

POLICY GUIDE

TEACHING STAFF MEMBERS

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Postnatal Accommodations

Mar 20

{See POLICY ALERT No. 219}

3421.13 POSTNATAL ACCOMMODATIONS

The Board of Education recognizes teaching staff members may be returning to work shortly after their child's birth and may need to express breast milk during the workday. The New Jersey Law Against Discrimination (NJLAD) and the Patient Protection and Affordable Care Act (PPACA) amended Section 7 of the Federal Fair Labor Standards Act (FLSA) for ensure nursing mothers to be permitted reasonable break times and a private location to express breast milk for their nursing child for one year after the child's birth.

Every employee in the school district is subject to the entitlements of NJLAD. For an employee breastfeeding her child, the Board of Education will provide the accommodation of a reasonable break time each day and a suitable room or other location with privacy for the employee to express breast milk for the child. Such location will be in close proximity to the employee's work area and will not be a toilet stall. These accommodations will be available unless they would be an undue hardship on the Board of Education's business operations.

Every employee position in the school district is designated as either "non-exempt" or "exempt" by the provisions of the FLSA. Generally, a teaching staff member entitled to overtime pay is designated as "non-exempt." A teaching staff member that performs duties that are executive, administrative, or professional in nature and not entitled to overtime pay is designated "exempt." The school district administration shall refer to the comprehensive definitions of "exempt" and "non-exempt" as outlined in 29 C.F.R. 541 et seq. in determining an employee's designation will additionally be subject to the entitlements of the FLSA. The employee's reasonable break time to express breast milk will be granted each time the employee has need. She will have access to a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public. These enhanced entitlements under the FLSA are available for only one year after the birth of the employee's child.

A Board of Education is required to provide reasonable break times to non-exempt teaching staff members to express breast milk for their nursing child. The non-exemptA teaching staff member shall coordinate such her breaks with their her immediate supervisor. The non-exempt teaching staff memberShe will not receive compensation during this break time unless the break time is during a non-exempt teaching staff member'sher compensated break time.



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~~A Board of Education is not required under the FLSA to provide such breaks to exempt teaching staff members. However, exempt teaching staff members may take such breaks provided the breaks are coordinated with their immediate supervisor. If this break is taken during the exempt teaching staff member's duty free lunch period or duty free break period during the workday, the exempt teaching staff member will not be reduced in compensation.~~

~~The Principal or the nursing mother's immediate supervisor, in consultation with the school nurse, will designate a lactation room that is shielded from view and free from intrusion from co-workers and the public. The location must be functional as a space for expressing breast milk and shall include an electrical outlet, a chair, and nearby access to running water. If the space is not dedicated to~~

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~~the nursing mother's use, it must be available when needed. A space temporarily converted into a lactation room or made available when needed by a nursing mother is sufficient; however, a bathroom, even if private, is not a permissible location under the FLSA.~~

All exempt and non-exempt teaching staff members are required to sign-out of work to begin the break to express breast milk and shall sign-in when they return to work after the break. ~~The break shall be for a reasonable amount of time. For compensation purposes, the immediate supervisor shall forward all sign-in and sign-out information relative to break times for nursing mothers under the FLSA to the School Business Administrator/Board Secretary.~~

Fair Labor Standards Act – 29 U.S.C. 201 et seq.

Patient Protection and Affordable Care Act – P.L. 111-148

N.J.S.A. 10:5-12

N.J.S.A. 26:4C-1 through 26:4C-3

Adopted:



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SUPPORT STAFF MEMBERS

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Mar 20

[See **POLICY ALERT No. 219**]

4421.13 POSTNATAL ACCOMMODATIONS

The Board of Education recognizes support staff members may be returning to work shortly after their child's birth and may need to express breast milk during the workday. The New Jersey Law Against Discrimination (NJLAD) and the Patient Protection and Affordable Care Act (PPACA) amended Section 7 of the Federal Fair Labor Standards Act (FLSA) for ensure nursing mothers to be permitted reasonable break times and a private location to express breast milk for their nursing child for one year after the child's birth.

Every employee in the school district is subject to the entitlements of NJLAD. For an employee breastfeeding her child, the Board of Education will provide the accommodation of a reasonable break time each day and a suitable room or other location with privacy for the employee to express breast milk for the child. Such location will be in close proximity to the employee's work area and will not be a toilet stall. These accommodations will be available unless they would be an undue hardship on the Board of Education's business operations.

