

Meeting Student Health Needs While on Field Trips

Tool Kit for Wisconsin Schools



Wisconsin Department of Public Instruction
Carolyn Stanford Taylor, State Superintendent



For more information contact:

Louise Wilson, MS, BSN, RN, NCSN
School Nursing/Health Services Consultant
Division of Learning Support
Wisconsin Department of Public Instruction
Louise.Wilson@dpi.wi.gov
608-267-3748

August 2019

The Wisconsin Department of Public Instruction does not discriminate on the basis of sex, race, color, religion, creed, age, national origin, ancestry, pregnancy, marital status or parental status, sexual orientation, or disability.

Table of Contents

<i>Introduction</i>	2
Factors to Consider when Determining the Need for Health Services on a Field Trip	4
Medication Administration on Field Trips	5
In-state Field Trips	8
Out-of-State Field Trips	10
Out-of-Country Field Trips	12
Overnight Field Trips	13
Emergencies	14
Use of Licensed Healthcare Providers as Volunteers or Chaperones	15
Tools	16
Suggested Roles and Responsibilities	16
School Nurse Field Trip Preparation Checklist	18
Sample Notification of Upcoming Field Trip Form	19
Sample Health History for Overnight or Out-of-State Field Trip	20
Sample Field Trip Preparation	22
Suggested Items for Field Trip First Aid Kit	23
Sample Field Trip Policy	24
States' Student Medication Administration and Delegation Chart	25
<i>Resources</i>	35
<i>References</i>	35

Introduction

The Department of Public Instruction (DPI) receives numerous inquiries from school nurses and school district administrators regarding the preparation and planning for school-sponsored field trips. While school-sponsored field trips are designed to enhance the educational experience of students, they require planning and special considerations, especially related to the health needs of students. Standards for safe medication administration, the provision of health care services, including delegated nursing acts and registered nurse supervision, do not change when students are on field trips sponsored by their school districts. Legal statutes, clinical standards for care, and states varying Nurse Practice Acts still apply.

School-sponsored field trips may involve local, state, or even national and international travel. Nurse Practice laws differ from state to state. While school nurses are familiar with their state-specific medication administration and nursing regulations, when a field trip occurs out-of-state or out-of-country, it is imperative that districts know, understand, and abide by the laws and regulations for nursing practice in the state or countries where the care will be administered.



Federal law requires equal access to school attendance and school-sponsored activities. In order to provide equal access the provision of health services including medication administration may be required. Successful field trips require collaboration and team planning among school administrators, teachers, school nurses, other school staff, parents, and students. School districts should have clear district-wide policies and procedures that inform team planning regarding field trips.

There is no specific state definition for field trips. Each local school district has the responsibility to determine its own individualized definition and policies. School-sponsored field trips as used for the purpose of this toolkit includes times students leave the school building/campus for scheduled activities. It is not intended to provide direction for planned athletic events such as games/matches/meets. It may be used for general guidance when making plans and arrangements for clubs or sport teams who will be traveling overnight or to other states. Health services for routine school-sponsored activities are required under Wisconsin statutes § [121.02\(1\)\(g\)](#) and [PI8.01\(2\)\(g\)](#). Guidance for these services are addressed in the DPI's publication [Emergency Nursing Services in Wisconsin Schools](#).

In order to assist school districts in establishing or reviewing their policies and practices a school nurse work group was established to provide expert guidance in the development of this document. The DPI would like to thank the individual school nurses listed below for their dedication and work in developing this toolkit. School districts may use these guidelines in conjunction with their individual school district policies and procedures. Additionally, school districts are encouraged to seek advice from their district legal counsel.

ACKNOWLEDGMENTS

The following school nurses provided help and support in determining best practices by reviewing drafts; by sharing materials; and by providing feedback and guidance.

Betsy Gallagher, RN - Pulaski School District

Laurel Gretebeck, BSN, RN, NCSN - Stoughton School District

Kathleen Roebber, MA, BSN, RN - University School of Milwaukee

The Wisconsin Department of Public Instruction gives acknowledgement to the National Association of State School Nurse Consultants (NASSNC) for individual NASSNC members sharing state information for use. Directors to the National Association of School Nurses (NASN) also provided information on states' delegation laws and medication administration practices.

Factors to Consider when Determining the Need for Health Services on a Field Trip

School-sponsored trips may range from a class walking to the local library for an hour, to multiple students traveling to another state or country for several days. The NASN recommends that at minimum districts engage school nurses to act in an advisory capacity to address the health and safety needs of students in programming and activities beyond the regular school day (NASN 2018).

If nursing or school health services are identified in a student's individualized education program (IEP) or Section 504 Accommodation Plan, then they must be provided to the same level by qualified staff during the field trip. If any student has an Emergency Action Plan (EAP) arrangements must be made to carry out the EAP if needed, or for modifications of the EAP.

The school nurse will need to determine the location, accessibility, and type of activity as well as the health care needs of students who will be attending the field trip. Field trip venue, the population of students with special health care needs attending, and the legal ability to delegate nursing care are the most important factors in determining the need for a school nurse to accompany the students.



Health-related factors to consider include:

- Availability and response time of Emergency Medical Services (EMS)
- Nurse licensure and nurse practice acts (RN license/Compact State, does state allow delegation of health care services to unlicensed staff)
- Handicap accessibility (elevators, wheelchair ramps, bathrooms, theatre seating)
- Availability of privacy for treatments or medication administration (rectal medication, toileting, etc.)
- Equipment/personnel that may be required by students for ambulation/treatment
- Storage/refrigeration of medications
- Length and duration of time students will be away from school
- Mode of transportation (school bus, private cars, planes, trains, boats, etc.)
- Medications that need to be given outside of the regular school day
- Food allergies or special dietary needs
- Other allergies or potential health needs

Arrangements should be made with parents/guardians, food service personnel, and staff accompanying students on field trips for students that need accommodations for life-threatening food allergies or other food-related health concerns (e.g., Diabetes, Celiac Disease, Cystic Fibrosis, PKU, etc.) School nurses can assist in developing a plan for both providing and storing these food items.

The school nurse's role is critical in planning, coordinating, and educating staff, families, and students to assure appropriate care for all students every day at school and during school-sponsored trips (NASN 2018).

Medication Administration on Field Trips

[Wis. Stat. § 118.29](#) provides the structure that allows school staff or volunteers to administer medication to students while on field trips. The purpose of Wis. Stat. §118.29 is to provide minimum standards for the safe and proper administration of medications to students in Wisconsin. The principles and requirements are to be followed any time staff or volunteers administer medications to students. Therefore, written authorization must be received from parents/guardians for any medication administered on a field trip. If the medication is one that has been regularly given at school and the field trip is within the same time period of the normal school day, the same "medication consent form" can be used. If the hours of the field trip extend outside of the time indicated on the consent, a medication needs to be given on a field trip that is not normally administered during the school day, or there is a change in dosage of the medication to be administered on the field trip, a(n) additional consent(s) must be obtained.

Prescription medication requires a written statement (medication consent/medical order) from a licensed prescriber. The same situations listed above would trigger a need to obtain an additional written medical order for a prescription medication given on a field trip. The situation requiring a medication be given that is not normally administered at school is most likely to occur on overnight field trips. See the section on **Overnight Field Trips**. Obtaining these proper consents may require additional communications and phone calls to parents/guardians and/or providers. Time to obtain these consents should be built into the planning phase of field trip preparation. School districts are reminded to follow district policy regarding timelines for the return of required permission forms, including medication consents and health histories in order to participate in field trips.

Wis. Stat. §118.29 requires specific training for staff or volunteers to administer medications by injection, inhalation, rectally, or via ostomy tubes. If staff who normally administer medications via these routes are not scheduled or able to attend the field trip, and there are students participating in the field trip that require medication administration by these routes, then arrangements must be made for this training to occur along with the required written authorization by the district/school administrator. Districts are reminded that without this training or written authorization, administrators, staff and volunteers are not immune from civil liability for their actions in administering medications to students while on the field trip (Wisconsin Department of Public Instruction [DPI] 2018). For a full discussion of requirements under Wis. Stat. § 118.29, please see the DPI guidance [Administration of Medications in Wisconsin Schools](#).

In addition to Wisconsin state law, school districts are reminded to follow their own district medication policies in regards to training. Best practice would require training for all routes of medication administration including oral medications. If a district requires training for staff to administer oral medications, arrangements should be made to have staff trained in oral medication administration accompany students on the field trip, or for this training to occur prior to students leaving campus.



A student cannot be excluded from a field trip due to a medical condition, disability, or need to receive medication (U.S. Department of Education Office for Civil Rights 2016). Nor, can they be excluded because the proper training has not occurred.

Other states may not allow unlicensed school staff or volunteers to administer medications to students. Exceptions to these laws may exist for certain emergency medications such as emergency epinephrine. See sections **Out-of-State Field Trips** and **Emergencies**.

It is the responsibility of the parent/guardian or adult student to provide the medication to accompany the student on the field trip. If the medication is one given on a regular basis at school and previously supplied to the school, the medication may be taken from this supply. For one day in-state field trips rather than carrying the entire prescription bottle and risk loss or damage, the school nurse or staff member authorized to administer medication in a particular school building may place the proper daily or anticipated dosage(s) for each individual student in a separate small envelope or plastic bag and seal. Each dose should be in an individual envelope/bag so that students receiving more than one dose per day will have more than one envelope/bag. The envelope/ bag should be labeled with:

- Student's name
- Medication name
- Dosage
- Time to be administered

Alternatively, circumstances may warrant, and districts may choose, to send the full container of medication for one-day in-state field trips.

For an out-of-state/country or overnight field trips, schools may find it more practical to carry and use the original prescription bottle or originally packaged over-the-counter medication. Safety concerns regarding the transportation of medication across state/country lines override risks of losing the bottle/package(s). Generally, staff or chaperones should carry and store all student medications on field trips.

The responsibility to provide the medication on a field trip includes the provision of emergency medication. Students may not be excluded from field trip attendance for lack of parent supplying emergency medication or equipment. It behooves districts to use school nurses to develop an alternative Emergency Action Plan (EAP) and inform parents of this necessary change in the normal response should an emergency occur and the medication/equipment is not available. Unless the entire school population is attending the field trip, it is not recommended to take the stock supply of emergency medications such as epinephrine along on the field trip unless a supply of the medication remains available to students and staff still present at the building.

