Unified Referral and Intake System (URIS)

Administrative Procedure 1.B.35

Board Governance Policy Cross Reference:
Legal Reference: Personal Health and Information Act

Date Adopted: June, 2013
Date Amended: June, 2018; June 2019

Introduction

URIS is a joint initiative of the Departments of Families, Health, Seniors and Active Living, and Education and Training. The protocol supports children attending community programs who have special health care needs and require assistance when they are apart from their parents/guardians. Through consultation with health professional and associations, URIS adopted a classification of health care procedures which divides medical procedures into categories. The categories identify differing levels of complexity in health care procedures and then assign the professional qualification (i.e., registered nurse, licensed practical nurse, non-health care personnel trained and supervised by a registered nurse) required by personnel to support these children. As well, the classification system introduces a provincial standard regarding the recruitment and training of personnel supporting children with special health care needs.

URIS Group A

Group A procedures are complex medical procedures which must be performed by a nurse. Children classified as Group A often require support from a medical assistive device or technology that replaces or augments a vital bodily function without which the child would be at risk of further disability or death. Some of the complex health care procedures requiring the clinical skill and judgement of a nurse to support a child attending a community program (licensed child care, school or respite) are ventilator care, tracheostomy care and nasogastric tube care. The URIS Policy and Procedural Manual provides more detailed information. Contact the Student Services Administrator if you require more information.

URIS Group B

For children with ‘Group B’ health care needs (listed below), support includes the development of a written health care plan and training of community program personnel by a registered nurse. Below is a summary of the processes implemented by the Northern Health Region (NHR) for the provision of URIS Group B support.
Applying for URIS Group B Support

Who is eligible for URIS Group B support?

A child is eligible for URIS Group B support if he/she is diagnosed with:

- Asthma – must be prescribed a reliever medication (e.g. Ventolin) AND bring it to the community program
- Anaphylaxis – must be prescribed an adrenaline auto-injector (EpiPen®)
- Bleeding disorder
- Cardiac condition
- Diabetes
- Seizure disorder
- Steroid dependent condition
- Osteogenesis imperfect
- Gastrostomy
- Catheterization
- Ostomy
- Suctioning (oral/nasal)
- Pre-set oxygen

How do I apply for URIS Group B support?

1. Complete the URIS Group B application found at
   http://www.edu.gov.mb.ca/k12/specedu/funding/resources/URIS_B_Application.pdf
   i. Section I includes community program information
   ii. Section II includes child name, birth date and health care need
   iii. Section III includes parent/guardian signature and contact information

2. Submit the completed URIS Group B application to NHR.
   It is recommended to keep a copy of the URIS Group B application in the child’s file.

3. If the child has asthma and/or anaphylaxis the Standard Health Care Plan is completed by the parent/guardian and submitted along with the URIS Group B application (See Health Care Plans below for more details).

Do I have to apply for URIS Group B support every year?

Yes. However, submission of the URIS Group B application is required only once during the child’s attendance at the community program.
Once you have submitted a URIS Group B application to the NHR, the renewal of URIS Group B support is completed annually (May). The NHR provides the community program with a list of children that are currently receiving URIS Group B support. The community program reviews this list and confirms which children require URIS Group B support for another year. Please ensure contact is made with the URIS nurse each year to update and review any URIS plans.

HEALTH CARE PLANS

The URIS nurse completes or reviews each child’s health care plan on an annual basis, minimally.

For asthma and/or anaphylaxis

A Standardized Health Care Plan (SHCP) is used for asthma and anaphylaxis as the management of an anaphylactic reaction or asthma episode is the same for every child.

1. The parent/guardian completes the SHCP.
2. The community program forwards the completed SHCP to the URIS nurse.
3. The URIS nurse reviews the SHCP and contacts the parent/guardian if required.
4. The URIS nurse signs the SHCP and returns it to the community program.
5. The community program stores the SHCP (original) in the child’s file and a copy is placed in a binder that is secure and accessible to staff.

Every January, the URIS nurse sends blank SHCP to the community program for children that are due for an annual review of their SHCP and the above process is implemented.

For all other health care needs

An Individual Health Care Plan (IHCP) is used for all other health care needs.

1. The URIS nurse contacts the parent/guardian and develops the IHCP.
2. The URIS nurse signs the IHCP and sends it to the community program.
3. The community program forwards the IHCP to the parent/guardian for review and signature.
4. The parent/guardian signs the IHCP and returns it to the community program. If changes need to be made to the IHCP, the parent/guardian contacts the URIS nurse directly.
5. The community program stores the signed IHCP (original) in the child’s file and a copy is placed in a binder that is secure and accessible to staff.

The URIS nurse contacts the parent/guardian at least once every year to review the IHCP.

- If there are no changes or demographic changes only to the IHCP, the URIS nurse updates the IHCP at the community program.
- If changes are made to the management of the child's Group B health care need, a new IHCP is developed which requires parent/guardian signature.

When health care plans are updated, expired plans should be clearly marked ‘expired’ and stored in the child’s file. Copies of expired plans (from the binder) can be shredded. It is the community program’s responsibility to ensure that any additional copies of the IHCP are updated.

**TRAINING**

Training of community program staff is provided on an annual basis, minimally.

*For asthma, anaphylaxis, bleeding disorders, cardiac conditions, diabetes, seizure disorders, steroid dependent conditions and osteogenesis imperfect:*  
It is recommended that all staff that may be responsible for the child(ren) receive annual training as these health care needs require a response to emergency situations.

The URIS nurse contacts the community program when a URIS Group B Application is received to discuss training needs. If the community program has not already received training for the relevant health are in the last year, training is scheduled. If community program staff require training interventions that are specific to the child (e.g., blood glucose monitoring for diabetes), training is also scheduled.

Every spring, the URIS nurse schedules annual training sessions for the upcoming year. Training sessions are scheduled on a first come first serve basis.

The community program may contact the URIS nurse at any time when additional learning needs are identified.

*For gastrostomy, catheterization, suctioning, ostomy care, pre-set oxygen:*
It is recommended that 2-3 community program staff are designated to receive training as these health care needs require completion of specific tasks on a regular basis. It is the community program’s responsibility to designate staff to receive training.

The nurse contacts the community program when a URIS Group B Application is received to discuss training needs and schedule training sessions.

Every spring, the URIS nurse contacts the community program to schedule the annual training session(s) for the upcoming year.

The community program may contact the URIS nurse at any time when additional learning needs are identified.
URIS GROUP B APPLICATION

Completed by Parents as Part of Registration if health needs are identified on the registration

Student with YES responses – School identify students with URIS Group B health care needs
Submit in September for new students

URIS Group B Applications and standard health care plans (Asthma/Anaphylaxis) forwarded to Northern Health Region URIS Group B Leads Kathy Beavis & Pam Noseworthy

URIS Nurse develops Individual Health Care Plan for eligible student
URIS Nurse communicates Health Care Plan to parents and school

The original Health Care Plan is kept in the child’s school file; a copy is made accessible to staff. Training is provided annually and as needed for those caring for students with a Health Care Plan.