Every employee position in the school district is designated as either "non-exempt" or "exempt" by the provisions of the FLSA. Generally, a support staff member entitled to overtime pay is designated as "non-exempt." A support staff member that performs duties that are executive, administrative, or professional in nature and not entitled to overtime pay is designated "exempt." The school district administration shall refer to the comprehensive definitions of "exempt" and "non-exempt" as outlined in 29 C.F.R. 541 et seq. in determining an employee's designation will additionally be subject to the entitlements of the FLSA. The employee's reasonable break time to express breast milk will be granted each time the employee has need. She will have access to a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public. These enhanced entitlements under the FLSA are available for only one year after the birth of the employee's child.

A Board of Education is required to provide reasonable break times to non-exempt support staff members to express breast milk for their nursing child. The non-exempt A support staff member shall coordinate such her breaks with their her immediate supervisor. The non-exempt support staff member She will not receive compensation during this break time unless the break time is during a non-exempt support staff member's her compensated break time.



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~~A Board of Education is not required under the FLSA to provide such breaks to exempt support staff members. However, exempt support staff members may take such breaks provided the breaks are coordinated with their immediate supervisor. If this break is taken during the exempt support staff member's duty free lunch period or duty free break period during the workday, the exempt support staff member will not be reduced in compensation.~~

~~The Principal or the nursing mother's immediate supervisor, in consultation with the school nurse, will designate a lactation room that is shielded from view and free from intrusion from co-workers and the public. The location must be functional as a space for expressing breast milk and shall include an electrical outlet, a chair, and nearby access to running water. If the space is not dedicated to~~

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~~the nursing mother's use, it must be available when needed. A space temporarily converted into a lactation room or made available when needed by a nursing mother is sufficient; however, a bathroom, even if private, is not a permissible location under the FLSA.~~

~~All exempt and non-exempt support staff members are required to sign-out of work to begin the break to express breast milk and shall sign-in when they return to work after the break. The break shall be for a reasonable amount of time. For compensation purposes, the immediate supervisor shall forward all sign-in and sign-out information relative to break times for nursing mothers under the FLSA to the School Business Administrator/Board Secretary.~~

~~Fair Labor Standards Act – 29 U.S.C. 201 et seq.~~

~~Patient Protection and Affordable Care Act – P.L. 111-148~~

~~N.J.S.A. 10:5-12~~

~~N.J.S.A. 26:4C-1 through 26:4C-3~~

~~Adopted:~~



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Administration of Medication

Mar 20

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[See **POLICY ALERT** Nos. **125, 133, 144, 145, 157, 173, 179, 206 and 219**]

5330 ADMINISTRATION OF MEDICATION

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 **and hydrocortisone sodium succinate** in an emergency pursuant to N.J.S.A. 18A:40-12.5, ~~and 12.6, 12.29, and 12.30.~~

Self-administration of medication by a student for asthma or other potentially life-threatening illnesses, ~~or~~ a life threatening allergic reaction, **or adrenal insufficiency** 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 **and hydrocortisone sodium succinate to the student.** 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 **and the administration of hydrocortisone sodium succinate** using standardized training protocols established by the New Jersey Department of Education (NJDOE) in consultation with the Department of Health ~~and Senior Services~~ when the school nurse is not physically present at the scene.



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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 **or an advanced practice nurse** providing a prescription under a standing protocol for school epinephrine pursuant to N.J.S.A. 18A:40-12.5 **and/or hydrocortisone sodium succinate pursuant to N.J.S.A. 18A:40-12.29**, shall be held liable for any good faith act or omission consistent with the provisions of N.J.S.A. 18A:40-12.5 **and N.J.S.A. 18A:40-12.29**, 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.d **and N.J.S.A. 18A:40-12.33**. 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 **or an emergency requiring the administration of hydrocortisone sodium succinate**. 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 **or hydrocortisone sodium succinate** 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 **or the administration of hydrocortisone sodium succinate** to the student. ~~and~~ **In addition**, 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 **or the administration of hydrocortisone sodium succinate** to the student.

The permission for the emergency administration of epinephrine via a pre-filled auto-injector mechanism containing epinephrine to students for anaphylaxis **and/or the emergency administration of hydrocortisone sodium succinate for adrenal insufficiency** is effective for the school year it is granted and must be renewed for each subsequent school year.



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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~~ **NJDOE** regulations. Every student that is authorized to use self-administered asthma medication pursuant to N.J.S.A. 18A:40-12.3 or a nebulizer 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.