Self-administration is defined as “the student is able to consume or apply prescription or over-the-counter medication in the manner directed by the licensed prescriber or according to package directions, without additional assistance or direction” (Massachusetts Department of Public Health School Health Unit [MDPH] 2014). Depending on the age of the students attending the field trip and the inability of staff or volunteers to legally administer medications to students in states other than Wisconsin, self-administration of required medications may be an option. Self-administration should only occur if the district has a medication policy that allows for the self-administration of medications.

Students deemed capable of self-administration may maintain their own over-the-counter and prescription medications. School districts may prefer to make exceptions for psychotropic or controlled medications. If there is a concern about safety for this student or others, a plan should be developed with the school nurse, parent, teacher, student, chaperones, and school administrator for the safe storage and transportation of the medication.

Documentation of the self-administration of medications should be discussed with parents. Issues of confidentiality surrounding the possession, the medication type, and the reason for the medication, should be agreed upon. Districts are reminded of their responsibility for both staff and non-staff chaperones to maintain such information confidential.

School district medication policies should address the transportation, storage, administration, and documentation of medication on field trips. School districts while developing field trip protocols may consider addressing the self-administration of medications in district medication policies.

In-state Field Trips

A student cannot be excluded from a field trip due to a medical condition or other disability (U.S. Department of Education, Office for Civil Rights 2018b; U. S. Department of Health & Human Services 2017). “As with extracurricular activities districts must provide nonacademic services or benefits in a nondiscriminatory manner that allows disabled students an equal opportunity to participate” (34 C.F.R. § 104.37[a][1]). School districts may also not require that a student take medication or have a parent or “babysitter” accompany the student in order for the student to participate (Hootman, et al. 2005, 223; New York State Center for School Health 2018; U.S. Department of Education, Office for Civil Rights 2018a).

For in-state field trips, all Wisconsin laws regarding medication administration and the Wisconsin Nurse Practice Act must be followed just as during the regular school day (Hootman, et al. 2001). See section on **Medication Administration on Field Trips** for an explanation of how Wisconsin medication law [Wis. Stat. § 118.29](#) applies to school field trips.

[Wisconsin Chapter 41](#) along with [Wisconsin Chapter 6](#) define the scope of practice for Registered and Licensed Practical Nurses. Professional nursing includes the execution of both general nursing procedures and techniques and those prescribed by licensed practitioners. Professional nursing also includes the supervision of a patient and the supervision and direction of licensed practical nurses and less skilled assistants. See the DPI guidance [Use of Delegation in the School Setting](#) for a full discussion of delegation principles and requirements of the Nurse Practice Act.

Procedures that are being properly delegated and supervised by a registered nurse during the school day and in the school setting may be performed outside the school setting and on field trips. However, changes in who performs the procedures or how the procedure is accomplished may be required depending on the circumstances surrounding the field trip. See section on **Factors to Consider when Determining the Need for Health Services on a Field Trip**.

Registered nurses are required by state law and nursing standards to use the four steps of the nursing process when performing nursing acts and in delegating nursing acts to school staff (American Nurses Association [ANA] 2012; American Nurses Association & National Council of State Boards of Nursing [ANA & NCSBN] 2006). This responsibility does not end because the procedure is occurring outside of the school building. It is imperative that school nurses reassess the delegation process in light of the field trip circumstances. Therefore, the school nurse must be informed well in advance (10 school days in-state, 20 school days out-of-state) of field trips when students require nursing procedures.

A school nurse who is not informed in a timely manner about school-sponsored trips may not be sufficiently prepared to safeguard the health and safety of the students attending the trip.

It is possible that due to the circumstances of the field trip, that what once was considered a basic patient care situation is now a complex patient care situation. This occurs when the student's health condition or response is no longer predictable given the circumstances of the field trip. Additionally, if medical or nursing orders are likely to involve frequent changes or complex modifications due to the circumstances of the field trip the procedure can no longer be delegated to unlicensed staff. In this instance, a licensed healthcare provider would be required to perform the procedure on the field trip. Parents in such situations may be asked to attend the field trip in order to perform the health care procedure for their child, but they cannot be required to do so. If such a student has a procedure and no licensed healthcare provider or parent is available to go on the field trip the trip school district will need to determine what options are available for the alteration of the trip if not all students can be reasonably accommodated (Erwin and Clark 2017, 624).



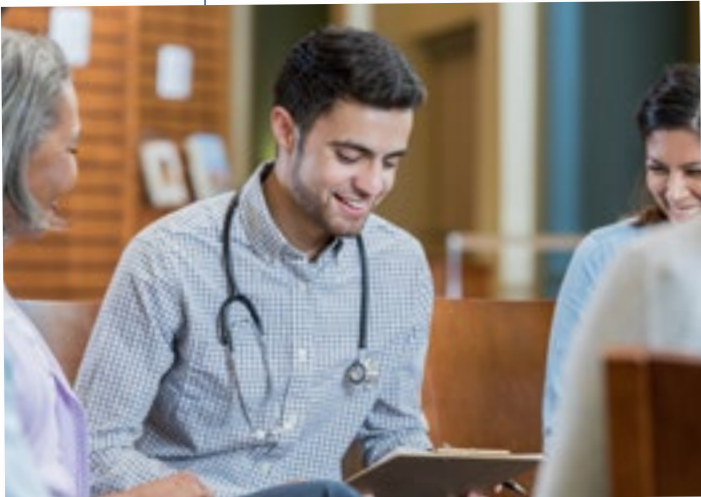
When decided that a school nurse will travel with the group of students on a field trip, districts should consider arranging for a substitute nurse to address the health needs of students who remain at school (Massachusetts Department of Public Health School Health Unit [MDPH] 2014). Alternatively, it might be more appropriate to send the substitute nurse on the field trip (Hootman 2005).

Teachers and chaperones on field trips should be provided with copies of any Emergency Action Plans (EAP) or medical management plans and have an opportunity to ask questions or seek clarification regarding their responsibilities before leaving on the field trip. Such EAPs and other health-related information are covered by FERPA and state pupil record laws. Non-school staff chaperones should be reminded of confidentiality requirements. It is recommended that non-school staff be provided with private student health information on a limited need-to-know basis.

Out-of-State Field Trips

When considering an out-of-state field trip, the school nurse/district must have a clear understanding of the nursing scope and practice and delegation regulation in the state where care will be provided. (Erwin and Clark, 2017; Russell, 2017). While in Wisconsin, bus drivers, school staff, and volunteers may administer medication to students, this practice is not nationwide. Some states do not allow for the practice of delegating nursing tasks to unlicensed individuals (UAPs); while other states may limit or define what tasks may be delegated. The registered nurse is responsible to the state nurse practice laws where care will be administered. If the nurse may delegate a task that is permissible in the nurse's home licensing state, but not in the state where the field trip occurs, the nurse's actions are accountable to both state boards of nursing (Erwin and Clark 2017; Jim Puente, Director Nurse Licensure Compact, email message to DPI consultant, February 8, 2019).

Wis. Stat. § 441 is comprised of two subchapters. Subchapter I, Regulation of Nursing, defines the basic statutory responsibilities, requirements for the examination and licensure of nurses, and authority of the board of nursing for disciplinary action. Subchapter II, Nurse Licensure Compact (NLC), governs the practice privileges of nurses licensed in other compact membership states while practicing out of their original state of licensure. The NLC is a mutual recognition model of licensure. The NLC is based on the nurse's license from their state of residence but provides the privilege to practice in another NLC state. Wisconsin is an NLC state. Registered and Licensed Practical Nurses with Wisconsin nursing licenses may practice professional or practical nursing in other NLC states without obtaining a separate license. However, the nurse is obligated to follow the nurse practice law of the designation state (Erwin and Clark, 2017). To determine which states currently belong to the NLC use this link <https://www.ncsbn.org/nurse-licensure-compact.htm> on the National Council of State Board of Nursing website.



If a field trip destination is a state that is not part of the NLC the school nurse may need to obtain licensure in that state in order to practice nursing. This ability to practice nursing in the destination state allows the school nurse to delegate the performance of nursing procedures to those accompanying the students. It also allows the school nurse to supervise medication administration in those states that require a registered nurse delegate medication administration. The ability to practice nursing in the destination state will also be crucial if the destination state does not allow for the delegation of certain nursing procedures required by field trip participants or the administration of

medications to students by anyone other than a licensed or registered nurse. In these circumstances, one option may be for the school nurse or another duly licensed registered nurse accompany the students. A second option would be for the district to make arrangements with a nurse living and licensed in the destination state. Local hospitals or nurse staffing agencies may be resources for such arrangements.

See **States' Student Medication Administration and Delegation Chart** to help determine which states allow UAPs to administer medications to students and restrictions on what procedures may be delegated to UAPs.

Further complicating the situation, is the fact that some states allow registered nurses to practice nursing for a limited time or under limited circumstances and not follow the destination state's NPA if the school nurse is only caring for his/her students. Wisconsin allows for a 72-hour practice exemption for practicing professional or practical nursing if a patient is being transported through or in Wisconsin for the purpose of receiving medical care or the nurse is temporarily in Wisconsin. See **States' Student Medication Administration and Delegation Chart**. Similar clauses exist in select state's NPAs.

Overall considerations when planning an out-of-state field trip should include:

- What are the nurse practice laws of the state(s) the students will visit or travel through?
- Does the state where the field trip occurs allow for delegation of nursing health services to UAP?
- Does the state where the field trip occurs allow for medication administration to the student by anyone other than a licensed healthcare professional?
- If the state is not part of the Nurse Compact, what does the state where the field trip will occur require in order for the licensed registered nurse to provide nursing care in that state?
- Are there state-specific restrictions related to the storage, possession, or administration of particular medications or substances?

Just as self-administration of medication may be an option, it might be reasonable for a student to increase their level of self-care of their health condition while participating in an out-of-state or other field trip. It is recommended the school nurse collaborate with the parent, student, and health care provider in determining this. The decision for the student providing self-care would ultimately be the parents.

Arrangements for out-of-state and overnight field trips are made on a case-by-case basis depending on the needs, age and competence of the student, the destination, and the qualifications of the staff/chaperones on the field trip. While safety must be the foremost consideration, creativity in achieving reasonable safe conditions for students while following state law is important as well. Advance information about emergency medical services and availability of specialized medical services at the destination may be necessary for some students (Massachusetts Department of Public Health School Health Unit [MDPH] 2014).

