for information the Unnamed North Oshawa Catholic Elementary School Boundary Report dated April 23, 2018."

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board approves the proposed boundary revisions for Father Joseph Venini Catholic School and the New Unnamed North Oshawa Catholic Elementary School outlined in the report dated April 23, 2018."

RATIONALE

On February 26, 2018 the Board of Trustees approved "In Principle" the boundaries for the New Unnamed North Oshawa Catholic School and Father Joseph Venini Catholic School. This report summarizes the public consultation that has taken place with respect to the boundaries and recommends that the Board of Trustees approve the boundary for the New Unnamed North Oshawa Catholic School which is scheduled to open for September 2019.

To: Board of Trustees

Page 2

Re: Unnamed North Oshawa Catholic Elementary School Boundary Report

Date: April 23, 2018

Boundary Policy

In accordance with Board Policy PO-415 School Boundary, a proposed school boundary is developed for each Catholic Elementary and Secondary School located within the Board's jurisdiction. The development of boundaries is undertaken to create neighbourhood or community schools. The boundary of each school should be of a sufficient size to sustain the long-term operation of the school at a full or near full capacity level.

Staff is required, through Policy, to report to the Board of Trustees with respect to the proposed boundaries. The Board of Trustees approves "In Principle" so that when the community consultation process commences, the affected schools will have a draft set of boundaries to work from and provide comments on.

Following the meetings with the affected communities, and based on input from these communities, a final report on the proposed set boundaries is brought to the Board of Trustees for approval.

Boundary Review Process

1. Staff develop draft boundaries for review by Administrative Council;
2. The draft boundaries are brought forward to Trustees for Approval "In Principle";
3. Staff are directed to meet with the affected school communities to present the approved "In Principle" boundaries and receive public input;
4. Staff review all input and present the proposed final boundaries to the Board of Trustees for approval;
5. The Board of Trustees provides final approval to the boundaries;
6. Staff communicates the approved boundaries to all affected parents and guardians of students living within the school boundaries and communicate all changes to attendance.

ANALYSIS

Public Consultation

The Board scheduled a series of three public open houses at Father Joseph Venini Catholic School to explain the boundary policy, the recommended boundary option which was approved "In Principle", and to receive public input regarding the boundaries and any issues related to implementation. The meetings were held on the following dates at the school:

- Tuesday March 20, 2018; 7-9 pm
- Thursday March 22, 2018; 7-9 pm
- Wednesday March 28, 2018 7-9 pm

To: Board of Trustees

Page 3

Re: Unnamed North Oshawa Catholic Elementary School Boundary Report

Date: April 23, 2018

Summary of Public Input

In total 28 persons plus Board staff attended the three public open houses to receive the information from staff, ask questions, and provide input into the boundary process. Two persons provided email responses to Board staff regarding the proposed boundary and any issues related to implementation.

Overall, there was unanimous support for the recommended boundary option and for keeping the existing school population together once the new school opens. Amongst the concerns raised for the new school was to maintain the same starting time as the Father Joseph Venini Catholic School and to keep the existing staff at the school when it opens. Appendix 2 contains a complete summary of the parents input received from all 3 public open houses.

Recommended Boundary

Staff recommends that the boundary for the Unnamed North Oshawa Catholic School be the same as the boundary for Father Joseph Venini Catholic School. Appendix 1 contains the map of the recommended boundary for the unnamed North Oshawa Catholic School.

