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CHAPTER 16
PROGRAMS TO SUPPORT STUDENT DEVELOPMENT
NEW JERSEY ADMINISTRATIVE CODE
TITLE 6A
EDUCATION

CHAPTER 16 **PROGRAMS TO SUPPORT STUDENT DEVELOPMENT**
AUTHORITY: *N.J.S.A. 18A:4-15*; P.L. 2001, c. 246; *N.J.S.A. 18A:36-5.1, 18A:17-46, 18:36-5.1, 2A:4A-60, 18A:37-2.1, 2C:33-19, 18A:37-1* through 5, *18A:38-25* through 31, and *18A:25-2*; *20 U.S.C. § 1400*; Section 504 of the Rehabilitation Act of 1973, P.L. 107-110 (Title IV, Part A, Subpart 4, Section 415, and Title IX, Part E, Subpart 2, Section 9532); *N.J.S.A. 18A:37-13* et seq., *2A:4A-60*, and *18A:36-19a*; *20 U.S.C. § 1232g*; 34 CFR Part 99; *20 U.S.C. § 1232h*; 34 CFR Part 98; 45 CFR § 160; 42 CFR Part 2; and *N.J.S.A. 18A:40A-7.1*, and *18A:36-19*.

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6A:16-1.1 Purpose

These rules specify minimum standards for district boards of education in establishing policies and procedures and in operating programs to support the social, emotional and physical development of students. Programs to support student development include school health services, athletic programs, intervention and referral services, programs of substance use prevention, intervention and treatment referral, school safety and security, student discipline, reporting of potentially missing, abused or neglected child situations, home instruction and approved alternative education programs. Included in these rules are standards for the delivery of home instruction and school health services to nonpublic schools.

6A:16-1.2 Scope

These rules apply to the provision of programs and services for all students in kindergarten through grade 12 by New Jersey public school districts, charter schools, jointure commissions, educational services commissions and approved private schools for the disabled acting under contract to provide educational services on behalf of New Jersey public school districts, unless otherwise indicated. Throughout this chapter “district board of education” refers to the governing authority for all of the agencies identified in N.J.A.C. 6A:16-1.2, unless otherwise indicated.

6A:16-1.3 Definitions

The following words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise.

"Advanced practice nurse" means a person who holds current certification as nurse practitioner/clinical nurse specialist from the State Board of Nursing.

"Alternative education program" means a comprehensive educational program delivered in a non-traditional learning environment that is distinct and separate from the existing general or special education program. The alternative education program shall fulfill the program criteria pursuant to N.J.A.C. 6A:16-9.2 and be approved by the district board of education, pursuant to N.J.A.C. 6A:16-9.1(a), or by the Commissioner of Education pursuant to N.J.A.C. 6A:16-9.1(b), for the purpose of addressing the individual learning , behavior and health needs of students determined by the school district to be at risk of school failure or who have been mandated for removal from general education, pursuant to N.J.A.C. 6A:16-5.5, 5.6 and, as appropriate, 5.7.

"Assessment" means those procedures used by school staff to make a preliminary determination of a student’s need for educational programs, supportive services or referral for outside services which extend beyond the general school program by virtue of learning, behavioral or health difficulties of the student or the student’s family.

“Asthma Action Plan” means a form approved by the Commissioner of Education, completed by the medical home, that is specifically designed to indicate differentiated symptoms and appropriate action to be taken by school staff to manage the care of a student that suffers from

asthma-related illnesses. The Asthma Action Plan shall serve as an accompaniment to the student's Individualized Healthcare Plan. N.J.S.A. 18A:40-12.8(b) refers to the asthma action plan as the asthma treatment plan.

"Automated external defibrillator" means a device that automatically detects shockable cardiac arrhythmia and can provide defibrillation as part of basic life support in non-healthcare settings.

"Case management" means advocacy for and coordination of services to students including, but not limited to, counseling, health services, referrals to community-based agencies and monitoring of academic progress.

"Certified school nurse" means a person who holds a current license as a registered professional nurse from the State Board of Nursing and an Educational Services Endorsement, school nurse or school nurse/non-instructional from the Department of Education pursuant to N.J.A.C. 6A:9-13.3 and 13.4.

"Code of student conduct" means standards, policies and procedures established by district boards of education for positive student development and student behavioral expectations on school grounds, including on school buses or at school-sponsored functions, and, as appropriate, conduct away from school grounds, in accordance with N.J.A.C. 6A:16-7.6.

"Commissioner" means the Commissioner of Education or his or her designee.

"Delegation" means the transfer of responsibility for performance of an activity from one individual to another, with the former retaining accountability for the outcome.

"Do Not Resuscitate order" or "DNR order" means a written directive signed by the parent or guardian of a student who, after consultation with the pediatrician and other advisors, declines emergency administration of cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) to the student.

"Evaluation" means those procedures used by a certified or licensed professional to make a positive determination of a student's need for programs and services which extend beyond the general school program by virtue of learning, behavior or health difficulties of the student or the student's family.

"Expulsion" means the discontinuance of educational services or the discontinuance of payment of educational services for a student.

"Firearm" means those items enumerated in N.J.S.A. 2C:39-1(f) and 18 U.S.C. § 921.

"General education" means the educational programs and services provided to students other than students determined to be eligible for special education and related services pursuant to N.J.A.C. 6A:14-3.5 and 3.6.

"Guided learning experiences" mean structured learning tasks assigned to the student to perform without the teacher being present that are aligned to the school district curriculum and State Core Curriculum Content Standards and designed to help the student to learn new or reinforce prior knowledge, practice skills, integrate knowledge and skills or demonstrate mastery.

"Harassment, intimidation or bullying" means any gesture or written, verbal or physical act that is reasonably perceived as being motivated either by any actual or perceived characteristic, such as race, color, religion, ancestry, national origin, gender, sexual orientation, gender identity and expression, or a mental, physical or sensory disability, or by any other distinguishing

characteristic, that takes place on school property, at any school-sponsored function or on a school bus and that a reasonable person should know, under the circumstances, will have the effect of harming a student or damaging the student's property or placing a student in reasonable fear of harm to his or her person or damage to his or her property; or has the effect of insulting or demeaning any student or group of students in such a way as to cause substantial disruption in, or substantial interference with, the orderly operation of the school.

“HIV” means human immunodeficiency virus, the cause of AIDS (Acquired Immunodeficiency Syndrome).

"Health history" means the record of a person's past health events obtained by school staff from the individual, a parent or guardian or health care provider.

"Health screening" means procedures designed to detect previously unrecognized conditions as early as possible in order to provide early intervention and remediation and to limit potential disability or negative impact on scholastic performance.

"Home instruction" means the provision of one-to-one or small group instruction in the student's place of residence or other appropriate setting due to a health condition, need for treatment, court order or exclusion from general education for disciplinary or safety reasons.

"Independent contractor" means an individual whose employment criteria satisfy those requirements necessary for treatment as an independent contractor for Federal employment tax purposes.

“Individualized emergency healthcare plan” means a personalized healthcare plan written by the certified school nurse that specifies the delivery of accommodations and services needed by a student in the event of an emergency.

“Individualized healthcare plan” means a plan written by the certified school nurse that details accommodations and/or nursing services to be provided to a student because of the student's medical condition based on medical orders written by a physician in the student's medical home.

"Individualized Program Plan" (IPP) means a written plan developed for a general education student who has been assigned by the district board of education to home instruction, an alternative education program or who is being provided other educational services either in or out of school that are comparable to those provided in the public schools for students of similar grades and attainments, pursuant to N.J.S.A. 18A:38-25. The IPP sets forth the student's present level of performance, measurable goals and short-term objectives or benchmarks that encompass behavioral and social competency as well as curriculum, and individually designed instructional activities to achieve the goals and objectives.

“Informal hearing” means a discussion between a school administrator and a student regarding the alleged misconduct of the student, pursuant to N.J.A.C. 6A:16-7.2, Short-term suspensions, in which the student is informed of his or her alleged violation of the district board of education's code of student conduct, pursuant to N.J.A.C. 6A:16-7.1, Code of student conduct, and the basis for the accusation, and the student is given the opportunity to explain his or her version of the facts and events regarding the alleged violation.

"Intervention" means those programs, services and actions taken to identify and offer help to a student at risk for learning, behavior or health difficulties.

“Long-term suspension” means removal of a student for more than 10 consecutive school days from the general education program, or the special education program when the appropriate procedures set forth in N.J.A.C. 6A:14-2.8 have been followed, but not the cessation of the student’s educational services.

"Medical home" means a health care provider and that provider’s practice site chosen by the student’s parent or guardian for the provision of health care.

"Medical staff" means employees of the district board of education serving as school physician, certified school nurse, noncertified nurse, advanced practice nurse, registered nurse, licensed practical nurse, or certified athletic trainer.

"Medical examination" means the assessment of an individual’s health status.

"Medication" means a drug approved by the Federal Food and Drug Administration for preventing, caring for and assisting in the cure of disease and injury that has a written order from a physician licensed in medicine, dentistry or osteopathy or an advanced practice nurse. Medication does not include herbal remedies.

"Noncertified nurse" means a person who holds a current license as a registered professional nurse from the State Board of Nursing and is employed by a district board of education or nonpublic school, and who is not certified as a school nurse by the Department of Education.

“Nursing Services Plan” means a plan that describes in detail the nursing services to be provided throughout the school district based on the needs of its students, potential emergency situations, basic nursing services requirements and the assignment of medical staff to provide those services.

"Parent" means the natural parent(s) or adoptive parent(s), legal guardian(s), foster parent(s) or parent surrogate(s) of a student. Where parents are separated or divorced, "parent" means the person or agency who has legal custody of the student, as well as the natural or adoptive parent(s) of the student, provided such parental rights have not been terminated by a court of appropriate jurisdiction.

"Parent surrogate(s)" means an individual or individuals approved by the district board of education in accordance with N.J.A.C. 6A:32 to act on behalf of a student whose parent(s) is not available to assure the student’s education rights.

"Physical examination" means the examination of the body by a professional licensed to practice medicine or osteopathy or an advanced practice nurse. The term includes very specific procedures required by statute as stated in N.J.A.C. 6A:16-2.2.

"Referral for evaluation" means those programs and services offered to a student or his or her family in order to make a positive determination regarding a student’s need for services which extend beyond the general school program.

"Referral for treatment" means those programs and services offered to a student or to his or her family to help implement the recommendations of an evaluation or in response to the family’s request for assistance with a learning, behavior or health difficulty.

"Registered professional nurse" means a person with a current license for this level of practice from the State Board of Nursing.

"School complex" means a group of two or more buildings.

“School grounds” means and includes land, portions of land, structures, buildings, and vehicles, when used for the provision of academic or extracurricular programs sponsored by the school district or community provider and structures that support these buildings, such as school district wastewater treatment facilities, generating facilities, and other central service facilities including, but not limited to, kitchens and maintenance shops. School grounds also includes other facilities as defined in N.J.A.C. 6A:26-1.2, playgrounds, and recreational places owned by local municipalities, private entities or other individuals during those times when the school district has exclusive use of a portion of such land.

"School physician" means a physician with a current license to practice medicine or osteopathy from the New Jersey Board of Medical Examiners who works under contract or as an employee of a New Jersey school district. This physician is referred to as the medical inspector in N.J.S.A. 18A:40-1.

“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 and/or supported by the school.

“Short-term suspension” means removal of a student for 10 consecutive school days or fewer from the general education program or the special education program, in accordance with N.J.A.C. 6A:14-2.8, but not the cessation of the student’s educational services.

“Standing orders” means directives and protocols written by the school physician to carry out medical procedures for all students and staff.