"Perhaps more appropriate than mandates in any event, are professional judgment, creativity, and collaboration with students, families, and other members of the education and health care teams. These are essential elements to finding the right balance between requirements for safety in a given situation and the personal-risk taking that is reasonable in order to the student to participate, learn and progress toward independence."
(Hootman, et. al 2005, 224)

Out-of-Country Field Trips

Nursing licenses are not recognized outside the United States. Therefore, school nurses are not permitted to practice nursing in other countries. This would also be true for other licensed healthcare providers who may be acting as chaperones. School districts are encouraged to investigate applicable laws when making plans for out-of-country field trips. The U.S. Embassy can provide information on points of contact for destination countries.

When planning out-of-country field trips school districts will want to allow sufficient time (at least 60 school days) to address not only medication administration, and the provision of delegated nursing acts, but also immunization requirements, and how health and emergencies issues such as sudden illness or accidents will be managed by chaperones. (See **Resources** section.)

Considerations for out-of-country field trips:

- Obtain permission for emergency treatment as determined by chaperones.
- Determine if the district has or requires students to have an insurance policy for medical care which would include emergency transport back to the U.S. if needed.
- Determine if any immunization requirements exist for the destination country. (See **Resources** section.)
- Determine if any Health Alerts exist for the destination country. (See **Resources** section.)
- Have copies of all prescriptions for prescription medication. Carry all medication on the plane, do not pack in luggage.
- Canadian field trips require contact with individual provinces as each province is governed by separate legislation.



Overnight Field Trips

Overnight field trips can be in-state, out-of-state, or out-of-the-country. Similar concerns regarding medication administration and the need for nursing procedures to be performed for students exist. Because the time staff are responsible for the care of students extends beyond the school day, the likelihood of nursing procedures being required increases. Examples include extra gastrostomy tube feedings, diabetes management with the administration of insulin, and the need to administer emergency medication. See section **In-State Field Trips** for a discussion of reassessing the delegation of nursing procedures when performed out of the normal context of the school day and building.

While schools may invite parents/guardians of the student with health care needs to accompany the student overnight, their attendance cannot be mandated (Hootman, et. al 2005, 223; New York State Center for School Health 2018; U.S. Department of Education Office for Civil Rights 2016; U.S. Department of Education Office for Civil Rights 2018a). If a parent or guardian of a child with health care needs is not able to accompany their child, a decision must be made by the school nurse if the delegation of the task is advisable. Decisions on the delegation are the sole responsibility of the licensed registered nurse (ANA 2012; ANA & NCSBN 2006).

As with other field trips, if it is determined necessary health care procedures may only be performed by licensed healthcare personnel, such arrangements should be made. If a student's health care needs cannot be met, the trip may need to be postponed.

Compensation for the school nurse attending a field trip is a district decision. Consideration should be given to the extended liability of the school nurse for the performance of nursing acts while outside normal working or contract hours. Although nurses may be willing to "volunteer" to provide nursing services on field trips, districts should investigate what professional liability coverage exists for such practices.



Emergencies

For all students attending field trips out of the normal geographic location of the school building/community prior arrangements should be made on how and where to access emergency or urgent medical services should the need arise. School districts should review their policies and practices for obtaining consents from parents to obtain emergency medical services for their child while on a field trip. When considering what health history information to collect prior to the field trip, it is important to keep in mind that parents may not be immediately accessible nor, the student in a condition where they can relate their own health/medication/allergy history.

If students with special health care needs attend a field trip, it may be necessary to make specialized arrangements in the event a student requires medical care beyond the anticipated nursing procedures or standard first aid. The EAP developed by the school nurse should address these arrangements. Any emergency supplies such as medications, suction or ventilation equipment must be transported on the trip.



Generally, in an emergency staff will perform first aid to their level of training/competency and Emergency Medical Services (EMS) or 911 called. Lines of authority among staff regarding when EMS is called or if chaperones may seek Urgent Care on behalf of an acutely ill student should be established before the field trip.

Parents should be informed before the field trip under what circumstances/conditions they will be contacted. Expectations regarding parent's responsibility/response in a health emergency should be clearly communicated. This is particularly critical for out-of-state or out-of-country field trips. As noted in the section **Medication Administration on Field Trips**, it is the parent or adult student's responsibility to provide a supply of emergency medication/equipment (e.g., emergency epinephrine auto-injector) on the field trip. Should an emergency occur and the medication/equipment is not available local EMS should be sought.

Use of Licensed Healthcare Providers as Volunteers or Chaperones

When serving as a volunteer chaperone, those individuals who are licensed in any capacity in Wisconsin as a healthcare professional should act within their role as a chaperone. Individual professions may have ethics, standards, or guidance regarding volunteer activities. School districts may request such individuals check with their particular licensing board before volunteering.

While it may be beneficial to have chaperones who have healthcare expertise accompany students, they are bound by the same issues discussed in the **Out-of-State Field Trips** section regarding licensing. They are licensed to act as that healthcare professional under Wisconsin law.

If one such volunteer is asked to perform a nursing procedure on a student other than their own child they will need to obtain a license in the destination (and travel through) state(s). Performance of this procedure must be within the scope of practice of their profession. For example, doing a urinary catheterization is not within the scope of practice of a chaperone licensed as a speech therapist. While the healthcare professional is more likely to have the attitude and aptitude to assist with health care procedures, they may need to have the procedure delegated to them and work under the license of the school nurse.

Volunteer healthcare providers whose scope of practice includes medication administration may administer medication to students without receiving DPI approved training and administrator authorization, but are not immune from civil liability per [Wis. Stat. § 118.29\(2\)\(a\)3](#). Suggested practice is that the volunteer act within their role as a chaperone and have trained and authorized school staff to administer medication to students on field trips.



Tools

SUGGESTED ROLES AND RESPONSIBILITIES

School Administrators:

- Ensure adherence to the districtwide policy for school-sponsored trips.
- Communicate the policy to all parties involved including staff, parents, and students.
- Encourage and support team planning for successful trips.
- Support school nurse notification (at least 10 school days in-state, 20 school days out-of-state) prior to the trip.
- Support school nurse involvement in planning and approval of field trips so the health needs of the student are identified and potential barriers to participation addressed before administration approval.
- Serve as the key contact for emergencies during trips and involve school nurse and medical advisor as needed.
- Determine alternative options or cancellation of the trip if all students cannot attend the field trip due to the inability of the school district to accommodate the health or other special needs of students.
- Initiate debriefing discussion after field trip among staff participating on the trip and school nurse to evaluate what worked well and suggestions for improvement on subsequent trips. Particular attention should be given to how any health emergencies that occurred were handled.

School Personnel (teachers and other staff):

- Adhere to the districtwide policy regarding field trips.
- Include the school nurse in planning the field trip to identify and plan for situations of concern (allergies, special transportation needs, delegated procedures, medication administration).
- Communicate to parents the need for updated health and emergency information.
- Participate in training regarding the health and safety of students as necessary prior to departure.
- Be prepared to address emergency situations.
- Follow district policy regarding notification of school administrator and school nurse as needed for health questions or emergencies while on a field trip.
- Meet with school nurse upon return to review documentation and performance of procedures and medication administration.
- Debrief with the school nurse and make suggestions for future field trips in regards to meeting student health needs.

School Nurses:

- Adhere to the districtwide policy regarding field trips.
- Follow applicable federal and state laws regarding the performance of nursing procedures including delegation and medication administration.
- Contact visiting state boards of nursing for information on and permission to practice if destination state not part of Nurse Compact.
- Consult with school administrators, other school nurses, state school nurse consultants, and professional resources regarding best practice.
- Conduct a health and safety assessment of student needs based on a multitude of factors including the severity of needs, location of the trip, length of trip, staff attending the trip, etc.
- Prepare (emergency) health concerns list of students based on information provided by parents and contained in school records.
- Develop an Emergency Action Plan or health management plan for students as noted in health concerns list.
- Develop a list of medications to be administered on a field trip based on information provided by parents.
- Provide medication administration training to staff and chaperones as necessary.
- Determine if special health care procedures will be required and arrange for their performance and any necessary supplies and training.
- Consult with food service and field trip supervisor regarding meeting dietary needs and restrictions as noted in health concerns list.
- Consult with administration and field trip supervisor regarding special circumstances including special immunization requirements or health alerts if traveling out-of-county.

Parents/Students:

- Adhere to the districtwide policy regarding field trips.
- Provide the school with updated health and emergency information as requested. This includes medication administration orders.
- Communicate with school nurse and teacher regarding any special health, diet, transportation concerns. This includes mental health or behavior concerns.
- Adhere to districtwide policies regarding medication administration and self-administration of medication by students while on field trips.
- Provide the school with an appropriately labeled medication bottle/package with only the amount needed on the field trip. May need to request labeled container from the pharmacy for prescription medication.
- Obtain any required immunizations for travel.
- Adhere to any travel alerts for out-of-country travel.
- Parents of students with special health care needs may be requested to accompany their child on a field trip but cannot be required to attend.

SCHOOL NURSE FIELD TRIP PREPARATION CHECKLIST

- ☐ Review district field trip request form, including a list of all participating students.
- ☐ Determine what emergency/medical services are available at the destination site as necessary.
- ☐ Identify any health-related concerns as well as accessibility issues for all students.
- ☐ Identify any food/allergy related issues. Contact food service /field trip supervisor/parents to make arrangements/accommodations as necessary.
- ☐ Prepare student health concerns list. Review IHPs/EAPs//IEPs/504 Accommodation plans.
- ☐ Revise health plans as needed for field trip circumstances.
- ☐ Determine in conjunction with school administrator and field trip supervisor staffing necessary to meet student health needs and abide by state Nurse Practice laws.
- ☐ Distribute health concerns list and health plans/EAPs per district protocol supporting student confidentiality and FERPA regulations.
- ☐ Develop a list and schedule of medications needed for a field trip (emergency/scheduled/prescription).
- ☐ Prepare necessary forms for documentation of medication administration.
- ☐ Prepare or make arrangements for the preparation of medications for a field trip.
- ☐ Determine special health care procedures required on a field trip, arrange for, and train staff as necessary. Document training.
- ☐ Arrange for or train staff/chaperones on medication administration as necessary. Check that administrator has authorized staff/chaperones to administer medication per Wis. Stat. § 118.29.
- ☐ Prepare field trip first aid kit(s).
- ☐ Confirm with field trip supervisor that health history/emergency cards are accessible during field trip.
- ☐ Attend any parent/student meetings as requested.
- ☐ Debrief with teachers/chaperones/ field trip supervisor after the field trip.

