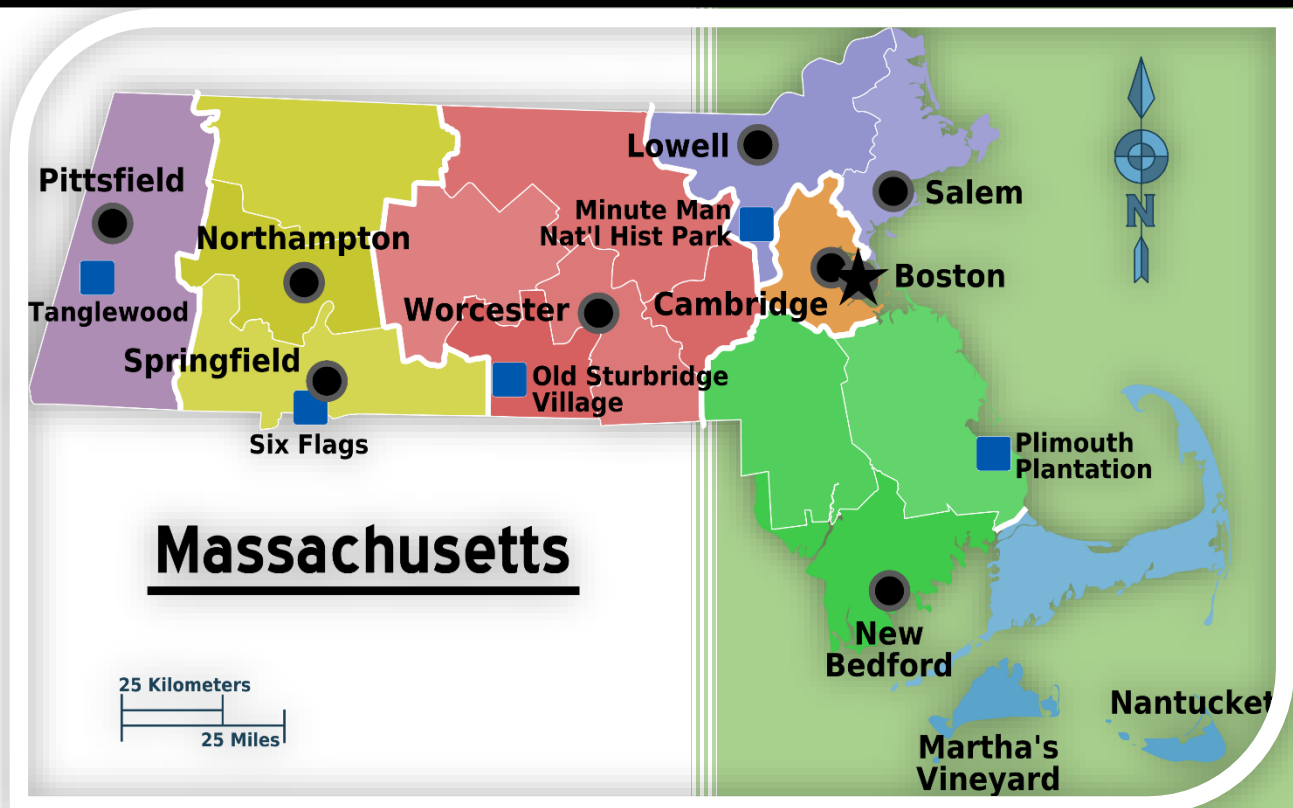


FIELD TRIP TOOL KIT



2015
ESHS CQI
PROJECT

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I. INTRODUCTION

A. Purpose and Goals

The Massachusetts Department of Public Health School Health Unit (MDPH) receives numerous inquiries from school nurses regarding the preparation and planning of field trips. Many of the same concerns were being asked by school nurses across Massachusetts. The Essential School Health Services (ESHS) Evaluation Team identified the need for a field trip toolkit for school nurses to utilize for the planning and preparation of school sponsored field trips. The purpose of the toolkit is to provide school nurses with sample guidelines and resources to allow for the health and safety of participating students. Forty-nine ESHS funding districts chose to participate in the Field Trip Toolkit Continuous Quality Improvement (CQI) project.

Goals of this CQI project include:

- ☐ Enhancing the knowledge and understanding of school administrators, school committees, school nurses and school staff regarding the time and planning involved in preparing for school-sponsored field trips.
- ☐ Providing guidelines to allow for both the safety of students and staff participating in school-sponsored field trips.
- ☐ Identifying the role of school personnel in the planning/approving/preparation of field trips.
- ☐ To develop a quality “toolkit”, which has been piloted by school nurse leaders and is supported by the MDPH School Health Unit as “best practices.”

The project timeline began in January 2014 when School Nurse Leaders from the 49 districts completed a Survey Monkey® regarding issues, concerns and questions regarding field trips. Results were utilized by the CQI evaluation team to determine the information to include in the toolkit. In March 2015, the toolkit draft was distributed electronically to the nurse leaders participating in this project. The districts piloted the toolkit for the planning and preparation of their field trips over several months. In June 2015, the school nurse leaders completed a follow up Survey Monkey® to determine the usefulness of the toolkit, and whether any adjustments need to be made before the toolkit is considered completed and ready for general distribution to Massachusetts school nurses.

The school nurse is central to all aspects of care and service delivery for all students, and therefore, s/he has a vital role in assuring that school-sponsored field trips are safe and appropriate for the participating students. According to the National Association of School Nurses (NASN)'s position statement on the Role of the School nurse, the school nurse is the care coordinator of students. (NASN, 2012). Thoughtful planning for students with special health care needs promotes quality school-based care, and helps to ensure that these students are able to participate to the fullest possible extent in educational and social opportunities (MDPH School Health Manual, 2007).

B. CQI Project Team Members

This project began as a vision in the Fall of 2013. The common objective was to produce a field trip tool kit that addresses many of the general concerns school nurses across the Commonwealth have regarding field trips, including the delegation of medication administration, emergency action plans, and criteria to use when determining the need for a nurse to accompany a field trip.

We wish to thank all of the School Nurse Leaders who contributed sample forms and to those who provided valuable insight into this project. We also wish to thank the 49 school nurse leaders who committed to this project and spent several months utilizing the contents and critiquing the toolkit.

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C. Glossary of Terms

ADA: American with Disabilities Act prohibits discrimination and ensures equal opportunity for individuals with disabilities.

Accessibility: a barrier free environment that allows maximum participation by individuals with disabilities.

Accommodations: a change in how a student accesses and demonstrates learning that does not substantially change instructional content.

Department of Elementary and Secondary Education: (DESE) is responsible for licensing all professional educators including teachers, psychologists, guidance counselors, nurses, speech language pathologists and many other professional positions in the Public Schools.

Disability: a functional limitation that interferes with a person's ability to walk, hear, talk, learn, see.

EAP: (Emergency Action Plan) defines the actions to be taken prior to or immediately following an emergency event. Some students have an individual EAP due to a medical diagnosis such as a life threatening allergy (LTA), diabetes and/ or seizures.

Field trip: when students leave school grounds for an educational purpose.
Types: day field trips, extended field trips (overnight or out of the area) out of the country trips.

Field Trip Coordinator: (FTC) any individual paid or unpaid who is coordinating a school-sponsored event off campus.

Individualized Educational Plan: (IEP) is a written document required for each child who is eligible to receive special education services. It is provided to a student who has been determined first to have a learning disability and, second, to need special education services because of that disability.

IEP Teams must consider the health and medical needs of a student with a disability when appropriate. The IEP Team must determine whether nursing services are a related service, i.e., necessary either because the student needs the service in order to benefit from the specially designed instruction provided to the student, or because the nursing service allows for access to the general curriculum.

If school nursing services are a related service, the nursing services should be described in the student's health plan, which should be attached to and referenced in the student's IEP. Additionally, the IEP service delivery grid should state "School Nursing Service(s) according to the attached Health Plan." No further description is necessary in the IEP. (MA DESE Advisory April 30, 2010).

Individualized Health Care Plans: (IHCP) are written to guide how a student's health care needs will be met in school and includes school-sponsored field trips.

IDEA- (Individuals with Disabilities Education Act): the Federal law which defines Special Education rights and responsibilities and mandates a free and appropriate education in the least restrictive environment for students who qualify for special education services.

Life Threatening Allergies: (LTA) are allergies that can cause anaphylaxis; a potentially life-threatening medical condition in allergic individuals after exposure to their specific allergens. Anaphylaxis refers to a collection of symptoms affecting multiple systems in the body. Common examples of potentially life-threatening allergies are those to foods, stinging insects, medications or latex rubber and in association with exercise.

LRE- (Least Restrictive Environment): the educational setting that provides a student with as much contact as possible with children without disabilities, while still appropriately meeting all of the child's learning and physical needs.

OCR (U.S. Office for Civil Rights): a Federal agency that oversees programs and services for identified population.

Privately sponsored field trip- not authorized by school administration, no school funds are used, the school/district is not named in promotional materials, meetings are not held at school and the field trip does not occur during school hours.

