

DURHAM CATHOLIC DISTRICT SCHOOL BOARD

“The Board”

ADMINISTRATIVE PROCEDURE - #AP434-4

USE OF SUPPORT PERSON BY THE GENERAL PUBLIC

ADMINISTRATIVE AREA: OPERATIONS

POLICY REFERENCE: ACCESSIBILITY

DATE APPROVED: APRIL 26, 2010

1.0 PURPOSE

The purpose of this Administrative Procedure is to provide direction in supporting members of the public who access Board facilities with assistance of a support person.

2.0 DEFINITIONS

Support Person: a person who assists or interprets for a person with a disability who accesses the services of the Board. A support person is distinct from an employee who provides support services to a student or staff person in the system and for whom separate and specific procedures would apply.

Additional Information:

A support person is an individual chosen by a person with a disability to provide services or assistance with communication, mobility, personal care, medical needs or with access to goods or services. Personal care needs may include, but are not limited to, physically transferring an individual from one location to another or assisting an individual with eating or using the washroom. Medical needs may include, but are not limited to, monitoring an individual's health or providing medical support by being available in the event of a seizure. The support person could be a paid professional, a volunteer, a friend or a family member. He or she does not necessarily need to have special training or qualifications.

3.0 PROCEDURES

3.1 Supervisory Officers, Principals and Departmental Managers will ensure that staff will receive training in interacting with people with disabilities who are accessing Board services accompanied by a support person.

3.2 Access to Board Premises:

3.2.1 Any person with a disability who is accompanied by a support person will be welcomed on Board and/or school premises with his or her support person. Access will be in accordance with normal security procedures.

3.2.2 This requirement applies only to those areas of the premises where the public or third parties customarily have access and does not include places or areas of the school or Board offices where the public does not have access.

3.3 Confidentiality:

3.3.1 Where a support person is accompanying a person with a disability, who is the parent/guardian of a student, for the purpose of assisting in a discussion that may involve confidential information concerning the student, the superintendent, principal or other staff member must first secure the consent of the parent/guardian regarding such disclosure.

3.3.2 Consent to the disclosure of confidential information in the presence of the support person must be given in writing by the parent or guardian.

3.3.3 The support person must also provide assurance in writing to safeguard the confidentiality of information disclosed in the discussion.

3.3.4 A copy of the signed consent document will be retained in the school/board office.

3.3.5 If the parent/guardian uses a different support person for subsequent meetings, a new signed consent will be required. (A sample of a consent document is provided below)

3.4 Support Persons Accompanying a Person with a Disability at School Events for which there is an admission fee

Where an individual with a disability who is accompanied by a support person wishes to attend a school, family of schools or board-organized event for which a fee is charged, the notice of the event will include information as to whether support persons will be charged a fee and specify the amount of the fee.

3.5 Where the Board may require the presence of a Support Person

The Board may require a person with a disability to be accompanied by a support person when on the premises, but only if a support person is necessary to protect the health or safety of the person with a disability or the health or safety of others on the premises.

(NOTE: This would be a highly rare situation and would only occur where, after consultation with the person with the disability, requiring a support person is the only means available to allow the person to be on the premises and, at the same time, fulfill the Board's obligations to protect the health or safety of the person with a disability or of others on the premises. It is further noted that people with disabilities are free to accept a reasonable risk of injury to themselves just as other people do. Different individuals will have a different tolerance for risk. Risk should be weighed against any benefit for the person with a disability. It is not enough that the support person might help to protect health and safety; a support person must be necessary or essential to protect health and safety before you can require one – the risk cannot be eliminated or reduced by other means. Any considerations on protecting health or safety should be based on specific factors and not on assumptions. Just because someone has a disability doesn't mean they're not capable of meeting health or safety requirements.)

4.0 SOURCES

Accessibility for Ontarians with Disabilities Act, 2005 (AODA).
Accessibility Standards for Customer Service, Ontario Regulation 429/07

5.0 REFERENCES

Accessibility Policy
"Tips on Serving Customers with Disabilities" - Ontario Education Services Corporation

6.0 RELATED FORMS

Customer Service Accessibility Standards, AP#434-1

Notice of Disruption of Services, AP#434-2

Use of Assistive Devices by the General Public, AP#434-3

Monitoring and Feedback on Accessible Customer Service, AP#434-5

Use of Service Animals by the General Public, AP#434-6

Use of Support Person by the General Public – Consent Form

Use of Service Dogs by Students in Schools, AP434-7

Appendix A

Use of Support Person by the General Public

SAMPLE CONSENT FORM

I, (parent/guardian) consent to the sharing of confidential information by (name of principal/teacher/other staff member) related to my child/ward (name) in the presence of my support person (name).

My support person (name) consents to safeguarding the confidentiality of the information shared.

Affirmation of Consent:

Parent/Guardian

Signature _____ Date _____

(Printed Name of Parent/Guardian)

I undertake to safeguard the confidentiality of information shared between (school staff) and (parent/guardian) for whom I am a support person.

Support Person

Signature _____ Date _____

(Printed Name of Support Person)

Signature of Witness –

Principal/Staff Member _____ Date _____

(Printed Name of Staff Person)