“Student health record” means documented information relevant to the health of the student in order to manage the routine and emergency care of the student while school is in session.

"Substitute school nurse" means a person who holds a current license as a registered professional nurse from the State Board of Nursing and who has been issued a county substitute certificate to serve as a substitute for a certified school nurse in accordance with N.J.A.C. 6A:9-6.5(i).

"Supervision" means the active process of directing, guiding and influencing the outcome of an individual’s performance of an activity.

"Suspension" means either a removal of a student for 10 school days or fewer, pursuant to the definition of “short-term suspension” in this section and N.J.A.C. 6A:16-7.2, Short-term suspensions, or a removal of a student for more than 10 school days, pursuant to the definition of “long-term suspension” in this section and N.J.A.C. 6A:16-7.3, Long-term suspensions.

“Truancy" means 10 or more cumulative unexcused student absences, as determined by the district board of education pursuant to N.J.A.C. 6A:16-7.8(a)3 and the definition of a school day, pursuant to N.J.A.C. 6A:32-8.3.

“Universal precautions" means a set of procedures designed to prevent transmission of human immunodeficiency virus (HIV), hepatitis B virus, and other bloodborne pathogens. Universal precautions involve the use of protective barriers such as gloves, masks or eyewear and procedures for use of sharps and needles to prevent exposure to human blood, other body fluids containing visible blood, semen, vaginal secretions, tissue and cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids. Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine and vomitus unless they contain visible blood. Universal

precautions do not apply to saliva except in the dental setting where blood contamination of saliva is predictable.

"Weapon" means items that are enumerated in N.J.S.A. 2C:39-1(r), except a firearm as defined by N.J.S.A. 2C:39-1(f).

"Written order" means a directive and protocol written by the student's medical home to address a healthcare need or provide a medical service for a specific student.

6A:16-1.4 School district policies and procedures

(a) Each district board of education shall develop and adopt written policies, procedures, mechanisms or programs governing the following school functions:

1. Care of any student who becomes injured or ill while at school or during participation in school-sponsored activities;
2. Transportation and supervision of any student determined to be in need of immediate medical care;
3. Isolation, exclusion, and readmission of any student or employee suspected of having a communicable disease as required by N.J.S.A. 18A:40-7 to 12 and 18A:40-16 to 18;
4. Provision of health services including immunization, administration of medication, treatment of asthma, medical examinations, nursing services and emergency medical situations as required in N.J.A.C. 6A:16-2;
5. An annual Nursing Services Plan that details the provision of nursing services based upon student need in the school district pursuant to N.J.A.C. 6A:16-2.1(b);
6. Administration of medication to students under the written order of a school physician or medical home pursuant to N.J.A.C. 6A:16-2.3(a)3vii;
7. Emergency administration of epinephrine via epipen to a student for anaphylaxis pursuant to N.J.S.A. 18A:40-12.5;
8. Provision of medical and nursing services to meet requirements for health history, medical examination, and health screening as an alternative for students who do not have a medical home or have a religious objection to the required examinations pursuant to N.J.S.A. 18A:35-4.8;
9. Provision of nursing services to non-public schools located in the school district as required by N.J.S.A. 18A:40-23 through 31 and N.J.A.C. 6A:16-2.5;
10. Comprehensive substance abuse prevention, intervention and treatment referral programs pursuant to N.J.S.A. 18A:40A-8 through 18 and N.J.A.C. 6A:16-3 and 4;
11. Confidentiality related to juvenile justice proceedings pursuant to N.J.S.A. 2A:4A-60 and N.J.A.C. 6A:16-5.4, HIV identifying information pursuant to N.J.S.A. 26:5C-5 et seq., and drug and alcohol use information pursuant to 42 CFR Part 2, N.J.S.A. 18A:40A-7.1 through 7.2, and N.J.A.C. 6A:16-3.2;
12. School safety plans as required by N.J.A.C. 6A:16-5.1;
13. Removal of students from school for firearms offenses, assaults with weapon offenses and assaults on district board of education members or employees as required by N.J.A.C. 6A:16-5.5 through 5.7, and N.J.A.C. 6A:16-7.4, including removal of students for these offenses from receiving schools, pursuant to N.J.A.C. 6A:14-7.1(a);

14. Prohibition of remotely activating paging devices pursuant to N.J.S.A. 2C:33-19 and N.J.A.C. 6A:16-5.8;
 15. Cooperation with law enforcement operations for substances, weapons and safety pursuant to N.J.A.C. 6A:16-6;
 16. Development and implementation of a code of student conduct pursuant to N.J.A.C. 6A:16-7.1;
 17. Provision of intervention and referral services in each building in which general education students are served, that meet the requirements of N.J.A.C. 6A:16-8;
 18. The falsification of the annual report on violence and vandalism, pursuant to N.J.A.C. 6A:16-5.3(g);
 19. Student attendance pursuant to N.J.A.C. 6A:16-7.8;
 20. Intimidation, harassment and bullying pursuant to N.J.A.C. 6A:16-7.9; and
 21. Notification of the appropriate law enforcement and child welfare authorities when a potential missing or abused child situation is detected pursuant to N.J.S.A. 18A:36-25 and N.J.A.C. 6A:16-11.1.
- (b) Each district board of education shall develop and adopt policies and procedures that fulfill the rules and regulations of the New Jersey Department of Health and Senior Services, New Jersey Department of Human Services, New Jersey Department of Agriculture, and local boards of health which include the following requirements:
1. Exclusion of any student from the school setting for failure to meet requirements for immunization against communicable disease as required in N.J.A.C. 8:57-4, Immunization of Pupils in School;
 2. Exclusion of any person from the school setting if the person has uncovered weeping skin lesions as required in N.J.A.C. 8:61-2.1, Attendance at school by students or adults with HIV infection;
 3. Procedures for sanitation and hygiene when handling blood and bodily fluids pursuant to N.J.A.C. 8:61-2, Participation and Attendance at School by Individuals with HIV Infection, and conforming to Centers for Disease Control and Prevention guidelines that schools implement universal precautions;
 4. Assurance that any student with HIV infection or AIDS or who lives with or is related to someone with HIV or AIDS is not excluded from general education, transportation services, extra-curricular activities, athletic activities, assigned to home instruction or classified as eligible for special education for reason of HIV infection pursuant to N.J.A.C. 8:61-2.1; and
 5. Creation of wellness policies pursuant to 7 CFR Parts 210, 215, 220 and 245 and N.J.A.C. 2:36-1.7, Local school nutrition policy.
- (c) Each district board of education that engages in student testing, studies or surveys shall assure that its procedures and materials meet the Federal requirements of 20 U.S.C. § 1232h, and N.J.S.A. 18A:36-34, School survey, parent consent required before administration.