School Nurse: An Registered Nurse (RN) who meets DESE requirements for School Nurses: to achieve a passing score on the Communication and Literacy Skills test, to possess a valid license to practice as a Registered Nurse in Massachusetts, to possess a bachelor's or master's degree in nursing, to have a minimum of two full years of employment as a Registered Nurse in a child health, community health, or other relevant clinical nursing setting, to complete an orientation program based on the requirements for delivery of school health

services as defined by the Massachusetts Department of Public Health.
(<http://www.doe.mass.edu/>).

School-sponsored field trip- school funds pay for the activity, it is part of the educational process or it is staffed by school employees.

Section 504: a provision of the Rehabilitation Act of 1973, which prohibits recipients of federal funds from discrimination against persons with disabilities. The law requires public schools to make adjustments so that students with certain disabilities can learn and participate in settings like other students without disabilities.

Section 504 plan- the modifications and accommodations that will be needed for students to have an opportunity to perform at the same level as their peers and may include such things as wheel chair ramps, blood sugar monitoring and that a nurse attend the field trip. This plan explains how the school will meet the student's needs while at school and may include health services for the student during the school day as well as on school sponsored trips if necessary.

D. Summary of NASN Position Statement on School Sponsored Trips

Schools offer school-sponsored trips to enhance the educational experience for students. A trip may be as simple as a local excursion for a few hours or as complicated as a trip for several days/nights to a different state. While schools may invite parents/guardians to attend, school officials cannot mandate that they attend. There are federal laws that protect students' with special health care needs. All schools that receive federal monies are subject to follow the Section 504 of the American with Disabilities Act (ADA). On-site school-sponsored before and after school programs, as well as extended school year programs, are on the increase in school districts across the United States, primarily due to funding from federal and/or state, and local monies. The school nurse is an essential facilitator for student access to these programs. (Gibbons et al, 2013).

The school nurse has the unique position to support students so that their individual health care needs are met during school hours, during school-sponsored programs before and after school and during extended year programs. The school nurse plays a vital role in preparing personnel with the necessary resources to respond to a health emergency.

The school nurse has the expertise to assess the proposed school-sponsored trip to determine the accommodations needed to allow all students to safely participate in these trips.

All students, including students with special healthcare needs, have the right to participate in field trips. School nurses must serve a role in the planning and coordination for all school-sponsored trips, including those off school grounds, so that all students with healthcare needs remain safe and healthy. The planning process includes making accommodations for access, health care needs, determining required medications and treatments and preparing for potential emergencies.

Administrators, school staff, families and students must work closely with the school nurse to ensure the healthcare needs and safety of all students are provided during school-sponsored trips. As more children with specialized healthcare needs enter the school system, the role of the school nurse becomes even more critical in assuring the rights, safety and educational experiences of all students. (Gibbons, et al, 2013).

II. PLANNING AND PREPARATION

A. Massachusetts Delegation of Medication Administration Regulations Summary

The following summarizes key regulations in 105 CMR 210.000 -the Administration of Prescription Medications in Public and Private Schools-which pertain to the planning and preparing for school sponsored field trips. The school nurse should be familiar with the specific regulations. The Massachusetts state regulations are found in full in the following link:

<http://www.mass.gov/eohhs/docs/dph/regs/105cmr210.pdf>.

The School Nurse should always review the school district's policy regarding medication administration and delegation before making decisions regarding delegation and self-administration of medications on field trips.

a) 210.001: Purpose

The purpose of 105 CMR 210.000 is to provide minimum standards for the safe and proper administration of prescription medications to students in Massachusetts public and private primary and secondary schools. It permits school nurses to delegate responsibility for administration of prescription medications to trained, nursing supervised unlicensed school personnel, provided the school district or private school registers with the Massachusetts Department of Public Health, and if school policy allows for delegation. It also encourages collaboration between parent/guardian and the school in this effort.

b) 210.005: Responsibilities of the School Nurse Regarding Prescription Medication Administration

A medication administration plan should be completed for every medication the student receives and includes a plan for medication administration on field trips.

c) 210.006: Self Administration of Prescription Medications

Self-administration is defined as “the student is able to consume or apply prescription medication in the manner directed by the licensed prescriber, without additional assistance or direction” There must be written authorization from the student’s parent/guardian that the student may self-administer. The school nurse has the final authority on whether a student may self-administer. A physician’s order for self-administration in schools is not required.

<p>Self- administration can only occur if the district has a medication policy that allows for self-administration of medications.</p>

The school nurse shall document the training and evidence of competency of unlicensed personnel designated to assume the responsibility for administration of prescription medication.

d) 210.100: Administration of Epinephrine

A) A public school or non-public school, as defined by the Massachusetts Department of Elementary and Secondary Education (DESE), may register with the Massachusetts Department of Public Health (MDPH) for the limited purpose of permitting properly trained unlicensed school personnel to administer epinephrine by auto injector in a life-threatening situation during the school day when the school nurse is not immediately available, including field trips, provided that certain conditions are met.

B) Epinephrine may be administered in accordance with these regulations in before and after school programs offered or provided by the school, such as athletic programs, special school events and school- sponsored programs on weekends, provided that the public school or non-public school is registered with the MDPH pursuant to section 210.100 (A) and meets the requirements set forth in section 210.100 (B).

Note: If the student has a Life Threatening Allergy, (LTA), requiring the use of epinephrine, but the parents have not provided one (or provided orders for epinephrine) after numerous reminders from the school nurse, the school nurse should consider whether this may be medical neglect and take the necessary steps to notify the appropriate school team to this concern. Since the student with an LTA may not be excluded from attending a field trip due to his/her health condition, a nurse should go on the field trip and carry school supplied epinephrine (making sure there is an additional supply remaining at school). There should be an emergency action plan in place for these students in the event of a possible reaction. The parents/guardians should approve this plan. The school nurse should contact Emergency Medical Services (EMS), to ensure that emergency epinephrine is available and determine whether the field trip is in an area that is readily accessible to EMS. If not, the field trip may need to be cancelled. The school nurse should be aware of the school district's policies regarding field trips and medication administration and delegation (MA DESE: Managing Life Threatening allergies in school; 2002).

B. Registering with MDPH for Medication Administration and Delegation on Field Trips and Other Short Term Events

For the purpose of field trips and other short term events, MDPH has developed a registration process. Registration will be granted provided the school district agrees to comply with **MDPH regulations 210.005 (E)** which requires *the development*

of a plan for medication administration during field trips and special school events (unique one-time events which are not part of the regular school schedule and involve travel from the school site). Every effort shall be made to obtain a nurse or school staff member trained in medication delegation to accompany students at special school events. When this is not possible, the school nurse may delegate the administration of prescription medication to another responsible adult. Written consent from the parent/guardian for the named responsible adult to administer the prescription medication shall be obtained. The school nurse shall instruct the responsible adult on how to administer the prescription medications to the child.

To apply for the **“Certificate of Registration for Delegation of Medication Administration”** and/or the **“Certificate of Registration for Training of Unlicensed Individuals to Administer Epinephrine via an Auto-Injector”**:

- 1) The school nurse leader/school nurse contact must complete both the online course: *Medication Administration in a School Setting: School Nursing Practice in Massachusetts* and attend the live course: *Medication Administration in Schools: What School Nurse Managers Need to Know* offered through the School Health Institute for Education and Leadership Development (SHIELD) before registration can be obtained. It is recommended that at least two nurses from the district complete these courses. Attendance is required every five years.
- 2) The school nurse leader/school nurse must **mail or fax** to MDPH a written request on the school’s letterhead for an application for registration.
- 3) Mail the completed application along with a copy of the two training certificates to:

MA DPH
School Health Services- 5th Floor
250 Washington St.
Boston, MA 02108-4619
Phone: 1-617-624-6060 Fax: Fax: 1-617-624-6062

- 4) After review, and if approved, MDPH will issue the certificate of registration for Day Public/Non-Public School Programs (includes Field Trips, Before and After School or Special events, and During the school . This registration is in effect for two school years. (www.Mass.gov: Handling, Storage, and Delegation of Administration of Medication).

C. Factors to Consider When Determining the Need For a Nurse on a Field Trip

1) Location

School-sponsored trips may range from a class walking to the local library for an hour, to multiple students-traveling to another state for several days. The school nurse should be involved in the initial stages of the field trip planning to help ensure the safety and health of the students. The school nurse will need to determine the location and accessibility and type of the field trip, as well as the health care needs of students who will be attending. Field trip venue and the population of students with special health care needs attending are the most important factors in determining the need for a nurse to accompany the students.

Factors to consider:

- ☐ 504 Plan: if school nursing services are identified in the plan; all school-sponsored activities require nursing services.
- ☐ Storage/refrigeration of medications.
- ☐ Handicap accessibility (elevators, wheelchair ramps, bathrooms, theater seating).
- ☐ In State versus out of state (check RN license practice concerns including reciprocity).
- ☐ Remote versus easily accessible destination.
- ☐ Proximity to hospital.
- ☐ Emergency Medical System response time where the field trip will be occurring.
- ☐ Availability of privacy for treatments or medication administration (rectal medication, toileting, etc.).
- ☐ Equipment/personnel that may be required by students for ambulation and treatment.

