

#### Hello Year 50 Parents and Students!

The Campus Health Centre receives many questions about how healthcare works in Canada and about medical things on campus, so I wanted to go over a few facts for everyone.

Immunizations are mandatory at Pearson. There is a list of all necessary vaccinations in the medical form, but students are required to have all the BC routine childhood immunization. Students must also have had a tetanus booster within the last eight years. Students are also required to have two doses of a WHO approved COVID-19 vaccine. There are no exceptions to this rule as it is an important way, we keep our community safe.

In the cafeteria on campus, we offer vegetarian, vegan and regular meals. We also offer Halal meat two or three times a week, and vegetarian meals the rest of the week for these students. We can also accommodate other dietary needs such a gluten free meal, but only with a diagnosed medical condition.

First year students coming from outside of Canada are on emergency medical insurance for the first three months at Pearson, as there is a provincial government mandated waiting period for health insurance. This insurance covers **emergency** items and services but does not cover any pre-existing conditions. So, if your student needs to see a doctor about something that has been going on since before they came to Pearson, the doctor's appointment will not be paid for. This also applies if they need blood work for a routine monitoring matter, such as checking their iron levels. Once students are on the public BC medical plan (Medical Services Plan or MSP), in their fourth month at Pearson, all doctor's visits are paid for.

The BC medical plan does not cover additional health practitioner services like the dentist, orthodontist, chiro-practor, physiotherapist or optometrist. It also does not cover prescription, other medications or glasses. Your student will have to pay for all these things directly (unless your student is on full medical financial aid).

If your student needs medication, we will order this from a pharmacy in a nearby community. Sometimes the student and a school driver can stop and get this medication right after their doctor's appointment, but this is not always possible. It is expected for the student to pick up their medication and connect with the Health Centre to see if it is appropriate for them to keep the medication or if it needs to be dispensed weekly by the Health centre. Our pharmacy is on the bus route into town and there are regularly adults driving to and from campus, so students are able to ask for a ride one or both ways.

On campus we have clinical counselors available 3-4 days a week and access to other specialists, as part of the campus wellness team. These practitioners usually book appointments about two weeks in advance. There is no charge to see these professionals and there is no specific limit on the number of visits. However, if your student requires significant ongoing support, such as ongoing counseling, we may ask you to pay for some appointments as we only have limited appointments and this resource needs to be shared by everyone. We will talk to you about this before we ask you to pay. We are also happy to facilitate online or phone visits with student's existing doctors or counselors as we really encourage the continuity of care this promotes.

If your student has any mental health challenges, such as depression, anxiety or an eating disorder, we strongly recommend starting treatment, such as counseling and medication, before coming to Pearson. Treatment can take two to six months to really start making a difference and it is our experience that students who start treatment while at Pearson find it extremely challenging to stay up to date with their studies and exams. Therefore, it is much better for students to have started this before arriving at Pearson. We are also happy to continue the care and treatment plan that has been started at home.



Right now, there is a shortage of doctors in Victoria. If your student needs to see a doctor, for a minor health condition, we will be sending them to an urgent care or walk-in clinic. We will arrange transportation to and from the clinic. They will be waiting in queue alone but will always have a way to contact the school nurse for questions and updates.

If your student has to go to a hospital emergency department, we will let you know as quickly as we can and we will keep you updated once we know how they are doing. We will usually have a houseparent or a school driver drop them off and pick them up when they are finished and depending on the severity of the injury we many ask a friend or their houseparent to stay with them. The student will always have a way to contact the school nurse for questions and updates while at the hospital.

In Canada, young people are considered mature minors and in British Columbia are able to give their own consent for health care under the <u>BC Infants Act</u>. This applies to all types of health care, emergency situations, medications, and procedures such as vaccinations. The health care practitioner needs to be sure that the young person understands the need for the treatment, the risks and the benefits. Here is a link specific to vaccination, but it describes the act quite well: <a href="https://www.healthlinkbc.ca/healthlinkbc-files/infants-act-mature-minor-consent-and-immunization">https://www.healthlinkbc.ca/healthlinkbc-files/infants-act-mature-minor-consent-and-immunization</a>

Additionally, health practitioners are legally bound to keep all young people's medical information confidential. Therefore, we cannot legally tell parents about medications and procedures that their student may undergo while in Canada without the student's consent. We strongly encourage students to talk to their parents about what is going on with their health, but we cannot compel them to tell their parents if they don't want to. As a school we will always tell parents if your student has a life-threatening medical concern, but legally we are unable to routinely tell parents other medical information without the student's consent.