SUBCHAPTER 2. GENERAL PROVISIONS FOR SCHOOL HEALTH SERVICES

6A:16-2.1 Health services policy and procedural requirements

(a) Each district board of education shall develop and adopt the following written policies, procedures and mechanisms for the provision of health, safety and medical emergency services and ensure staff are informed as appropriate:

1. The review of immunization records for completeness pursuant to N.J.A.C. 8:57-4.1 through 4.20;
2. The administration of medication to students in the school setting by the following authorized individuals:
 - 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. The student approved to self-administer medication pursuant to N.J.S.A. 18A:40-12.3 and 12.4; and
 - vi. Other school employees 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;
3. The review of Do Not Resuscitate (DNR) Orders received from the student's parent or medical home.
4. The provision of health services in emergency situations including:
 - i. The emergency administration of epinephrine via epipen pursuant to N.J.S.A. 18A:40-12.5;
 - ii. The care of any student who becomes injured or ill while at school or during participation in school-sponsored activities;
 - iii. The transportation and supervision of any student determined to be in need of immediate care;
 - iv. The notification to parents of any student determined to be in need of immediate medical care; and
 - v. The administration of medication for students requiring epinephrine;
5. The treatment of asthma in the school setting which shall include, but not be limited to, the following:
 - i. A requirement that each school nurse shall be authorized to administer asthma medication through use of a nebulizer pursuant to N.J.S.A. 18A:40-12.8(a);
 - ii. A requirement that each school nurse receive training in airway management and in the use of nebulizers and inhalers consistent with nationally recognized standards, including, but not limited to, those of the National Institutes of Health and the American Academy of Allergy, Asthma and Immunology pursuant to N.J.S.A. 18A:40-12.8(a); and
 - iii. A requirement that each student authorized to use asthma medication pursuant to N.J.S.A. 18A:40-12.3 or a nebulizer shall have an Asthma Action Plan (AAP) prepared by the student's medical home and submitted to the certified school nurse. The AAP shall identify, at a minimum, asthma triggers and information to be included in the individualized healthcare plan and individualized emergency healthcare plan, pursuant to N.J.A.C. 6A:16-2.3(b) for meeting the medical needs of the student while attending school or a school-sponsored function;

6. The administration of student medical examinations, pursuant to N.J.S.A. 18A:40-4, N.J.S.A. 18A:35-4.8 and N.J.A.C. 6A:16-2.2;
 7. Procedures for sanitation and hygiene when handling blood and bodily fluids pursuant to N.J.A.C. 8:61-1.1(f) and in compliance with the Centers for Disease Control and Prevention guidelines which advise that schools implement Universal Precautions titled Universal Precautions for Prevention of Transmission of HIV and Other Bloodborne Infections (1986, updated 1996), incorporated herein by reference, as amended and supplemented, which is available from the Centers for Disease Control and Prevention, Division of Healthcare Quality Promotion, 1600 Clifton Road, Atlanta GA 30333; and
 8. Provision of nursing services to nonpublic schools located in the school district as required by N.J.S.A. 18A:40-23 et seq. and N.J.A.C. 6A:16-2.5.
- (b) Each district board of education shall annually adopt the school district's Nursing Services Plan at a regular meeting and submit it to the county superintendent of education for review and approval.
1. The chief school administrator or his or her designee shall develop the Nursing Services Plan in consultation with the school physician and certified school nurse.
 2. The Nursing Services Plan shall include:
 - i. A description of the basic nursing services to be provided to all students;
 - ii. A summary of the specific medical needs of individual students, if any, and the nursing services required to address those needs;
 - iii. A description of how nursing services will be provided in emergency situations;
 - iv. Detailed nursing assignments sufficient to provide the services to students in all of its school buildings as outlined in N.J.A.C. 6A:16-2.3(b) through (d); and
 - v. Nursing services and additional medical services provided to nonpublic schools pursuant to N.J.A.C. 6A:16-2.5.
 3. Each district board of education, in its determination of the number of certified school nurses and non-certified nurses needed to perform all of the required services in this subchapter, shall consider the following:
 - i. Geographic size including the number and location of school buildings;
 - ii. The general and special education enrollment;
 - iii. The number of children with medical involvement and extent of nursing services required;
 - iv. The requirement that non-certified nurses be assigned to the same school building or school complex as the supervising certified school nurse, to ensure that the certified school nurse can provide required supervision pursuant to N.J.A.C. 6A:16-2.3(b) and (d) and pursuant to N.J.S.A. 18A:40-3.3; and
 - v. Nursing services and additional medical services provided to nonpublic schools pursuant to N.J.A.C. 6A:16-2.5.

6A:16-2.2 Required health services

- (a) Each school district shall ensure that immunization records are reviewed and updated annually pursuant to N.J.A.C. 8:57-4.1 through 4.16.

(b) Each school district shall ensure that a principal or his or her designee does not knowingly admit or retain in the school building any student whose parent has not submitted acceptable evidence of the child's immunization, according to the schedule specified in N.J.A.C. 8:57-4, Immunization of Pupils in School.