2) Duration of Trip

The length of time that students will be away from school on a field trip should be evaluated by the school nurse in the initial planning stages. Duration of a field trip may impact medication and treatment needs for students with chronic health conditions.

Factors to consider:

- ☐ Medications or treatments that need to be given outside of the regular school day.
- ☐ Length of travel time required to and from school.
- ☐ Overnight/weekend trips.
- ☐ Type of travel required (private cars, school bus, planes, trains, boats, etc.).

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.

3) Students with Special Health Care Needs

Schools are federally mandated to provide equal opportunities for all students to participate in academic, nonacademic and extracurricular activities, including access to health services (Erwin, NASN School Nurse, 2014).

In order to identify potential needs for field trips, *“the school nurse should perform an individual health assessment and develop the individualized healthcare plan at the beginning of the school year to appropriately plan safe care for students with medical needs throughout the school year, including the potential for off-campus school sponsored trips”* (NASN Position Statement, 2014).

The Office of Civil Rights provides guidance regarding the obligations of schools under Section 504 which requires that students with disabilities have equal opportunities to participate in nonacademic extracurricular services and activities as well as guidance on providing athletic opportunities. (Office of Civil Rights 2013).

“The level of nursing or healthcare services required for a student in the classroom is, at a minimum, the same level of care that the student requires during school programs outside of the classroom” (Hootman et al 2005., p. 223)

Factors to consider:

- ☐ School Nurse is aware of health related 504 plan accommodations for field trips and makes arrangements for these accommodations.
- ☐ Individual Health Care Plan (IHCP) includes plan for health care needs on field trips.
- ☐ Emergency Action Plan (EAP) reviewed and signed by parent.
- ☐ Health care provider orders are appropriate and applicable for field trips.
- ☐ If a nurse is not available, a parent/guardian may be invited to attend field trip; but parents/guardians cannot be required to attend in order for their child to participate).
- ☐ Nursing activities required for student while on field trip that cannot be delegated.
- ☐ Medication administration plan for each child should be followed.

4) Medications

Standards for safe medication administration, including delegation procedures and school nurse supervision, do not change when students are on a field trip sponsored by their school district. Regardless of the setting or time or the year, legal and clinical standards of safe medication administration still apply, as do standards for other health care the students require.

Factors to Consider:

- ☐ Legal considerations in planning for field trips and other district-supported student activities include the following: if delegation of a nursing task to unlicensed assistive personnel (UAP) is either inappropriate or judged by the

school nurse to be unsafe when the student is in the classroom, it is likely to be inappropriate or unsafe during a field trip.

- ☐ Students who require medication administration during the school day or on extended field trips must have a medication administration plan completed at the start of each school year. The plan should indicate how the student will receive the medication while away from school or on a field trip.
- ☐ Is medication administration permitted to be delegated? Can the medication be administered before or after the trip? If not, a parent, or nurse must accompany the student on this field trip.
- ☐ Is student allowed to self-administer the medication? School policy must allow for self-administration. This must be approved by the school nurse and the parent/guardian and should be signed off by the parent/guardian.

Note: It is recommended that psychotropic and narcotic medications not be carried by a student and should be carried by a designated responsible and trained adult.

- ☐ In general, students may self-administer insulin, inhalers, enzymes and epinephrine auto-injectors, provided the school nurse has determined that the student is capable.
- ☐ The school nurse has the final authority over the student's participation in self-administration of medication on the field trip, providing the school policy place allows self-administration.
- ☐ Delegation of medication administration during the school day to an UAP is based on the premise the school nurse will be immediately available by phone for questions or concerns. Outside of the school day, unless a student can self-administer as per 105 CMR 210.006 Self Administration of Prescription Medications and school policy, a nurse must accompany the trip or be available for consultation throughout the duration of the field trip. All medications to be given during the field trip must have a valid medication order by a licensed provider.
- ☐ Since delegation of medication administration or other nursing tasks, requires the delegating nurse to direct and supervise the UAP and evaluate the outcomes of care, the school nurse must remain reasonably available to the UAP through telecommunications or other means for consultation.
- ☐ Procedures for administration of medication must be consistent with licensure, state law and regulations specific to medication administration in schools, and controlled drug and pharmacy mandates in each state visited. All prescription medications must be in the pharmacy labelled container. All

over the counter medications should be in the original manufacturer's container.

- ☐ Medication on a field trip must be appropriately secured and well supervised throughout the trip. School nurses need to follow state regulations (where field trip is taking place) and their school district policies regarding access to and storage of medications.
- ☐ Students who require immediate access to medication during the trip should be in reasonable proximity to the nurse/UAP who is carrying the medication.
- ☐ Under certain situations, plans for self-administration may be developed to allow competent students to carry and administer their own medication while on field trip (if in compliance with school policy and with parent/school nurse authorization). However, a back-up plan for adult assistance is essential (Schwab et al, 2001).

5) Physical Activities and Accessibilities

The school nurse has the nursing experience to appropriately assess the proposed school sponsored trip to determine the accommodations needed to allow all students to safely participate in activities (NASN 2013).

Factors to consider:

- ☐ Student's ability to participate in planned activities based on accessibility of location.
- ☐ Sufficient adult supervision of activities (ratio of number of students per adult).
- ☐ Reasonable and acceptable plan for modified activities, if needed, and accommodations for accessibility.
- ☐ Potential for change in planned activities is anticipated and follow up plan is established in coordination with field trip coordinator (change of venue to indoor soccer facility due to weather cancellation of trip to local zoo).
- ☐ Field trip plan in student's IHCP is reviewed for possible physical activity barriers.

6) Meal Arrangements

School nurses should consult with the parent/guardians and the Field Trip Coordinator (FTC) to establish an acceptable plan for snacks and meals to accommodate students with LTAs or other food related health concerns (e.g. Diabetes, Celiac Disease, Cystic Fibrosis, PKU, Crohn's, etc). A plan for supplying or providing food on field trips should be included in the IHCP for these students (DESE, 2002).

Factors to consider:

- ☐ Review 504 accommodation plans and IHCPs for food related considerations.
- ☐ Determine whether alternative snacks/meals will be available.
- ☐ Plan for potential for change in venue of eating establishment (from Italian restaurant to Chinese restaurant).
- ☐ Sufficient number of field trip staff trained in recognition of anaphylaxis and administration of emergency epinephrine auto-injector as per **CMR 210.105.000**.
- ☐ Ensure that a student's epinephrine auto-injector is carried by the student, his/her parent, trained staff or nurse accompanying field trip.
- ☐ Length of field trip travel time.
- ☐ Plan for food/snack during transport; availability & accessibility to food/snacks.

7) Transportation

The school nurse should be aware of the mode (s) of transportation for field trips.

Factors to consider:

- ☐ Review 504 Accommodation Plans/IHCP's for transportation needs.
- ☐ Determine whether there are any students who may be unable to access certain modes of transportation due to physical barriers.
- ☐ Determine whether certain students have motion sickness and allow for these students to sit in front of bus.
- ☐ Length of time spent in vehicle for students with toileting or other frequent health needs.

D. Guidelines for the School Nurse

Due to the extensive planning involved, notification of the nurse regarding the planned trip must be done in a timely manner. It is recommended the nurse be provided with a minimum of 30 days notification for field trips within state (including overnight), and three months notification for trips out of state.

The following applies to **Out of State** and/or **Overnight** trips:

a. Nursing Licensure Reciprocity

If the school-sponsored trip takes place in a different state, plans must be in place to meet the nursing license and practice laws of that state. (NLC allows nurses to have one multistate license, with the ability to practice in both their home state and other party states). A nurse who holds a license issued by a state that is not a member of the NLC has a single-state license; **only valid in that state.**

Massachusetts does not participate in the Nurse Licensure Compact (NLC)

Nurses must request and receive permission from the respective state's board of nursing, to practice in another state (NCSBN, 2012). The nurse must still know the nursing laws/regulations of that state and practice accordingly, regardless of whether she/he is delegating tasks to a non-nurse school staff member or actually attending the school-sponsored trips and performing the necessary health services (NCSBN, 2012).

b. Planning

Arrangements for overnight and out-of-state field trips should be made on a case-by-case basis, depending on the needs, ages, and competence of the students, the destination, and the responsible adult on the trip.

While safety must be the foremost consideration, creativity in achieving reasonably safe conditions for students is important as well. Advance information about emergency medical services and availability of specialty medical services at the destination may be necessary for some students.

c. Medication Administration and Delegation

The administration of narcotic medications and over-the-counter medication (OTC), during overnight field trips can be especially problematic. It may be questionable if even mature students, should be permitted to carry or self-administer these medications – on or off school property. Since self-administration means that the student carries or keeps the medication on his or her person, or is otherwise in charge of it at all times, this is not appropriate with controlled medication for several reasons:

- ☐ Students who require narcotic medications in school often require them for disabilities that affect their learning, memory, and organizational skills.
- ☐ Narcotic medications have a street value related to their use as “recreational” drugs, making them high risk for misuse, sale to others and potential for violent theft.
- ☐ Administration of prescription medications (including over the counter medications) may have serious side effects, both physical and psychiatric, including death from overdose.
- ☐ School policies and procedures must, to the extent possible, work to prevent the sale and theft of controlled medications between students at school and during school events, including field trips. This safety requirement should override any individual student’s or family’s preference regarding self-administration of medication, regardless of the student’s competence.