Please let me know if you have any questions or concerns. I also encourage parents to review our health and wellness website which contains lots of good information! Here is the link: <a href="https://pearsoncollege.share-point.com/sites/HealthandWellness">https://pearsoncollege.share-point.com/sites/HealthandWellness</a>

Sincerely,

The Health Centre Team



### **Health Centre**

Lester B. Pearson College of the Pacific and United World Colleges (Canada)

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Located on the unceded territory of the Sc'ianew (Beecher Bay) First Nation



# TO BE COMPLETED BY THE STUDENT

This form must be returned to Pearson by May 31, 2023
Student's full name
Preferred pronouns
This form is for College purposes only and will not be submitted to any other agency or organization. The information provided will be held in confidence as part of your health record at the College Health Centre.
I (the "Student"), consent to Lester B. Pearson College of the Pacific using or disclosing my medical information when necessary for my medical treatment, or to enable Pearson College, or its employees to make reasonable and informed decisions regarding my participation or supervision in programs offered by Pearson College.
I hereby authorize the Head of College or College Nurse or a delegate to act on my behalf in arranging necessary medical intervention by qualified medical practitioners in the event of injury or illness.
I understand that students are considered adults under Canadian Law and as such I am able to consent to all medical decisions on my own, without my parents being consulted. I also understand that it is also against the law for medical professionals to disclose my medica information without my specific consent.
I understand that students are responsible for all expenses not covered by medical plans, such as dental and optical services, and all prescription and non-prescription medications.
It is essential for your well-being that full and accurate information is shared with the school in order to prepare for your medical care. Failure to disclose relevant information may result in Pearson not being able to support your medical needs and you being sent home. I hereby declare that I have completed the medical report and believe that it discloses all necessary information about my health.
Student Signature Date



## **MEDICAL CONDITIONS**

Do you currently have any of the following medication conditions?

	YES	NO
Respiratory problems including asthma		
Cardiac disease including heart murmur, hypertension and congenital		
defects		
Gastrointestinal conditions including crohn's, IBS, and celiac's disease		
Musculoskeletal issues including arthritis		
Neurological issues including seizures, migraines and fainting		
Head injuries including concussions		
Endocrine issues including diabetes and thyroid issues		
Menstrual issues including heavy periods, and uterine cysts		
Eye, ear or nose concerns including chronic nose bleeds or hearing or		
vision loss		
Climate issues such as heat stroke or issues related to humidity or alti-		
tude		
Chronic skin conditions including acne, and psoriasis		
What is the condition and when was it diagnosed? Please provide diagnos		
What are the signs and symptoms of the condition?		
Are you undergoing any treatment or taking any medication for the cond quency)?	ition (if yes,	what is the dose and fro

# MENTAL AND EMOTIONAL HEALTH

In the last five years have you had any of the following conditions?

	YES	NO
History of drug or alcohol abuse		
Eating disorder		
Depression		
Anxiety		
Bipolar		
Schizophrenia		



Autism Spectrum				
Attention deficit disorde	r or attention deficit	hyperactive disorder		
Suicidal thought or plan				
Self-harm or cutting				
	when were you diag	licated above: gnosed? Please provide diag l, but is suspected, please pr		
Are you undergoing any to quency?	reatment or taking a	ny medication for the cond	ition. If yes, what i	is the dose and fre-
Have you taken any medic tion and when you took th	-	depression <b>in the last five</b>	<b>years</b> ? If yes, plea	ase indicate medica-
<b>MEDICATIONS</b> Are you taking any medica	ation <b>not listed abo</b>	<b>ve</b> (if yes, what is the medic	cation, the dose an	nd the frequency)?
LIFESTYLE CHOICES				_
Do you:	YES	NO	HOW 0	)FTEN
Drink alcohol?			11011	<del></del> -
Smoke cigarettes?				
Use cannabis?				
Use any other drugs? Which ones?				
ALLERGIES  Do you have any allergies'	? If yes, please list:	l	<b>'</b>	
ALLERGY	TREATMENT	SE	SEVERITY (mild, mo	



# **FOOD PREFERENCES** Do you follow any special diet? YES NO Vegetarian Vegan Halal Other, please specify: \*\* Please note: \*\* -Halal meat is only available two to three times a week, vegetarian meals will be provided the rest of the time. -Diets other than vegetarian and vegan can only be accommodated if they are related to a diagnosed medical condition **OTHER** Is there anything else you would like the Pearson Wellness Team to know about you or your health? WELLNESS CARE PLAN This year we are encouraging all students to reflect on their health and wellbing prior to coming to campus. This exercise is to help you understand your own needs and support systems. We have found that early awareness helps to minimize the severity of symptoms. 1. What are you basic sleep habits? – What is your balances sleep schedule? 2. How will you support yourself nutritionally? Our cafeteria offeres omnivore, vegetarian and vegan options, however, each meal time only offers on choice per dietary preference as chosen above. 3. What are the first signs and symptoms when you start to feel unwell or out of balance? 4. What behavious and tools can support your return to wellness? What supports, at home and on

campus, can you access?