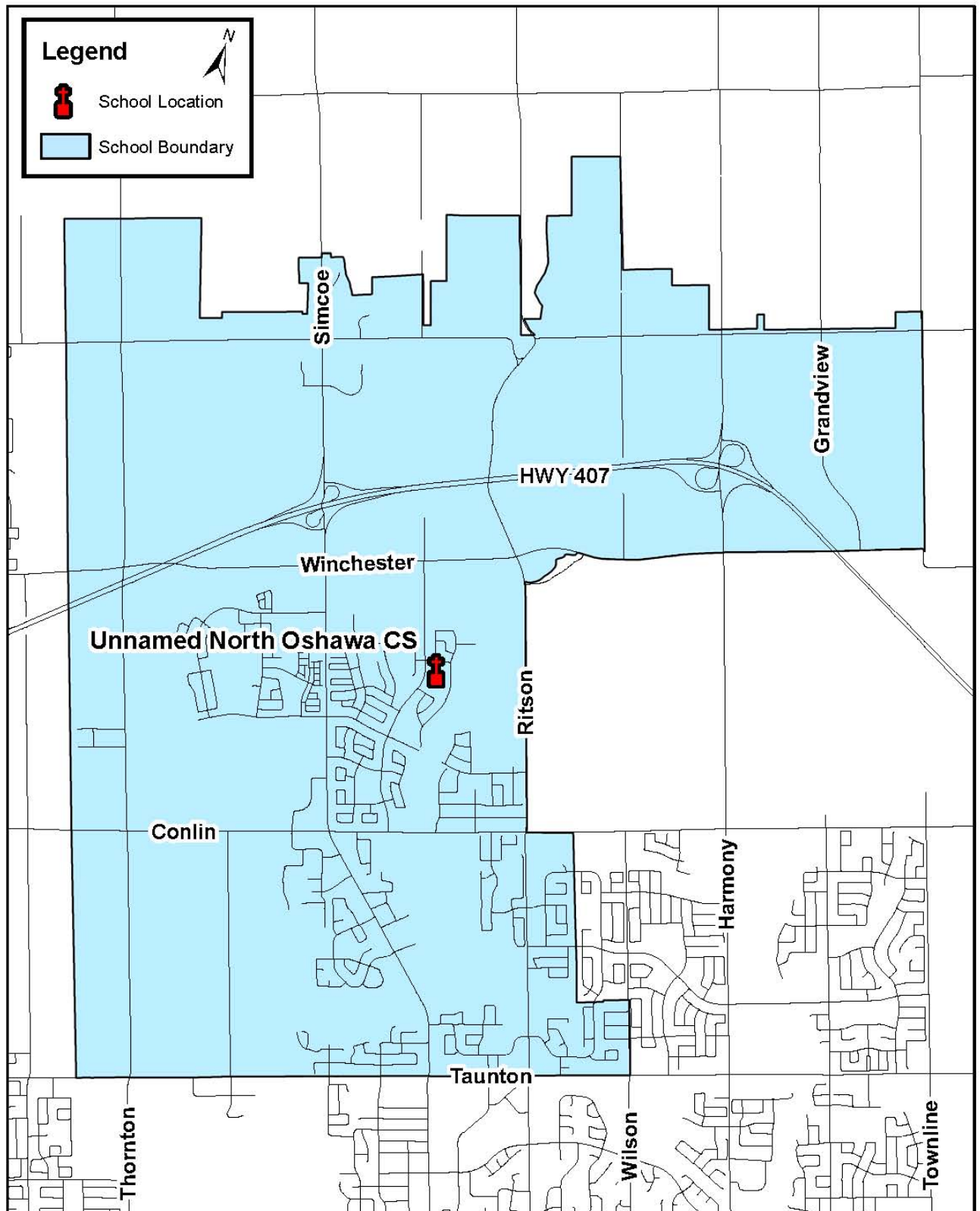
Implementation

Once the new school opens in September 2019, the Board may wish to close the existing Father Joseph Venini Catholic School, and may do so without the requirement for an Accommodation Review as it meets the test for an exemption from the Pupil Accommodation Review Guidelines and the Board's Policy.

NEXT STEPS

Following approval by the Board of Trustees, staff will update all relevant information sources and web sites for the new school boundary and location.

APPENDIX 1: FINAL RECOMMENDED SCHOOL BOUNDARY



APPENDIX 2: PUBLIC INPUT

Feedback Form

On Mar 20, 2018

Monika Bluck:

Main concern is "splitting the kids up". Hoping all the students can be moved to the new school.

Daniela Brown:

I am truly appreciative that all the same staff will be attending the new school. The staff here at Father Joseph Venini are amazing. I can't express how wonderful everyone are. Not only the teachers, secretary, Principal & janitors are friendly & go above & beyond their duties. Amazing staff! I would like to keep Option 1.

I would prefer the name of the school to stay the same.

Shannon Johnston:

I would like to support the Option 1, where the kids all stay together. I wholeheartedly love Father Venini and the "lift and shift" option is preferred

Michelle Rodriquez

Bob was going to investigate the boundaries for the Church to include the Kedron (Avalon) Area as well as Winchester and West of Simcoe (new area).

We are very pleased with the new school design and including the boundaries for all current Venini students.

Teresa Smaglinski:

I think that the proposed boundary is the best choice so all the kids and teachers stay together and it would be a much easier transition for the kids.

Tina Thiessen:

The boundaries outlined at the meeting look good to me. Moving all the kids and staff is the best option. All looks good to me.

Adriana Trakos:

*I'm really happy to hear that the staff will all be remaining the same and moving to the new school along with all the children so that the children get to keep their friends and teachers especially since my 4 year old just getting started making friends and is just getting used to different teachers in her class. I feel it would be safer for the little ones to be able take a bus no matter the radius because when walking during all our cold months in snowsuits, its not the easiest for them.
Also we really support in keeping Option 1 in keeping all the staff and students together.*

Sabrina Wilson:

Keeping our students together with the staff they are use to.