N.J.S.A. 18A:6-1.1; 18A:40-3.1; 18A:40-6; 18A:40-7; 18A:40-12.3;
18A:40-12.4; 18A:40-12.5; 18A:40-12.6; 18A:40-12.7;
18A:40-12.8; **18A:40-12.29 through 12.33**

N.J.S.A. 45:11-23

N.J.A.C. 6A:16-2.3(b)

Adopted:



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Administration of Medication

Mar 20

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[See **POLICY ALERT** Nos. **125, 133, 144, 145, 157, 173, 179, 206, 209 and 219**]

R 5330 ADMINISTRATION OF MEDICATION

A. Definitions

1. “Medication” means any prescription drug or over-the-counter medicine or nutritional supplement and includes, but is not limited to, aspirin and cough drops.
2. “Administration” means the taking of any medication by ingestion, injection, or application to any part of the body or the giving of direct physical assistance to the person who is ingesting, injecting, or applying medication.
3. “Self-administration” means carrying and taking medication without the intervention of the school nurse, approved through the school district policy and restricted to students with asthma, other potentially life-threatening illnesses, ~~or~~ life-threatening allergic reaction, **or adrenal insufficiency**.
4. “Life-threatening illness” means an illness or condition that requires an immediate response to specific symptoms or sequelae (an after effect of disease or injury) that if left untreated may lead to potential loss of life, ~~i.e. adrenaline injection in anaphylaxis~~.
5. “A pre-filled auto-injector mechanism containing epinephrine” is a medical device used for the emergency administration of epinephrine to a student for anaphylaxis.
6. “Noncertified ~~school~~ nurse” means a person who holds a current license as a registered professional nurse from the State Board of Nursing and is employed by the district, and who is not certified as a school nurse by the **New Jersey** Department of Education (**NJDOE**).
7. “Substitute school nurse” means a person who holds a current license as a registered professional nurse from the State Board of Nursing and who has been issued a county substitute certificate to serve as a substitute for a certified school nurse in accordance with N.J.A.C. 6A:9B-7.6.



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8. “School physician” means a physician with a current license to practice medicine or osteopathy from the New Jersey Board of Medical Examiners who works under contract or as an employee of the district. This physician is referred to as the medical inspector in N.J.S.A. 18A:40-4.1.
9. “Advanced practice nurse” means a person who holds a current ~~certification~~ **license** as nurse practitioner/clinical nurse specialist from the State Board of Nursing.
10. “Certified school nurse” means a person who holds a current license as a registered professional nurse from the State Board of Nursing and an Educational Services Certificate with a school nurse endorsement or school nurse/non-instructional from the Department of Education pursuant to N.J.A.C. 6A:9B-14.3 and 14.4.

B. Permission for Administration by a School Nurse or Registered Nurse

1. Permission for the administration of medication in school or at school-related ~~events~~ **sponsored events functions** will be given only when it is necessary for the health and safety of the student.
2. Medication will not be administered to a student who is physically unfit to attend school or has a contagious disease. Any such student should not be permitted to attend school and may be excluded in accordance with Policy 8451.
3. Parent requests for the administration of medication in school must be made in writing and signed by the parent.
4. The parent must submit a certified statement written and signed by the student’s physician. The statement must include:
 - a. The student’s name;
 - b. The name of the medication;
 - c. The purpose of its administration to the student for whom the medication is intended;



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- d. The proper timing and dosage of medication;
 - e. Any possible side effects of the medication;
 - f. The time when the medication will be discontinued;
 - g. A statement that the student is physically fit to attend school and is free of contagious disease; and
 - h. A statement that the student would not be able to attend school if the medication is not administered during school hours.
5. The request for the administration of medication must be made to the **Principal Superintendent or designee** prior to any administration of medication or delivery of the medication to the school. The **Principal Superintendent or designee** may consult with the school nurse and the school physician in making his/her final determination to allow or deny the request.
- a. An approved request will be signed by the **Principal Superintendent or designee** and given to the school nurse and the student's parent.
 - b. The parent will be informed of the **a** reason for a denied request; ~~a denied request may be appealed to the Superintendent.~~

