

5330.04 ADMINISTERING AN OPIOID ANTIDOTE

N.J.S.A. 18A:40-12.24.a requires schools to adopt a Policy for the emergency administration of an opioid antidote to a student, staff member, or other person who is experiencing an opioid overdose.

N.J.S.A. 18A:40-12.24.a.(1) requires schools with any of the grades nine through twelve to comply with the provisions of the law.

N.J.S.A. 18A:40-12.24 requires a school to obtain a standing order for opioid antidotes pursuant to the “Overdose Prevention Act” - N.J.S.A. 24:6J-1 et seq. The school shall maintain a supply of opioid antidotes under the standing order in a secure, but unlocked and easily accessible location. The opioid antidotes shall be accessible in the school during regular school hours and during school-sponsored functions that take place in the school or on school grounds adjacent to the school building.

For the purpose of this policy, “nurse” shall refer to a certified registered nurse or school nurse; “designated person” shall refer to qualified volunteer school personnel.

The school nurse and a designated employee who volunteers to administer an opioid antidote pursuant to N.J.S.A. 18A:40-12.24.c. are required to be trained for the administration of an opioid antidote in accordance with N.J.S.A. 18A:40-12.25.b. The school nurse or a designated employee who volunteers to administer an opioid antidote shall be promptly available on site at the school during regular school hours and during school-sponsored functions that take place in the school or on school grounds adjacent to the school building at any time.

N.J.S.A. 18A:40-12.24 permits the school nurse or a designated trained employee to administer an opioid antidote to any person whom the nurse or the trained designated employee who in good faith believes is experiencing an opioid overdose during school hours or during on-site school-sponsored activities to block the opioid’s life-threatening effects.

An overdose victim shall be transported to a hospital emergency room by emergency medical responders after the administration of an opioid antidote, even if the person’s symptoms appear to have resolved.

In accordance with N.J.S.A. 24:6J-4.a.(1)(f), a prescriber or other health care practitioner, as appropriate, may prescribe or dispense an opioid antidote directly or through a standing order to a school, school district, or school nurse. In accordance with N.J.S.A. 24:6J-4.a.(2)(c), whenever the law expressly authorizes or requires a school or school

district to obtain a standing order for opioid antidotes, the school nurse(s) employed or engaged by the school or school district shall be presumed by the prescribing or dispensing health care practitioner to be capable of administering the opioid antidote, consistent with the express statutory requirement. The physician's standing order must specify a school district certified school nurse or any other appropriately licensed school healthcare professional is authorized to administer the opioid antidote to overdose victims. In accordance with N.J.S.A. 24:6J-5a(a), the school physician issuing the standing order shall ensure that overdose prevention information is provided to the school district and the certified school nurse(s) authorized to administer an opioid antidote. The overdose prevention information shall include but not be limited to: information on opioid overdose prevention and recognition; instructions on how to perform rescue breathing and resuscitation; information on opioid antidote dosage and instructions on opioid antidote administration; information describing the importance of calling 911 emergency telephone service for assistance with an opioid overdose; and instructions for appropriate care of an overdose victim after administration of the opioid antidote.

Upon receiving a report of a possible 4.a.(2)(c), whenever the law expressly authorizes or requires a school district to obtain a standing order for opioid overdose during school hours or during an on-site school-sponsored activity, the Principal, Principal's designee, or supervising staff member will immediately call 911. The school nurse, during school hours and if available at an on-site school-sponsored activity, will also be immediately called. In accordance with the provisions of N.J.S.A. 24:6J-4.d.(1), the school nurse who has received overdose prevention information pursuant to N.J.S.A. 24:6J-5.a.(1) and has been deemed capable of administering the opioid antidote by the school physician may administer the opioid antidote to a student, school personnel, or other person in an emergency if the school nurse believes, in good faith, that the person is experiencing an opioid overdose, consistent with the express statutory requirement.

The school nurse and/or other school staff members shall keep the student, school personnel, or other person comfortable until emergency medical responders arrive on the scene. Any student who receives an opioid antidote by the school nurse, designated person or emergency medical responder shall be transported to the nearest hospital with a school staff member designated by the Principal, Principal's designee, or supervising staff member of the on-site school-sponsored activity.

The Principal, Principal's designee, or supervising staff member will notify the parent of any student or a family member or other contact person for a school staff member who may be experiencing a possible opioid overdose as soon as practicable. The Principal, Principal's designee, or supervising staff member of the on-site school-sponsored activity

shall notify the Superintendent of Schools whenever an opioid antidote is administered by a school nurse, designated person or an emergency medical responder.

The school nurse shall be responsible to store the opioid antidote that has been prescribed by the school physician in a safe and secure location; document the administration of an opioid antidote on a student's health record; monitor the on-site inventory and replacement of the opioid antidote supply; and plan for the disposal of administered opioid antidote and expired opioid antidote applicator.

Any student or school staff member who is found to be under the influence of a controlled dangerous substance shall be subject to the provisions of applicable statutes and administrative codes and Board policies and regulations regarding substance use.

Notwithstanding the provisions of N.J.S.A. 24:6J-4.a.(3)(b) to the contrary, if the law expressly authorizes or requires a school, school district, or school nurse to administer or dispense opioid antidotes pursuant to a standing order under N.J.S.A. 24:6J-4 et seq., the standing order issued shall be deemed to grant the authority specified by the law, even if such authority is not specifically indicated on the face of the standing order.

In accordance with the provisions of N.J.S.A. 18A:40-12.26, no school employee, including a school nurse or any other officer or agent of a Board of Education or charter school, or a prescriber of opioid antidotes for a school through a standing order, shall be held liable for any good faith act or omission consistent with the provisions of N.J.S.A. 18A:40-12.23 et seq. Good faith shall not include willful misconduct, gross negligence, or recklessness.

Any school, school district, school nurse, school employee, or any other officer or agent of a Board of Education or charter school who administers or permits the administration of an opioid antidote in good faith in accordance with the provisions of N.J.S.A. 18A:40-12.24 and pursuant to a standing order issued under N.J.S.A. 24:6J-4 shall not, as a result of any acts or omissions, be subject to any criminal or civil liability or any disciplinary action for administering, or permitting the administration of, the opioid antidote in accordance with N.J.S.A. 24:6J-1 et seq.

Notwithstanding the provisions of any law, rule, regulation, ordinance, or institutional or organizational directive to the contrary, any person or entity authorized to administer an opioid antidote pursuant to N.J.S.A. 24:6J-4, may administer to an overdose victim, with full immunity: a single dose of any type of opioid antidote that has been approved by the United States Food and Drug Administration for use in the treatment of opioid overdoses; and up to three doses of an opioid antidote that is administered through an intranasal application, or through an intramuscular auto-injector, as may be necessary to revive the

overdose victim. Prior consultation with, or approval by, a third-party physician or other medical personnel shall not be required before an authorized person or entity may administer up to three doses of an opioid antidote, as provided in N.J.S.A. 24:6J-4, to the same overdose victim.

A school district may enter into a shared services arrangement with another school district for the provision of opioid antidotes pursuant to N.J.S.A. 18A:40-12.27 if the arrangement will result in cost savings for the districts.

This Policy and Regulation 5330.04 shall be reviewed and approved by the school physician prior to Board adoption and whenever this Policy is revised. This Policy shall be made available to school staff members, parents, and students in handbooks, on the school district's website, or through any other appropriate means of publication.

N.J.S.A. 18A:40-12.23; 18A:40-12.24; 18A:40-12.25;

18A:40-12.26; 18A:40-12.27

N.J.S.A. 24:6J-1 et seq.

Adopted: 19 December 2017

Revised: