Northeastern Catholic District School Board

STUDENT HEALTH PLAN

Administrative Procedure Number: APE005-4

POLICY STATEMENT

The Northeastern Catholic District School Board (NCDSB) is committed to the belief that every student can learn and develop their full potential as children of God. The NCDSB believes that it is the shared responsibility of home, community, and school partners to design and implement an instructional program appropriate to meet the needs of each student. All students should feel safe at school and deserve a positive school climate founded on the principles of equity, inclusivity, and acceptance.

REFERENCES

Education Act
NCDSB Policy
- E-2 Prevalent Medical Conditions
- E-24 Personal Information Management

NCDSB Administrative Procedures
- APE005-1 Special Education Equipment
- APE005-3 Toileting for Students

NCDSB Special Education Plan

DEFINITIONS

Health-Related Need
Any medical, developmental, or physical condition that requires special attention, care, or accommodation during the school day — such as support with toileting, feeding, mobility, or use of specialized equipment.

Prevalent Medical Condition
A chronic condition identified by the Ministry of Education that requires a dedicated *Prevalent Medical Condition Plan*: diabetes, epilepsy, asthma, or anaphylaxis. Students with these conditions do not use the *Student Health Plan* form.

Student Health Plan
A written plan outlining individualized care, supports, and accommodations for a student who has a health-related need not covered under a Prevalent Medical Condition. It describes the student's needs, required supports, staff responsibilities, and emergency procedures.

PROCEDURES

1.0 GENERAL PROVISIONS

1.1 The Student Health Plan is designed to ensure that students with health-related needs—other than prevalent medical conditions such as diabetes, epilepsy, anaphylaxis, or asthma—receive appropriate and consistent care during the school day.

1.2 This plan provides a structured process for documenting individualized supports required to maintain a student's safety, dignity, and well-being while at school. It facilitates communication among parents/guardians, school staff, and healthcare professionals to ensure all members of the student's support team understand their roles and responsibilities.

1.3 This form is completed when a student has a specific medical or physical need that requires care or accommodation beyond routine school practices but does not fall under an existing *Prevalent Medical Condition Plan of Care*. Examples may include:

i) Students who require toileting assistance or mobility support.
ii) Student who use specialized medical equipment or SEA-funded items.
iii) Students who require assistance with daily activities.
iv) Students who have other identified health needs documented through medical or professional recommendations.

1.4 The Student Health Plan should be developed collaboratively by the Principal (or designate), parents/guardians, and relevant school staff, with input from a medical or therapy professional as appropriate.

1.5 Student Health Plans must be reviewed annually or sooner if there are changes in the student's needs, school staff, or medical recommendations.

1.6 Any revisions must be communicated to all staff supporting the student.

2.0 COMPLETING THE STUDENT HEALTH PLAN

2.1 Student Information

i) Records identifying information such as the student's name, school, grade, and any noted exceptionality.
ii) This section ensures the plan is properly linked to the student's Ontario Student Record (OSR) and clearly identifies the context for the health supports being provided.

2.2 Health / Medical Condition

i) Describes the student's medical or developmental diagnosis and how it affects their participation or safety at school (limited mobility, feeding challenges, or sensory needs).

ii) This information should be specific enough to inform care decisions while maintaining confidentiality.

2.3 Provision of Care

i) Outline the specific care requirements the student needs during the school day. Examples may include feeding, toileting, lifting, or assistance with mobility.

ii) The plan should name or identify the staff members responsible for providing this support, and will include any external service providers.

2.4 Location of Supplies and Equipment

i) Specifies the location of all necessary medical or assistive items, including SEA-funded equipment or personal care supplies.

ii) Clarity in this section ensures accessibility and promotes an organized, safe response during regular routines and emergencies.

2.5 Daily Instructions and Communications

i) Documents individualized routines such as scheduled toileting, sensory breaks, or communication protocols between home and school.

ii) The preferred method of daily communication (logbook, phone calls, digital updates) should be stated to ensure consistency and accountability.

2.6 Emergency Situations

i) Describes how the student will be supported in the event of an emergency (fire drill, lockdown, shelter-in-place).

ii) This section should identify staff responsible for assisting the student and specify any adaptive evacuation procedures or equipment required.

2.7 Toileting

i) Indicates whether toileting support is required and the level of assistance needed:
- Full Physical Assistance – staff complete all steps of care.
- Partial Physical Assistance – student participates with support (hygiene, clothing).
- Supervision – adult oversight for safety or prompting.

ii) Detail the specific care and support the student requires. This may describe routines, support, or specialized equipment.

2.8 Acknowledgement

i) This section documents that parents/guardians and the principal have reviewed and approved the plan.

ii) Copies are distributed as follows:
- Original in the student's OSR.
- Copy to parents/guardians.
- Copy stored in the Emergency Preparedness Binder.

3.0 RELATED FORMS AND DOCUMENTS

FORM: Student Health Plan

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Date: November 2025