Email:

On Mar 21, 2018, at 5:12 PM, Sara C wrote:

My son attends Father Joseph Venini school. We live in the Glovers road area in the boundary map. I feel that the boundry should be left the same. I would like my son to attend the new school. I dont think it's worth changing the boundary to send the approximately 66 students in the Glovers road area to the John Bosco school. Neither John Bosco nor the new unnamed school will be in walking distance so either way students from this area will be bused or driven. From the information given John Bosco school is already at a higher student capacity then the new school will be. The Glovers road area is not in development so the approximate number of 66 students will not dramatically increase therefore I don't see it making a strain on the school student capacity. I don't think it's worth separating those 66 children in that area from their friends and teachers and I think the boundary should stay the same.

Thanks,

Sara Chapieski

Feedback Form

On Mar 22, 2018

Iwona Maciejewski:

In my opinion, I prefer all students from Father Venini would be moved to the new school. If you can please keep the same hours of school.

Zenaida M. Travis:

- *I prefer that all students and teachers from Father Venini be sent to the new school so that they do not have to adjust with classmates and teachers.*
- *Keep the new school in the same parish as St. Joseph the Worker, Oshawa.*
- *Keep the school hours the same*
- *please keep the same school boundaries*

Jennifer Toutant:

- *All students move together*
- *Keep Father Venini school name*
- *Current teachers move with students*
- *Like the Kiss'n'Ride idea for parent drop off*

Julie Ellis

We would like to keep the same start time as we currently have at Father Venini. We fully support the suggested boundary which moves the whole school population the new school.

Feedback Form

On Mar 28, 2018

Stacey McCarthy

Please keep the boundary – my oldest is going to be entering his grade 8 year and has spent his years with the same children and would like to graduate with his peers. We have 2 other children in the school as well – will be in grade 2 & 3 – have also developed important friendships and enjoy the school and staff. We would like to keep the same start time – 8:45 a.m. – the earlier start times are difficult as the children like not having to wake up until 7 a.m. We love our staff here and feel very grateful they can come to the new school.

C. Stokes

Thank you very much for all of the information. School boundaries as proposed seem well thought out. All children being able to go to the new school together, will continue with the school community. My daughter is happy to know that she will be a walking student.

Subin Vasu

Children would like to go to new school rather than St. John Bosco School.

Date: March 28, 2018 at 8:13:41 PM EDT

To: planning@dcdsb.ca

Subject: Concerns on the "Board Report - Unnamed North Oshawa Catholic Elementary School"

Hi,

My name is Zenaida Travis, a parent of three children at Father Joseph Venini Catholic school and one of the families who will be directly impacted by the Board's decision to close the school and open a New Unnamed North Oshawa Catholic Elementary School. We are just 2 minutes walk from Father Joseph Venini Catholic School.

Based on the "Board Report – Unnamed North Oshawa Catholic Elementary School," I understand why the board decides to close Father Joseph Venini Catholic School but I plead that the school boundaries, faculty and staff and all the students, and the school hours be kept as is. Keeping the school boundaries will keep us at the same parish which we are involved in, will keep my children studying together with the friends they have developed since Junior Kindergarten, and give the children the opportunity to enjoy a new school environment.

To begin with, our location is directly under St. Joseph the Worker Parish boundaries and we are registered members of the parish. We volunteer every summer for the Parish's summer program, Totus Tuus. Additionally my children already established a rapport with our Parish Priest, Fr. Eric Mah. Likewise, any events at Father Venini Catholic school that involves being at the church makes it possible for me to volunteer whenever I can. Busing my kids to the new school is my concern. I would like to suggest that the bus pick-up and drop off be at the front of Father Joseph Venini Catholic School since it will be easily accessible. Secondly, all the students have developed friendships and will be easier for them to proceed studying in the same school hours, with the same classmates and friends as well as teachers, and not worry about adjusting and fitting in in a different school. Lastly, since the announcement of closing Father Venini Catholic School and opening of the new school, my children have been very excited to go to the New Unnamed Catholic Elementary School. They wanted to see and use the new facilities, the new school environment, and the ability to graduate together with their friends. To sum it up, I strongly recommend that the School Board approve moving the whole school community – faculty, staff, and students, keeping the school hours, as well as keeping the school boundaries as is.

Please do not deny my children as well as the other children in this area near Father Joseph Venini Catholic School the experience of being in the new school with their friends and teachers.

Here's looking forward to being in the same school community.