C. Administration of Epinephrine to Students

1. **In accordance with N.J.S.A. 18A:40-12.5,** ~~t~~The parent may provide the **Superintendent or designee** authorization for the emergency administration of epinephrine via a pre-filled auto-injector mechanism containing epinephrine to a student for anaphylaxis provided:
- a. The parent provides the **Superintendent or designee** a written authorization for the administration of epinephrine ~~with written orders from the physician or an advanced practice nurse that the student requires the administration of epinephrine for anaphylaxis;~~



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- b. **The parent of the student provides the Superintendent or designee with written orders from the physician or an advanced practice nurse that the student requires the administration of epinephrine for anaphylaxis;**
- ~~b. The school nurse has the primary responsibility for the administration of epinephrine. However, the school nurse shall designate, in consultation with the Board or Superintendent, additional employees of the district who volunteer to administer epinephrine via a pre-filled auto-injector mechanism to a student when the school nurse is not physically present at the scene. These volunteers shall be trained using standardized training protocols established by the New Jersey Department of Education in consultation with the Department of Health and Senior Services. The student's parent must consent in writing to the administration of epinephrine via a pre-filled auto-injector mechanism by the designee(s).~~
- c. The parent ~~must be~~ **is** informed in writing by the Board of **Education** or Superintendent **or designee** that the school district and its employees or agents shall have no liability as a result of any injury to a student arising from the administration of epinephrine via a pre-filled auto-injector mechanism.;
- d. The parent ~~must~~ signs a statement acknowledging their understanding the district shall incur no liability as a result of any injury arising from the administration of 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 epinephrine via a pre-filled auto-injector mechanism to the student.;
- e. The permission for the emergency administration of epinephrine via a pre-filled auto-injector mechanism is effective for the school year it is granted and must be renewed for each subsequent school year upon the fulfillment of the requirements as outlined in a. through d. above.;



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f. **The Superintendent or designee requires:**

~~f. (1) The school nurse shall be responsible for T~~the placement of the student's prescribed epinephrine **to be** in a secure but unlocked location easily accessible by the school nurse and trained 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 student's emergency care plan. Back-up epinephrine shall also be available at the school if needed-;

~~g. (2) The school nurse or trained designee shall to be~~ promptly available on site at the school and school-sponsored functions in the event of an allergic reaction-; **and**

~~h. (3) The school nurse or trained designee shall arrange for T~~the transportation of the student to a hospital emergency room by emergency services personnel after the administration of epinephrine, even if the student's symptoms appear to have resolved.

g. **The Superintendent or designee shall also:**

~~i. (1) In accordance with the provisions of N.J.S.A. 18A:40-12.5.f, Permit~~ the school nurse or a ~~designated employee~~ trained **designee** to administer epinephrine via a pre-filled auto-injector mechanism ~~is permitted to administer epinephrine via a pre-filled auto-injector mechanism to any student without a known history of anaphylaxis or to any student whose parent has not met the requirements outlined above in Regulation 5330 – Section C.1.a., b., and d. and has not received the notice required in Regulation 5330 – Section C.1.c. when the school nurse or trained designee in good faith believes the student is having an anaphylactic reaction-; and~~



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- j- (2) **Require** ~~e~~Each school in the district ~~to will~~ maintain in a secure, but unlocked and easily accessible location, a supply of epinephrine auto-injectors prescribed under a standing order from a licensed physician **or advanced practice nurse**, and ~~that~~ is accessible to the school nurse and trained designees for administration to a student having an anaphylactic reaction.
2. In accordance with N.J.S.A. 18A:40-12.6, the school nurse shall have the primary responsibility for the administration of the epinephrine. 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 student for anaphylaxis when the nurse is not physically present at the scene. In the event that a licensed athletic trainer volunteers to administer epinephrine, it shall not constitute a violation of the "Athletic Training Licensure Act," P.L.1984, c.203 (C.45:9-37.35 et seq.).
- a. The school nurse shall determine that:
- (1) The designees have been properly trained in the administration of the epinephrine via a pre-filled auto-injector mechanism using standardized training protocols established by the NJDOE in consultation with the Department of Health;
 - (2) The parent of the student consented in writing to the administration of the epinephrine via a pre-filled auto-injector mechanism by the designees;
 - (3) The Board or Superintendent or designee has informed the parent of the student in writing that the district and its employees or agents shall have no liability as a result of any injury arising from the administration of the epinephrine to the student;



