The Board of Education disclaims any and all responsibility for the diagnosis and treatment of an illness of any student. However, in order for many students with chronic health conditions and disabilities to remain in school, medication may have to be administered during school hours. Parents are encouraged to administer medications to children at home whenever possible as medication should be administered in school only when necessary for the health and safety of students. The Board will permit the administration of medication in school in accordance with applicable law.

Medication will only be administered to students in school by the school physician, a certified or noncertified school nurse, a substitute school nurse employed by the district, the student’s parent, a student who is approved to self-administer in accordance with N.J.S.A. 18A:40-12.3 and 12.4, and school employees who have been trained and designated by the certified school nurse to administer epinephrine in an emergency pursuant to N.J.S.A. 18A:40-12.5 and 12.6.

Self-administration of medication by a student for asthma or other potentially life-threatening illness or a life threatening allergic reaction is permitted in accordance with the provisions of N.J.S.A. 18A:40-12.3.

Medication no longer required must be promptly removed by the parent.

The school nurse shall have the primary responsibility for the administration of epinephrine. However, the certified school nurse may designate, in consultation with the Board or the Superintendent, additional employees of the district who volunteer to be trained in the administration of epinephrine via a pre-filled auto-injector mechanism using standardized training protocols established by the Department of Education in consultation with the Department of Health and Senior Services when the school nurse is not physically present at the scene.

In accordance with the provisions of N.J.S.A. 18A:40-12.6.d, no school employee, including a school nurse or any other officer or agent of a Board of Education or a physician providing a prescription under a standing protocol for school epinephrine pursuant to N.J.S.A. 18A:40-12.5, shall be held liable for any good faith act or omission consistent with the provisions of N.J.S.A. 18A:40-12.5, nor shall any action before the New Jersey State Board of Nursing lie against a school nurse for any such action taken by a person designated in good faith by the school nurse pursuant to N.J.S.A. 18A:40-12.6. Good faith shall not include willful misconduct, gross negligence, or recklessness.

The school nurse or designee shall be promptly available on site at the school and at school-sponsored functions in the event of an allergic reaction. In addition, the parent must be informed that the school district, its employees and agents shall have no liability as a result of any injury arising from the administration of epinephrine to the student.

The parent of the student must sign a statement acknowledging their understanding the district shall have no liability as a result of any injury arising from the administration of the epinephrine via a pre-filled auto-injector mechanism to the student and the parent shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the administration of the epinephrine via a pre-filled auto-injector mechanism to the student.
The permission for the emergency administration of epinephrine via a pre-filled auto-injector mechanism containing epinephrine to students for anaphylaxis is effective for the school year it is granted and must be renewed for each subsequent school year.

Each school in the district shall have and maintain for the use of students at least one nebulizer in the office of the school nurse or a similar accessible location. Each certified school nurse or other persons authorized to administer asthma medication will receive training in airway management and in the use of nebulizers and inhalers consistent with State Department of Education regulations. Every student that is authorized to use self-administered epinephrine must have an asthma treatment plan prepared by the student’s physician which shall identify, at a minimum, asthma triggers, the treatment plan, and other such elements as required by the State Board of Education.

All student medications shall be appropriately maintained and secured by the school nurse, except those medications to be self-administered by students. In those instances the medication may be retained by the student with the prior knowledge of the school nurse. The school nurse may provide the Principal and other teaching staff members concerned with the student’s educational progress with such information about the medication and its administration as may be in the student’s best educational interests. The school nurse may report to the school physician any student who appears to be affected adversely by the administration of medication and may recommend to the Principal the student’s exclusion pursuant to law.

The school nurse shall document each instance of the administration of medication to a student. Students self-administering medication shall report each incident to a teacher, coach, or other individual designated by the school nurse who is supervising the student during the school activity when the student self-administers. These designated individuals shall report such incidents to the school nurse within twenty-four hours of the self-administration of medication. The school nurse shall preserve records and documentation regarding the self-administration of medication in the student’s health file.

The Board shall not be responsible for the diagnosis and treatment of pupil illness. The administration of medication to a pupil during school hours shall be permitted only when failure to take such medicine would jeopardize the health of the pupil, or the pupil would not be able to attend school if the medicine were not made available to him/her during school hours.

