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January 7, 2019

To: BOCES District Superintendents  
Superintendents of Public and Nonpublic

Services to Students with Special Needs

to-One Nursing

## **Introduction**

Medical care advancements have increased the number of students with disabilities attending school who also have complex nursing needs. This can result in the need for frequent nursing care during the school day and/or during transportation to and from school. The frequency of such nursing care may be beyond what an individual school building nurse can reasonably provide. These students may require -6 (a)-3 (y)10 J29i3l9enmu cl

related to licensed health professions other than nursing, please contact the [NYSED Office of Professions](#).

Please Note- Education Law Article 19 section 902 limits the title of ***school nurse*** to registered professional nurses (RNs) legally qualified to practice nursing in this State.

## **Provision of Care**

To assist schools in establishing policies and protocols governing the provision of nursing and health services in a manner consistent with law, the following information and attachments are provided. Attachments A, B, & C list nursing and health 0.0157 g ccB13(m31

the complexity of the nursing care needs of the students. A directing RN may be off site but must be available by telephone at any time as needed by the LPN, and the RN must be able to provide onsite assistance within a reasonable time frame, which must be 15 minutes or less. See question 15 in NYSED's Office of Professions [Nurse Practice Frequently Asked Questions](#). Administrators should consult school nursing personnel and the medical director when determining nurse staffing needs.

#### Health Activities/Tasks Which May be Performed by Appropriately Trained, Unlicensed School Personnel

Attachment B lists examples of health activities/tasks for students which may be assigned to trained, unlicensed school personnel after a registered nurse first conducts an assessment to determine the appropriateness of the assignment.

To determine whether a health activity/task can be performed by a trained, unlicensed person, the RN should establish in each case that the activity/task:

constant feeding problems (such as choking and vomiting), an unlicensed, untrained person may not be assigned to assist the student with o

defines that licensed practical nurses (LPNs) may perform tasks and responsibilities only when under the direction of a registered professional nurse (RNs) or other authorized healthcare provider. The State Education Department has determined that the administration of medication is a protected task under the Nurse Practice Act. The only exceptions to that rule are exemptions in the Nurse Practice Act, Section 6908.1, related to the care of individuals in the home by family members or their designees, and other licensed professions, e.g., medicine, etc.

Education Law Article 19 permits trained unlicensed school personnel to administer glucagon or epinephrine auto-injector to a student with a patient specific order. The law also allows trained unlicensed school personnel to administer naloxone, or epinephrine auto-injector to students and staff on site in accordance with Public Health Law. More information is available in

6. Can Licensed Practical Nurses (LPNs) be employed as school nurses?

Education Law Article 19 section 902 limits the title of school nurse to registered professional nurses (RNs) legally qualified to practice nursing in this State. Schools may also employ LPNs but must be cognizant that an LPN is not interchangeable with an RN. LPNs are not independent practitioners, and as such must function under the direction of an RN or other appropriately licensed health care professional. See [NYSED Memo- Use](#)

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7. Can an LPN provide school health services if direction is provided?

Per [NYSED Board for Nursing FAQ](#):

Yes. New York State Education Law § 6902 requires LPNs to practice under the direction of a registered professional nurse, clinical nurse specialist, nurse practitioner, physician, dentist, physician assistant, specialist assistant, podiatrist, or midwife

direction to the LPN, which is determined by the care needs of the patients and the skill and ability of the LPN. In most cases, the directing practitioner must be on premises when LPNs provide nursing care. The directing practitioner does not necessarily have to be on premises to direct an LPN where:

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nurse cannot refer to themselves as an "LPN" or "Certified Nurse Aid" unless it is, in fact, true.

9. Can an unlicensed school personnel prepare and administer (give ) a medication to a student if no nurse is available?

No, the administration of medication is a function that is statutorily authorized to a limited number of professions, see question 1. Also see [NYSED Memo- Medication Administration by Unlicensed Persons](#) for details. Unlicensed school personnel who have

- < Identify the time the medication is needed during the school day (e.g. lunch time, before/after recess, etc.);
- < Know the parameters or condition(s) under which the medication is to be taken, and will refuse to take the medication if the parameters or condition(s) are not met (e.g. blood glucose or vital sign ranges that are acceptable to take medication, or taken only for headache, shortness of breath, etc.);
- < Describe what will happen if medication is not taken (e.g., unable to complete school work, blood glucose will elevate, etc.); and
- < Refuse to take medication if the student has any concerns about its appropriateness.