If school personnel will need to administer or a student will need to self-administer medications, ordinarily not required during the school day, the same plans and procedures should be followed as are required for medications given during school hours. (i.e. parent permission, physician order, properly labeled container, etc.) (Hootman, 2005).

1. The following applies to **out of country** trips:

Nursing licenses are not recognized outside the United States; therefore school nurses are not permitted to practice nursing in other countries.

On international field trips, it is the responsibility of the Field Trip Coordinator (FTC), to communicate with parents to address any medical concerns for students planning to attend the trip. The FTC is responsible for making sure that the students and chaperones have the proper immunizations required for the country they plan to visit. The field trip coordinator must be aware of the laws and regulations regarding bringing medications into the country. The consulate of the country or countries that will be visited are a valuable resource for this information.

2. The following **applies to all types** of field trips:

The Field Trip Coordinator should provide the school nurse with the list of students attending within the above timeline. The school nurse will review the medical needs of students participating, including IHCP, EAP and 504 Accommodation Plan. S/he will notify the School Nurse Leader and/or Field Trip Coordinator as to whether a nurse is required to accompany the field trip.

When it is decided that a school nurse will travel with the group of students on a fieldtrip, a substitute nurse should be provided to address the health care needs of students remaining at school. Alternatively, it may be more appropriate to send the substitute nurse on the field trip. (Hootman, 2005).

3. The following applies to **in-state** day and **extended/overnight trips**:

If a nurse is not accompanying the field trip, the school nurse will supply each trained field trip staff member with the medication (in accordance with **CMR 105 210.000**), supplies, and equipment to ensure the health and safety of the students. The appropriately trained staff member will report any medication administrations to the school nurse for documentation and report any first aid issues that may have occurred. All confidential information will be returned to the school nurse. An accident/incident report may be required by district policy if a student/staff member required additional medical attention.

While schools may invite parents/guardians of the student with healthcare needs to accompany the student on the trip, school officials cannot mandate that they attend (NASN, 2013). If a parent or guardian of a child with medical needs is not able to accompany their child on a field trip; a decision will be made by the school nurse to either designate a nurse to accompany the student on the field trip or to delegate medication administration according to **CMR 105 210.000** to a trained staff member. If student health care needs require nursing services on a field trip, and a nurse is unavailable, the trip may need to be postponed. Under these circumstances, the school nurse should confer with the district's nursing administrator, building principal, field trip coordinator and parent (s) to reach a decision regarding field trip postponement.

4. The following applies **to all types** of field trips:

Compensation of the field trip nurse will vary by district. Field trip nurses may be hired and paid by the district as per diem nurses, or the district may contract with a nursing agency to provide these services. Some field trip coordinators will include the cost of a nurse in the field trip fee, and reimburse the district for the cost of the nurse. Although nurses may be willing to “volunteer” to provide nursing services on field trips, the state’s nurse practice act should be consulted regarding licensed nurses as volunteers (Hootman, 2001).

For the purpose of reducing professional liability risks, a contract between the nurse and the administration defining the scope of nursing services should be agreed upon before the field trip occurs.

5. The following applies to **all types** of field trips:

Based on student needs, the School Nurse or School Nurse Leader will determine whether the building nurse or field trip nurse will accompany the field trip. The school nurse should inform the field trip nurse of the student health care plans, nursing procedures and medication plans. The school nurse will provide her/him with all the necessary first aid supplies, medications, student health information and any other equipment and

documentation needed. **The nurse accompanying the field trip should not be given the added responsibility of having an assigned group of students to chaperone.**

6. The following applies to **all types** of field trips:

All school staff attending the field trip who have been delegated any nursing tasks, should receive instructions on how to contact the building based school nurse with any questions or concerns. If the trip extends beyond the school day, field trip staff will need to contact the parent directly with any questions or concerns. Should any student health related issues or concerns occur *during* the field trip (e.g. 911 call, student injury), staff should immediately contact the school nurse and/or building administrator/designee (if school nurse is not available). District guidelines should be followed for documenting incidents and accidents that may occur in all school activities. (Hootman, 2001).

7. The following applies to **all types** of field trips:

The field trip nurse should have a cell phone and share the number with all the staff, while on the trip, depending on the nature of the venue. The nurse may position herself in a central location so she can be reached quickly. The nurse should be aware of how to activate Emergency Medical Services (EMS), where the nearest hospital is located, and whether there is an appropriately staffed first aid station on site.

8. The following applies to **all types** of field trips:

The field trip nurse must return all documents containing confidential information, medications, supplies and equipment to the school nurse as soon as possible upon return. The field trip nurse must document any care provided on the trip, including medications and treatments. S/he may need to complete an accident/incident report if the student/staff required additional medical attention.

9. The following applies to **in-state** day and **extended/overnight** trips:

If a nurse is not accompanying the field trip, the school nurse will supply each trained field trip staff member with the medication (in accordance with CMR 105 210.000), supplies and equipment to ensure the health and safety of the students. The appropriately trained staff member will report any medication administrations to the school nurse for documentation and report any first aid issues that may have occurred. All confidential information will be returned to the school nurse. An accident/incident report may be required by district policy if a student/staff member required additional medical attention.

E. Special Considerations

The school nurse should be aware of the special health concerns and considerations of each student that will be participating in field trips. The school nurse must be aware of whether there are 504 plan accommodations related to health conditions, and include these in the student's IHCP. The school nurse should develop an Emergency Action Plan (EAP) for each student with a potentially life threatening health condition. Both the IHCPs and EAPs should be reviewed and signed by the student's parent/guardians. These documents should be reviewed as least annually- preferably in the beginning of each school year:

1. **IHCP:** Field trips plans should be addressed in the student's Individual Health Care Plans in consultation with the student's parent/guardians and health care provider.
2. **EAP:** A copy of the student's **Emergency Action Plan** must be provided to the trained staff/chaperones for the field trip. For example, the EAP should include the plan of action for when the student requires emergency medication that cannot be delegated to unlicensed staff, and a nurse is not available (Refer to Section C: # 10).

3. **504:** Students who have 504 plans for health related conditions or concerns should have field trip plans addressed on the 504 (i.e.: Student must be able to access all aspects of the field trip).

4. **Medication Administration:**

Students who require medication administration during the school day or on extended field trips must have a medication administration plan completed at the start of each school year. The plan should indicate how the student will receive the medication while away from school or on a field trip.

Determine whether students with health related absences immediately prior to the field trip require physician documentation stating that the student is healthy and may fully participate in all planned activities, on the field trip.

The school has the ultimate responsibility for the student's well-being on the field trip and may override the student's physician when the school determines it is in the best interest of the student.

The School Nurse should have the final authority regarding whether the student may safely participate in the field trip (not parent, physician or field trip coordinator).

E.g., Student with active concussion may not attend a performance of live music and strobe lights, or attend a theme park trip.

III. SAMPLES

Field Trip Request Form

_____ Public Schools

All field trip requests must be submitted to the Building Principal and the School Nurse 30 days prior to the date requested. (30 days to 6 months may be needed if school committee needs to approve)

Date of request: _____ Date(s) of Trip: _____

School: _____

Teacher(s): _____ Grade(s): _____

Number of Students: _____ Chaperone(s): _____

NOTE: ALL CHAPERONES MUST BE FINGERPRINTED AND CORIED
BY THE _____ PUBLIC SCHOOLS

Destination: _____ Date/Time of Departure _____

Date/Time of Return: _____

General Field Trip Information: Please check all that apply:

Beyond School Hours: _____ Overnight: _____ Out of State: _____ Out of country: _____

Transportation: School Owned Bus _____ School Bus Charter _____ Other (explain) _____

Approximate mileage (round trip): _____ Transportation Cost per Student: _____

Admission Price per Student: _____ Funding Source: _____

Funding Source for Nurse: _____ Funding source for chaperones: _____

Nature of Proposed Trip/ Relationship to Curriculum: (include follow-up plans): _____

Coverage for Classes: Substitute needed _____ None needed _____ Covered by Department: _____

Lunch arrangements (If applicable): _____

Cafeteria Manager notified of field trip: Yes _____ No _____ N/A _____

School Nurse notified and medical concerns reviewed: Yes _____ No _____

Nurse needed for field trip: Yes _____ No _____

APPROVALS: Signatures required

School Nurse: _____ Department Head: _____

Asst Principal (Transportation) _____

Administrative Principal: _____

Superintendent: _____

Field Trip Coordinator (FTC) Checklist

- ☐ FTC organizing the trip must complete the request form and forward to appropriate personnel, as indicated by your district policy.
- ☐ Determine Field trip Destination – Is the trip educational?
- ☐ Get approval from Principal – 4 weeks in advance.
- ☐ Get approval from School nurse/Nursing Supervisor (at least 4 weeks in advance).
- ☐ Get approval from Superintendent and/or School Committee (if needed).
- ☐ Check date – any other field trips in the district scheduled for the same day?
- ☐ Meet with School Nurse regarding student medical needs.
 - Is a nurse needed on the trip?
 - Is parent/guardian willing to go? Is there a nurse available?
 - You can ask a parent if they would like to attend but they cannot be required to attend in order for their child to participate on the field trip.
- ☐ Check with school nurse to obtain a list of staff/chaperones trained in epinephrine administration and CPR/AED.
- ☐ Does facility offer access for all students, as needed? (ramps, bathrooms, area for toileting).
- ☐ Secure transportation. Do any students require a wheel chair accessible bus?
- ☐ Note the location of nearest medical facility and access to EMS.
- ☐ Is there access to functional cell phone/walkie-talkies?
- ☐ When determining plan for lunch/snacks are there any students with food allergies and does he/she have a plan? Will there be food on the bus?
- ☐ All parents/volunteers/chaperones must have CORI and finger printing.
- ☐ If medical concern is checked off by parent/guardian on the permission slip, share this information with the school nurse.