Best regards,

Zenaida Travis



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **Annual Facility Partnership Opportunities**

Origin: Bob Camozzi, Superintendent of Education, Facilities Services
Rosemary Leclair, Superintendent of Education
Lewis Morgulis, Manager of Planning, Admissions and Partnerships
Claudia Henry, Supervisor, Community Use of Schools and Partnerships

RECOMMENDATIONS

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive as information the Annual Facility Partnership Opportunities report dated April 23, 2018."

RATIONALE

Background

In accordance with Board Policy PO-435 Community Planning and Partnerships Policy, the Board is required to determine a final list of schools that have suitable space available for partnership opportunities and communicate it to the public.

Developing cooperative and collaborative facility partnerships enables the Board to reduce facility costs and improve educational opportunities for students. Partnerships can also foster greater ties to the community and represents an important part of the Province's strategy regarding community hubs.

The Board's Partnership opportunities involve co-building new facilities, leasing and licensing existing unused spaces, and the development of joint use agreements to use portions of existing schools and administrative facilities during school hours. The Board has been receptive to sharing facilities for the use of unoccupied space in existing schools and administration facilities where the partnerships are appropriate for the school setting and where it enhances student achievement.

To: Board of Trustees
Re: Annual Facility Partnership Opportunities Report
Date: April 23, 2018

This report summarizes the list of schools that should be circulated for potential partnership in accordance with the Durham Catholic District School Community Planning and Partnerships Policy PO-435 and associated Administrative Procedures AP-435-1, and reports on both new and existing facility partnerships.

Criteria for Selection

In accordance with Administrative Procedures AP-435-1 schools are to be considered for potential partnership when they meet one or more criteria listed within the procedure. The criteria for consideration includes:

- long term enrolment projections which allow for a portion of the building to remain unused or underutilized;
- all schools with a projection of 200 or more excess pupil places or 60% or less utilization for at least two (2) years from the start of the partnership;
- other schools where a portion of the building remains unused or underutilized;
- space is not required for Board programming or other uses;
- ability to identify and create a distinct and contiguous space within the facility;
- facility is not located within an area identified for a possible accommodation review within three (3) years from the time the space is identified as available;
- appropriate access to the space;
- parking availability;
- facility condition;
- zoning restrictions.

Schools Considered

Staff reviewed the enrolment projection and facility utilization data for all elementary and secondary schools from 2018 to 2022 using the Boards Accommodation Utilization Report dated December 18, 2017 to determine if there were schools which would meet the enrolment criteria for consideration.

Based on the criteria contained within the revised procedure, the following schools have underutilized spaces within the school that may be considered for the development of a facility partnership in available surplus space:

1. Holy Family Catholic School - Up to 4 rooms
2. St. Bridget Catholic School – Up to 5 rooms
3. St. Francis de Sales Catholic School – Up to 2 rooms
4. St. Luke the Evangelist Catholic School – 2 rooms
5. St. Paul Catholic School – 2 rooms

To: Board of Trustees
 Re: Annual Facility Partnership Opportunities Report
 Date: April 23, 2018

Co-build Opportunities

The Boards Community Planning and Partnership Policy contemplates the ability of the Board to jointly build facilities with other agencies that are complimentary in nature.

The Unnamed North Oshawa Catholic School was approved for design and construction by the Ministry of Education in 2016 and contains both a Child Care Centre and an Early ON Centre within its design. This school will commence construction in the Spring of 2018 and is anticipated to open for September 2019.

The replacement of St. Marguerite D'Youville Catholic School was approved in January 2018 and includes the replacement of the Child Care spaces and the existing Early ON centre. This project will start design in 2018 with replacement to be completed by September 2020.

In addition to the Unnamed North Oshawa Catholic School project identified above, the Board is seeking potential co-build partners for all of the following school construction projects:

1. Monsignor Paul Dwyer Catholic High School Replacement - Oshawa
2. Unnamed Brooklin Catholic Secondary School – Brooklin
3. Unnamed Seaton #1 Catholic Elementary School - Pickering

Existing Partnerships

In September 2017 the Board and the Community Innovation Lab opened a community hub located in 4 former classrooms at Monsignor Paul Dwyer Catholic High School. The community hub is aimed at providing entrepreneurship and training programs to at risk youth and women's groups.