SAMPLE - School District Field Trip Proposal and Notification Form

Submit the form to building administrator at least 30 calendar days in advance of your in-state field trip. Out-of-state or out-of-country travel requires Board of Education approval 120 calendar days in advance.

Teacher/Field Trip Supervisor Name: _____

Grade/Subject/Organization: _____ Date of application: _____

Destination: _____ Event: _____

Date leaving: _____ Time leaving: _____

Date returning: _____ Time returning: _____

Number of students involved: _____ Number of chaperones: _____

Total cost of trip: _____ Cost to individual student: _____

Mode of transportation: _____ Arrangements required for transportation: _____

Meals required while on trip: _____ Name of Food Service personnel notified: _____

Food Service notified by: _____ Date notified: _____

School Nurse notified by: _____ Date notified: _____

Special circumstances surrounding field trip that will affect health, accessibility, food or other allergies (stairs, animals, etc.) _____

Chaperone names: _____

Chaperones who have medication administration training per district policy: _____

Purpose and Description of the Out of School Learning Experience

As per district policy, the purpose of a field trip is to enrich the curriculum through learning experiences in a setting or environment outside of the school; to help students relate school experiences to the reality of the world outside of the school, and to give students the opportunity to study real things and real processes in an authentic environment. To that end, please complete the following questions:

What class curriculum or unit does this trip relate to? _____

What learning experiences will be provided to the students on this trip related to the curriculum?

Explain pre-activities planned in preparation for the trip to make it an optimal learning experience for your students.

Explain post-trip activities planned to make use of the knowledge and skills gained from the trip.

Field trip has been approved by: _____ Date of approval: _____

The following staff members have been trained in accordance with district policy and are therefore authorized to administer medication to students on this field trip per Wis. Stat. § 118.29.

Signature of district administrator: _____ Date: _____

SAMPLE - Health History for Overnight or Out-of-State Field Trips

Student Name: _____ Birthdate: _____

Address: _____

Parent/Guardian (1) _____ Phone Number Cellular: _____ Work: _____

Parent/Guardian (2) _____ Phone Number Cellular: _____ Work: _____

Physicians' Name: _____ Phone Number: _____

In the event we would not be able to contact you, please list two alternate names to call.

Alternate: _____ Phone Number: _____

Alternate: _____ Phone Number: _____

To assist the chaperones in providing careful supervision of the health and safety of your child, please advise of any conditions needing attention. To the best of my knowledge, _____ is in good health and free of any communicable disease. **Date of last tetanus booster:** _____

Has your child been diagnosed with any of the following conditions by a Healthcare Provider (check all that apply)?

- | | | |
|-----------------------------------|---|--|
| ☐ ADD/ADHD | ☐ Emotional/Behavioral/Psych | ☐ Heart Condition |
| ☐ Asthma | ☐ Headaches/Migraines | ☐ Epilepsy/Seizures |
| ☐ Diabetes | ☐ Orthopedic | ☐ Other _____ |

Details/Specifics regarding condition:

Allergies		
☐ Food	Specify:	Does your child require emergency epinephrine? ☐ Yes ☐ No Will your child self-administer this epinephrine? ☐ Yes ☐ No
☐ Insect	Specify:	Does your child require oral antihistamine? ☐ Yes ☐ No
☐ Seasonal	Specify:	<i>If yes to either, the medication will need to be provided by the parent/guardian and a medication consent form is required in order for staff/chaperones to administer</i>
☐ Other	Specify:	

Does your child have a problem with?

Motion sickness	☐ Yes ☐ No	Sleep walking	☐ Yes ☐ No
-----------------	--	---------------	--

MEDICATION: Is your child currently taking any medication? ☐ Yes ☐ No

Type of medication:	Reason for medication:	When is it given?
Type of medication:	Reason for medication:	When is it given?
Type of medication:	Reason for medication:	When is it given?

****If prescription medication is being taken, the student should bring the medication in its prescription bottle.**
 I hereby authorize the teacher or person in charge of medication to give my child the medication listed above at the times indicated.

(See back of form)

In the event of EMERGENCY CONDITIONS, the following procedures will be followed:

1. Emergency first aid will be given by the teacher, chaperone, or other qualified person.
2. In the case of serious injury/illness: the child will be transported to the nearest hospital for examination by a health care provider.
3. Reasonable effort will be made at contacting parent/guardian referenced above.

In the event I am unable to be reached, I hereby consent to my child's treatment as recommend by the physician/hospital. I understand that I as a parent /guardian am responsible for the cost of the service rendered.

Insurance provider: _____

Insurance provider telephone number: _____

Name of subscriber: _____

Policy number: _____

Parent/Guardian Signature

Date

AUTHORIZATION FOR SELF-ADMINISTRATION OF MEDICATION

I give permission for my son/daughter to administer his/her own medication(s) during this trip. The following medications will be sent with my son/daughter in a pharmacy-labeled container (prescription medication) or the original manufacturer's packaging (non-prescription medication).

Parent/Guardian Signature

Date

Medication Name:	Dose: mg/cc/ tsp	Form: tab/cap/liquid/ inhaler	Time to be taken:	Reason:

SAMPLE FIELD TRIP PREPARATION

Having a uniform and consistent system for organizing emergency medications makes field trip preparation efficient and reduces the chance for error. Having all emergency medications in a bag or container that is easy to transport will also make school evacuations much smoother.

Here is one such method to organize these emergency medications:

Each student who has an emergency medication available at school has an emergency medication pouch in the health room. Whether the medication is kept in the health room, the classroom, or carried by the student, a medication pouch will be kept in the emergency medication bag. Each student's pouch contains the following; the medication, the emergency action plan, items necessary to administer the medication, and a pen. If the student either carries his medication or if the medication is kept in the classroom, a note is placed in the pouch stating where the medication is located. In the grade school setting a student who carries his medication usually keeps it in the front of his backpack while at school to avoid misplacing it. Each pouch is labeled with the student's name and a quick reference card. The reference card has the name of the medication, dose, and instructions as to when it is to be administered. The opposite side has a brief description on how to administer that particular medication. The name tag and reference cards are laminated and a medication documentation sticker is applied. If the medication is administered outside of the school setting, the teacher would document the administration on this sticker.

- Betsy Gallagher RN



Student EVELYN EPIPEN
Medication EPINEPHRINE 0.15mg
Dosage 0.15mg/one autoinjection
Time to be given peanut exposure
or symptoms of anaphylaxis
Special Instructions May repeat in 15
minutes.

Signature Date/Time given

Student: EVELYN EPIPEN
Allergy: PEANUTS

Directions: ADMINISTER IF
PEANUT PRODUCT IS
INGESTED, EVEN IF
SYMPTOMS NOT PRESENT
OR IF ANAPHYLACTIC SYMPTOMS
ARE PRESENT WITHOUT KNOWN
INGESTION.

SUGGESTED ITEMS FOR FIELD TRIP FIRST AID KIT

Additional supplies for extended or overnight depend on field trip activities. Determine if first aid supplies are available at the destination site. First aid kits should be resupplied after each trip.

Supplies	Amount (single day trip)	Amount (extended trip)	Comments and alternatives
Abdominal pad	1	2-3	
Ace bandage	1	2-3	
Alcohol-free cleansing wipes	6	10	Wound care
Band-Aids	15-20	20+	Bring a variety of sizes.
Bandage tape	1 roll	1 roll+	
CPR shield	1	1+	
Emergency blanket	1	1	
Epinephrine auto-injector (optional per district protocol/ supply)	1	1+	In each pack appropriate dose for grade level, if the school has a supply for trips.
Eye flush	1 (4 oz) bottle	2 (4 oz) bottles	Can be used for eye problems and wound care.
Eye pads	2	2	
Fanny pack	1	1+	May use other carrier
First aid booklet	1	1	Or use the American Red Cross First Aid App.
Flashlight or light stick	1	1+	Could use cellphone instead.
Gauze pads	6	10+	
Gloves	3 pairs	6+	Latex-free
Hand wipes	6	6+	Waterless hand washing solution
Instant ice pack	2	2-3	
Kling/gauze roll	1	2-3	
Pencil/marker, note pad	1	2-3	Pens can freeze on winter trips.
Sanitary supplies/pads/tampons	4-5	4-5+	As applicable to the age group. Pads can also double for wound care..
Scissors	1	1+	
Surface disinfectant wipes	4	5	
Tongue depressors	4	4	Or cotton tip applicators. Help splint finger injuries.
Tourniquet (optional)	1	1+	If staff is trained in Stop the Bleed.
Triangle bandage	1	2-3	
Tweezers (optional)	1	1	
Vomitus bag	3	5+	May use garbage bag.

SAMPLE - Field Trip Policy
Field and Other Off-Campus District-Sponsored Trips

The Board of Education recognizes that field and off-campus trips, when used for teaching and learning, are integral to the curriculum and are an educationally sound and important ingredient in the instructional program of the schools. Properly planned and executed field trips should:

1. Supplement and enrich classroom procedures by providing learning experiences in an environment outside the schools;
2. Arouse new interests among students;
3. Help students relate school experiences to the reality of the world outside of school;
4. Bring the resources of the community - natural, artistic, industrial, commercial, governmental, educational - within the student's learning experience; and
5. Afford students the opportunity to study real things and real processes in their actual environment.

For purposes of this policy, a field trip shall be defined as any planned journey for one or more students away from district premises, which is under the supervision of a professional staff member and an integral part of a course of study.

Other off-campus district-sponsored trips shall be defined as any planned, student-travel activity in which a student or students leave their assigned school building and are approved as part of the district's total educational program.

The Board shall approve those field trips and other off-campus district-sponsored trips which are out of the State or Country. The Board shall give preliminary approval for such trips before any planning regarding fundraising or auditioning to occur.