Determining whether a student is a Supervised Student should also consider the





16. When a private PreK program is located in a public school building, is the building nurse responsible for providing school health services to the private PreK students enrolled in such program?

The answer is dependent on the type of program, and/or the contract between the district and the private PreK program:

- < The private PreK program is contracted by the district to operate the district's PreK program- then such PreK students are district students and entitled to the same health services provided to other grade levels.
- < The private are is depeethere tit3 (ri)5 (v) (ide)-5 (d)-3 ( t)-3 (o)-3 ( )8 (o)-3 (th)4 (e)-3 (r gBDC a

be instances where it will be necessary for an administrator to insist that an unwilling person who is otherwise qualified must perform a health activity/task which they are legally permitted to perform.

21. Can an unlicensed school staff member, who receives appropriate training, assist students with medications?

Yes, trained unlicensed school personnel may assist supervised students to take their own medications. See \_\_\_\_\_ .

- . If parents/guardians and family representatives are trained to do nursing procedures at home, can non-nurses be trained to do them in the school setting?

Laws governing the practice of nursing have been written to protect the public.

a 1:1 nurse at home because they are the only person in the household needing nursing care, that does not mean that a 1: 1 nurse is necessarily needed in a school. If the CSE/CPSE determine that a student's health needs in accordance with provider orders for treatment can be appropriately met by the school's building nurse, a shared nurse, a 1:1 aide to monitor and alert the school nurse, then a 1:1 nurse is not necessary. The school must consult with its medical director and/or school nurse to determine if a student's nursing service is episodic or continuous. The New York State Education Department (NYSED) has developed a School Nursing Decision-Making Tool Flowchart for CPSEs, CSEs and 504 Teams to facilitate decisionD) has deven0n-2 (E)-2( schol FI)3 2 (to)4 ( )8 n



## ATTACHMENT A

In schools, Nursing Activities/Tasks that may only be performed by Registered Professional Nurses (RN) or Licensed Practical Nurses (LPN) under the direction of an RN, physician, nurse practitioner, physician assistant. (list is not all inclusive)

\* May only be performed by a registered professional nurse (RN)

\* Assessment and triage

Administration of oral, Nasogastric tube (NG), Gastrostomy tube (GT), ocular, ear, nose, respiratory, subcutaneous, intramuscular, \* intravenous, and rectal or vaginal medications

\* IV Parenteral Nutrition

\* Assessment and care of indwelling lines (e.g. PICC)

Intake and output measurements of gastric and parenteral fluids

Feeding students with feeding risks (i.e. aspiration)

Initiation and cessation of gastrostomy tube feeding by bolus or drip with or without pump.

Replacement of nasogastric or gastric tube

\* Replacement of PEG or Mic-Key button

Nasogastric tube feeding

Oxygen administration (pm/intermittent) or initiation of continuous oxygen

Oropharyngeal or tracheostomy suctioning

Tracheostomy care, including removal and cleaning of inner cannula

\* Replacement of tracheostomy outer cannula

\* Respirator/ventilator care

## ATTACHMENT A

Respiratory care (i.e. postural drainage and cupping)

Urinary catheterization, Reinsertion of an indwelling urinary catheter

Ostomy care (care of stoma and changing the appliance) and irrigation  
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# ATTACHMENT B



# ATTACHMENT B

## ATTACHMENT B

In schools, Health activities/tasks that may be performed by unlicensed school personnel, generally not requiring involvement of the school nurse or other health professionals. (list is not all inclusive)

Oral hygiene or nail, hair and skin care

Preparing nourishment

Feeding student orally if there are no feeding problems

Care of an incontinent student, including changing diapers

Assistance with bedpan and urinal

Non-medical aspects of bowel and bladder training

Assistance with clothing