(c) Each school district shall perform tuberculosis tests on students using methods required by and when specifically directed to do so by the New Jersey Department of Health and Senior Services, based upon the incidence of tuberculosis or reactor rates in specific communities or population groups pursuant to N.J.S.A. 18A:40-16.

(d) Each school district shall immediately report any communicable diseases that are identified as reportable pursuant to N.J.A.C. 8:57-1, whether confirmed or presumed, by telephone to the health officer of the jurisdiction in which the school is located.

(e) Each public and nonpublic school in the State shall have and maintain for the care of students at least one nebulizer in the office of the school nurse or a similar accessible location, pursuant to N.J.S.A. 18A:40-12.7.

(f) Each student medical examination shall be conducted at the medical home of the student. If a student does not have a medical home, the school district shall provide this examination at the school physician's office or other comparably equipped facility.

1. For the purpose of the physical examination required in (h)1 below, the student's parent may choose either the school physician or their own private physician.
2. A full report of the examination shall be maintained as part of the student's health record.

(g) The findings of required examinations under (h)1 through 5 below shall be documented on a form that is approved by the Commissioner of Education and shall include the following components:

1. Immunizations pursuant to N.J.A.C. 8:57-4.1 through 4.16;
2. Medical history including allergies, past serious illnesses, injuries and operations, medications and current health problems;
3. Health screenings including height, weight, hearing, blood pressure and vision; and
4. Physical examinations.

(h) Each school district shall ensure that students receive medical examinations:

1. Prior to participation on a school-sponsored interscholastic or intramural athletic team or squad for students enrolled in any of grades six to 12;
 - i. The examination, in accordance with (g) above, shall be conducted within 365 days prior to the first practice session.
 - ii. The medical examination shall be reported pursuant to (g) above and shall include a health history questionnaire, completed and signed by the parent.
 - (1) The report of health findings of the medical examination for participation shall be documented on the Athletic Preparticipation Physical Examination Form approved by the Commissioner of Education to determine whether the student had or currently has any of the following conditions since their last physical:
 - (A) Injuries;
 - (B) Chronic or ongoing illness;
 - (C) Prescribed medication;
 - (D) Allergies;

- (E) Head-related conditions;
 - (F) Heart related conditions;
 - (G) Eye, ear, nose, mouth or throat conditions;
 - (H) Neuromuscular/orthopedic conditions; and
 - (I) General or exercise related conditions.
- (2) The medical report shall include a determination concerning the student's participation from the examining physician, advanced practice nurse or physician's assistant which includes, at a minimum, the following normalities:
- (A) Measurement of weight, height, and blood pressure;
 - (B) Examination of the skin to determine the presence of infection, scars from previous surgery or trauma, jaundice and purpura;
 - (C) Examination of the eyes to determine visual acuity, use of eyeglasses or contact lenses, and examination of the sclera for the presence of jaundice;
 - (D) Examination of the ears to determine the presence of acute or chronic infection, perforation of the eardrum and gross hearing loss;
 - (E) Examination of the nose to assess the presence of deformity which may affect endurance;
 - (F) Assessment of the neck, back and spine to determine range of motion, the presence of pain associated with such motion and abnormal curvature of the spine;
 - (G) Examination of chest contour;
 - (H) Auscultation and percussion of the lungs;
 - (I) Assessment of the heart with attention to the presence of murmurs, noting rhythm and rate;
 - (J) Assessment of the abdomen with attention to the possible presence of hepatomegaly, splenomegaly or abnormal masses;
 - (K) Examination of upper and lower extremities to determine abnormal mobility or immobility, deformity, instability, muscle weakness or atrophy, surgical scars and varicosities;
 - (L) Examination of the testes to determine the presence and descent of testes, abnormal masses or configurations, or hernia;
 - (M) Assessment of physiological maturation; and
 - (N) Neurological examination to assess balance and coordination.
- (3) The medical report shall indicate whether a student is allowed or disallowed to participate in the required sports categories and be completed and signed by the original examining physician, advanced practice nurse or physician's assistant. A form that is incomplete shall be returned to the student's medical home for completion.

- iii. Each student whose medical examination was completed more than 60 days prior to the first practice session shall provide a health history update of medical problems experienced since the last medical examination. This shall be completed and signed by the parent. The health history update shall include the following information:
 - (1) Hospitalization/operations;
 - (2) Illnesses;
 - (3) Injuries;
 - (4) Care administered by a physician of medicine or osteopathy, advanced practice nurse or physician's assistant; and
 - (5) Medications.
 - iv. Each school district shall provide written notification signed by the school physician to the parent stating approval of the student's participation in athletics based upon the medical report or the reasons for the school physician's disapproval of the student's participation.
 - v. A student that does not have a completed Athletic Preparticipation Physical Examination Form shall not be permitted to participate;
2. Upon enrollment into school;
- i. Each school district shall require parents to provide examination documentation of each student within 30 days upon enrolling into school.
 - ii. When a student is transferring to another school, each school district shall ensure that student documentation of entry examination is forwarded to the transfer school district pursuant to N.J.A.C. 6A:16-2.4(d).
 - iii. Students transferring into a New Jersey school from out-of-State or out-of-country may be allowed a 30-day period in order to obtain entry examination documentation.
 - iv. Each school district shall notify parents of the importance of obtaining subsequent medical examinations of the student at least once during each developmental stage, at early childhood (pre-school through grade three), pre-adolescence (grade four through six) and adolescence (grades seven through 12);
3. When applying for working papers;
- i. Pursuant to N.J.S.A. 34:2-21.7 and 21.8, the school district is responsible for the administration of medical examinations for a student pursuing a certificate of employment.
 - ii. A statement of physical fitness shall be signed by the school physician unless the parent elects to obtain the examination at the student's medical home.
 - iii. The school district shall not be held responsible for the costs incurred by the parent who elects to obtain the examination at the student's medical home;
4. For the purposes of the comprehensive child study team evaluation pursuant to N.J.A.C. 6A:14-3.4; and
5. When a student is suspected of being under the influence of alcohol or controlled dangerous substances, pursuant to N.J.S.A. 18A:40A-12 and N.J.A.C. 6A:16-4.3.