The Board does not endorse, support, or assume liability in any way for any staff member, volunteer, or parent of the district who takes students on trips not approved through the appropriate approval process. Approval must be obtained in accordance with the district's procedures.

The Board directs the administration to develop administrative rule and procedures to ensure meaningful learning for students while they are out of their assigned school building. Administrative guidelines for the operation of both field trips and other off-campus district-sponsored trips, including athletic trips, shall ensure:

1. Field trips and off-campus trips should be integrated with the curriculum, followed up with appropriate activities which enhance its usefulness and evaluated for the effectiveness of learning;
2. The effectiveness of field trip activities is judged in terms of demonstrated learning outcomes; and
3. Student behavior while on all field trips and off-campus trips complies with all district policies including the Student Code of Conduct.

The Board directs the administration to develop administrative rule and procedures to ensure the safety and well-being of students while they are out of their assigned school building. Administrative guidelines for the operation of both field trips and other off-campus district-sponsored trips, including athletic trips, shall ensure:

1. Staff members in charge have Emergency Medical Authorization information, any Emergency Health Plans, any medications and medication consent forms, and have been properly trained by the school nurse;
2. Parental permission is sought and obtained before any student leaves the District on a trip;
3. Each trip is properly planned; and
4. Each trip is properly monitored and supervised.

A professional staff member shall not change a planned itinerary while the trip is in progress, except where the health, safety, or welfare of the students in his/her charge is endangered or where changes or substitutions beyond his/her control have changed the purpose of the trip.

In any instance in which the itinerary of a trip is altered, the professional staff member in charge shall notify the building administration immediately. The distance traveled outside the State and the use of non-district vehicles shall be consistent with Chapter 121 Wis. Stats.

Reference: Wis. § 121.54(7)

REFERENCE CHART FOR STATES' MEDICATION ADMINISTRATION TO STUDENTS AND NURSE DELEGATION LAWS AND REGULATIONS				
Information in this chart is compiled from surveys of members of the National Association of State School Nurse Consultants and the Board of Directors for the National Association of School Nurses. Information is used by permission and has been edited to fit format. Users are encouraged to seek verification with BONs regarding updates to information as presented.				
Key: UAP= Unlicensed Assistive Personnel DOE = Department of Education BON = Board of Nursing NPA= Nurse Practice Act NCSBN = National Council for State Boards of Nursing				
State	Circumstances under which unlicensed school staff may administer medications to students	State Nurse Practice Act Places Restrictions on Delegation to UAP	Comments	Board of Nursing website
Alabama- AL	The school nurse can delegate the administration of medications to a unlicensed medication assistant only after the chosen assistant attends a minimum seven hour course of instruction that includes a curriculum approved by the Alabama Board of Nursing and the Alabama State Department of Education. The unlicensed medication assistant must demonstrate competency to perform the delegated task and score high on the medication test. The task of providing oral, topical, ear, eye, nasal and inhalation medications to a student can be delegated.	Yes	Unlicensed medication assistants cannot do catherizations, cannot administer injectible's, except premeasured EpiPen, They cannot administer rectal or vaginal medications, calculations of medications, trach care, gastric tube insertion, replacement or feedings or any invasive procedure. On a field trip a nurse is required to attend if any student requires diabetic care, a student with epilepsy and has diastat prescribed.	https://www.abn.alabama.gov/
Alaska- AK	School staff may administer medication to students if there is no nurse in the building, on field trips, and on out of state travel. Staff must have specifically board approved training by an RN and have that training documented. Medication administration is considered a delegated nursing procedure. AAC 44.965. DELEGATION OF THE ADMINISTRATION OF MEDICATION. (a) The administration of medication is a specialized nursing task that may be delegated under the standards set out in 12 AAC 44.950, 12 AAC 44.960, and this section.	Yes	Alaska's BON has a document that helps clarify scope of practice issues. https://www.commerce.alaska.gov/web/portals/5/pub/NUR_AdOp_Scope.pdf School Nurses (RN) in regards to out of state field trips: that delegation to a UAP It was advised that a power of attorney is an option for the parent or guardian to assign prior to the field trip. The other option is to have the parent delegate to someone on the field trip to manage their child's health need. The school nurse can teach the field trip's UAP after the parent has delegated to the UAP. By using one of these methods the school nurse is not delegating to a UAP.	https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/BoardofNursing.aspx
Arizona - AZ	UAPs with proper training and documentation can administer medications on field trips and at the direction of the school administration.	Yes	RNs may delegate nursing tasks to UAPs. In maintaining accountability for the delegation, an RN shall ensure that the: a. UAP has the education, legal authority, and demonstrated competency to perform the delegated task; b. Tasks delegated are consistent with the UAP's job description and can be safely performed according to clear, exact, and unchanging directions; c. Results of the task are reasonably predictable; d. Task does not require assessment, interpretation, or independent decision making during its performance or at completion; e. Selected client and circumstances of the delegation are such that delegation of the task poses minimal risk to the client and the consequences of performing the task improperly are not life-threatening; f. RN provides clear directions and guidelines regarding the delegated task or, for routine tasks on stable clients, verifies that the UAP follows each written facility policy or procedure when performing the delegated task; g. RN provides supervision and feedback to the UAP; and h. RN observes and communicates the outcomes of the delegated task. The following tasks may be performed with training and demonstrated competency: ADL's, catheterization, skin care, oral feeding, monitoring of continuous feed, seizure precaution, vagus nerve stimulation with magnet, over the counter medication administration, taking of vital signs, vision screening, hearing screening, scoliosis screening, and blood glucose monitoring.	http://www.azbn.gov/

Arkansas -AR		Yes	Arkansas has specific <i>School Nurse Roles and Responsibilities: Practice Guidelines</i> https://www.arsbn.org/Websites/arsbn/images/School%20Nurse%20Guidelines%202018%20%20Revision%20Updated%207.11.18.pdf	https://www.arsbn.org/
California - CA	California education code allows for staff to administer medication after training by school nurse. Staff may be trained to administer emergency medications (epinephrine, Diastat, glucagon).	Yes	Registered nurses may delegate according to NCSBN delegation tree so long as procedure does not involve assessment and care plan is predictable.	https://www.rn.ca.gov/
Colorado -CO	This may occur if UAP competency can be verified after training and delegation, and if there is no nursing judgement involved.	Yes	This may occur if UAP competency can be verified after training and delegation, and if there is no nursing judgement involved. Colorado provides delegation guidance for school nurses. https://www.cde.state.co.us/healthandwellness/guidance-on-delegation-for-colorado-school-nurses-child-care-consultants-2-2016	https://www.colorado.gov/pacific/dora/Nursing
Connecticut -CT	Allowed when delegated by the school nurse. There are certain classes of staff for different medications.	Yes	Delegation laws in CT refer to a specific student and a specific staff member. Delegation incorporates training and supervision. There are some laws that are only applicable "in the absence of the school nurse". For delegation of diastat and glucagon the staff member must volunteer for the role. Also each school must have 1 person that is trained to respond to a student who may be having a life threatening allergy but may be unknown and have no orders. This only pertains to on school grounds and during the school day.	https://portal.ct.gov/DPH/Public-Health-Hearing-Office/Board-of-Examiners-for-Nursing/Board-of-Examiners-for-Nursing
Delaware - DE	Field trips or in an emergency situation. Parent must provide written permission and the consent must accompany the medication on the trip. In order to provide assistance with medication each UAP must have taken the approved training course developed by the DE DOE. This regulation only covers prescribed medications.	No	Refer to http://regulations.delaware.gov/AdminCode/title24/1900.shtml	https://dpr.delaware.gov/boards/nursing/
Florida -FL	District school board personnel may assist students in the administration of prescription medication when they have been trained in accordance with district policies. Training is provided by a registered nurse, a licensed practical nurse, a physician or a physician assistant. School personnel are designated by the school principal to assist students in the administration of prescribed medication. Each district school board shall adopt policies and procedures governing the administration of prescription medication by district school board personnel. The policies and procedures shall include, but not be limited to, the following provisions: 1) For each prescribed medication, the student's parent shall provide to the school principal a written statement which grants to the school principal or the principal's designee permission to assist in the administration of such medication and which explains the necessity for the medication to be provided during the school day, including any occasion when the student is away from school property on official school business. The school principal or the principal's trained designee shall assist the student in the administration of the medication.; 2) Each prescribed medication to be administered by district school board personnel shall be received, counted, and stored in its original container. When the medication is not in use, it shall be stored in its original container in a secure fashion under lock and key in a location designated by the school principal. There shall be no liability for civil damages as a result of the administration of the medication when the person administering the medication acts as an ordinarily reasonably prudent person would have acted under the same or similar circumstances.	Yes	A professional nurse is responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing. Florida Nurse Practice Act allows for a legally qualified nurse of another state whose employment requires the nurse to accompany and care for a patient temporarily residing in Florida for not more than 30 consecutive days, provided the patient is not in an inpatient setting, the board is notified prior to arrival of the patient and nurse, the nurse has the standing physician orders and current medical status of the patient available, and prearrangements with the appropriate licensed health care providers in this state have been made in case the patient needs placement in an inpatient setting. The nurse must provide notification to the Division of Medical Quality Assurance, Board of Nursing prior to arrival in Florida. The notification must include the nurse's name (as it appears on the license), jurisdiction in which licensed is held, and license number and the address of the nurse. Also, the notification must include an affirmation that the nurse has the standing physician orders and current medical status of the patient and that prearrangements with the appropriate licensed health care providers in Florida have been made in case the patient needs placement in an inpatient setting. Notification letters should be sent to: Florida Board of Nursing 4052 Bald Cypress Way, BIN C02 Tallahassee, Florida 32399-3252 or FAX: (850) 617-6460	https://floridasnursing.gov/