On Day of Trip

- ☐ Meet with School Nurse – collect all necessary inhalers, epinephrine, care plans, contact information and First Aid supplies and other supplies to provide for the care of each child participating on the field trip.
- ☐ If Nurse going on trip, consider putting students with health concerns on same bus or develop a plan to contact the nurse if she is needed. (Cell number should be given to all chaperones and FTC) **Do not** give the nurse the added responsibility of students to chaperone. The nurse must be available to all students and staff in an emergency.

Post Field Trip

- ☐ Return all medications, care plans, first aid kits and all confidential information to the school nurse immediately after the field trip or the following day.
- ☐ Document any medications/treatments or First Aid care provided on the trip.

School Nurse Field Trip Preparation Checklist

- ☐ Review/Sign District Field Trip Request form, including list of all participating students.
- ☐ Identify any health related concerns as well as accessibility issues for all students.
- ☐ Review IHCPs and 504 Accommodation Plans for field trip planning needs.
- ☐ Determine whether parent/guardians of students with medical needs plan to accompany field trip.
- ☐ Notify Nurse Leader and Field Trip Coordinator (FTC) that a nurse is required on the trip.
- ☐ Prepare necessary forms for documentation of medication administration and other treatments. Include copies of licensed prescriber orders, Emergency Action Plans, and parent contact information.
- ☐ Prepare First Aid Kit.
- ☐ Day of Field Trip: Review medical concerns, medication administration and treatment plans, and emergency protocols with Field Trip Nurse, or with staff member (s), as allowed by FERPA.
- ☐ Field Trip nurse must provide a cell phone number to FTC and staff/chaperones for ongoing consultation for all student health concerns.
- ☐ If a nurse is not accompanying the field trip:
 - ☐ Notify the FTC and administration.
 - ☐ Ensure district is currently registered with MDPH for Field Trip delegation of medication administration and epinephrine training.
 - ☐ Notify parents/guardians of students requiring medication of the name of the trained, unlicensed staff member who will be administering medication to the student and obtain parent's written consent (per CMR 105. 210).
 - ☐ Train staff members in epinephrine/medication administration and document training (per CMR 105. 210).

Parent/Guardian Authorization Form

Student Name: _____ Date of birth: _____
First Middle Last

School _____ Grade _____ Homeroom teacher _____

Parent/Guardian: _____

Address _____

Home # () _____ Work # () _____ Cell # _____

History of: Diabetes ☐ Asthma ☐ Seizures ☐

Allergies: Yes ☐ No ☐ please list: _____

Epinephrine: Yes ☐ No ☐ Inhaler: Yes ☐ No ☐

Medical needs/treatments on Field Trip: Yes ☐ No ☐

Comments: _____

Who will be responsible for the child's needs on the trip? _____

Does child take medication in school or will the child need other medication beyond the school day? Yes ☐ No ☐ Please list: _____

If yes, please call the school nurse at: _____.

Specific arrangements shall be made in advance for medication/ treatment to be given on trip.

Health insurance provider _____ Policy number _____

Preferred local hospital _____ Doctor: _____

In case of emergency, if parents are unavailable, the following individuals may be contacted.

Name: _____
Contact #: _____

Name: _____
Contact #: _____

I hereby give permission for my child to be transported and to participate in all activities on the field trip to _____
Destination Date

I give permission for school personnel to transport my child to a medical facility and to secure emergency medical treatment for my child, if necessary.

Other: _____

Parent's / Guardian's signature _____ Date _____

Protocol for Delegation of Medication Administration

This procedure will be implemented whenever it is necessary to administer medication to a student during field trips or special school event and nursing coverage is not available. NOTE: The school must be registered with MDPH if any delegation of medication administration is to occur as well as for training unlicensed school staff to administer epinephrine via an auto-injector.

1. The school nurse will obtain written consent
(Parent/Guardian Authorization for Medication Delegation, completed).
2. The school nurse will train designated staff members on the correct protocol for administering medications and/or epinephrine auto-injectors on field trips, and document this training.
3. The school nurse will place only the required amount of medication for the student in a pharmacy labeled container which contains:
 - a. The student's name
 - b. The name of the medication
 - c. The amount to be taken
 - d. The time it should be taken
 - e. The route of administration
 - f. Any other instructions per the pharmacy label
4. The trained designated staff member will carry the medication and/or epinephrine.
5. The trained designated staff member will carry a cell phone on all trips away from school and will call the school nurse for consultation when needed.
6. In an emergency situation (i.e. serious accident), the trained designated staff member will use the cell phone to call:
 - a. 911 – The trained designated staff member will stay on the line until all pertinent information has been communicated.
Do not hang up when talking to EMS until you are told to do so.
 - b. _____ staff member will notify parent/guardian by phone of emergency situation and contact the school nurse and school administration.
7. The trained designated staff member will report any problems to the school nurse.

Staff Form for Delegation of Medication Administration

Name and Title of Staff Person _____

1. Signed Parent/Guardian permission form to delegate administration of medication on file with school nurse _____

2. Reviewed medication orders for each student to whom medication will be given _____

3. Given written information about the medication(s), possible side effects and adverse reaction to medication(s) that will be dispensed _____

4. Demonstrates reading label on medication bottle to ensure:

- ☐ Correct student
- ☐ Correct medication
- ☐ Correct dose
- ☐ Correct time
- ☐ Correct route

5. Describes correct route of administration of medication to be given _____

6. Describes time frame for administering medication _____

7. Describes how documentation of administration will be completed _____

8. Describes how to access emergency medical services in case of an emergency _____

9. When to consult with the school nurse _____

Comments:

Signatures: Training by: _____ R.N.

Staff Person: _____

Date: _____

Parent/Guardian Authorization for Medication Delegation

Date: _____

Dear Parent/Guardian of _____

Please sign and return this form to the school nurse by _____
(date)

I grant permission for _____ to administer my
son's/daughter's medication during the following school sponsored field trip or
special school event

Field trip/event/date

I am aware that the above named person will administer the medication as ordered
by the physician and delegated by the school nurse.

Parent/Guardian Signature:

Date: _____

Teacher:

Sincerely,

School Nurse

School Building

Health Office Telephone Number

Procedure for Calling 911

Do Not Leave the Injured Person Alone or Without an Adult Present

1. **REMAIN CALM.** This helps the operator receive your information.
2. **DIAL 911.** Remember you may need to access an outside line first.
3. My name is _____ .
“I am a/an _____ in the _____ Public Schools.”
4. I need paramedics now.
5. My exact address is _____
6. There is a person with a _____ injury/illness.
(type/location of injury/ illness)
7. The person’s name is _____ and he/she is _____ years old.
8. The person is located at _____ which is on the
_____ side of the facility (east, west, front, back)
9. I am calling from _____
(Phone #)
10. _____ will meet the ambulance.
(Name)
11. Don’t hang up. Ask for the information to be repeated back to you and answer any questions the dispatcher may have. Wait until the dispatcher hangs up.
Hang up the phone when all of the information is correct and verified.
12. Wait with person until EMS arrives.

EMS response personnel will take over care of the person when they arrive.
Staff/chaperone must accompany any injured student in the ambulance and remain with the student until the parent/guardian arrives.
13. Call parent/guardian, principal, school nurse, and the Superintendent’s Office, if necessary. File an accident or incident report per school policy. .

School Nurse Name and #: _____
Principal Name and #: _____
Additional Phone Numbers: _____

Extra-Curricular Emergency Medical Form

****A school nurse is not present during before or after school programs or weekend activities.**

Activity/Sport: _____ Adult Supervisor _____

Student Name: _____

Address: _____ Home Phone: _____

Parent/Guardian Cell Phone: _____ Work Phone: _____

Parent/Guardian Cell Phone: _____ Work Phone: _____

My child has the following medical condition that may require immediate attention (**911**) at school sponsored activities or athletic practices/events that occur outside of the regular school day. **Please circle:**

Allergy to: _____ Requires Epinephrine __ Yes __ No Asthma Diabetes Seizures

Other: _____
Action Plan

Allergic Reaction: (examples of some of the symptoms include) Difficulty breathing, shortness of breath, wheezing, difficulty swallowing, hives, itching, swelling of any body part.

