



POLICY

**Haddonfield
Board of Education**

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Administering an Opioid Antidote
(M)

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 and permits schools with students in other grades to comply with the provisions of N.J.S.A. 18A:40-12.24.a.(1). Therefore, the Board extends the provisions of N.J.S.A. 18A:40-12.23 through 12.27 to schools with any of the grades K through 12.

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. The Board may, in its discretion, make an opioid antidote accessible during school-sponsored functions that take place off school grounds.

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.

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.



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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.



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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.

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R 5330.04 ADMINISTERING AN OPIOID ANTIDOTE

A. Definitions

1. “Opioid antidote” means any drug, regardless of dosage amount or method of administration, which has been approved by the United States Food and Drug Administration (FDA) for the treatment of an opioid overdose. “Opioid antidote” includes, but is not limited to, naloxone hydrochloride, in any dosage amount, which is administered through nasal spray or any other FDA-approved means or methods.
2. “Opioid overdose” means an acute condition including, but not limited to, extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death resulting from the consumption or use of an opioid drug or another substance with which an opioid drug was combined, and that a layperson would reasonably believe to require medical assistance.
3. “School-sponsored function” means any activity, event, or program occurring on or off school grounds, whether during or outside of regular school hours, that is organized or supported by the school.
 - a. The requirements of N.J.S.A. 18A:40-12.23 through 12.27 only apply to school-sponsored functions that take place in the school or on school grounds adjacent to the school building.

B. Acquisition, Maintenance, Accessibility, and Documentation of an Opioid Antidote

1. In accordance with N.J.S.A. 24:6J-4(a)(1)(f) and N.J.S.A. 24:6J-4(a)(2)(c), the school physician may prescribe or dispense an opioid antidote through a standing order to the school district, school, or certified school nurse for administration to overdose victims. The school physician’s standing order must specify, at a minimum, the following:
 - a. The certified school nurse is authorized to directly administer the opioid antidote to overdose victims in the event of an emergency; and
 - b. The school district, school or certified school nurse may also dispense or grant access, in emergency situations, to other persons employed by the district or school who have certified to have received training in the administration of the opioid antidote and overdose prevention information.
2. The school nurse in each school that includes any of the grades designated by the Board in Policy 5330.04 shall obtain a standing order for opioid antidotes pursuant to the “Overdose Prevention Act” – N.J.S.A. 24:6J-1 et seq.



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- a. Written standing orders shall be reviewed and reissued before the beginning of the school year in accordance with N.J.A.C. 6A:16-2.3(a)4(vi).
3. The school nurse shall be responsible to:
 - a. Maintain a supply of opioid antidotes that have been prescribed under a standing order in a safe and secure, but unlocked and easily accessible location in the school:
 - (1) 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.
 - b. Document the administration of an opioid antidote on a student's health record;
 - c. Monitor the on-site inventory and replacement of the opioid antidote supply;
 - d. Ensure the replacement of the opioid antidote supply following use or expiration of the opioid antidote; and
 - e. Plan for the disposal of administered opioid antidote and expired opioid antidote applicators.
4. Opioid antidotes shall be maintained by a school pursuant to N.J.S.A. 18A:40-12.24.b.(1) in quantities and types deemed adequate by the Board, in consultation with the New Jersey Department of Education (NJDOE) and the Department of Human Services.

C. Authorization and Training for Administering an Opioid Antidote

1. The school nurse shall have the primary responsibility for the emergency administration of an opioid antidote.
2. However, the Board upon the recommendation of the Superintendent shall designate additional employees who volunteer to administer an opioid antidote in the event that a person experiences an opioid overdose when the nurse is not physically present at the scene.
 - a. The district shall notify all school staff members of the identity of each employee approved and designated by the Board to administer an opioid antidote pursuant to N.J.S.A. 18A:40-12.24.c.(1).



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3. The school nurse and designated employees shall only be authorized to administer opioid antidotes after receiving the training required under N.J.S.A. 18A:40-12.25.b and N.J.S.A. 24:6J-5.
 - a. Each certified school nurse and each employee designated to administer an opioid antidote pursuant to N.J.S.A. 18A:40-12.24.c.(1) and N.J.S.A. 24:6J-5 shall receive training on standard protocols from the school physician issuing the standing order or through a written agreement by the school physician with an organization that addresses medical or social issues related to drug addiction.