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- (4) The parent of the student signed 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; and
 - (5) The permission is effective for the school year for which it is granted and is renewed for each subsequent school year upon fulfillment of the requirements in subsections 2.a.(1) through 2.a.(4) above.
3. The NJDOE, in consultation with the Department of Health, shall require trained designees for students enrolled in a school who may require the emergency administration of epinephrine for anaphylaxis when the school nurse is not available.
4. Nothing in N.J.S.A. 18A:40-12.6 and Regulation 5330 – Section C. shall be construed to prohibit the emergency administration of epinephrine via a pre-filled auto-injector mechanism to a student for anaphylaxis by the school nurse or other employees designated pursuant to N.J.S.A. 18A:40-12.3(a)(1) when the student is authorized to self-administer epinephrine pursuant to N.J.S.A. 18A:40-12.3, 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, or when the epinephrine is administered pursuant to N.J.S.A. 18A:40-12.5.f.



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5. The certified school nurse, in consultation with the Superintendent or designee, shall recruit and train volunteer designees who are determined acceptable candidates by the school nurse within each school building as deemed necessary by the nursing services plan, in accordance with N.J.S.A. 18A:40-12.6c(b).
6. No school employee, including a school nurse, or any other officer or agent of a Board of Education, or a physician or an advanced practice nurse providing a prescription under a standing protocol for school epinephrine pursuant to N.J.S.A. 18A:40-12.5.f and Regulation 5330 – Section C.1.g., shall be held liable for any good faith act or omission consistent with the provisions of N.J.S.A. 18A:40-12.5 et seq., 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 N.J.S.A. 18A:40-12.6. Good faith shall not include willful misconduct, gross negligence, or recklessness.

D. Administration of Hydrocortisone Sodium Succinate to Students

1. In accordance with the provisions of N.J.S.A. 18A:40-12.29, the Board will permit the emergency administration of hydrocortisone sodium succinate through appropriate delivery devices and equipment to a student for adrenal insufficiency provided that:
 - a. The parent of the student provides the Superintendent or designee a written authorization for the administration of hydrocortisone sodium succinate;
 - b. The parent of the student provides the Superintendent or designee written orders from the physician or an advanced practice nurse that the student requires the administration of hydrocortisone sodium succinate for adrenal insufficiency;
 - c. The Superintendent or designee informs the parent of the student in writing that the school district and its employees or agents shall have no liability as a result of any injury arising from the administration of hydrocortisone sodium succinate;



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- d. The parent of the student signs a statement acknowledging their understanding that the district shall have no liability as a result of any injury arising from the administration of hydrocortisone sodium succinate to the student and that the parent shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the administration of hydrocortisone sodium succinate to the student; and
 - e. The permission for the administration of hydrocortisone sodium succinate is effective for the school year for which it is granted and must be renewed for each subsequent school year upon the fulfillment of the requirements as outlined in a. through d. above.
2. In accordance with the provisions of N.J.S.A. 18A:40-12.29.b:
- a. The placement of the student's prescribed hydrocortisone sodium succinate shall be in a secure, but unlocked location easily accessible by the school nurse and trained designees to ensure prompt availability in the event of emergency situations at school or at a school-sponsored function. The location of the prescribed hydrocortisone sodium succinate shall be indicated on the student's emergency care plan. Back-up hydrocortisone sodium succinate, provided by the student's parent, shall also be available at the school if needed;
 - b. The school nurse or trained designee shall be promptly available on site at the school and school-sponsored functions in the event of an emergency; and
 - c. The student shall be transported to a hospital emergency room by emergency services personnel after the administration of hydrocortisone sodium succinate, even if the student's symptoms appear to have resolved.



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3. In accordance with N.J.S.A. 18A:40-12.30, the school nurse has the primary responsibility for the administration of hydrocortisone sodium succinate.

The school nurse shall designate, in consultation with the Superintendent or designee, additional employees of the school district who volunteer to administer hydrocortisone sodium succinate to a student when the school nurse is not physically present at the scene.

In the event that a licensed athletic trainer volunteers to administer hydrocortisone sodium succinate, it shall not constitute a violation of the "Athletic Training Licensure Act" - N.J.S.A. 45:9-37.35 et seq.