The Board has continued to expand partnerships for space use with a range of agencies and organizations. The current list of partners includes the following:

- All Saints Catholic Secondary School partnership with Gladiators Basketball for the use of one portable;
- Archbishop Denis O'Connor Catholic High School partnership for the use of Town of Ajax fields and school facilities;
- Archbishop Denis O'Connor Catholic High School partnership with Durham City Basketball for the use of one portable;
- Archbishop Denis O'Connor Catholic High School partnership with Flying Angels Track and Field Club for the use of one portable;
- Giffard Centre partnership with the Participation House – Durham Region for use of the gym and one classroom;
- Holy Family Catholic School partnership with Brock Community Health Care to use the former child care space;

To: Board of Trustees
Re: Annual Facility Partnership Opportunities Report
Date: April 23, 2018

- Monsignor John Pereyma Catholic Secondary School partnership with Durham College for joint use of Technological Education space;
- Monsignor Paul Dwyer Catholic High School partnership with the Oshawa Kicks Soccer Club for the use of fields;
- St. Mary Catholic High School partnership for the use of City of Pickering fields and school facilities;

The Board has recently received funding to expand Child Care Centres in the following schools:

- Good Shepherd Catholic School a total of four new infant, toddler and pre-school rooms for the YMCA Child Care;
- Monsignor Philip Coffey Catholic School a total of five new infant, toddler and pre-school rooms for Waterview Child Care;
- Sir Albert Love Catholic School a two room Early ON Centre is nearing completion;
- St. John Paul II Catholic School a new Early ON program in one room;
- St. Teresa of Calcutta Catholic School a total of four new infant, toddler and pre-school rooms for PRYDE Learning Centres;
- St. Theresa Catholic School a total of two new rooms for its child care centre operated by Fairy Glen Daycare;

PUBLIC MEETING

In accordance with Policy and Administrative Procedure PO-435 and AP-435-1 a public meeting is planned for Wednesday June 13, 2018 which will address the available locations for potential facility partnerships in existing space and co-builds.

At the meeting staff will outline the requirements of the Policy and Administrative Procedure with respect to Facility Partnerships and provide a list of the potential partnership sites to the attendees.

NEXT STEPS

Subsequent to the public meeting, it is intended that staff would review any potential partnership applications in accordance with the Policy and Administrative Procedure and return to the Durham Catholic District School Board for further direction.



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **Long Term Accommodation Plan 2018-2022 Update**

Origin: Bob Camozzi, Superintendent of Education, Facilities Services
Lewis Morgulis, Manager of Planning, Admissions & Partnerships

RECOMMENDATIONS

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive as information the report entitled Long Term Accommodation Plan 2018-2022 Update dated April 23, 2018."

Moved by _____, seconded by _____

RATIONALE

Overview

On January 22, 2018 the Board of Trustees received the Long Term Accommodation Plan 2018-2022 (LTAP) report. This report provides information to the Board of Trustees that summarizes the status of the projects identified in the LTAP and any actions taken to date.

SUMMARY OF PROPOSED ACTIONS BY YEAR

2018

1. Open the new Arts and Media Program (AMP) at All Saints Catholic Secondary School for grades 7-12 (now under construction);
2. Open the new St. Leo Catholic School Child Care Centre (now under construction);
3. Open the new St. John Paul II Catholic School Early On Centre;

To: Board of Trustees

Page 2 of 4

Re: **Long Term Accommodation Plan 2018 to 2022 Update**

Date: April 23, 2018

4. Open the expanded Early On Centre at Sir Albert Love Catholic School;
5. Open the expanded Child Care centre at St. Elizabeth Seton Catholic School;
6. Open the expanded Child Care centre at St. Joseph Catholic School – Uxbridge (now under construction);
7. Determine the boundaries for the new Unnamed North Oshawa Catholic Elementary School;
8. Purchase the Unnamed North Oshawa Catholic Secondary School site subject to Ministry approval;
9. Purchase the Unnamed Seaton #1 Catholic Elementary School site in Pickering;
10. Purchase the Unnamed Seaton Catholic Secondary School site in Pickering;
11. Review potential locations for additional single track French Immersion programs;
12. Examine potential locations for a regional outdoor education centre;

2019

1. Open a new Child Centre at Good Shepherd Catholic School (approved by Ministry in January 2018);
2. Open a new Child Care Centre at St. Teresa of Calcutta Catholic School (approved by Ministry in January 2018);
3. Open a new Child Care Centre at Monsignor Philip Coffey Catholic School (approved by Ministry in January 2018);
4. Open a new Child Care and Family Centre at the Oshawa Continuing Education site at 850 King Street West (approved by the Region of Durham in March 2018);
5. Open expanded Child Care Centre at St. Theresa Catholic School (approved by Ministry in January 2018);

SUMMARY OF ACTIONS TO DATE

Open the new Arts and Media Program (AMP) at All Saints Catholic Secondary School for grades 7-12 (now under construction);

The renovation project was awarded to QuadPro Construction and demolition and construction started on site in December 2017. Renewal in all of the academic spaces is well underway and the project remains on track for a September 2018 completion.