Georgia -GA	There is no law that prohibits unlicensed staff to administer medications to students.	Yes	Georgia does not allow nurses to "delegate" tasks. Instead Georgia's BON has provided a decision making tree to assist nurses in determining which tasks can be "assigned" to an UAP.	http://sos.ga.gov/index.php/licensing/plb/45
Hawaii -HI	Currently Hawaii Revised Statutes (HRS): §302A-853 Administration of medication. School health aides may assist students by administering oral and topical medication, and in emergency situations, other premeasured medication; provided that: (1) If the student receiving the medication is a minor, a parent or guardian requests and authorizes the administration of medication; (2) The medication has been prescribed by a licensed physician, as defined in section 334-1, or by a practitioner with prescriptive authority; (3) The administration of the medication is with the approval of the department of health; and (4) The administration of the medication is necessary for the health of the student and for the student's attendance at school. [L 2007, c 105, pt of §2; am L 2012, c 134, §2]	Yes	HRS [§457-7.5] Delegation. (a) A registered nurse may delegate nursing care tasks, functions, and activities to unlicensed assistive personnel in a manner that is appropriate to the level of knowledge and skill of the unlicensed assistive personnel; provided that the delegation of tasks, functions, and activities complies with applicable federal and state laws; and provided further that the practice-pervasive functions of assessment, evaluation, and nursing judgment shall not be delegated. When delegating a task, function, or activity, a delegating nurse shall use the NCSBN delegation decision-making process as a model for decision-making.	http://cca.hawaii.gov/pvl/boards/nursing/
Idaho -ID	Under the supervision and training by school nurses, in the absence of a school nurse, parents may delegate the responsibility to a UAP.	Yes	The RN may not delegate IV push meds to a UAP. The school nurse may train and delegate procedures to a UAP in the absence of a school nurse. Even though another person may deliver care, that person is operating under the license of the registered nurse.	https://ibn.idaho.gov/IBNPortal/
Illinois -IL	Medication administration may be delegated to other licensed nurses. http://ilga.gov/legislation/ilcs/ilcs5.asp?ActID=1312&ChapterID=24	Yes	Link to Illinois Nurse Practice Act http://nursing.illinois.gov/nursepracticeact.asp . The only restriction is that non-licensed personnel cannot re-delegate (something that was delegated to them) a nursing intervention to someone else.	https://www.idfpr.com/profs/Nursing.asp
Indiana -IN	May delegate "only those nursing measures which the nurse knows, or should know, that another person is prepared, qualified, or licensed to perform." Medication may be one of those duties.	No	Refer to document created in collaboration with school nurse association, state nursing association, board of nursing and education department: https://www.doe.in.gov/sites/default/files/health/delegation-guidelines-12-9-16.pdf	https://www.in.gov/pla/nursing.htm
Iowa - IA	See Iowa Administrative Code 281-14.1(256). Health care professionals may delegate medication to school personnel after training including knowledge and skills verification. Individuals who have demonstrated competency in administering their own medications may self-administer their medication. Individuals shall self-administer asthma or other airway constricting disease medication or possess and have use of an epinephrine auto-injector with parent and physician consent on file, without the necessity of demonstrating competency to self-administer these medications. School staff must have completed a class approved by the Department of Education and successfully return a procedural skills check to a registered nurse or pharmacist. A record of completion must be maintained at school.	Yes	Refer to Iowa Administrative Code (IAC) 6.2(5). There is no restriction except that the delegated task must not require skill and education that is beyond the scope of practice of an LPN. Iowa registered nurses use guidance given by the NCSBN, in particular that the delegated task must not require nursing judgement to perform.	https://nursing.iowa.gov/
Kansas - KS	Staff may administer if nursing judgment is not required and calculations must not be involved. (This does not include insulin calculations based on carb counts.) The nurse must train the UAP and be able to provide supervision (this can be in the form of availability by telephone for questions). The nurse is allowed to use her judgment in determining complexity of task and appropriateness of delegation. Principal or other administrator is not allowed to make that determination.	Yes	The over-arching determination in any delegation situation is the question of the complexity of the task and the ability of the UAP. Nursing judgment can not be delegated. Web link to the Kansas Nurse Practice Act Position Statement (grid) on Delegation of Specific Nursing Tasks in the School Setting: https://ksbn.kansas.gov/wp-content/uploads/Resources/Position_Statements/Delegation-of-Specific-Nursing-Tasks-in-the-School-Setting.pdf	https://ksbn.kansas.gov/
Kentucky - KY				https://kbn.ky.gov/Pages/default.aspx

Louisiana - LA	Unlicensed school employees may administer most medications and emergency medications after taking a 6-hour medication administration training course presented by a School Nurse.	Yes	We must follow the Delegation Tree for the RN delegating to LPN's, and RN delegating to unlicensed personnel.	http://www.lsb.state.la.us/
Maine -ME	Maine statute MRS-A Title 20-A § 254(5) requires that school districts develop a policy on medication administration in schools, Chapter 40 Rule for Medication Administration in Maine Schools, outlines what must be included. The policy must address the training by the school nurse of unlicensed school staff that administer medication and must address students who carry and self-administer emergency medication. It is recommended that medication be administered only when it is essential for the student to remain in school. The school nurse is responsible to oversee medication administration in schools to ensure that medications are administered safely. The certified school nurse may choose to not oversee some medication administration activities if, in the judgment of the school nurse, the task can not be properly and safely performed by the unlicensed person without jeopardizing the student's welfare. Oversight of a task carried out by an unlicensed person is determined on a case-by case basis and is most appropriate when the unlicensed staff is caring for students with routine, repetitive, and ongoing medication administration. When medication administration is not routine and the student's response to medication is less predictable, nursing oversight should be carefully considered.	Yes	Refer to the Maine Nurse Practice Act, Ch. 6 - Regulations Relating to Coordination and Oversight of Patient Care Services by Unlicensed Health Care Assistive Personnel (PDF) covers this topic.	https://www.maine.gov/boardofnursing/
Maryland - MD	Medication administration to student is considered a delegatable nursing task. RN cannot delegate medication administration including oral if it involves calculation of a dose.	Yes	Delegation principles apply. Certain nursing functions have been determined to be non-delegable. These are listed in delegation in school setting guidance available at: http://marylandpublicschools.org/about/Documents/DSFSS/SSSP/SHS/HSGuidelines/DelegationofNursingFunctions.pdf	https://mbon.maryland.gov/Pages/default.aspx
Massachusetts - MA	If the local School Board or Board of Trustees (in the case of a non-public school) has registered with the Department of Public Health and has authorized categories of unlicensed school personnel to administer prescription medications, under the supervision of the school nurse. (This is outlined in our regulations 105 CMR 210.000.) The school must provide assurances that there are sufficient number of school nurse(s) are available to provide proper supervision of unlicensed school personnel.	Yes	The Board of Registration in Nursing presents this framework for delegation decision-making and accountability based on a model which identifies the five (5) key elements of any delegated act. The five rights of delegation clarify the critical components of the delegation decision-making process.	https://www.mass.gov/orgs/board-of-registration-in-nursing
Michigan -MI	Michigan School Code Section 1178 REVISED (1995) states "a school administrator, teacher, or other school employee designated by the school administrator" or "licensed registered professional nurse" may administer medication. The Michigan Education Code allows for the school administrator to assign the task of medicine administration to unlicensed staff. School districts are accountable for policies and procedures for safe administration of medication.	Yes	Michigan does not actually have a Nurse Practice Act. However, under the health code there are guidelines on what can be delegated. Most school districts operate under the Michigan School Code which allows administrators to designate who can administer medications in the school setting.	https://www.michigan.gov/lara/0,4601,7-154-89334_72600_72603_27529_27542---,00.html

Minnesota -MN	Not allowed if not delegated by licensed school nurse (LSN).	No	In MN, the nurse practice at https://mn.gov/boards/nursing/laws-and-rules/nurse-practice-act/ and our MN state regulation https://www.revisor.mn.gov/statutes/cite/148.171 do not list or limit what nursing procedures may be delegated. Per Sub. 7a.Delegation. "Delegation" means the transfer of authority to another nurse or competent, unlicensed assistive person to perform a specific nursing task or activity in a specific situation. Guidelines from the National Council of State Boards of Nursing can be used to assist with assigning tasks and other activities to nurses or unlicensed staff. Delegation to unlicensed staff must be determined by the RN. https://mn.gov/boards/assets/Use_of_Protocols_2017_10-11-18_tcm21-37192.pdf	https://mn.gov/boards/nursing/
Mississippi- MS	Registered nurses in Mississippi cannot delegate medication administration to an unlicensed person. School administrators delegate unlicensed personnel in their school who will assist with medications. Mississippi's Board of Nursing allows registered nurses to train those unlicensed individuals delegated by school administrators to assist with self-administration of medications. The MS Board of Nursing has a curriculum that the school nurse uses to train unlicensed personnel on assistance with medications at school.		Link to Delegation position statement: https://www.msbn.ms.gov/sites/default/files/documents/Delegation_2009_0.pdf . The Registered Nurse uses professional judgment to decide which nursing duties and patient treatments may be delegated and to whom. Some duties and treatments require the knowledge, skills and judgment of the Registered Nurse and therefore may not be delegated to a Licensed Practical Nurse or unlicensed person. Some duties and treatments utilize more standardized procedures and may be delegated to another Registered Nurse or Licensed Practical Nurse. In this case, the Registered Nurse who delegates the task continues to be responsible for appraising the care given and providing guidance and assistance as needed in order to safeguard the consumer of health care. Other duties and treatments, while requiring that a Registered Nurse supervise the act, may be delegated to an appropriately prepared unlicensed person. Some tasks, due to their complexity and the accompanying assessment and evaluation skills required, may not be delegated to unlicensed persons.	https://www.msbn.ms.gov/
Missouri - MO	School Districts in Missouri are under local control, so local school district policies and protocols should be followed. There is a resource for Medication Administration on the MO DHSS site: (Medication Administration training - documented and supervised by a Registered Nurse - https://health.mo.gov/living/families/schoolhealth/pdf/MedicationManual.pdf Missouri NPA does not restrict this activity or delineate specifically how this delegation is to happen. In MO nursing does not own any tasks and med admin is not restricted to nurses. Missouri has position statement at : https://pr.mo.gov/boards/nursing/positionstatements/Utilization%20of%20Unlicensed%20Health%20Care%20Personnel.pdf	No	MO Nurse Practice Act does not list or limit what nursing acts may be delegated nor does it list specific tasks as belonging only to nursing.	https://www.pr.mo.gov/nursing.asp
Montana - MT	School staff may administer emergency medications - Glucagon, Nasal Versed, Epinephrine.	Yes	Before delegating, the LPN or RN should consider the five rights of delegation: the right task, the right person to whom the delegation is made, the right circumstances, the right direction and communication by the LPN or RN, and the right supervision and evaluation. The LPN or RN shall delegate to another only those nursing tasks for which that person has the necessary skills and competence to accomplish safely. The delegating nurse retains accountability in all four areas: 1) The decision to delegate; 2) The delegated task; 3) Verifying the delegatee's competency to perform the task and ; 4) Providing supervision.	http://boards.bsd.dli.mt.gov/nur

