



Policy 4.60 Unexpected Health Emergencies

The Board of Education commits to safeguarding the health and well-being of students, staff, and visitors by ensuring that Gulf Islands School District is adequately prepared to respond to unexpected health emergencies. It is the expectation of the Board that its facilities will be equipped with readily accessible Automated External Defibrillators (AEDs) and naloxone kits, to provide effective and timely intervention in the event of sudden cardiac arrest and opioid overdose.

Definitions:

Automated External Defibrillator (AED): A portable electronic device that analyzes and looks for shockable heart rhythms, advises the rescuer of the need for defibrillation and delivers the shock if needed. An AED is considered an effective treatment for sudden cardiac arrest. Early defibrillation, alternating with CPR is paramount to increase success for victims of sudden cardiac arrest. Defibrillation within the first 3 to 5 minutes of cardiac arrest will dramatically increase survival rates.

Naloxone: A medication that reverses opioid overdose effects. Available in nasal spray or injectable form, naloxone works by temporarily blocking opioid receptors in the brain, restoring normal breathing in individuals experiencing opioid toxicity. Quick administration of naloxone, along with calling emergency services and providing supportive care, is critical in preventing fatal outcomes. Naloxone kits are considered essential, life-saving tools in response to suspected opioid overdoses and are safe for use by non-medical personnel.

Opioid Overdose: A life-threatening condition caused by excessive opioid intake, requiring immediate medical intervention.

Guidelines:

1. The Board will ensure that Automated External Defibrillators (AEDs) and naloxone kits are readily accessible and maintained in each Gulf Islands school and administrative site. These life-saving tools shall be:
 - 1.1. clearly marked with standardized signage to support easy identification and use.
 - 1.2. routinely inspected to ensure functionality and monitor expiry dates.

Legislative References: School Act Section 88(1); Ministerial Order M149/89)

Collective Agreement References: G.I.T.A. Article D29; C.U.P.E Articles 26.08 and 30.01

Date of Adoption: DRAFT – Circulated Jan 14, 2026

Date of Revision:



- 1.3. provide barrier-free access to accommodate diverse user needs.
- 1.4. presented in a non-stigmatizing manner to encourage comfortable and equitable use.

2. Training and Education

- 2.1. Annual training will be provided to designated staff and/or first aid responders on the proper use of AEDs and naloxone kits to ensure swift and effective response during emergencies that involve sudden cardiac arrest or suspected opioid overdose.
 - 2.1.1. Voluntary training may be made available to all staff, prioritizing first aid attendants, administrators, and Joint Occupational Health and Safety Committee members.
- 2.2. Regular drills and information sessions are encouraged to foster confidence and readiness among students and staff.

3. Emergency Response Protocols

Common basic steps should be followed when responding to cardiac arrest or expected opioid overdose:

- 3.1. Immediate Response
 - 3.1.1. Call 911 immediately.
 - 3.1.2. For opioid overdose, trained responders will follow the SAVE ME protocol: Stimulate, Airway, Ventilate, Evaluate, Muscular Injection/Nasal Spray, Evaluate again.
 - 3.1.3. For Cardiac Arrest, trained responders will follow printed directions and AED prompts
 - 3.1.4. Notify Administration immediately
 - 3.1.5. Document incident details and notify caregivers, Superintendent, and District Principal (OHS).

3.2. Post-Incident Procedures

- 3.2.1. Provide support and follow-up care, including counseling and referrals.
- 3.2.2. Complete critical incident forms and injury reports.

Legislative References: School Act Section 88(1); Ministerial Order M149/89)

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- 3.2.3. Conduct debriefing and review.
- 3.2.4. Ensure timely replenishment of AED supplies and naloxone kits

4. Administrative Practices

- 4.1. The Superintendent will establish Administrative Practices to support staff when dealing with unexpected health emergencies, and identify:
 - 4.1.1. Common language/key terms for clarity and consistency
 - 4.1.2. Roles and responsibilities
 - 4.1.3. Clear steps for emergency response
 - 4.1.4. Documentation, communication, and debriefing
 - 4.1.5. Equipment inspection, maintenance, and replacement
 - 4.1.6. Training expectations and requirements
- 4.2. The Joint Occupational Health and Safety Committee will periodically review these administrative practices as deemed appropriate, particularly in response to new legislation or regulatory requirements.

5. Respect for Dignity and Privacy

- 5.1. The Board of Education recognizes the importance of respecting the dignity and privacy of all individuals experiencing an unexpected health emergency. By prioritizing dignity and privacy, the district fosters safe, supportive environments for all students, staff, and visitors.
- 5.2. The Board expects staff to approach every situation with compassion, sensitivity, and discretion, ensuring that:
 - 5.2.1. Individuals are treated with respect and empathy, regardless of the nature of the emergency.
 - 5.2.2. Personal information and details about the emergency are shared only with those who need to know, and only for the purpose of providing appropriate care and support.
 - 5.2.3. Conversations and actions regarding the emergency are conducted in a manner that protects the individual's privacy and avoids unnecessary disclosure.
 - 5.2.4. Staff are mindful of cultural, personal, and family considerations, and strive to maintain the individual's comfort and trust throughout the response and recovery process.



5.2.5. All actions taken during and after an emergency uphold the individual's right to confidentiality and dignity.

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