



UNEXPECTED HEALTH EMERGENCY RESPONSE

Background

On July 1, 2025, The Response to Unexpected Health Emergencies Policy came into effect, accompanied by amendments to the *Support Services for Schools Ministerial Order*. The Ministry of Education and Child Care requires all school districts to:

- Establish, maintain, and make publicly available a policy or administrative procedure for responding to unexpected health emergencies.
- Ensure automated external defibrillators (AEDs) and naloxone kits are readily accessible in all schools.

This Administrative Procedure outlines the qathet School District's response to unexpected health emergencies, including opioid overdoses and cardiac arrests. It ensures alignment with the Ministry of Education and Child Care, Work SafeBC and District policies.

The installation of automated external defibrillators (AED) and naloxone supplies within District facilities has been adopted to facilitate the timely response to an unexpected health emergency. These devices will be available so that timely, life-saving action can be taken when any person experiences a life-threatening emergency while on District property and while simultaneously awaiting medical response.

Definitions

Automated External Defibrillators (AED): Are portable, life-saving devices designed to treat people experiencing sudden cardiac arrest, a medical condition in which the heart stops beating suddenly and unexpectedly.

First Aid Attendant: A staff member who has received required training and is designated by the principal to respond to health emergencies.

Naloxone: A medication used to reverse the effects of an opioid overdose.

Opioid Overdose: An acute life-threatening condition caused by exposure to too much opioid. During an opioid overdose a person's breathing can slow or stop.

Unexpected Health Emergency: A sudden, serious health event that requires immediate intervention to protect life, health or safety until emergency responders arrive.



Administrative Procedure 167

Immediate Emergency Response Protocol

When an unexpected health emergency occurs on school grounds or during a school sponsored activity, staff will:

- Assess the situation for safety and remove any immediate hazards where possible
- Provide First Aid: A designated school district first aid attendant will provide first aid within the scope of their training
- Call 911 or other local emergency services
- Support and supervise students and move them away from the immediate scene
- Communicate with caregivers as soon as reasonably possible
- Assist emergency first responders by providing necessary information, in accordance with the Freedom of Information and Protection of Privacy Act (FOIPPA)
- Document and Debrief: Complete all required documentation and ensure staff debrief and follow up supports for staff and students are provided as necessary

Procedures

- Please refer to and follow the [Site Based First Aid Procedures](#) for use, inspection, and maintenance of unexpected health emergency equipment.
- For safety, staff are discouraged from leaving their school / site to respond to an overdose occurring off the school site. Staff should call 911 if they become aware of an off-site incident and notify their site supervisor.

1. Education and Training

1.1 Site based administrators will submit an annual list to the Superintendent, or designate, identifying the location's certified first aid attendants. The staff members will be provided with opportunities for training, as needed, in:

- First aid and CPR
- Use of AED's
- Administration of Naloxone
- Any other emergency medical tools adopted by the district

2. Understanding Risk

2.1 Staff should understand that there may be some health and safety risk involved in responding to unexpected health emergencies. Responding requires proper use of personal protective equipment, handling syringes, and potential contact with drugs or blood and body fluids. If drugs are on the person or the scene, they also must be handled carefully (gloves are required and located in the naloxone kit). Finally, some individuals may be angry and physically aggressive or violent upon revival via naloxone. Staff should be prepared to stand back and de-escalate these situations.



Administrative Procedure 167

For further risk reduction information see Appendix 4 in [Site Based First Aid Procedures](#).

- 2.2 In a medical emergency, the doctrine of in “loco parentis” and the “Good Samaritan Act apply, affirming that trained staff members may take necessary actions in the best interest of students and other individuals.

3. Equipment

Each school must ensure the following lifesaving equipment is available on site:

- Automated External Defibrillator (AED)
- Naloxone Kit

Site based administrators are responsible for determining the least restrictive, and most accessible placement of an AED’s and a Naloxone kit, preferably together.

Each site-based administrator must ensure that all equipment is:

- 3.1 Located and presented in a manner that is readily and easily accessible to any person on the premises and so that its use will be encouraged by anyone to assist any person in need.
- 3.2 Is readily recognizable with high visibility signage.
- 3.3 Is made familiar to occupants and visitors of the facility regarding its location and use.
- 3.4 Is inspected and maintained regularly to ensure it is in good and operable condition. Any expired, spent, or malfunctioning equipment must be replenished repaired or replaced as soon as possible by notifying the Health and Safety Manager.
- 3.5 Is presented and stored in a non-stigmatizing manner to encourage confident and equitable use by staff, and where applicable, trained community responders.

This Administrative Procedure also applies to any additional emergency health tools or devices adopted by the district.

4. Documentation

- 4.1 Any staff member who responds to an unexpected health emergency will report the event immediately to the site-based administrator and complete procedures for documentation as outlined in the [Site Based First Aid Procedures](#). This documentation will be kept separate from a student’s file.
- 4.2 The site-based administrator will report the event to the Superintendent (or designate) and complete required documentation, which may include a [BC Schools Protection Program \(SPP\)](#) report.



Administrative Procedure 167

5. Procurement

- 5.1 Procurement of Naloxone and EAD components shall be done centrally on a purchasing schedule, based on the purchase dates and use of medication or equipment components.
- 5.2 Only unexpected health emergency equipment that is approved for use by Health Canada shall be permitted to be installed or used at District facilities.

6. Privacy and Confidentiality

All staff must respect the privacy of others in responding to, documenting, and discussing health emergencies.

7. Mental Well-being Follow-up After and an Unexpected Health emergency

- 7.1 Responding to an unexpected health emergency (cardiac arrest, opioid overdose) can be a stressful and difficult experience for first aid responders and bystanders. Following an intervention for an unexpected health emergency, staff and bystander(s) are asked to debrief with their direct supervisor as soon as practical. Ongoing support for staff is available through the District Employee and Family Assistance Program (EFAP). Immediate and ongoing support can be provided for students in collaboration with the suite administrator and the Critical Incident Response Team as required.

Reference: Sections 20, 22, 65, 85 *School Act*
Good Samaritan Act
Support Services for Schools Order

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