

### **Vallivue School District 139**

This district has a statutory duty to protect the health of all students enrolled in the district. Medical personnel who are employed by the district or whose medical services are contracted by the district also have statutory duties to adhere to certain protocols. Based upon these statutory duties, this district's medical personnel or health care providers will honor a student's written "consent to care" which may include refusal to consent to care and/or withdrawal of care.

In the event a Living Will and Durable Power of Attorney for Health Care relating to a student contains a refusal to consent or a withdrawal of care and is presented to district personnel by the adult student or his or her parent/guardian, a copy of the document(s) will be placed in the student's educational record. Nursing staff will also be notified and provided a copy of such document(s). The individual presenting the document(s) for health care will be informed of this policy.

In the event emergency medical services personnel are called by this district to assist a student, district personnel knowledgeable of a written consent to care will make a reasonable effort to inform the medical services personnel of the consent to care document. Emergency medical services personnel have statutory authority to follow the consent. Medical personnel or health care providers employed or contracted by the district or contracted to provide medical services, if on site at the time of a medical emergency, will comply with the consent to care document presented to the district.

There is a presumption in favor of consent to cardiopulmonary resuscitation (CPR) unless:

1. A completed living will for that person is in effect and the person is in a terminal condition or persistent vegetative state; or
2. A completed durable power of attorney for health care for that person is in effect in which the student or his/her parent or guardian has indicated that the student does not wish to receive CPR; or
3. The student or his/her parent or guardian has a completed physician's order for scope of treatment (POST) form indicating otherwise and/or proper POST identification device.

Medical treatment that is medically inappropriate or futile is not required.

No health care provider shall be civilly or criminally liable or subject to discipline for unprofessional conduct for acts or omissions carried out or performed in good faith pursuant to the directives in a facially valid POST form or living will or the holder of a facially valid durable power of attorney or a directive for health care.

**DEFINITIONS**

“Cardiopulmonary resuscitation” or “CPR” means measures to restore cardiac function and/or support ventilation in the event of cardiac or respiratory arrest.

“Comfort care” means treatment and care to provide comfort and cleanliness given in an attempt to protect and enhance quality of life without artificially prolonging that life. “Comfort care” includes: oral and body hygiene; reasonable efforts to offer food and fluids orally; medication, positioning, warmth, appropriate lighting, and other measures to relieve pain and suffering; and privacy and respect for the dignity and humanity of the patient.

“Consent to Care” includes refusal to consent to care and/or withdrawal of care. (39-4502)

“Emergency medical services personnel” means the personnel of a service engaged in providing initial emergency medical assistance, including, but not limited to, first responders, emergency medical technicians, advanced emergency medical technicians, and paramedics.

“Health care provider” means any person or entity licensed, certified, or otherwise authorized by law to administer health care in the ordinary course of business or practice of a profession, including emergency or other medical services personnel.

“Persistent vegetative state” means an irreversible state that has been medically confirmed by a neurological specialist who is an expert in the examination of nonresponsive individuals in which the person has intact brain stem function but no higher cortical function and no awareness of self or environment.

“Physician orders for scope of treatment (POST) form” means a standardized form containing orders by a physician that states a person’s treatment wishes.

“Physician orders for scope of treatment (POST) identification device” means standardized jewelry that can be worn around the wrist, neck, or ankle, and which has been approved by the Department of Health and Welfare.

“Terminal condition” means an incurable or irreversible condition that, without the administration of life-sustaining procedures, will, in the opinion of a physician, result in death if it runs its usual course.



**LEGAL REFERENCE:** Idaho Code Sections 33-512(4), 39-4501 through 39-4515  
*Czaplicki v. Gooding Joint School District No. 231*, 775 P.2d 640 (1989)

**ADOPTED: 4/13/10**

**AMENDED: 5/14/13, 6/9/15, 6/14/16, 8/14/18**