For purposes of this policy, “medication” shall include all medicines prescribed by a physician and/or advanced practice nurse for the particular pupil, and all non-prescription “over the counter” medication.

Before any medication may be administered to or by any pupil during school hours, the board shall require the written request of the parent/guardian who shall give permission for such administration and relieve the board and its employees of liability for administration of medication. In addition, the board requires the written order of the prescribing physician and/or advanced practice nurse for the administration of epinephrine that shall include:

A. the purpose of the medication;
B. the dosage;
C. the time at which or the special circumstances under which the medication shall be administered;
D. the length of time for which medication is prescribed;
E. the possible side effects of the medication.
Both documents will be kept on file in the office of the school nurse.

The school nursing staff, in cooperation with the district medical inspector shall develop procedures for the administration of medication which provide that:

A. All medications, whether prescribed or over the counter, shall be administered only by the school's medical inspector, the school nurse, a registered nurse, the parent/guardian, or the pupil himself/herself in certain limited instances involving asthma or other potentially life-threatening illnesses or a life-threatening allergic reaction and when the pupil has received prior written permission from the school district;

B. Additional employees of the Board shall be designated to administer epinephrine via a pre-filled single dose auto-injector mechanism containing epinephrine and shall be properly trained to do so;

C. Medications shall be securely stored and kept in the original labeled container. Epinephrine shall be stored in accordance with the requirements set forth below;

D. The school nurse shall maintain a record of the name of the pupil to whom medication may be administered, the prescribing physician and/or advanced practice nurse, the dosage and timing of medication, and a notation of each instance of administration;

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Administration of Medication

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E. All medications in their original containers, including pre-filled single dose auto-injector mechanisms containing epinephrine, shall be brought to school by the parent/guardian or adult pupil and shall be picked up at the end of the school year or the end of the period of medication, whichever is earlier;

F. A pupil may self-administer medication, in accordance with the requirements of this policy as set forth below, without supervision of the school nurse for asthma, other life-threatening illnesses or a life-threatening allergic reaction. “Life-threatening illness” has been defined as an illness or condition that requires an immediate response to specific symptoms or sequelae that if left untreated may lead to potential loss of life. Medication that can be self administered includes, but is not limited to, the use of an inhaler to treat an asthma attack or the use of an adrenaline injection to treat a potential anaphylactic reaction;

G. A pupil with a written diagnosis of anaphylaxis from a physician-and/or advanced-practice nurse may be determined to be “disabled” under Section 504 of the Rehabilitation Act of 1973 and an appropriate plan will be developed in accordance with Policy #1515 - Rights of Persons with Disabilities.

Pupil Self-Administration of Medication

The Board shall permit self-administration of medication for asthma, other potentially life-threatening illnesses or potentially life-threatening allergic reactions by pupils both on school premises during
regular school hours, and off-site or after regular school hours when a pupil is participating in field trips or extra-curricular activities. Parents/guardians of the pupil shall meet the following conditions:

A. provide the Board with written authorization for the pupil’s self-administration of medication;

B. provide written certification from the pupil’s physician that the pupil has asthma, another potentially life-threatening illness or a potentially life-threatening allergic condition and is capable of and has been instructed in the proper method of self-administration of medication;

C. sign a statement acknowledging that the district shall incur no liability as a result of any injury arising from the self-administration of medication by the pupil, and that the parents/guardians shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the pupil’s self-administration of medication.

D. nothing shall be construed to prohibit the emergency administration of epinephrine via a pre-filled auto-injector mechanism to a pupil for anaphylaxis by the school nurse or his/her designee when the pupil is authorized to self-administer epinephrine or when there is a coexisting diagnosis of asthma, or when a prescription is received from a licensed health care professional for epinephrine coupled with another form of medication.