The training must address overdose prevention information, including but not limited to, the following:

- (1) Information on opioid overdose prevention and recognition;
 - (2) Instruction on how to perform rescue breathing and resuscitation;
 - (3) Information on opioid dosage and instruction on opioid antidote administration;
 - (4) Information describing the importance of calling 911 emergency telephone service for assistance with an opioid overdose; and
 - (5) Instructions for appropriate care of an overdose victim after administration of the opioid antidote.
- b. The district shall collect and maintain written evidence of satisfactory completion of the required training program before a certified school nurse or an employee is approved to administer opioid antidote.
4. In the event a licensed athletic trainer volunteers to administer an opioid antidote pursuant to N.J.S.A. 18A:40-12.23 through 12.27, it shall not constitute a violation of the “Athletic Training Licensure Act” – N.J.S.A. 45:9-37.35 et seq.

D. Administration of an Opioid Antidote

1. The school nurse or a trained employee designated pursuant to N.J.S.A. 18A:40-12.24.c.(1) shall be authorized to administer an opioid antidote to any person whom the nurse or trained employee in good faith believes is experiencing an opioid overdose.
 - a. The school nurse or a trained employee designated pursuant to N.J.S.A. 18A:40-12.24.c.(1) shall be promptly available on site at the school during regular school



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hours and during school-sponsored functions that take place in the school or on school grounds adjacent to the school building at any time.

- b. Upon receiving a report or observing a possible opioid overdose in the school or at a school-sponsored function that takes place in a school or on school grounds adjacent to the school building at any time, the Principal or designee or any staff member present will immediately call the school nurse, if present, or a designated staff member who volunteered and was trained to administer an opioid antidote, and emergency medical responders.
2. The certified school nurse or employee designated to administer an opioid antidote pursuant to N.J.S.A.18A:40-12.24.c.(1) and N.J.S.A. 24:6J-5 shall determine, in addition to the opioid antidote, whether any other emergency medical response is necessary, including but not limited to, cardiopulmonary resuscitation (CPR), Rescue Breaths, or the use of an automated external defibrillator (AED).
 3. The certified school nurse and/or other staff member(s) shall monitor the person who has received an opioid antidote and keep the individual who may be experiencing an opioid overdose comfortable until emergency medical responders arrive on the scene.
 4. An individual 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. A student transported to the hospital shall be transported in accordance with the Board's Policy required in treating alcohol or other drug-affected students pursuant to N.J.A.C. 16-4.1(c)5.
 5. The Principal or designee shall notify the Superintendent or designee whenever an opioid antidote is administered.
 6. The Principal or designee shall notify, as soon as practical, the parent of any student or a family member or other contact person for a staff member who may be experiencing an opioid overdose or has been administered an opioid antidote.
 7. Nothing in Regulation 5330.04 shall be interpreted to prohibit the administration of an opioid antidote to a student, staff member, or other person in an emergency during school hours or during on-site school-sponsored activities by an emergency medical responder or other person authorized by law to administer an opioid antidote, in accordance with N.J.S.A. 24:6J-1 et seq.
- E. Use of Controlled Dangerous Substances
1. Any student or staff member who is found to be under the influence of a controlled dangerous substance shall be subject to the provisions of any applicable statutes and



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administrative codes and Board Policies and Regulations prohibiting the use of a controlled dangerous substance.

F. Limitation of Liability

1. Pursuant to N.J.S.A. 24:6J-4, the school district, school physician, certified school nurse, and other approved designees shall not, as a result of any acts or omissions, be subject to any criminal or civil liability for administering an opioid antidote.
2. Any person or entity authorized under N.J.S.A. 18A:40-12.23 through 12.28 to administer an opioid antidote, may administer to an overdose victim with full immunity:
 - a. A single dose of any type of FDA approved opioid antidote for use in treatment of opioid overdoses; and
 - b. Up to three doses of an intramuscular auto injector or an intranasal application of opioid antidote, as needed to revive the overdose victim.

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