- i. If a student who is suspected of being under the influence of alcohol or controlled dangerous substances is reported to the certified school nurse, the certified school nurse shall monitor the student's vital signs and general health status for emergent issues and take appropriate action pending the medical examination pursuant to N.J.A.C. 6A:16-4.3.
 - ii. No school staff shall interfere with a student receiving a medical examination for suspicion of being under the influence of alcohol or controlled dangerous substances pursuant to N.J.A.C. 6A:16-4.3.
- (i) The school district shall make accessible information regarding the NJ FamilyCare Program for students who are knowingly without medical coverage pursuant to N.J.S.A. 18A:40-34.
- (j) Information concerning a student's HIV/AIDS status shall not be required as part of the medical examination or health history pursuant to N.J.S.A. 26:5C-1 et seq. .
- (k) Each district board of education shall ensure that students receive health screenings.
 - 1. Screening for height, weight and blood pressure shall be conducted annually for each student in kindergarten through grade 12.
 - 2. Screening for visual acuity shall be conducted biennially for students in kindergarten through grade 10.
 - 3. Screening for auditory acuity shall be conducted annually for students in kindergarten through grade three and in grade seven and 11 pursuant to N.J.S.A. 18A: 40-4 .
 - 4. Screening for scoliosis shall be conducted biennially for students between the ages of 10 and 18 pursuant to N.J.S.A. 18A:40-4.3.
 - 5. Screenings shall be conducted by a school physician, school nurse, physical education instructor or other school personnel properly trained.
 - 6. The school district shall provide for the notification of the parent of any student suspected of deviation from the recommended standard.

6A:16-2.3 Health services personnel

- (a) The district board of education shall appoint at least one school physician pursuant to N.J.S.A. 18A:40-1. In school districts where there is more than one school physician, a lead physician shall be appointed to serve as health services director.
 - 1. The school district shall conduct a criminal history background check on any physician before entering into an agreement for delivery of services.
 - 2. The school physician shall be currently licensed by the New Jersey Board of Medical Examiners in medicine or osteopathy whose training and scope of practice includes child and adolescent health and development.
 - 3. The school physician shall provide, at a minimum, the following services:
 - i. Consultation in the development and implementation of school district policies , procedures and mechanisms related to health, safety and medical emergencies pursuant to N.J.A.C. 6A:16-2.1(a);
 - ii. Consultation to school district medical staff regarding the delivery of school health services, which includes special health care needs of technology supported and medically fragile children, including those covered by 20 U.S.C. § § 1400 et seq, Individuals with Disabilities Education Improvement Act;

- iii. Consultation to the district board of education, school district administrators and staff as needed;
- iv. Physical examinations conducted in the school physician's office or other comparably equipped facility for students who do not have a medical home or whose parent has identified the school as the medical home for the purpose of the sports physical examination;
- v. Provision of written notification to the parent stating approval or disapproval of the student's participation in athletics based upon the medical report;
- vi. Direction for professional duties of other medical staff;
- vii. Written standing orders that shall be reviewed and reissued before the beginning of each school year;
- viii. Establishment of standards of care for emergency situations and medically related care involving students and school staff;
- ix. Assistance to the certified school nurse or noncertified nurse in conducting health screenings of students and staff and assistance with the delivery of school health services;
- x. Review, as needed, of reports and orders from a student's medical home regarding student health concerns;
- xi. Authorization of tuberculin testing for conditions outlined in N.J.A.C. 6A:16-2.2(c) ;
- xii. Review, approval or detail of reasons for denial of a student's physician's determination of anticipated confinement and resulting need for home instruction; and
- xiii. Consultation with the school district certified school nurse(s) to obtain input for the development of the school Nursing Services Plan, pursuant to N.J.A.C. 6A:16-2.1.

(b) The district board of education shall employ a certified school nurse to provide nursing services while school is in session pursuant to N.J.S.A. 18A:40-1 and 3.3 .

- 1. The certified school nurse shall work under the direction of the school physician and chief school administrator.
- 2. The certified school nurse shall possess an educational certificate for school nurse or school nurse/non-instructional pursuant to N.J.S.A. 18A:40-3.2 and N.J.A.C. 6A:9-13.3 and 13.4.
- 3. The certified school nurse shall possess a current license as a registered nurse from the State Board of Nursing and valid, current Providers Cardiopulmonary Resuscitation/ Automated External Defibrillator (AED) certification as issued by the American Heart Association, the American Red Cross , the National Safety Council or other entities determined by the Department of Health and Senior Services to comply with the American Heart Association's CPR guidelines.
- 4. The certified school nurse shall receive training in airway management and in the use of nebulizers and inhalers consistent with nationally recognized standards including, but not limited to, those of the National Institutes of Health and the American Academy of Allergy, Asthma and Immunology.
- 5. The role of the certified school nurse shall include, but not be limited to:

- i. Carrying out written orders of the medical home and standing orders of the school physician;
- ii. Conducting health screenings which include height, weight, blood pressure, hearing, vision and scoliosis pursuant to N.J.A.C. 6A:16-2.2 and monitoring vital signs and general health status for emergent issues for students suspected of being under the influence of alcohol and controlled dangerous substances pursuant to N.J.S.A. 18A:40-4;
- iii. Maintaining student health records, pursuant to N.J.S.A. 18A:40-4 and N.J.A.C. 6A:16-2.4;
- iv. Recommending to the school principal those students who shall not be admitted to or retained in the school building based on a parent's failure to provide evidence of the child's immunization according to the schedules specified in N.J.A.C. 8:57-4;
- v. Annually reviewing student immunization records to confirm with the medical home that the medical condition for the exemption from immunization continues to be applicable, pursuant to N.J.A.C. 8:57-4.3;
- vi. Recommending to the school principal exclusion of students who show evidence of communicable disease, pursuant to N.J.S.A. 18A:40-7 and 8;
- vii. Directing and supervising the emergency administration of epinephrine and training school staff designated to serve as delegates, pursuant to N.J.S.A. 18A:40-12.6;
- viii. Administering asthma medication through use of a nebulizer;
- ix. Directing and supervising the health services activities of any school staff to whom the certified school nurse has delegated a nursing task;
- x. Classroom instruction in areas related to health pursuant to N.J.A.C. 6A:9-13.3;
- xi. Reviewing and summarizing available health and medical information regarding the student and transmitting a summary of relevant health and medical information to the Child Study Team for the meeting pursuant to N.J.A.C. 6A:14-3.4(h);
- xii. Writing and updating, at least annually, the individualized health care plan and the individualized emergency healthcare plan for students' medical needs and instructing staff as appropriate;
- xiii. Writing and updating, at least annually, any written healthcare provisions required under Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794(a), for any student who requires them;
- xiv. Implementing and assisting in the development of healthcare procedures for students in the event of an emergency;
- xv. Instructing teachers on communicable disease and other health concerns, pursuant to N.J.S.A. 18A:40-3; and
- xvi. Providing other nursing services consistent with the nurse's educational services certification endorsement as a school nurse issued by the State Board of Examiners and current license approved by the State Board of Nursing.

(c) A certified school nurse who possesses the school nurse/non-instructional certificate is not authorized to teach in areas related to health pursuant to N.J.A.C. 6A:9-13.4.

(d) School districts may appoint a noncertified nurse under the supervision of a certified school nurse to supplement the services of a certified school nurse as outlined in N.J.S.A. 18A:40-3.3.

1. The noncertified nurse shall be assigned to the same school building or complex as the certified school nurse pursuant to N.J.A.C. 18A:40-3.3.
2. A noncertified nurse shall possess a current license as a registered nurse from the State Board of Nursing and a valid, current Providers Cardiopulmonary Resuscitation/AED certification as issued by the American Heart Association, the American Red Cross, the National Safety Council or other entities determined by the Department of Health and Senior Services to comply with American Heart Association CPR guidelines.
3. A noncertified nurse is limited to providing the following services:
 - i. Carrying out written orders of the medical home and standing orders of the school physician;
 - ii. Conducting health screenings pursuant to N.J.A.C. 6A:16-2.2 which includes height, weight, blood pressure, hearing, vision and scoliosis;
 - iii. Maintaining student health records, pursuant to N.J.S.A. 18A:40-4 and N.J.A.C. 6A:16-2.4;
 - iv. Recommending to the school principal those students who shall not be admitted to or retained in the school building based on a parent's failure to provide evidence of the student's immunization according to the schedules specified in N.J.A.C. 8:57-4;
 - v. Recommending to the school principal exclusion of students who show evidence of communicable disease, pursuant to N.J.S.A. 18A:40-7 and 8;
 - vi. Implementing school district healthcare procedures for students in the event of an emergency;
 - vii. Instructing teachers on communicable disease and other health concerns, pursuant to N.J.S.A. 18A:40-3; and
 - viii. Providing other nursing services consistent with the nurse's educational services certification endorsement as a school nurse issued by the State Board of Examiners and current license approved by the State Board of Nursing.

6A:16-2.4 Required student health records

(a) Each school district shall maintain student health records for each student, which include the following mandated records:

1. Findings of health histories, medical examinations and health screenings pursuant to N.J.A.C. 6A:16-2.2 and 4.3; and
2. Documentation of immunizations against communicable diseases or exemption from these immunizations pursuant to N.J.A.C. 8:57-4.

(b) Each school district shall document the findings of student health histories, health screenings and required medical examinations that are relevant to school participation on the student health record using a form approved by the Commissioner of Education.

(c) The school district shall maintain student health records in accordance with N.J.A.C. 6A:32-7.4 as follows:

1. Student health records shall be maintained separately from other student records in a secure location;
 2. Student health records kept in electronic form shall be both accessible and secure according to N.J.A.C. 6A:32-7.4(d);
 3. Student health records shall be located in the school building or complex to which the student is assigned;
 4. Student health records shall be accessible to authorized personnel while school is in session; and
 5. The health and immunization record shall be removed from the student's health record and placed in the student's mandated record until such time as graduation or termination and kept according to the schedule set forth in N.J.A.C. 6A:32-7.8.
- (d) The school district shall ensure the following when transferring student health records:
1. Original mandated student health records that the schools are directed to compile pursuant to New Jersey statute, rule or authorized administrative directive shall be forwarded to the chief school administrator or his or her designee of the school district to which the student has transferred within 10 days of receipt of a written request and verification by the school district;
 2. Duplicate mandated student health records which the schools have been directed to compile pursuant to New Jersey statute, rule or authorized administrative directive shall be forwarded to the chief school administrator or his or her designee of the nonpublic school to which the student has transferred within 10 days of receipt of a written request and verification by the school district;
 3. Duplicate mandated student health records which the schools have been directed to compile pursuant to New Jersey statute, rule or authorized administrative directive shall be forwarded to the chief school administrator or his or her designee of the out-of-State school district to which the student has transferred within 10 days of receipt of a written request and verification by the school district;
 4. Records that are transferred in duplicate form shall have their original maintained at the location of the sending school district; and
 5. The chief school administrator or his or her designee shall request all student health records in writing from the school district of last attendance within two weeks from the date that the student enrolls in the new school district.
- (e) Any district board of education employee with knowledge of, or access to, the following health information shall comply with restrictions for sharing that information as required by Federal and State statutes and regulations.
1. Information that identifies a student as having HIV infection or AIDS shall be shared only with prior written informed consent of the student age 12 or greater, or of the student's parent as required by N.J.S.A. 26:5C-1 et seq. and only for the purpose of determining an appropriate educational program for the student.
 - 2.. Information obtained by the school's alcohol and other drug program which would identify the student as an alcohol or other drug user may be disclosed only for those purposes and under those conditions permitted by 42 CFR Part 2.
 3. Information provided by a secondary school student while participating in a school-based alcohol or other drug counseling program that indicates that a parent or other person residing in the student's household is dependent upon or illegally

using a substance shall be shared only for those purposes and conditions permitted by N.J.S.A. 18A:40A-7.1.

