

# Franklin Lakes School District Nursing Services Plan

## 2015-2016

(N.J.A.C. 6A:16-2.1 through 2.5)

**District Name: Franklin Lakes**

**School Year: 2015-2016**

**Board of Education Approval Date: October 27, 2015 (as per N.J.A.C. 16:A-2.1 (b))**


**District Contact Person: Lydia Furnari**

### I. Description of Basic Nursing Services Provided to All Students: (N.J.A.C. 6A 16-2.1 (b) 2 (i))

Basic services: N.J.A.C. 16A and N.J.S.A. 18A:40, federal law (such as FERPA- 20 U.S.C. §1232g, 34 CFR Part 99) and N.J. Sanitation Code. Under the direction of the School Physician, the following services are provided to students:

A. Health Records (N.J.A.C. 8:57-4.1 through 4.20)	
1. Maintain and review student health documents	(N.J.A.C. 6A:16-2.2 (g))
a) State of New Jersey Health History and Appraisal record i.e., A-45 cards	
b) Immunization record	(N.J.A. C.6A:16-2.2 (a))
c) Medical history	
d) Conduct and record health screenings (i.e., height, weight, hearing, vision, scoliosis and blood pressure as per current NJ statues)	(N.J.A.C. 6A:16-2.2 (k))
e) Physical examinations for:	
(1) Athletic Pre-Participation Physical Examination Form Part A & B as part of student's health record	(N.J.S.A. 18A: 40-41.9 and N.J.A.C. 6A:16-2.2 (h)1)
(a) Distribution of educational fact sheet annually to parents or guardians of students of <b>Sports-Related Eye Injuries</b>	
(2) New or transfer student	(N.J.A.C. 6A:16-2.2 (h) 2)
(3) Working Papers health exam	(N.J.A.C. 6A:16-2.2 (h) 3)
(4) Comprehensive child study team evaluation	(N.J.A.C. 6A:16-2.2 (h) 4)
(5) Evaluation of student suspected of being under the influence of alcohol or a controlled dangerous substance	(N.J.A.C. 6A:16-2.2 (h) 5)

f) Transference and request of health records i.e. A-45 and current physical exam	(N.J.A.C. 6A:16-2.4 (d))
g) Adherence to Family Education Rights and Privacy Act	(FERPA- 20 U.S.C.§1232g, 34 CFR Part 99, N.J.A.C. 6A:16-2.4 (c))
2. Determine student status for admission or retention with unacceptable evidence of immunizations	(N.J.A.C. 6A:16-2.2(b))
3. Conduct tuberculosis testing as directed by the NJ DHSS	(N.J.S.A. 18A:40-16 & N.J.A.C. 6A:16-2.2 (c))
B. Medications, health care treatments, procedures and care:	(N.J.A.C. 6A:16-2.1 (a) 2)
1. Administer authorized medications, health care treatments and care	(N.J.A.C. 6A:16-2.1 (a) 2 )
2. Approval of self administered medications	(N.J.S.A.18A:40-12.3 & 12.4 & N.J.A.C. 6A:16-2.1 (a) 2v)
3. Designate and train annually epinephrine and glucagon auto injector delegates	(N.J.A.C. 6A:16-2.1(a) 2 vi N..J.S.A. 18A:40-12.5; 12.6 & 12.14)
4. Permit the school nurse or trained designee to administer epinephrine via a pre-filled auto-injector mechanism <b>to any student without a known history of anaphylaxis when the nurse or trained designee in good faith believes the student is having an anaphylactic reaction or any student whose parent has not;</b> a) Provided written authorization for the administration of epinephrine; b) Provided written orders from the physician or advanced practice nurse that the student requires epinephrine for anaphylaxis; c) Received written notice from the board of education (BOE) or nonpublic school chief school administrator that the agencies and their employees or agents have no liability as a result of an injury arising from the administration of epinephrine; and d) Signed a statement releasing the BOE or nonpublic school of liability.	(N.J.S.A. 18A:40-12.5a-d and N.J.S.A. 18A:40-12.6)
C. Review and create IHP/IEHP for Do Not Resuscitate (DNR) orders	(N.J.A.C. 6A:16-2.1 (a) 3)
D. Provide Health Care	(N.J.A.C. 6A:16-2.1 (a) 4)
1. Provide nursing health care and execute medical regimens to students as per: NJ Nurse Practice Act, District Collaborative Standing Orders, IHP, IEHP and Medical Home Practitioner's orders.	(N.J.A.C. 6A:16-2.1 (a)10 (N.J.S.A. 45:11-23)- New Jersey Board of Nursing Statutes
2. Isolate, exclude and re-admit any student or employee with a communicable disease	(N.J.A.C. 6A:16-1.4 (a))
3. Report "Reportable Communicable Disease" to County health officer	(N.J.A.C. 8:57-1 & N.J.A.C. 6A:16-2.2 (d))
4. Arrange for transportation and supervision of students in need of emergency health care	(N.J.A.C. 6A:16-2.1 (a) 4(iv)