Action Plan: Call 911 and assist child in using Epinephrine, if prescribed and available.
Do not allow the child to lie down after epinephrine administration.

Asthma: student has difficulty breathing, wheezing, and shortness of breath.

Action Plan: If the student has their inhaler, allow them to use it. If no relief of symptoms in five (5) minutes, **call 911. If no inhaler available, call 911 immediately.**

Diabetes: Low blood sugar reaction- hunger, sweaty, pallor, feels shaky, headache.

Action Plan: Allow student to drink a juice box or regular soda, or eat glucose tablets or a snack from his/her emergency snack pack. Have student test their blood glucose level and record number. If no change in symptoms in five (5) minutes - **call 911** and have child repeat all of the above.

Seizure: Altered consciousness, involuntary muscle stiffness or jerking movements, drooling/foaming at the mouth, temporary halt in breathing, loss of bladder control.

Action Plan: protect student from falling or injuring any body parts, **call 911.** Never put anything into the student's mouth.

Child specific instructions: _____

Parent/Guardian signature: _____ **Date:** _____

School Nurse signature: _____ **Date:** _____

Emergency Action Plan

Diabetes Emergency Action Plan for Students with Diabetes

Hypoglycemia (Low Blood Sugar)

Photo

Student Name: _____

Date: _____

Grade/Teacher: _____

Year/Date & School: _____

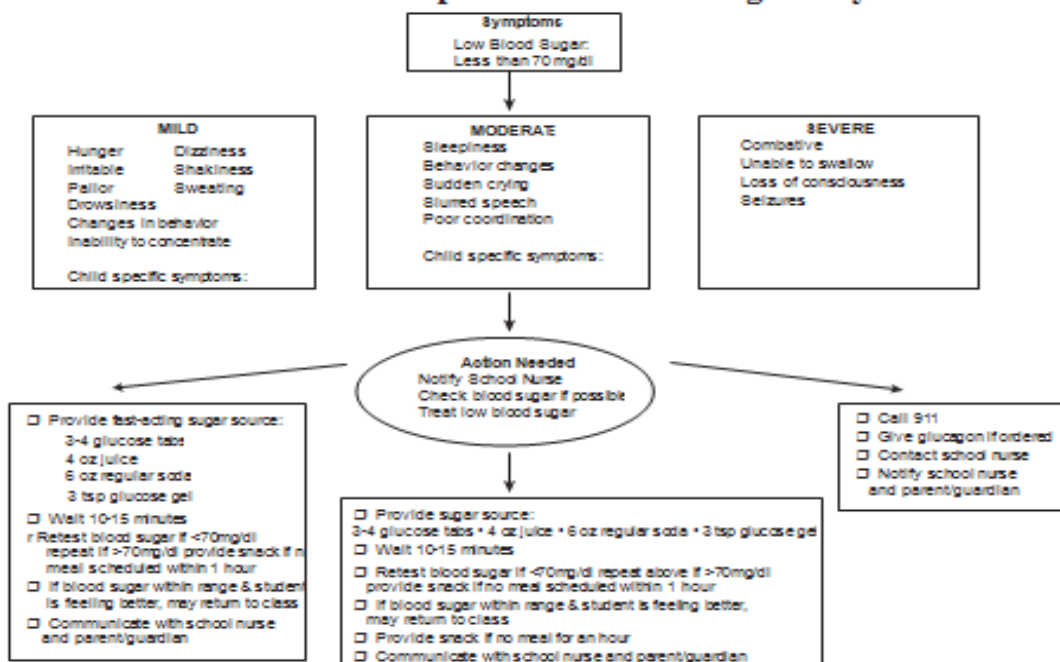
Parent/Guardian Name: _____ Phone _____

Emergency Contact: _____ Phone _____

Health Care Provider: _____ Phone _____

Diabetes Nurse Educator: _____ Phone _____

Never send a child with suspected low blood sugar anywhere



School Nurse Signature: _____ Date: _____

Adapted with permission from the National Association of School Nurses H.A.N.D.S.® 2008.

Student Health Encounter Form

Date: _____ Time: _____

Student's Name: _____ DOB: _____ Grade: _____

School: _____ Room #: _____

Provider: ☐ Nurse ☐ Aide ☐ School Staff Signature: _____

Complaint:

Observation:

Presenting Problem:

- ☐ Cold ☐ Stomach Ache ☐ Headache ☐ Asthma ☐ Allergy ☐ Nosebleed ☐ Sore Throat
☐ Pink Eye ☐ Cramps ☐ Insect Bites ☐ Rash ☐ Diarrhea ☐ Other: _____
☐ Laceration ☐ Splinter ☐ Puncture ☐ Bruise ☐ Abrasion
☐ Possible Fracture ☐ Sprain ☐ Burn ☐ Other: _____
☐ Dental ☐ Toothache ☐ Other: _____
☐ Emotional Problem ☐ Violence to Other

Temperature: _____ Blood Pressure: _____ Respirations: _____

Nursing Assessment:

Treatment/Action Taken:

☐ Counseling ☐ Cleaned ☐ Band-Aids ☐ Ice ☐ Rest

☐ Accident Report ☐ Medication ☐ Transport ER

☐ Parent Notified: __ Phone __ Person ☐ Administration Notified ☐ School Nurse Notified

Referral: ☐ Private Medical Doctor/Facility ☐ Emergency Department ☐ Other: _____

Medication Administration Plan

Name of Student: _____ D.O.B.: _____	Parent/Guardian Name: _____
School: _____ Grade: _____	Home Telephone: (____) _____
	Business Telephone: (____) _____
Name of Licensed Prescriber: _____	Emergency Telephone: (____) _____
Business Telephone: (____) _____	
Emergency Telephone: (____) _____	

Food/Drug Allergies: _____

Diagnoses: _____

Name of Medication: _____ Date of Order: _____

Dosage: _____ Frequency: _____ Route of Administration: _____ Expiration Date: _____

Specific Directions (e.g., *times to be given*):

Possible Side Effects/Adverse Reactions and when to call the school nurse:

Quantity of Medication Received by School and Date:

Required Storage Conditions: _____

Delegated to (if applicable): _____ Back-up Plans (if delegate unavailable): _____

Plan for Field Trips: _____

Plans for teaching self administration (if applicable):

Other persons to be notified of medication administration (*with parental permission*):

Other medications being taken by the student (*if not in violation of confidentiality*):

Location where medication administration will occur: Health Room _____ (Other specify): _____

Plan for monitoring medication, *if needed*:

School Nurse Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Student's Signature (*if appropriate*): _____ Date: _____

Overnight and Out of State Field Trip Administration Approval Form

Grade: _____ Staff in charge: _____

1. Submit to Nursing and Administration at least 1 to 3 months prior to trip departure date
2. Complete all of the following information.

Program Information:

Destination of Field Trip, Activity, or Program _____

Dates(s): _____

Location of nearest medical facility for emergency care: _____

Relevancy to Teaching Unit: _____

What is your current lesson plan:

Educational value of the trip:

What do you have for follow-up plans?

Program Specifics:

Time of Departure: _____

Time Scheduled to Return: _____

Number of Students Attending: _____

Cost per Student: \$ _____

Number of _____ Chaperones: _____

Number of Additional Chaperones: _____

Total Number Substitute Staff needed: _____

Transportation: _____

Nursing services require: Yes _____ No _____

Superintendent and School Committee approval are required.

Allow a minimum of one month for planning

- | | |
|---|-------------|
| <input type="checkbox"/> Approved by Principal: _____ | Date: _____ |
| <input type="checkbox"/> Reviewed by School Nurse: _____ | Date: _____ |
| <input type="checkbox"/> Approved by School Committee _____ | Date: _____ |
| <input type="checkbox"/> Approved by Superintendent _____ | Date: _____ |

Medical Form for Students on Overnight & Out of State Trips

Please return this form to your trip coordinator at least ONE MONTH prior to trip departure.

Program Information:

Field Trip Coordinator: (FTC) _____

Title or Name of Field Trip, Activity, or Program: _____

Dates: _____ **Location(s) of event:** _____

Location of nearest medical facility for emergency care: _____

Student Information:

Student's Name: _____ **DOB:** _____

Home Address: _____

Parent/Guardian Phone: _____ **Cell #1:** _____ **Cell #2:** _____

Emergency Contact: _____ **Phone:** _____ **Cell:** _____

Health Insurance Provider: _____ **Health Insurance Policy Number:** _____

Primary Subscriber of Medical/Health Policy: _____

Student's Primary Health Care Provider: _____ **Phone:** _____

Allergies: Yes _____ No _____ **Please list:** _____

Epinephrine: Yes _____ No _____ **Asthma:** Yes _____ No _____ **Inhaler:** Yes _____ No _____

Diabetes: Yes _____ No _____ **Seizures:** Yes _____ No _____

Medical Concerns: _____

Medications needed on trip: Yes ____ No _____

***Please send only medications that are regularly taken by the student and are medically necessary.**

Please list: _____

***Medications with physician's order must be brought to the health room at least three days before the trip. Only send the amount of medication needed for the trip.**

All medications must be in a pharmacy labeled container with name, medication, dosage and frequency of administration.