The school nurse shall determine that:

- a. The designees have been properly trained in the administration of hydrocortisone sodium succinate using standardized training protocols established by the NJDOE in consultation with the Department of Health;
- b. The parent of the student consented in writing to the administration of hydrocortisone sodium succinate by the designee(s);
- c. The Superintendent or designee has informed the parent of the student in writing that the district and its employees or agents shall have no liability as a result of any injury arising from the administration of hydrocortisone sodium succinate to the student;
- d. The parent of the student signed a statement acknowledging their understanding that the district shall have no liability as a result of any injury arising from the administration of hydrocortisone sodium succinate to the student and that the parent shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the administration of hydrocortisone sodium succinate to the student; and



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- e. The permission is effective for the school year for which it is granted and is renewed for each subsequent school year upon fulfillment of the requirements in N.J.S.A. 18A:40-12.30 and D.3.a through d above.
4. Nothing in N.J.S.A. 18A:40-12.30 and D.3. above shall be construed to prohibit the emergency administration of hydrocortisone sodium succinate to a student for adrenal insufficiency by the school nurse or other employees designated pursuant to N.J.S.A. 18A:40-12.30 and D.3. above when the student is authorized to self-administer hydrocortisone sodium succinate pursuant to N.J.S.A. 18A:40-12.3.
5. The certified school nurse, in consultation with the Superintendent or designee, shall recruit and train volunteer designees who are determined acceptable candidates by the school nurse within each school building as deemed necessary by the nursing services plan, in accordance with N.J.S.A. 18A:40-12.32(b).
6. No school employee, including a school nurse, or any other officer or agent of a Board of Education shall be held liable for any good faith act or omission consistent with the provisions of N.J.S.A. 18A:40-12.29 et al., nor shall an action before the New Jersey State Board of Nursing lie against a school nurse for any action taken by a person designated in good faith by the school nurse pursuant to N.J.S.A. 18A:40-12.30. Good faith shall not include willful misconduct, gross negligence, or recklessness, in accordance with N.J.S.A. 18A:40-12.33.

DE. Permission for Self-Administration of Medication

In accordance with N.J.S.A. 18A:40-12.3, the Board shall permit the ~~Permission for self-administration of medication of by a student with for~~ **asthma, or other potentially life-threatening illnesses, or a life-threatening allergic reaction, or adrenal insufficiency may be granted under the following conditions provided that:**

1. ~~The p~~**Parent** of the student ~~must~~ provides the Board **or Superintendent or designee** written authorization for the self-administration of medication;



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2. The parent of the student ~~must also~~ provides the Board **or Superintendent or designee** with a signed written certification from the physician of the student that the student has asthma or another potentially life threatening illness, ~~or~~ is subject to a life-threatening allergic reaction, **or has adrenal insufficiency** and is capable of, and has been instructed in, the proper method of self-administration of medication. The written certification must include:
 - a. The student's name;
 - b. The name of the medication;
 - c. The purpose of its administration to the student for whom the medication is intended;
 - d. The proper timing and dosage of medication;
 - e. Any possible side effects of the medication;
 - f. The time when the medication will be discontinued, **if applicable**;
 - g. A statement that the student is physically fit to attend school and is free of contagious disease; and
 - h. A statement the medication must be administered during the school day or the student would not be able to attend school.
3. **The Board or the Superintendent or designee informs the parent of the student in writing that the district and its employees or agents shall incur no liability as a result of any injury arising from the self-administration of medication by the student;**
34. The parent of the student ~~have signed~~ a statement acknowledging that the school district shall incur no liability as a result of any injury arising from the self-administration of medication by the student and that the parent shall indemnify and hold harmless the school district, the Board, and its employees or agents against any claims arising out of the self-administration of medication by the student;



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45. The parent's written authorization and the physician's written certification ~~shall be~~ **is** reviewed by the Principal or designee with the school nurse and the school physician. The school nurse and the school physician must agree the student is capable of self-administration of the medication. If it is determined the student may self-administer medication in accordance with the request:
- a. The request will be signed by the Principal and given to the school nurse and the student's parent;
 - b. The parent will be informed of ~~the a~~ reason for a denied request; ~~a denied request may be appealed to the Superintendent.~~
56. Permission to self-administer one medication shall not be construed as permission to self-administer other medication; and
67. Permission shall be effective on the school year for which it is granted and shall be renewed for each subsequent school year upon fulfillment of the requirements in **E.1.** through **E.46.** above.

EF. Custodianship of Medication

1. Medications to be administered by the school nurse or a registered nurse:
- a. All medications must be delivered to the school by the parent.
 - b. All medications must be in the original container, with the prescription information affixed.
 - c. The school nurse shall be custodian of students' medication, which will be properly secured.
 - d. Any unused medication must be picked up by the student's parent.