5. Notify parents of need for emergency care	(N.J.A.C. 6A:16-2.1 (a) 4 (v))
6. Administer emergency medications i.e., anaphylaxis (epinephrine) or asthma medications etc.	(N.J.A.C. 6A:16-2.1 (a) 4)
7. Write and update annually student individualized health care plans (IHP's) and individualized emergency health care plan (IEHP's) for student's medical needs and instruction of staff.	(N.J.A.C.6A:16-2.1(a)10(i) and (N.J.A.C. 6A:16-2.3 (b) 3(xii))
8. Establish, annually review and implement Standards of Care/Collaborative Standing Orders with the School physician for deliverance of daily and emergency health care	(N.J.A.C. 6A:16-2.3 (a) 3(vi) and N.J.A.C 6A:16-2.3(b) 3(i))
E. Administer asthma related care	(N.J.A.C. 6A:16-2.1 (a) 5)
1. Obtain training for administration of medication via nebulizer	(N.J.S.A.18A:40-12.8 (a) & (N.J.A.C. 6A:16-2.1(a) 5 ii)
2. Maintain one nebulizer per school	(N.J.A.C. 6A:16-2.2 (e))
3. Require Students to have a current "Asthma Action Plan	(N.J.A.C. 6A:16-2.1 (a) 5 (iii))
F. Health history and examinations	(N.J.S.A. 18A:40-4, N.J.S.A. 18A:35-4.8, N.J.A.C. 6A:16-2.2 and N.J.A.C. 6A:16-2.1 (a) 6)
1. Provide health examination for student's without medical homes	(N.J.A.C. 6A:16-2.2 (f) 6)
G. Establish and maintain procedures for universal precautions	(N.J.A.C.6A:16-2.1 (a) 7)
H. Provide nursing services to nonpublic school located in district	(N.J.A.C. 6A:16-2.1 (a) 8)
I. Instruct students/ teachers/staff:	(N.J.A.C. 6A:9-13.3, N.J.S.A. 18A:40-3; and N.J.A.C. 6A:16-2.3 (b)3. xv
1. communicable diseases, blood borne pathogens	
2. Asthma management	
3. Anaphylaxis and symptoms of hyperglycemia and hypoglycemia	
4. classroom health curriculum (not CSN with a "Non-Instructional" certificate)	
5. other health concerns	
J. Provide information for:	
1. NJ Family Care program	(N.J.A.C. 6A:16-2.2 (i))
K. Implementation of the Nurse Practice Act by.....	
L. Certified School Nurse Functions as Certified School Nurse (CSN) and Registered Nurse	N.J.S.A. 45:11-23.- New Jersey Board of Nursing Statutes
1. Nursing Diagnosis /Case-finding of actual or potential physical health problems	
2. Provision of nursing care for actual or potential emotional health problems	
3. Health teaching in health office	

4. Health teaching in classroom	
5. Health counseling	

## II. Summary of Nursing Services Required to Address Specific Health Care Needs of Individual Students (N.J.A.C. 6A:16-2.3 (b)3)

Indicated number students for which you are providing services. From the list below add or delete nursing services that are provided or not provided by your schools within district, respectively.