Nebraska -NE	All unlicensed assistive personnel must be assess for 14 competencies to do medication administration - this is only for oral, inhaled, topical or instilled medications. If other routes, written directions and training must occur. This competency assessment must be renewed every 3 years at a minimum with corrections of any errant ways as they occur.	Yes	NE only allows RN's to make delegation decisions. RN's have the education, experience, nursing assessment and judgment skills to make the delegation decision. Nursing interventions are considered complex - needing nursing judgement to continue when there may be complications and these may not be delegated. Nursing interventions are considered non-complex meaning they are routine and step by step and do not require nursing judgment to continue. There may be delegated if the circumstances are appropriate - willing and competent UAP, right environment, cooperative student, etc. Interventions may change from non-complex to complex if student's condition changes or other circumstances change. Training is required and UAP must have method to contact RN at any time for questions and RN must provide adequate supervision. This is regulated by 173 NAC Chapter 99.	http://dhhs.ne.gov/publichealth/pages/crINursingHome.aspx
Nevada - NV	Nevada has First Aid and Safety Assistances (FASA) that assist the school nurse. The FASA's are allowed to administer medication after completing a medication package online, test reviewed with the nurse and the school administrator approval.	Yes	Nevada state board of nursing has a table of nursing procedures. The table specifies the procedures that can be delegated to an UAP.	https://nevadanursingboard.org/
New Hampshire -NH	Follow the School Nurse Delegation guidelines.	No	NH allows for delegation and registered nurses use Rules and laws to guide such delegation.	https://www.oplc.nh.gov/nursing/
New Jersey -NJ	18A:40-12.14 The school nurse shall have the primary responsibility for the emergency administration of glucagon to a student with diabetes who is experiencing severe hypoglycemia. The school nurse shall designate, in consultation with the board of education, additional employees of the school district who volunteer to administer glucagon to a student with diabetes who is experiencing severe hypoglycemia. The designated employees shall only be authorized to administer glucagon, following training by the school nurse or other qualified health care professional. The policy for the administration of medication to a pupil shall provide that the school nurse shall have the primary responsibility for the administration of the epinephrine. The school nurse shall designate, in consultation with the board of education, or chief school administrator of a nonpublic school additional employees of the school district or nonpublic school who volunteer to administer epinephrine via a pre-filled auto-injector mechanism to a pupil for anaphylaxis when the nurse is not physically present at the scene. The school nurse shall determine that the designees have been properly trained in the administration of the epinephrine via a pre-filled auto-injector mechanism using standardized training protocols established by the Department of Education in consultation with the Department of Health and Senior Services.	Yes	NJ law allows for delegation in accordance with New Jersey Board of Nursing "Delegations of Selected Nursing Tasks Model." This model is base on N.J.A.C. 13:37-6.2	https://www.niconsumeraffairs.gov/nur/Pages/default.aspx
New Mexico -NM	The New Mexico Nurse Practice Act specifically addresses the authority for the school nurse to delegate medication administration to school personnel and anyone associated with school operations (volunteers). Staff must be trained by an RN and both the trainer and trainee must sign/verify training completed.	Yes	Registered nurses may delegate any procedure that is deemed to be routine and predictable. Procedure cannot include an assessment, as assessment cannot be delegated. The BON has expanded the interpretation to allow prn medication and even to insulin administration.	http://nmbon.sks.com/

New York - NY	NY does not permit delegation (of medication to staff). There are statutes permitting trained unlicensed personnel to administer emergency epinephrine via auto-injector, glucagon, and naloxone. New York has a form where parent can designate someone to administer medication to their child while in New York. According to NYSED's Medication Management Guidelines for Schools staff may assist supervised students to take their own oral, topical and inhalant medication at the request and direction of the student if trained by a registered (school) nurse.	Yes	In New York RNs that come to New York may practice nursing on Wisconsin students as long as they do not hold themselves out to be RN's to anyone in the host state (New York). New York is not part of the Nurse Compact. http://www.p12.nysed.gov/sss/documents/OnetoOneNSGQAFINAL1.7.19.pdf defines what can be delegated. A School Nurse can only delegate certain tasks to an LPN or an unlicensed school personnel. Only a school nurse can assess and triage. It is important to check this document before delegating any task. Registered nurses must train and assess each person to who a task is delegated.	http://www.op.nysed.gov/prof/nurse/
North Carolina - NC	State statute allows school staff to administer medications and do procedures when trained to do so. The training and oversight comes through nursing delegation in this state. G.S. 115C-375.1. School staff may, administer medication prescribed by a doctor upon the written request of the parent, give emergency care when circumstances indicate that a delay would have serious consequences, and perform first aid or other lifesaving techniques for which the staff has had training. The law also limits an employee's liability as long as they are acting within the defined parameter. This law also assigns authority and responsibility to the principal for determining which persons will participate in the medical care program. It is pointed out that no employee, however, shall be required to administer drugs or medication or attend lifesaving techniques programs.	Yes	The restrictions are not specific - anything that, through completing the delegation process, is determined by the registered nurse to be safe to delegate is allowed. The task under question must meet all the following criteria: Frequently occur in the daily care Be performed using an established sequence of steps Involve no modification Has a predictable outcome Does not involve ongoing assessment, interpretation, or decision making Does not endanger the student or their well-being. The NC Board of Nursing allows nurses traveling in or through to practice for a limited period (no more than 30 days) in the state under the requirements of their state of licensure. In addition, NC allows 'remote-delegation' for students traveling to or through NC on a school sponsored activity. Here is the link to the position statement: https://www.ncbon.com/vdownloads/position-statements-decision-trees/out-of-state-nurses-practicing-nc-for-lpt.pdf Nurses are allowed to delegate to unlicensed personnel, as long as nursing judgement is not involved. If the physician order is specific and does not require nursing judgement, it can be delegated. North Carolina is also a state that says, if you are traveling on a field trip to our state, then you take care of your students as you would in your own state.	https://www.ncbon.com/
North Dakota - ND				https://www.ndbon.org/
Ohio - OH	ORC 3313.713 allows school administrators to designate school employees to administer prescription medication. These staff must receive training by a licensed health professional that is considered appropriate by the school board. Over the counter medication administration decisions are made by the individual district/school. Anyone can administer a medication in a true emergency.	Yes	In Ohio, RNs may delegate any nursing task except (1) medication administration, and (2) the nursing process (e.g., assessment, nursing diagnosis, nursing plan of care, etc.). RNs direct the care of LPNs.	http://www.nursing.ohio.gov/
Oklahoma - OK	Training is required for staff other than school nurses to administer medication.			http://nursing.ok.gov/
Oregon - OR	'Designated' and trained school staff can administer non-injectable medications (oral, topical, inhalers). This is accomplished by using Oregon Department of Education medication training. Additional types of medication can be administered with extra training by the nurse - nebulizers, rectal Diastat, intranasal Versed, oxygen. Emergency injectable medications may be given if they are 'certified' by attending state created trainings - Epinephrine, glucagon, adrenal, naloxone. Training protocol maybe found at: https://www.ode.state.or.us/groups/supportstaff/hklb/schoolnurses/medicationtrainingpacket.pdf	No	The Oregon NPA allows the licensed RN to CONSIDER delegation for any nursing procedure other than an IM injection based on a specific set of criteria. The decision to delegate lies solely with the RN. One of the criterion is that the UAP must be willing, competent, and able to perform the procedure without direct supervision and oversight. Oregon Nurse Practice Act does not limit the tasks or trainings that can be delegated, however you cannot delegate nursing assessment, it does require the use of the nursing process, and documentation that the student's condition is stable or predictable and the care giver (UAP) is competent to perform the procedure.	https://www.oregon.gov/OSBN/pages/index.aspx

Pennsylvania -PA	Not allowed.	Yes	Pennsylvania does not have delegation. The RN cannot delegate any functions/ duties of a RN to any other entity. LPN's function under the direction of the RN.	https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Nursing/Pages/default.aspx#VTEYxCFVhBd
Rhode Island -RI	Under the RI Good Samaritan Law staff may administer/assist with albuterol "rescue inhalers" and emergency epinephrine auto injector administration in students with these medications only as prescribed.	Yes	Registered nurses in RI do not delegate tasks requiring assessment or medication administration except in the case of albuterol inhalers or emergency epinephrine auto injector only for students with prescriptions. Staff must be trained by the RN. Parent or RN must attend a field trip for administration of any other treatments or medications.	http://www.health.ri.gov/licenses/detail.php?id=231/index.php
South Carolina -SC	Unlicensed Assistive Personnel (UAP) can ASSIST in the administration of oral medications. They cannot administer ear drops, eye drops, IM, Sub Cutaneous, or G-tube medication administration.	No	Delegation consists of identifying appropriate staff (with guidance from administration/teacher), training staff member, performing competency demonstration after training, and supervising the staff member in performing certain medical procedures. Prior to delegation the parent/guardian AND physician must give written consent for delegation.	https://www.llr.sc.gov/pol/nursing/
South Dakota - SD				http://doh.sd.gov/boards/nursing/
Tennessee - TN	Under T.C.A. 49-5.415 Unlicensed staff may "assist" a student with self administration of medication. The student must be competent to self administer their medication. They must be able to verbalize the medication and why they are taking the medicine.	Yes	If the student is deemed incompetent then a licensed personnel must perform medication administration and any procedure. The only procedure an unlicensed personnel could administer is emergency medicine i.e. epi pens, glucagon, inhalers, "if" the employee volunteers without duress to be trained in the said procedure.	https://www.tn.gov/health/health-program-areas/health-professional-boards/nursing-board/nursing-board/about.html
Texas -TX	<u>TX BON Position 15.13. The Role of LVNs and RNs in School Health</u> in the section on RN Delegation to Unlicensed Personnel (https://www.bon.texas.gov/practice_bon_position_statements_content.asp#15.13) allows administration of emergency medications or treatments. "The RN may decide to delegate to an unlicensed person the emergency administration of medications or treatments. Examples include, but are not limited to, Epi-pens, Glucagon, Diastat, oxygen, metered dose inhalers or nebulizer treatments for the relief of acute respiratory symptoms, and the use of a hand held magnet to activate a vagus nerve stimulator to prevent or control seizure activity. All delegation of this nature must be in compliance with 22 TAC §224.6(4) in order to stabilize the child and prevent complications from delaying treatment. The decision to delegate a specific task is always at the discretion of the RN in accordance with 22 TAC §224.8(b)(1)(C) or 22 TAC §225.9(d)." Texas Education Code 22.052, Administration of Medication by School District Employees or Volunteer Professionals; Immunity from Liability gives broad allowance for school district employees to administer medication. The TX Dept. of State Health Services, publishes the Guide to Medication Administration in the School Setting: How to Implement TX Ed Code Chapter 22 Section 22.052. (https://www.dshs.texas.gov/uploadedFiles/Content/Prevention_and_Preparedness/schoolhealth/pdf/Med%20Guide%20for%20Schools%209.2017.pdf)	Yes	General Criteria for Delegation - The nursing task must not require the unlicensed person to exercise professional nursing judgment; however, the unlicensed person may take any action that a reasonable, prudent non-health care professional would take in an emergency situation. Rule 225 allows delegation for stable and predictable health conditions. Rule 225.10 defines Tasks that May be Delegated - includes intermittent catheterization, irrigation of catheter or feeding tube, vent care. Rule 225.12 - Delegation of Insulin. Rule 225.13 - Tasks Prohibited From Delegation - dosage calculation, administration of injectables except for diabetes medication and emergency meds, medications via tube except as allowed by 225.10, receipt of verbal/telephone orders, administration of initial dose of medication not previously received by patient. BON Delegation Resource Packet - includes decision flow charts, FAQs, and School Nurse Delegation algorithms. https://www.bon.texas.gov/pdfs/delegation_pdfs/School%20Nurse%20Delegation%20Decision%20Trees.pdf	http://www.bon.state.tx.us/

