SICKLE CELL ANEMIA

I have made you and I will carry you. I will sustain you and I will rescue you. - Isaiah 46:4

Nick Biagini, Program Coordinator HPE and the Arts

REPORT TO

STUDENT ACHIEVEMENT AND WELL BEING, CATHOLIC EDUCATION AND HUMAN RESOURCES COMMITTEE

Vision
At Toronto Catholic we transform the world through witness, faith, innovation and action.

Mission:
The Toronto Catholic District School Board is an inclusive learning community rooted in the love of Christ. We educate students to grow in grace and knowledge and to lead lives of faith, hope and charity.

G. Poole
Associate Director of Academic Affairs

A. Sangiorgio
Associate Director of Planning and Facilities

S. Pessione
Associate Director of Business Services, Chief Financial Officer and Treasurer

Angela Gauthier
Director of Education
A. EXECUTIVE SUMMARY
Lanre Tunji-Ajayi, representing the Sickle Cell Disease Association of Canada (SCDAC), regarding support for Students living with sickle cell disease in Ontario Schools

B. PURPOSE
How to increase awareness of the Sickle Cell Disease in our schools and the possible recognition of June 19 as World Sickle Cell Disease Day.

C. BACKGROUND
1. Received and referred to staff for a report to come back on how to increase awareness of the Sickle Cell Disease in our schools and the possible recognition of June 19 as World Sickle Cell Disease Day.

D. EVIDENCE/RESEARCH/ANALYSIS

Analysis of the subject matter
Sickle cell disorder (scd) is a collective name for a series of serious inherited chronic conditions that can affect all systems of the body.

It is one of the most common genetic conditions in the world. The percentage of people who are carriers of the sickle cell gene is as high as 25% in some regions of the world. The life span of persons with these disorders can be reduced by as much as 30 years of all hemoglobinopathies, sickle cell disease affects the largest number of patients approximating 250,000 out of about 300,000-400,000 children born annually worldwide with various hemoglobinopathies. The prevalence of this condition is of higher magnitude than other, well-resourced congenital conditions such as hemophilia or cystic fibrosis.

People with sickle cell disease have a type of haemoglobin (called haemoglobin s (hbs) or sickle haemoglobin) which differs from normal adult haemoglobin (haemoglobin a or hba). This can cause red blood cells to change shape and become blocked in the blood vessels, causing acute pain.

The main types of sickle cell disease are sickle cell anaemia, haemoglobin sc disease and sickle beta-thalassaemia.

The two main characteristics of scd are a longstanding anemia and recurrent episodes of vaso-occlusion.

Anemia is a result of increased breakdown of red blood cells. The student may appear pale and have yellow eyes from time to time.

Vaso-occlusive episodes are blockages of the blood vessels anywhere in the body by deformed red blood cells. This causes a lack of oxygen in the affected area of the body.
E. VISION

<table>
<thead>
<tr>
<th>VISION</th>
<th>PRINCIPLES</th>
<th>GOALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>As compassionate human beings we need to be aware of the suffering of others and to recognize that we can accommodate to reduce suffering.</td>
<td>Provide professional learning on the Student Well-Being Research Framework to ensure a holistic approach to the well-being of all students</td>
<td>To make school leaders and educators more aware of the impact that sickle cell anemia has on student performance and engagement and to make the necessary accommodations in all curricular areas for these students.</td>
</tr>
</tbody>
</table>

F. ACTION PLAN

F. #1 Explanation of Options/Scenarios

<table>
<thead>
<tr>
<th>#1</th>
<th>#2</th>
<th>#3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide schools with a communication plan for raising awareness of Sickle Cell Disorder</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

F. #2 Resource & Compliance Requirements

<table>
<thead>
<tr>
<th>Resources</th>
<th>#1</th>
<th>#2</th>
<th>#3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curriculum / Professional Learning</td>
<td>SCDAC can provide in servicing at the school level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital / Infrastructure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Resources</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Costs/Funding Source</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal / Policy Compliance</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
G.  METRICS AND ACCOUNTABILITY

1. How will the recommendations in this report be monitored or assessed?

There will be a greater understanding of the triggers for a pain crisis as administrators and teachers become more aware of the impact that this disease has on the students afflicted. With a greater awareness of the triggers teachers can prevent pain crisis from occurring. Teachers will post triggers in the class of the student with sickle cell anemia. The picture of the students will be placed in the same area as students who are anaphylaxis and the same protocol will be used. A medical conditions form will be completed by the school and placed in a binder in the school so that all can access in the event that a pain crisis initiates. (Refer to Appendix 1- Sickle Cell Disease: A Practical Guide for Teachers.).

This document will be sent via email to all school administrators who will forward it to teachers who have a student or students with the disease. Once it is determined that a student has the condition, all individuals who have direct contact with the student will be given the practical guide for review. Schools with a sickle cell anemic student can also contact for more support The Sickle Cell Awareness Group of Ontario at www.sicklecellanemia.ca/ info@sicklecellanemia.ca. This group will come to the school to in service staff of the disease and what to be aware of if a student or students in that school have a disease. It is important that: students with sickle cell disease do not feel singled out or set apart by their disease. They should still be encouraged to participate actively within their reasonable restrictions. This message will be communicated to the schools.

Schools will also be notified at recognizing June 19th as World Sickle Cell Day.

H.  IMPLEMENTATION, STRATEGIC COMMUNICATIONS AND STAKEHOLDER ENGAGEMENT PLAN

1. Provide a brief overview of the salient features of the implementation plan.

Sickle Cell Disease: A Practical Guide for Teachers will be sent via email to all elementary and secondary principals. Principals will forward the guide to all of their teachers. If there is a student or students in the school with the disorder, the student will be treated like any other student in the school with a medical condition. In the case of anaphylaxis students, a picture is taken and a summary of the triggers and action plan are listed on a Medical Condition Form. The form is kept in a binder in the school where all have access. An IEP will be created for the student particularly in the area of Physical Education so that the necessary accommodations and modifications to the students program will be adhered to. Record of this will carry into the IEP Companion where future teachers can access. A copy will also go into the students OSR file.
2. Provide a brief overview of the communications plan.

   **Communication Plan:**

   1) The parent will have already notified the school of the medical condition of the student.

   2) The principal will have reviewed and sent the Sickle Cell Anemia: A Practical Guide for Teachers to all teachers. If need be Principal can call Sickle Cell Awareness Group of Ontario for further support. The school can also contact Sick Kids Hospital for further support.

   3) The school’s action plan can then be discussed with the parent so that parent input can be included in the action plan that would be placed in the central medical binder in the front office.

   4) Once more information comes out from SCDAC about the June 19 World Sickle Cell Awareness Day, this information will be communicated to the schools.

I. **STAFF RECOMMENDATION**

   Staff indicates preference and rationale for a specific option or prioritizes options.

   **APPENDICES**