If school policy permits, the school nurse and the parent will decide if the student is capable of self-administration.

The nurse has the final decision concerning self-administration.

Parent/guardian signature: _____ **Date:** _____

Self-Administration Medication Form for parents

Dear Parent/Guardian:

District policy allows students to self-administer medications with school nurse and parent/guardian approval. In order for your child to carry and administer his/her own inhaler and/or epinephrine auto injector and/or insulin and/or other medication as prescribed by a licensed physician, you must complete part A of this form. Part B will be completed in the health office with your child. You may be present during the completion of part B of this form if you so desire. Your child must be able to answer the questions in Part B or he/she will not be permitted to carry or administer his/her own medication. This is for the safety of your child and others. This form must be completed IN ADDITION to the parent and prescriber's normal authorization form for administration of medication in school.

A. To be completed by the parent/guardian:

I request that my child _____ be permitted to carry on his/her person the _____ inhaler and/or _____ Epinephrine auto injector and/or _____ insulin and/or _____ medication (name) _____ that has been prescribed.

My child has been instructed in and understands the purpose, appropriate method, frequency and use of his/her medication. My child understands that he/she is responsible and accountable for carrying and using his/her medication. My child understands that if he/she self administers this medication while at school that he/she will inform the school nurse or closest adult immediately. It is understood that if there is irresponsible behavior or safety risk, the privilege of carrying his/her medication will be rescinded.

I will support my child in following the agreement in Part B.

(Parent/Guardian Signature)

(Date)

B. To be completed by the school nurse:

Yes

No

- | | | |
|-------|-------|--|
| _____ | _____ | Student is consistently able to: |
| | | Name the medication; |
| | | Identify the correct medication; |
| | | Explain the purpose of the medication; |
| | | Knows the correct dosage; |
| | | Explain when the medication is to be taken; |
| | | Describe what will happen if the medication is not taken; |
| _____ | _____ | Student demonstrated the correct use/administration. |
| _____ | _____ | Student realizes his/her responsibility in carrying his/her own medication(s) and agrees not to share the medication(s) with others. |
| _____ | _____ | The student agrees to notify the school nurse or closest adult immediately after self-administering his/her medication during school hours or on school-sponsored trips. |
| _____ | _____ | The student agrees to come to the health office immediately upon taking the prescribed medication or with any questions, concerns or adverse side effects. |

The student understands that the privilege of carrying and administering his/her own medication(s) will be rescinded if he/she does not follow the above agreement.

(Student Signature)

Date

(School Nurse Signature)

Date

IV. APPENDIX

A. NASN position statement

School-Sponsored Trips, Role of the School Nurse

SUMMARY

It is the position of the National Association of School Nurses that the registered professional school nurse (hereinafter referred to as school nurse) is in a unique position to support students so that their individual healthcare needs are met both at school and on school-sponsored trips. The school nurse has the nursing background to appropriately assess the proposed school-sponsored trip to determine the accommodations needed to allow all students to safely participate in activities. All students, including students with special healthcare needs, have the right to participate in school-sponsored trips (also referred to as field trips). School nurses must serve a role in the planning and coordination for all school-sponsored trips, including those off campus, so that all students with healthcare needs remain healthy and safe. This planning process includes making accommodations for health care needs, determining required medications and treatments, and preparing for potential emergencies.

BACKGROUND

Schools offer school-sponsored trips to enhance the educational experience for students or to reward class accomplishments. A trip may be as simple as a local excursion for just a few hours or as complicated as a trip for several days/nights to a different city, state or country. While schools may invite parents/guardians of the student with healthcare needs to accompany the student on the trip, school officials cannot mandate that they attend.

Three federal laws provide important protection to students with disabilities. Section 504 of the Rehabilitation Act of 1973 and Title II of the American Disabilities Act of 1990 (ADA) are civil rights laws that prohibit discrimination against individuals with disabilities. The Individuals with Disabilities Education Improvement Act (IDEIA), reauthorized in 2004, mandates a free and appropriate education in the least restrictive environment for those students who qualify for special education services (U.S. Department of Education, 2011). All schools that receive federal monies are subject to follow Section 504 and the ADA Act (Gibbons, Lehr, & Selekman, 2013). Many states have additional laws that provide supplementary protections for students.

Estimates indicate that in the United States, 26.6% of children have special healthcare needs (Van Cleave, Gortmaker, & Perrin, 2010). Of these children, 86% receive prescribed medication, 52% require specialty medical care, 33% require vision care, 25% require mental health services, 23% require specialty therapies and 11% require the use of medical equipment (U.S. Department of Health and Human Services, 2008). “The level of nursing or healthcare services required for a student in the classroom is, at a minimum, the same level of care that the student requires during school programs outside of the classroom” (Hootman, Schwab, Gelfman, Gregory, & Pohlman, 2005, p. 223). As the number of students with specialized healthcare needs increases, it is critical that all school systems develop policies to address the provision of safe and competent health services for students while they are away from school buildings for school-sponsored trips (Kentucky Department of Education, 2012).

RATIONALE

A system should be in place to engage the school nurse in all planning phases of the school-sponsored trip to ensure that all necessary accommodations are in place. Currently, the costs associated with providing these accommodations are the responsibility of the school district and must be considered in the initial planning phases of a proposed school-sponsored trip (Foley, 2013). The school nurse should perform an individual health assessment and develop the IHP at the beginning of the school year to appropriately plan safe care for students with medical needs throughout the school year, including the potential for off-campus school-sponsored trips. The student's healthcare needs on field trips are determined through a collaborative process coordinated by the school nurse, reviewed annually and include a nursing assessment, the healthcare provider orders and information provided by the family (Moses, Gilchrest, & Schwab, 2005). The IHP outlines the plan for meeting the healthcare needs of the student at school and during school-sponsored trips, and is utilized to create emergency care plans (ECP). Behrmann (2010) states "although children with food allergy have a serious medical condition, their allergy should not result in their exclusion from events, such as field trips" (p. 186). This is true for all students with health needs.

The school nurse's knowledge about the individual needs of the students place him/her in a unique position to coordinate care that enables the student to fully participate in a safe and healthy school-sponsored trip experience. Planning steps may include:

- Assessing the transportation method, determining the food that will be served, the staff whom will be present, the layout of the planned visitation site, duration of the trip, and proximity to emergency medical care.
- Addressing medication, medical treatments and procedures required during the trip, as well as the potential for health emergencies.

If allowed by state law, including applicable state nurse practice acts, and district policy/procedures, the school nurse may consider delegating some tasks to a non-nurse, school staff member such as a teacher, utilizing the American Nurses Association's *Principles for Delegation by Registered Nurses to Unlicensed Assistive Personnel (UAP)*, which includes a nursing decision tree (ANA, 2012). If the school nurse who is familiar with the student's health condition and treatment determines that medical care cannot legally or safely be delegated, a school nurse may need to accompany the student (Prenni, 2009), and an additional school nurse may need to cover the school health office.

If the school-sponsored trip takes place in a different state or country, plans must be in place to meet the nursing license and practice laws of that state or country. The Nurse Licensure Compact (NLC) allows nurses to have one multistate license, with the ability to practice in both their home state and other party states. A nurse who holds a license issued by a state that is not a member of the NLC has a single-state license that is only valid in that state. They must request and receive permission from the respective state's board of nursing, to practice in another state (NCSBN, 2012). Even if a trip is in a compact state, the nurse must still know the nursing laws/regulations of that state and practice accordingly, regardless of whether she/he is delegating tasks to a non-nurse school staff member or actually attending the school-sponsored trips and performing the necessary health services (NCSBN, 2011). If the nurse is traveling to another country, the nurse must consult with the consulate of the visiting country for permission to practice nursing (K. Erwin, personal communication, 3/14/13).

CONCLUSION

School-sponsored trips can be some of the most memorable experiences for students. Administrators, school staff, families and students must work closely with the school nurse to so that the healthcare needs and safety of all students are provided for during school-sponsored trips. As more children with specialized healthcare needs enter the school system, the role of the school nurse becomes even more critical in assuring the rights, safety and educational experiences of all students.

B. State Reciprocity:

It is the responsibility of the school nurse to contact the Board of Registration in Nursing in the state(s) where a field trip is occurring for information regarding practicing in other states whenever a field trip takes place during school hours or beyond school hours. School Nurses must also inquire if the delegation of medication administration or other nursing activities is allowed in that state. If delegation is not permitted, a nurse may need to accompany the trip. Information may change so check frequently.

Nurses licensed in the United States (including Massachusetts) cannot practice nursing outside the United States.