Utah - UT	RN's must train any unlicensed personnel that are assigned to care for students and they must be signed off under the RN's license. EpiPens, inhalers, diabetic supplies and prescription meds may be administered by unlicensed personnel after RN training is completed and documented. Currently Utah law doesn't allow the delegation of Diastat or Versed. Parents or EMS must administer these if needed.	Yes	Person being delegated to must be competent and willing to be trained.	https://dopl.utah.gov/nurse/index.html
Vermont - VT	UAP may not administer medications or health care tasks without training and demonstrated competencies. UAPs must have access to the delegating school nurse (RN) or their designated nurse or licensed medical provider. Medical procedures are completed with written IHP or written protocol.	No	The RN is responsible to follow the nursing process and delegate per the BON position paper on delegation and the VT agency of education EQS (2014) requiring written policy, (protocol) and procedures.	https://www.sec.state.vt.us/professional-regulation/list-of-professions/nursing.aspx
Virginia - VA	Virginia State code allows UAPs in K-12 to administer any medication ordered by a physician, administration has identified the UAP that will administer the medication, and for which an RN has in-serviced them in the administration thereof.	Yes	Per Virginia state code, nursing tasks that shall not be delegated include: those that are inappropriate for a specific, unlicensed person to perform on a specific patient after an assessment is conducted as provided in 18VAC90-19-260. Nursing tasks that shall not be delegated to any unlicensed person are: 1. Activities involving nursing assessment, problem identification, and outcome evaluation that require independent nursing judgment; 2. Counseling or teaching except for activities related to promoting independence in personal care and daily living; 3. Coordination and management of care involving collaboration, consultation, and referral; 4. Emergency and nonemergency triage; 5. Administration of medications except as specifically permitted by the Virginia Drug Control Act (§ 54.1-3400 et seq. of the Code of Virginia); and 6. Circulating duties in an operating room.	http://www.dhp.virginia.gov/nursing/
Washington -WA	RNs can, if certain criteria are met, delegate oral and topical medication as well as ear and eye drops. In addition, epinephrine auto-injectors can be delegated. RNs can delegate oral (including G tube meds and inhalers), topical, eye drops, ear drops, and epinephrine in schools. This only applies to schools and off site (field trips) that are in state.	Yes	Student status must be "stable and predictable", both RN And delegee must agree that delegation is appropriate, and anything that requires nursing judgement cannot be delegated. With the exception of epinephrine, piercing of the skin cannot be delegate.	https://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission
Washington DC	Medications can be delegated in public schools as long as they do not require dosage calculation. injection except with an epinephrine delivery device, mechanical devices for inhalation or insertion of a tube in the body.	Yes	The DC nurse practice act states tasks can be delegated that do not require critical thinking, independent nursing judgement or complex or multi-dimensional application of nursing process and that these tasks must frequently recur. Additionally, the results must be predictable, the potential for risk must be minimal, and they must utilize standard, unchanging practice. Delegation must be under the general or immediate supervision of an RN.	https://dchealth.dc.gov/node/149382
West Virginia - WV				http://wvrnboard.wv.gov/Pages/default.aspx

Wisconsin - WI	Wis. Stat. 118.29 (http://docs.legis.wisconsin.gov/document/statutes/118.29) allows bus drivers, school staff, and volunteers to administer all routes of medication to students as long as the stipulations of the law are followed. Staff administering medication in all routes other than oral, ear, eye, or topical need to complete training approved by the Wisconsin Department of Public Instruction. Such training is located on the DPI website. http://docs.legis.wisconsin.gov/document/statutes/118.29 http://docs.legis.wisconsin.gov/document/statutes/118.29 https://dpi.wi.gov/sspw/pupil-services/school-nurse/training/medication. Training involves a knowledge portion and skills competency. Staff must be authorized in writing by their school administrator in order to be immune from civil liability. Parents must provide written consent for over the counter medications and both practitioner and parent written consents must be provided for prescription medications. The medication must be provided in a labeled container. See statute for description.	Yes	The Wisconsin Nurse Practice Act does not list or limit what nursing procedures may be delegated to "LPNs or less skilled assistants." It does require the use of the nursing process and delegation decision tree. RN's may only delegated procedures for which there are written orders from a practitioner. Wisconsin allows for a 72 hour practice exemption for practicing professional or practical nursing if a patient is being transported through or in Wisconsin for the purpose of receiving medical care or the nurse is temporarily in Wisconsin. Form to receive permission under this exception is located on the BON website.	https://dsps.wi.gov/pages/BoardsCouncils/Nursing/Default.aspx
Wyoming - WY				https://nursing-online.state.wy.us/

Resources

National Council of State Boards of Nursing [NCSBN]. 2015. Nursing license compact. <http://www.ncsbn.org/nurse-licensure-compact.htm>.

University School of Milwaukee. Information, agreement, and Permission Packet for University School of Milwaukee International Off-Campus Programs and Travel. Available on the DPI School Nursing webpage.

Wisconsin Department of Safety and Professional Services. 72 Hour Practice Exemption form #2193 (rev.11/16) Retrieved: <https://dsps.wi.gov/Credentialing/Health/fm2193.pdf>.

References

American Nurses Association [ANA]. 2012. Principles for delegation by registered nurses to unlicensed assistive personnel (UAP) [Brochure]. Silver Spring: Author.

American Nurses Association & National Council of State Boards of Nursing [ANA & NCSBN]. 2006. "Joint statement on delegation." Accessed May 3, 2019. https://www.ncsbn.org/Delegation_joint_statement_NCSBN-ANA.pdf.

American Red Cross First Aid Kit List. Accessed May 3, 2019. <https://www.sosproducts.com/Field-Trip-Fannypack-First-Aid-Kit-p/90185.htm>.

Erwin, Karen and Clark, Sandra. "School-Sponsored Field Trips. 2017. In Legal Resources for School Health Services. Edited by Cheryl Resha and Vicki Taliaferro, 621-629. Nashville.SchoolNurse.com.

Hootman, Janis, Schwab, Nadine C., Gelfman, Mary H. B., Gregory, Elizabeth K., and Pohlman, Katherine J. 2005. "School Nursing Practice: Clinical Performance Issues" in Legal Issues in School Health Services, edited by Nadine C. Schwab and Mary H.B. Gelfman, 167-230. Lincoln NE: Sunrise Press.

Massachusetts Department of Public Health School Health Unit [MDPH] 2014. Field Trip Tool Kit.

National Association of School Nurse [NASN]. 2018. School-sponsored before, after, and extended school year programs-the role of the school nurse (Position Statement). Silver Spring, MD: Author. Accessed May 3, 2019. <https://www.nasn.org/nasn/advocacy/professional-practice-documents/position-statements/ps-before-after-programs>

New York State Center for School Health. 2018. Field Trip FAQs. Accessed _____. <https://www.schoolhealthny.com/site/default.aspx?PageType=3&ModuleInstanceId=189&ViewID=7b97f7ed-8e5e-4120-848f-a8b4987d588f&RenderLoc=0&FlexDataID=485&PageID=140>.

Russell, Kathleen A. 2017. "Nurse Practice Acts Guide and Govern: Update 2017." Journal of Nursing Regulation 8, no. 3 (October):18-24.

U.S. Department of Education Office for Civil Rights. Parent and Educator Guide to Section 504 in Public Elementary and Secondary Schools. (December 2016). Accessed May 3, 2019. <https://www2.ed.gov/about/offices/list/ocr/docs/504-resource-guide-201612.pdf>

- U.S. Department of Education Office for Civil Rights. Protecting Students with Disabilities. (September 2018a). Accessed May 3, 2019. <https://www2.ed.gov/about/offices/list/ocr/504faq.html>
- U.S. Department of Education Office for Civil Rights. Questions and Answers on the ADA Amendments Act of 2008 for Students with Disabilities Attending Public Elementary and Secondary Schools. (September 2018b) Accessed May 3, 2019. <https://www2.ed.gov/about/offices/list/ocr/docs/dcl-504faq-201109.html>
- U. S. Department of Health & Human Services. 2017. Discrimination on the Basis of Disability. Accessed May 3, 2019. <https://www.hhs.gov/civil-rights/for-individuals/disability/index.html>
- Wisconsin Department of Public Instruction [DPI]. 2018. Memo- 2017 Wisconsin Act 29 compliance-revised 1/16/18. Accessed May 3, 2019. <https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/snopiodantagonistfaq.pdf>