(f) Access to and disclosure of information in the student health record shall meet the requirements of the Family Education Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g, incorporated herein by reference, as amended and supplemented, 34 CFR Part 99, incorporated herein by reference, as amended and supplemented, and N.J.A.C. 6A:32-7, Student Records.

(g) The school district shall provide access to the student health record to licensed medical personnel, not holding educational certification, who are working under contract with or as employees of the school district only to the extent necessary to enable the licensed medical personnel to perform their duties.

1. Secretarial or clerical personnel under the supervision of the certified school nurse shall be permitted access to those portions of the student health record that are necessary for entry and recording of data and for conducting routine clerical tasks as outlined in N.J.S.A. 18A:40-3.4 and N.J.A.C. 6A:32-7.5.

(h) Nothing in this section shall be construed to prohibit school personnel from disclosing information contained in the student health record to students or adults in connection with an emergency, if such knowledge is necessary to protect the immediate health or safety of the student or other persons pursuant to N.J.A.C. 6A:32-7.4.

6A:16-2.5 School health services to nonpublic schools

(a) The district board of education having nonpublic schools within their school district boundaries shall provide nursing services to students enrolled in a nonpublic school as follows pursuant to N.J.S.A. 18A:40-23 et seq.:

1. The school district shall provide services to students who are full-time based upon the nonpublic school enrollment on the last school day prior to October 16 of the preceding school year;
2. The provision of services shall be only to students of a nonpublic school that provided to the district board of education a report of the type and number of services provided during the previous school year;
3. The provision of nursing services as follows:
 - i. Assistance with medical examinations including dental screening;
 - ii. Screening of hearing;
 - iii. The maintenance of student health records and notification of local or county health officials of any student who has not been properly immunized; and
4. Scoliosis examinations of students between the ages of 10 and 18.

(b) The district board of education in which the nonpublic school is located shall provide for the extension of emergency care provided to public school students to those students who are enrolled full-time in the nonpublic school who are injured or become ill at school or during participation on a school team or squad pursuant to N.J.A.C. 6A:16-1.4 and 2.1(a)4 .

(c) The district board of education having nonpublic schools within school district boundaries may provide additional services to those required under (a) above under the following conditions:

1. Such additional medical services may only be provided when all basic nursing services required under (a) and (b) above have been provided, or will be provided;
2. Such additional medical services may include the necessary equipment, materials and services for immunizing students who are enrolled full-time in the nonpublic school from diseases as required by N.J.A.C. 8:57-4, Immunization of Pupils in School;
3. Equipment comparable to that in use in the school district may be purchased by the school district to loan without charge to the nonpublic school for the purpose of providing services under this section. However, such equipment shall remain the property of the district board of education; and
4. Costs of supplies comparable to that in use in the school district and transportation costs may be charged to the funds allocated for each participating nonpublic school provided that they are directly related to the provision of the required basic nursing services and additional medical services which may be provided.

(d) Health services shall be provided by a registered nurse licensed in the State of New Jersey who is an employee of the school district, an employee of a third-party contractor or an independent contractor.

(e) The health services provided to nonpublic school student shall not include instructional services.

(f) A nonpublic school may decline nursing services required under this subchapter by submitting notification to the district board of education signed by the chief school administrator of the nonpublic school pursuant to N.J.S.A. 18A:40-29.

(g) A student who is enrolled in a nonpublic school and whose parent objects to the student receiving any services provided under this subchapter shall not be compelled to receive the services except for a physical or medical examination to determine whether the student is ill or infected with a communicable disease pursuant to N.J.S.A. 18A:40-30.

(h) The district board of education shall consider the provision of health services based upon the following:

1. The funding for services shall be based upon the nonpublic school enrollment on the last school day prior to October 16 of the preceding school year;
2. The provision of services shall be only to student of a nonpublic school that provided to the district board of education a report of the type and number of services provided during the previous school year; and
3. The funds expended by the district board of education for administrative costs shall be limited to the actual costs or six percent of the funds allocated for each participating nonpublic school, whichever is less.

(i) The chief school administrator or his or her designee of the school district in which a nonpublic school is located shall confer annually with the administrator of the nonpublic school for the following purposes:

1. To advise the nonpublic school of the amount of funds allocated to the nonpublic school by the Department of Education or otherwise made available by the school district for the provision of health services for the full-time students enrolled in the nonpublic schools;
2. To agree on the basic health services to be provided and additional medical services which may be provided as set forth in N.J.S.A. 18A:40-23 et seq.;
3. To assure that in the event that the chief school administrator or designee and the nonpublic school administrator cannot reach agreement regarding the health services and additional medical services to be provided, the county office of education shall provide assistance;
4. To assure that each nonpublic school which receives nursing services has a copy of N.J.S.A. 18A:40-23 to 31 and this subchapter; and
5. To assure that a description of the provision of nursing services reflected in the school district's Nursing Services Plan.

(j) For the purposes of monitoring and recordkeeping, the district board of education providing health services to nonpublic schools shall annually submit the following information to the county superintendent of education on or before October 1 and shall provide a copy to the chief school administrator of the nonpublic schools within school district boundaries:

1. A written statement verifying that the required conference was held with the nonpublic school;
2. A copy of the contract with another agency to provide the services, if applicable, and approved minutes of the district board of education meeting approving the contract, which describes the methods by which the health services to nonpublic school students will be provided for the ensuing year, including a rationale for the distribution of funds; and

3. A description of the type and number of services that were provided during the previous school year on a form approved by the Commissioner of Education.