C. Summary of Federal Laws and Regulations

The school nurse should be familiar with both Federal and State laws and regulations that relate to the planning and implementation of school sponsored trips and events. Pertinent laws and regulations are provided in the reference section of this toolkit.

1. IDEA

The Individuals with Disabilities Education Act (IDEA) assists States and school districts in making “free appropriate public education” available to eligible students. IDEA recognizes “health impairments due to chronic diseases or acute health problems” (such diabetes as one of thirteen disability categories).

Under IDEA, a “free appropriate public education” means special education and related services provided under public supervision and direction, in conformity with an individualized education program, at no cost to parents/guardians. A student who has a chronic disease and who is making effective educational progress in the regular education program does not need a special education evaluation, an IEP, or special education services. Whether such a student is in regular education or special education, however, the student has the right to a free appropriate public education and to have the school provide related aids and services designed to meet the individual educational needs of the students with disabilities as adequately as the needs of students without disabilities are met, under Section 504.

2. SECTION 504 of the Rehabilitation Act of 1973

The Office for Civil Rights (OCR) of the U.S. Department of Education enforces Section 504. The following guidance is excerpted from OCR’s “Frequently Asked Questions About Section 504 and the Education of Children with Disabilities,”

<http://www2.ed.gov/about/offices/list/ocr/504faq.html#interrelationship>.

Section 504 is a federal law designed to protect the rights of individuals with disabilities in programs and activities that receive federal financial assistance from the U.S. Department of Education (ED). Section 504 provides: “No otherwise qualified individual with a disability in the United States . . . shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance” OCR enforces Section 504 in programs and activities that receive federal financial assistance from ED. Recipients of this federal financial assistance include public school districts, institutions of higher education, and other state and local education agencies. The regulations implementing Section 504 in the context of educational institutions appear at 34 C.F.R. Part 104.

To be protected under Section 504, a student must be determined to:

- (1) Have a physical or mental impairment that substantially limits one or more major life activities;
- (2) Have a record of such impairment; or
- (3) Be regarded as having such impairment.

Section 504 requires that school districts provide a free appropriate public education (FAPE) to qualified students in their jurisdictions who have a physical or mental impairment that substantially limits one or more major life activities. The Section 504 regulations require a school district to provide a “free appropriate public education” (FAPE) to each qualified student with a disability who is in the school district’s jurisdiction, regardless of the nature or severity of the disability. Under Section 504, FAPE consists of the provision of regular or special education and related aids and services designed to meet the student’s individual educational needs as adequately as the needs of nondisabled students are met.

Section 504 protects a student (with diabetes) from discrimination or exclusion from education based on disability in any public or private school that receives federal funds. The parent may request that the school write a 504 Plan for an eligible student. The plan documents in writing that a group of people knowledgeable about the student (including the parents/guardians and school nurse) has been convened and that they have specified the agreed-upon aids and services to meet the student’s individual educational needs.

A 504 Plan for students with special health care needs can provide for health or disability-related aids and services that are necessary for a student to participate fully in the school environment and programs. For example, if a student takes prescription medications (such as insulin) during school hours, provision will be made for dispensing and monitoring the medications under the school nurse’s direction.

A 504 Plan should include:

- a school evaluation
- a letter from the student’s primary care provider describing the disability, related problems, and needed medications and/or treatments
- aids and services to be provided — physical and instructional;
- an Individual Health Care Plan (IHCP); and
- a copy of the Emergency Information Form for Children with Special Health Needs

The Section 504 mandate has also been incorporated in 7 CFR Part 15b, USDA regulations, so that schools receiving federal funding must enable students with disabilities (such as diabetes) to fully participate in the child nutrition programs.

3. AMERICANS WITH DISABILITIES ACT (ADA)

The ADA prohibits discrimination on the basis of disability in employment, state and local government, public accommodations, commercial facilities, transportation, and telecommunications. It also applies to the United States Congress.

To be protected by the ADA, one must have a disability or have a relationship or association with an individual with a disability. An individual with a disability is defined by the ADA as a person who has a physical or mental impairment that substantially limits one or more major life

activities, a person who has a history or record of such impairment, or a person who is perceived by others as having such impairment. The ADA does not specifically name all of the impairments that are covered.

4. EXTRACURRICULAR ACTIVITIES -OFFICE OF CIVIL RIGHTS (OCR) Summary

The OCR distributed a letter on January 25, 2013 to ensure that students with disabilities consistently have opportunities to participate in extracurricular athletics.

Under Section 504 regulations, a school district is required to provide a qualified student with a disability an opportunity to benefit from the school district's program equal to that of students without disabilities. Section 504 regulations also require school districts to require a free appropriate public education (FAPE) to each qualified person with a disability who is in the district's jurisdiction, regardless of the nature or severity of the person's disability.

Example: An elementary student with diabetes is not eligible for services under IDEA but under the school district's Section 504 process, however, the student is determined to have a disability. In order to participate in the regular classroom setting, under Section 504, the student is provided services that include assistance with glucose testing and the administration of insulin by the school nurse. If this student wants to join a sports team, the student must be provided the same services. The student needs assistance in glucose testing and insulin administration in order to participate in activities during and after school.

OCR is committed to working with schools, student, families, community and advocacy organizations, athletic associations and other interested parties to ensure that students with disabilities are provided an equal opportunity to participate in activities in school and after school.

5. HIPAA & FERPA

Overview of FERPA

FERPA is a Federal law that protects the privacy of students' "education records." (See 20 U.S.C. § 1232g; 34 CFR Part 99). FERPA applies to educational agencies and institutions that receive funds under any program administered by the U.S. Department of Education. This includes virtually all public schools and school districts and most private and public postsecondary institutions, including medical and other professional schools. If an educational agency or institution receives funds under one or more of these programs, FERPA applies to the recipient as a whole, including each of its components, such as a department within a university. See 34 CFR § 99.1(d). Private and religious schools at the elementary and secondary level generally do not receive funds from the Department of Education and are, therefore, not subject to FERPA. Note that a private school is not made subject to FERPA just because its students and teachers receive services from a local school district or State educational agency that receives funds from the U.S. Department of Education. The school itself must receive funds from a program administered by the U.S. Department of Education to be subject to FERPA. For example, if a school district places a student with a disability in a private school that is acting on

behalf of the school district with regard to providing services to that student, the records of that student are subject to FERPA, but not the records of the other students in the private school. In such cases, the school district remains responsible for complying with FERPA with respect to the education records of the student placed at the private school. An educational agency or institution subject to FERPA may not have a policy or practice of disclosing the education records of students, or personally identifiable information from education records, without a parent or eligible student's written consent. See 34 CFR § 99.30. FERPA contains several exceptions to this general consent rule. See 34 CFR § 99.31. An "eligible student" is a student who is at least 18 years of age or who attends a postsecondary institution at any age. See 34 CFR §§ 99.3 and 99.5(a). Under FERPA, parents and eligible students have the right to inspect and review the student's education records and to seek to have them amended in certain circumstances. See 34 CFR §§ 99.10 – 99.12 and §§ 99.20 – 99.22. The term "education records" is broadly defined to mean those records that are: (1) directly related to a student, and (2) maintained by an educational agency or institution or by a party acting for the agency or institution. See 34 CFR § 99.3. At the elementary or secondary level, a student's health records, including immunization records, maintained by an educational agency or institution subject to FERPA, as well as records maintained by a school nurse, are "education records" subject to FERPA. In addition, records that schools maintain on special education students, including records on services provided to students under the Individuals with Disabilities Education Act (IDEA), are "education records" under FERPA. This is because these records are (1) directly related to a student, (2) maintained by the school or a party acting for the school, and (3) not excluded from the definition of "education records."

Overview of HIPAA

Congress enacted HIPAA in 1996 to, among other things, improve the efficiency and effectiveness of the health care system through the establishment of national standards and requirements for electronic health care transactions and to protect the privacy and security of individually identifiable health information. Collectively, these are known as HIPAA's Administrative Simplification provisions, and the U.S. Department of Health and Human Services has issued a suite of rules, including a privacy rule, to implement these provisions. Entities subject to the HIPAA Administrative Simplification Rules (see 45 CFR Parts 160, 162, and 164), known as "covered entities," are health plans, health care clearinghouses, and health care providers that transmit health information in electronic form in connection with covered transactions. See 45 CFR § 160.103. "Health care providers" include institutional providers of health or medical services, such as hospitals, as well as non-institutional providers, such as physicians, dentists, and other practitioners, along with any other person or organization that furnishes, bills, or is paid for health care in the normal course of business. Covered transactions are those for which the U.S. Department of Health and Human Services has adopted a standard, such as health care claims submitted to a health plan. See 45 CFR § 160.103 (definitions of "health care provider" and "transaction") and 45 CFR Part 162, Subparts K–R. The HIPAA Privacy Rule requires covered entities to protect individuals' health records and other identifiable health information by requiring appropriate safeguards to protect privacy, and setting limits and conditions on the uses and disclosures that may be made of such information without patient authorization. The rule also gives patient's rights over their health information, including rights to examine and obtain a copy of their health records, and to request corrections.

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