To: Board of Trustees

Page 3 of 4

Re: **Long Term Accommodation Plan 2018 to 2022 Update**

Date: April 23, 2018

Open the new St. Leo Catholic School Child Care Centre (now under construction);

The tender for construction closed on February 12, 2018 and was awarded to Gerr Construction Limited. Mobilization on site took place on March 8, 2018 and demolition was completed during the March break. The project remains on track for a September 2018 opening.

Open the new St. John Paul II Catholic School Early On Centre;

The Early On centre has opened at St. John Paul II Catholic School in existing vacant classroom space. Minor renovations will be undertaken during the summer of 2018 to improve the existing space.

Open the expanded Early On Centre at Sir Albert Love Catholic School

The renovation project was tendered in the Fall of 2017 and started in December 2017. Seaforth Building Group is finishing site deficiencies and the centre will be available for occupancy by May.

Open the expanded Child Care centre at St. Elizabeth Seton Catholic School

The renovation project was tendered in the Fall of 2017 and started in December 2017. Snyder Construction is completing construction deficiencies on site. Licensing will take place in May allowing the site to open for September 2018.

Open the expanded Child Care centre at St. Joseph Catholic School - Uxbridge;

The tender for construction closed on February 7, 2018 and was awarded to Seaforth Building Group. Mobilization on site took place on March 8, 2018 and demolition was completed during March break. The project remains on track for licensing and completion by September 2018.

Determine the boundaries for the new Unnamed North Oshawa Catholic Elementary School;

The proposed boundaries for the new Unnamed North Oshawa Catholic Elementary School were approved "In Principle" at the February 2018 meeting of the Board of Trustees. Following a public consultation process staff prepared a separate report to the Board of Trustees which is included in this month's agenda.

Purchase the Unnamed North Oshawa Catholic Secondary School site subject to Ministry approval;

This requirement will have to be addressed in 2019 or later as the Ministry did not approve the replacement of Monsignor Paul Dwyer Catholic High School. In addition, other requirements related to the replacement of Monsignor Paul Dwyer Catholic High School will be delayed by a minimum of one year and are still all subject to Ministry of Education approval.

To: Board of Trustees

Page 4 of 4

Re: **Long Term Accommodation Plan 2018 to 2022 Update**

Date: April 23, 2018

Open a new Child Care Centre at Good Shepherd Catholic School

The Ministry approved the Child Care project in January 2018. Board staff have appointed Moffet and Duncan Architects to undertake the design. Tender of the project is anticipated for the Fall of 2018 with construction to be completed in 2019.

Open a new Child Care Centre at St. Teresa of Calcutta Catholic School

The Ministry approved the Child Care project in January 2018. Board staff have appointed Taylor Smyth Architects to undertake the design. Tender of the project is anticipated for the Fall of 2018 with construction to be completed in 2019.

Open a new Child Care Centre at Monsignor Philip Coffey Catholic School

The Ministry approved the Child Care project in January 2018. Board staff have appointed Hossack Architects to undertake the design. Tender of the project is anticipated for the Fall of 2018 with construction to be completed in 2019.

Open a new Child Care Centre at the Oshawa Continuing Education site at 850 King Street West

The Region of Durham approved this unique Child Care project in March 2018 to be run with YMCA. Board staff are working with the landlord to undertake the design with Paradigm Architects.

Open expanded Child Care Centre at St. Theresa Catholic School

The Ministry approved the project in January 2018. Board staff have appointed Allen and Sherriff Architects to undertake the design. Tender of the project is anticipated for the Fall of 2018 with construction to be completed in 2019.

Next Steps

Staff will bring updates to the Board of Trustees for all of the actions in the LTAP, and individual reports as required through the specific policies that drive those actions.



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees

From: Anne O'Brien, Director of Education

Date: April 23, 2018

Subject: **Durham Catholic Children's Foundation Annual Report 2017**

Origin: Ryan Putnam, Superintendent of Business & CFO

RECOMMENDATION:

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board receive as information the Durham Catholic Children's Foundation Annual Report 2017."

RATIONALE:

See attached.

AOB:RP:br
Attachment

Durham Catholic
Children's
Foundation



Providing Help. Creating Hope.

Annual Report 2017





About the Durham Catholic Children's Foundation

Recognizing the importance of supporting the whole student in mind, body and spirit to foster positive learning outcomes, the Durham Catholic Children's Foundation was established to ensure that students are able to attend school with the basic daily necessities of life provided.

Through our signature fundraising events and donor contributions, the Foundation enables a formal mechanism for coordinating charitable initiatives and raising funds to support student participation in all aspects of school life.