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- e. After reasonable efforts to have the parent retrieve the medication have failed, any unused medication that remains in the school at the end of the school year or two school weeks after the student stops taking the medication, whichever first occurs, must be destroyed or discarded by the school nurse, in accordance with proper medical controls.
- 2. Medications to be self-administered by a student:
 - a. Time being of the essence in cases of asthma, **or** other potentially life threatening illnesses, or a life-threatening allergic reaction, **or adrenal insufficiency**, all medications to be self-administered by a student must be kept in the student's possession.
 - b. No student may possess medication for self-administration unless the proper permission has been granted by the Principal **or designee** and a record of the medication is on file in the office of the school nurse.
 - c. Students who are permitted to self-administer medications must secure their medication in such a manner that the medication will not be available to other students. The medication must be in a sealed container and clearly labeled with the medication name, dosage, and ordering physician. The medication, if ingested by someone other than the student, shall not cause severe illness or death.
 - d. Students who are permitted to self-administer medications shall only have in their possession the quantity of medication necessary for the time period of the student's school day.
 - e. Notwithstanding any other law or regulation, a student who is permitted to self-administer medication in accordance with the provisions of N.J.S.A. 18A:40-12.3 shall be permitted to carry an inhaler or prescribed medication for allergic reactions, including a pre-filled auto-injector mechanism, **or prescribed medication for adrenal insufficiency**, at all times, provided the student does not endanger himself/**herself** or other persons through misuse.



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FG. Administration of Medication

1. No medication shall be administered to or taken by a student in school or at a school-sponsored ~~event~~ **function** except as permitted by Board Policy ~~5330~~ and this ~~R~~regulation.
2. 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, 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 **and to administer hydrocortisone sodium succinate in an emergency pursuant to N.J.S.A. 18A:40-12.29 and 12.30.**
3. When practicable, self-administration of medication should be observed by the school nurse.
4. Students self-administering medication shall report each administration of medication and any side effects to a teacher, coach, or the individual in charge of the student during school activities. Such individuals shall report all administrations and any side effects reported or observed to the school nurse within twenty-four hours.
5. When a student attends a school-sponsored ~~event~~ **function** at which medication may be required (such as an outdoor field trip or athletic competition) and the school nurse cannot be in attendance, the student's parent will be invited to attend. If neither the school nurse nor the parent can attend and the student does not have permission to self-administer medication and there is a risk that the student may suffer injury from lack of medication, the student may be excused from the ~~event~~ **function**.

GH. Emergencies



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1. Any medical emergency requiring medication of students will be handled in accordance with Policy 8441 and implementing regulations on first aid and, as appropriate, the school physician's standing orders for school nurses. Arrangements will be made to transport a student to a hospital emergency room after the administration of epinephrine in accordance with N.J.S.A. 18A:40-12.5.e.(3) **and after the administration of hydrocortisone sodium succinate in accordance with N.J.S.A. 18A:40-12.29.b.(3).**
2. ~~Nothing in N.J.S.A. 18A:40-12.6 prohibits the emergency administration of epinephrine via a pre-filled auto-injector mechanism to a student for anaphylaxis by the school nurse or other trained designated employees pursuant to N.J.S.A. 18A:40-12.6 when the student is authorized to self-administer epinephrine pursuant to N.J.S.A. 18A:40-12.3, 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 medicine, or when the epinephrine is administered pursuant to N.J.A.C. 18A:40-12.5.~~

III. Records

The school nurse shall include the following in a student's health record:

1. The approved written request for the administration or self-administration of medication;
2. A record of each instance of the administration of the medication by the school nurse or a registered nurse;
3. A record of reports by teachers, coaches, and other individuals in charge of school activities who report student self-administration of medication;
4. Any side effects that resulted from the administration of medication; and



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5. Whether the supply of medication provided in cases where the medication is to be administered by the school nurse or a registered nurse was exhausted or the parent removed the medication or, if the parent failed to remove the medication, the medication was destroyed and the date on which that occurred.

IJ. Notification

1. The school nurse may provide the Principal and other teaching staff members concerned with the student's educational progress with information about the medication and administration when such release of information is in the student's best educational interest.
2. The school nurse will provide teachers, coaches, and other individuals in charge of school activities with a list of students who have been given permission to self-administer medication.
3. The school nurse will inform the student's parent of any difficulty in the administration of medication or any side effects.
4. The school nurse will report to the school physician any student who appears to be adversely affected by the medication.

Adopted:

