Date: December 13, 2023

To: Local Educational Agency Leads, Administrators of Nonpublic Schools

Route To: Principals, School Nurses, School Physicians

From: Kathy Ehling, Assistant Commissioner

Division of Educational Services

Delegation of Medication Administration in School Settings

The New Jersey Department of Education (NJDOE) has received several inquiries regarding scenarios when it is permissible for a school nurse to delegate medication administration to other staff members in the school setting. Confusion regarding permissible delegation may lead to inconsistent practices and place students and staff members at risk. This memorandum is intended to clarify the scenarios when delegation of medication administration is required and permitted in a school setting.

The New Jersey Board of Nursing (NJBON) provides oversight regarding nursing practice. This includes the licensing, regulations for safe ethical practice, and discipline for nurses who violate those regulations or ethics. The NJDOE recognizes that through the licensure granted by the Division of Consumer Affairs and the NJBON, it is within a registered nurse's scope of practice to delegate medication administration.

School nursing is a separate and distinct specialty. The credentials of a certified school nurse (CSN) in New Jersey signify a registered professional nurse (RN) with advanced professional nursing knowledge and clinical skills specific to the school setting. The certified school nurse must be directly employed by the district board of education and cannot be employed through a contract with a third party. Consequently, a CSN hired by a local educational agency is providing school health services through both their licensure as an RN and certification as a CSN. The CSN's practices are governed by regulations administered by both the NJBON and the NJDOE. The regulations administered by the NJDOE specify how nursing practices are allowed to be implemented within a school setting.

Pursuant to N.J.A.C. 6A:16-2.1(a)2, school health services provided in a school setting restrict the individuals permitted to administer medication to students to the following:

- i. The school physician.
- ii. A certified school nurse or noncertified nurse.
- iii. A substitute school nurse employed by the school district.
- iv. The student's parent.
- v. A student approved to self-administer medication pursuant to N.J.A.C. 6A:16-2.1(a)5iii and 9 and N.J.S.A. 18A:40-12.3 and 12.4.
- vi. Other school employees who volunteer to be 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.
- vii. Other employees who volunteer to be designated as a delegate and trained to administer glucagon pursuant to N.J.S.A. 18A:40-12.14.

In certain circumstances, there are statutes enacted that specifically require school nurses to delegate medication, allow or require other members of a school community to administer specific medications:

- N.J.S.A. 18A:40-12.3 permits the self-administration of medication by a pupil for asthma or other potentially life-threatening illnesses, a life-threatening allergic reaction, or adrenal insufficiency.
- N.J.S.A. 18A:40-12.15 allows for students with diabetes to self –manage their care and administer medication related to their diabetes.
- N.J.S.A. 18A:40-12.30 requires the school nurse to designate the administration of hydrocortisone sodium succinate to employees who volunteer when the nurse is not available.
- N.J.S.A. 18A:40-12.14 requires the school nurse to designate the administration of glucagon to a student with diabetes who is experiencing severe hypoglycemia when a school nurse is not physically present at the scene.
- o N.J.S.A. 18A:40-12.6c requires the school nurse to recruit and train volunteer designees to administer epinephrine via an auto injector when the nurse is not present.
- N.J.S.A. 18A:40-12.24 directs the school nurse and trained school personnel to administer opioid antidotes in the event that someone is believed to be experiencing an opioid overdose.

As per N.J.S.A. 18A:40-3.3, a local educational agency (LEA) may supplement the services provided by the certified school nurse with non-certified nurses, provided that the non-certified nurse is assigned to the same school building or school complex as the certified school nurse. In addition, there are circumstances which allow LEAs to hire licensed practical nurses (LPNs). An LPN's practice within the scope of their education and training includes medication administration. LPNs are not trained or educated in assessment of illness or injury. An LPN does not work independently, but rather may be employed by an institution or organization and supervised by the certified school nurse. The board of nursing explains that supervision may require the direct continuing presence or the intermittent observation, direction, and occasional physical presence of a registered professional nurse. Whether supervised directly or indirectly by an RN or CSN, LPNs are responsible for professional acts and accepting assignments in which they are competent.

LEAs and district boards of educations are reminded that, in order to protect the health and safety of students, N.J.A.C. 6A:16-2.1(a) requires each district board of education to develop and adopt written policies, procedures, and mechanisms for the provision of health, safety, and medical emergency services, and shall ensure staff are informed as appropriate. This includes the provision of health services in emergency situations, including the care of any student who becomes injured or ill while at school or participating in school-sponsored functions.

Contact Information

Questions may be directed to healthysch@doe.nj.gov.

c: Members, State Board of Education NJDOE Staff Statewide Parent Advocacy Network Garden State Coalition of Schools NJ LEE Group