With recommendations from the Durham Catholic District School Board (DCDSB) and its communities, the Durham Catholic Children's Foundation contributes to student well-being and achievement by providing basic needs to the most vulnerable children and families in Durham Region, enabling them to work towards reaching their full potential.



Our Mission

To bring hope to students in need.

Our Vision

A Catholic community that supports students in becoming who they are called to be.

Our Catholic Values

By living these values with an open mind and a faithful heart we bear witness to these words:

"You are the hope of the Church and of the world. You are my hope." – Saint John Paul II

As a Catholic Learning Community, we value:

Faith, evangelizing ourselves and others through scripture, sacrament, prayer and action in service with the home, school and parish.

Hope, giving witness to the belief that we can become who we are called to be.

Love, being present to others with care, compassion, solidarity, community and joy.

Peace, creating opportunities for contemplation, spirituality, reconciliation and forgiveness.

Wisdom, listening and responding to the Holy Spirit.

Inclusion, ensuring a sense of belonging by promoting the dignity and worth of each human life.

Excellence, building on God's grace to achieve our earthly and eternal vocations.

Creativity, celebrating diverse and innovative expressions of God's gifts.

Service, seeking out and responding to local and global needs with prudence, fortitude, humility and charity.

Stewardship, shepherding God's creation and resources for the common good.

Responsibility, demonstrating accountability and fidelity in our thoughts, words and deeds.

Justice, acting and serving with integrity in communion with the Gospel and teachings of Jesus.

A Message from the Chair



This year, the Durham Catholic Children's Foundation's Board of Directors developed a formal mission statement — simply stated — *to bring hope to students in need*. These words ring true to our hearts as we aim to remove barriers to student well-being and achievement. Our refined vision of a *Catholic community that supports students in becoming who they are called to be* — compliments the mission of the Durham Catholic District School Board (DCDSB) — serving with excellence in the light of Christ — as we work in partnership to ensure equitable opportunities for all learners. Thank you to the members of the Board for your insight and support.

It was a successful year for the Foundation with respect to community engagement and continued efforts to promote equity. Our signature events were a tremendous success, not only in raising funds to support students, but doing so in a way that brings people with a common goal together — to support student success.

We are blessed to have the support of DCDSB staff and Foundation volunteers that work countless hours with a commitment to bringing hope and possibilities to families in need. Thanks to everyone involved in organizing our special signature events, including the Gala, Golf Classic, Run/Walk for Hope and other local school events that have raised funds in support of these initiatives.

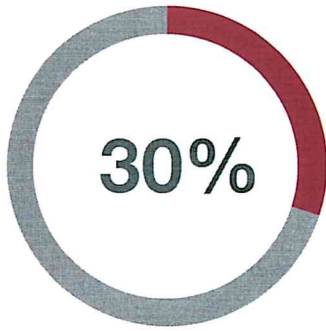
A special thank you to our donors and sponsors for their generosity and giving spirit, *providing help; creating hope* for students.

Stan Karwowski

Chair, Durham Catholic Children's Foundation

Impact

70 students and families received assistance through the Direct Family Assistance program and Emergency Support Fund.



Direct Family Assistance \$40,000

Approximately 30% of Durham Catholic students live below the poverty line. Living in such circumstances can impact a student's ability to learn and participate freely in all aspects of school life. Through the Direct Family Assistance program, the Foundation has extended support to students. The most common categories of assistance include:

- Food purchases
- Medical (glasses, dental)
- Clothing (winter, graduation)
- Activities (camp, school trips)

Emergency Support Fund \$20,000

The Emergency Support Fund provides assistance to families faced with significant unexpected challenges and unique circumstances that present obstacles for students to come to school physically, mentally and emotionally prepared for learning.

Durham Catholic Secondary School Graduate Bursaries \$4,000

\$500 for each student representing 8 secondary schools

The Foundation presented bursaries to students in need who have demonstrated commitment to meeting the Ontario Catholic School Graduate Expectations. A student from each Durham Catholic secondary school was selected and awarded with this opportunity upon graduation as they transitioned into their post-secondary pathways.

Foundation Revenue



Funds are raised through the Foundation's signature events, including the Foundation Gala, Fore-the-Kids Golf Classic and Community Walk/Run for Hope. Through events like these, we engage our Catholic learning community, partners and families in the spirit of hope, love and charity.