The Board shall inform the pupil and his/her parents/guardians in writing that:

A. permission is effective only for the school year for which it is granted, and must be renewed for each subsequent school year upon fulfillment of requirements listed above;

B. the district and its employees or agents shall incur no liability as a result of any injury arising from the self-administration of medication;

C. the district maintains the right to revoke a pupil’s permission to self-medicate if he/she has failed to comply with all conditions of this policy and/or has violated in any way the tenets of the agreement to self-medicate. The chief school administrator shall confer with the school physician and school nurse prior to recommending termination of a pupil’s permission to self-medicate and shall also consult with the pupil, the pupil’s parents/guardians, and the pupil’s physician.

D. a pupil who is permitted to self-administer medication under the requirements of this policy shall be permitted to carry an inhaler or other prescribed medication for allergic reactions, including a pre-filled auto-injector mechanism, provided that the pupil does not endanger himself or other persons through misuse.
E. Each pupil authorized to use asthma medication or a nebulizer shall have an Asthma Action Plan ("AAP") prepared by the student’s medical home and submitted to the school nurse. The AAP shall identify, at a minimum, asthma triggers and information to be included in the individualized healthcare plan and individualized emergency healthcare plan pursuant to N.J.A.C. 6A:16-2.3(b) for meeting the medical needs of the pupil while attending school or school-sponsored functions.

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Emergency Administration of Epinephrine

In emergency situations, the Board shall permit the school nurse or medical inspector to administer epinephrine via a pre-filled single dose auto-injector mechanism. The school nurse shall designate, in consultation with the Board of Education, additional employees of the school district who volunteer to administer epinephrine via a pre-filled auto-injector mechanism to a pupil for anaphylaxis when the nurse is not physically present at the scene.

The designee(s) shall be properly trained by the school nurse in the administration of epinephrine via a pre-filled single dose auto-injector mechanism using the standardized training protocol designated by the State Department of Education. Each designee shall receive individual training for each pupil for whom he/she is designated.

The Board shall inform the pupil’s parents/guardians in writing that if the specified procedures are followed, the district, its employees and agents shall have no liability as a result of any injury arising from the administration of epinephrine via a pre-filled single dose auto-injector mechanism to the pupil.

Parents/guardians shall provide the board with the following:

A. Written orders from the physician and/or advanced practice nurse that the pupil requires the administration of epinephrine for anaphylaxis and does not have the capability of self-administration of the medication;

B. Written permission for the administration of epinephrine via a pre-filled single dose auto-injector mechanism by the school nurse or designee(s);

C. A signed statement acknowledging their understanding that if the specified procedures are followed, the district shall have no liability as a result of any injury arising from the administration of the epinephrine via a pre-filled single dose auto-injector mechanism by the school nurse or designee(s) to the pupil; and that the district, its employees, and agents shall be indemnified and held harmless against any claims arising out of the administration of epinephrine via a pre-filled single dose auto-injector mechanism to the pupil.

Permission for the administration of epinephrine via a pre-filled single dose auto-injector mechanism shall be granted annually and must be renewed each school year upon the fulfillment of the above requirements.
The epinephrine shall be stored in a secure but unlocked location easily accessible by the school nurse and the designees to ensure prompt availability in the event of an allergic emergency at school or at a school sponsored function. The location of the epinephrine shall be indicated on the pupil’s emergency care plan. Back-up epinephrine shall also be available at the school if needed.

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The school nurse and/or designee shall be promptly available on site at the school or at a school sponsored function in the event of an allergic reaction.

The pupil shall be transported to a hospital emergency room by emergency services personnel after the administration of epinephrine, even if the pupil’s symptoms appear to have resolved.

Immunity from Liability

No school employee, including a school nurse, shall be held liable for any good faith act or omission consistent with the requirements of this policy, nor shall an action before the New Jersey State Board of Nursing lie against a school nurse for any such action taken by a person designated in good faith by the school nurse pursuant to this policy.

Implementation

The Superintendent is directed to adopt regulations on all aspects of the administration of medication.


N.J.S.A. 45:11-23
N.J.A.C. 6A:16-2.3(b)


N.J.A.C. 6A:16-1.4, 6A:16-2.1, 6A:12-2.3

Cross Reference: 5310

Previously Adopted: June 2, 2008

First Reading: November 16, 2015 May 19, 2008
Second Reading: June 2, 2008 December 21, 2015
Adopted Latest Adoption: June 2, 2008