<b>Services Required to Address Specific Health Care Needs of Individual Students with acute care needs, chronic illness, special health needs, procedures and administration of medications, procedures or treatments.</b>		<b>HMR</b>	<b>WAS</b>	<b>CRS</b>			<b>FAMS</b>	
First-Aid, splinting, Ace-wrap etc.		220	254	262			441	
Dental: tooth avulsion, caries, braces, etc.		220	254	262			441	
Health Screenings Ht., Wt., & BP yearly		220	254	262			441	
Visual Acuity screening K,2,4,6,8,10		220	254	262			441	
Auditory screening K,1,2,3,7,11		220	254	262			441	
Scoliosis screening biennially age 10-18		36	59	49			161	
Diabetic Glucose testing, insulin pump management		1	0	0			0	
Mantoux/PPD testing		0	0	15			0	
Medication Administration- daily		1	2	3			1	
Medication Administration - PRN		22	32	25			66	
Nebulizer/inhalers/peak flow measurements		6	8	4			17	
Tube feedings		0	0	0			0	
Urinary catherizations		0	0	0			0	
Ventilator care		0	0	0			0	
Referral for vision evaluations		5	6	10			10	
Referral for hearing evaluations		2	2	2			1	
Referral for Alcohol and drug use/abuse testing		0	0	0			0	
Referral for pregnancy		0	0	0			0	
Nursing Diagnosis /Case-finding of actual or potential		220	254	262			441	

[illegible]

### **III. Emergency Management (N.J.A.C. 6A:16-2.1 (a) 4**

**(Emergency management is a description of how nursing services will be provided in all emergency situations for the entire school district. Add or delete the following services provided or not provide by your school district, respectively)**

#### **A. Acute Care Management Plan:**

1. Creation and maintenance of an Emergency Management Kit (“Go-box”, crash cart, etc.) for utilization in Crisis, Emergency Evacuations, or and Shelter-In-Place situations
2. Cardiac or Respiratory Distress Action Plan
  - a) AEDs (Automatic External Defibrillators) deployment and delegates trained (reference Janet’s Law Requirement)
  - b) CPR trained school nurse
  - c) Asthma Nebulizer trained nurses
  - d) Universal Precautions trained staff
  - e) CPR trained coaches/athletic trainers/teachers/staff

#### **B. IEHP’s/Chronic Care Management Plans:**

1. Epinephrine Auto-Injector/ Anaphylaxis Action Plan
2. Asthma Action Plan
3. Diabetic Action Plan
4. Lock-Down Health Care Action Plan
5. Shelter-In –Place Health Care Action Plan

#### **C. District Crisis Management Plan:**

1. Triage Action Plans in District Crisis Management Plan

#### **D. Community Rescue Squad and Emergency Paramedic Services**

1. How is emergency response services provided to your district schools?

#### **IV. Detailed Nursing Assignments Sufficient to Provide Health Services (N.J.A.C. 6A 16-2.3 (b))**

[illegible]



## **V. Nursing Services and Additional Medical Services provided to Non-Public Schools**

**Non-public nursing services** (N.J.A.C. 6A:16-2.1(a)8)

**1. Non-public nursing services are** provided by Catapult Learning, LLC to the following schools located in the Franklin Lakes School District: Most Blessed Sacrament and Barnert Temple on an as needed basis.

(Please submit to Executive County Business Official the following):

### **VI. Additional District Nursing Services Information:**

Add any additional data that your school district requires be disclosed in this Nursing Services Plan

**A.**

**1.**

**B.**

**1.**

**Nursing Services Plan Reviewed By:**

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**School Physician Name**

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**Signature**

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**Date**

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**Head Nurse Name**

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**Signature**

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**Date**

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**CSA Name**

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**Signature**

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**Date**