Annual Signature Events

- Foundation Gala
- Fore-the-Kids Golf Classic
- Community Walk/Run for Hope

"We used our Foundation allocation to provide gift cards to a family that lost everything in a fire. The funds allowed them to purchase clothes for their children so they could come to school wearing something new the next day." – DCDSB Principal



"Let us work together to ensure that children continue to smile: their faces serene, filled with joy and hope." – Pope Francis on World Children's Day

4th Annual Foundation Gala

May 4, 2017

\$25,000 Raised

The Durham Catholic Children's Foundation, in partnership with the Durham Catholic District School Board, hosted the 4th Annual Foundation Gala. Honouring the Most Reverend Bishop Vincent Nguyen and the 2017 Durham Catholic Distinguished Alumni, the event brought approximately 300 guests together from the Durham Catholic community. Guest speaker, Father Damien Ali captured the crowd with his insights on the theme of hope and Catholic Education.



"I thank our vendors for their support, bringing more funds directly to students in need through the Foundation." – Ronald Rodriguez, Organizer

4th Annual Golf Classic

August 22, 2017

\$35,000 Raised

The 4th Annual Fore-the-Kids Golf Classic sold out with 144 players, as well as additional participants taking a golf lesson and attending the dinner for a total of 190 guests.



"Thank you to all who have given your time, support and donations to the Foundation. You are helping many students in our Durham Catholic Community."

– Jim Raper, Foundation Board of Directors

Community Run and Student Walk for Hope

April 23, 2017

\$20,000 Raised

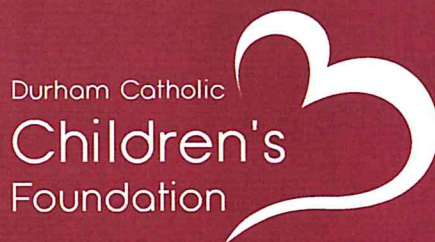
DCDSB staff organized the annual Community Run for Hope, bringing together students, families and staff for a 4K run starting and finishing at Monsignor Paul Dwyer Catholic High School. Students also contributed toonies at their local Durham Catholic schools as they participated in a Walk for Hope, contributing to the funds raised at the community run.

Get Involved



How You Can Help

Sponsors and volunteers are always appreciated in support of our various events. E-mail info@durhamcatholicfoundation.ca for details.



Providing Help. Creating Hope.

Donate Now

Visit durhamcatholicfoudnation.ca to make a difference today.

Tel: 905-576-6150 ext. 22850

E-mail: info@durhamcatholicfoundation.ca

Twitter: @DC-ChildrensFdn

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Brian Miettinen, Retiree Representative (Vice-Chair)

Father Damian Ali, Parish/Clergy Representative

Rosemary Barry, Parent Representative

Shannon da Silva, Teaching Representative

Kathleen LeFort, Trustee Representative

Anne O'Brien, Senior Leadership Representative

Shelley Phoenix, Non-Teaching Representative

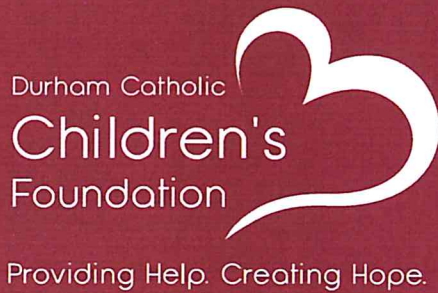
Ryan Putnam, Senior Leadership Representative

Jim Raper, Principal/Vice-Principal Representative

John Rinella, Trustee Representative



Thank you for supporting the Durham Catholic Children's Foundation.



650 Rossland Road West
Oshawa, Ontario L1J 7C4
Tel: 905-576-6150 x22850
Web: durhamcatholicfoudnation.ca
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Twitter: @DC-ChildrensFdn



Durham Catholic District School Board

MEMORANDUM

To: Board of Trustees
From: Anne O'Brien
Date: April 23, 2018
Subject: **Out of Province Travel**

RECOMMENDATION

Moved by _____, seconded by _____

"THAT the Durham Catholic District School Board approve the attendance of a staff member at the *Building More Effective Teams* Program scheduled for July 25-26, 2018 in Cambridge, Massachusetts."

RATIONALE

The Attendance of Board Employees at Conventions, Conferences and Seminars policy (PO 319) and its attendant Administrative Procedure (AP 319-1) requires that out of province travel be brought by the Director to the Board for approval.

The Director of Education or designate as part of their professional development, will be participating in the *Building More Effective Teams* Program. This program is designed for leaders who will learn strategies and facilitation techniques for building great teams and creating successful team dynamics. They will develop skills that enhance communication and trust, and align team members around shared goals so they can effectively plan, communicate, execute and deliver effective strategic plans.

Expenses will be offset by the Ontario Director Mentorship Program, the Ontario Catholic Supervisory Officers Association Professional Development funds and the Director Professional Development funds.

AOB/eb