



South Carolina Department of Labor, Licensing and Regulation

Mark Sanford
Governor

Adrienne Riggins Youmans
Director

South Carolina Board of Nursing
110 Centerview Drive
Post Office Box 12367
Columbia, SC 29211-12367
Phone: (803) 896-4550
FAX: (803) 896-4525
www.llr.state.sc.us

ADVISORY OPINION # 52

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Question: **Is it within the role and scope of a registered nurse (RN) or licensed practical nurse (LPN) practicing in a school setting to select, train, determine the competency of and evaluate unlicensed school personnel for assisting students with medications taken on a routine schedule?**

Section 43-205 of the South Carolina Code of Regulations outlines the qualifications, duties and workloads of professional personnel working in school settings. Section 43-205 requires nurses working in a school setting to hold a current license issued by the State Board of Nursing and also requires school administrators to set duties and responsibilities for the nurses that are in accordance with the laws and regulations governing nursing in South Carolina.

The Board of Nursing is aware that the concept of “assisting with medications” has been used in school settings for allowing school personnel who are not licensed to practice nursing to give medications to students. Assisting with medications includes the acts of reminding an individual of the time to take a medication; opening the container that is properly labeled; and/or assisting the individual to place the medication in the mouth or properly apply the medication.

Increasingly, students are attending school with chronic and medically fragile health conditions that require a variety of potent medications. These students have varying levels of knowledge regarding their medications and varying abilities to advocate for themselves where their medications are concerned. The Board of Nursing thus is convinced that it is in the best interest of students and school districts to have a RN or LPN administer medications to students.

The administration of medications includes the acts of preparing and giving drugs in accordance with the orders of a licensed, authorized advanced practiced registered nurse (i.e., nurse practitioner, certified nurse-midwife, clinical nurse specialist), or a physician, dentist, or other authorized licensed prescribing provider as to drug, dosage, route and frequency; observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy; intervening when emergency care is required as a result of drug therapy; appropriately instructing the student regarding the medication; recognizing accepted prescribing limits; and reporting deviations to the prescribing advanced practice registered nurse, physician, dentist, or other authorized licensed prescribing provider. According to the laws governing nursing in South Carolina unlicensed persons (persons not licensed to practice nursing) must not administer medications, except as otherwise provided by law (1976 SC Code of Laws, Section 40-33-42, enacted May 11, 2004).

Recognizing the health risks for children and the legal implications for school districts when medications are not given appropriately, the Board of Nursing cautions school districts that it is in the best interest of students to have a full-time RN and/or LPN employed at each school. Registered nurses develop and write individual health care plans for students (Section 59-63-80 of the South Carolina Code of Laws), and based on an understanding of pharmacotherapeutics, provide the full range of services associated with the safe “administration of medications.” The use of unlicensed school personnel to “assist” students with medications should be limited to situations where the RN or LPN working full-time at the school is absent or not available.

In schools where there is a RN or LPN on staff full-time to provide health services for students, the RN assigned to the school or the RN supervising the clinical practice of the LPN assigned to the school in collaboration with the LPN may select, train, determine the competency of, and evaluate unlicensed school personnel for assisting students with medications in situations where the RN or LPN on staff at the school is absent or not available. The RN must provide the initial training and competency determination of unlicensed school employees. The RN may delegate training updates that do not include procedural changes and periodic re-evaluation of an unlicensed school employee’s competency to a LPN if the RN has determined and documented that the LPN is competent to perform the tasks. The RN should develop a checklist for the LPN to use during training updates and the re-evaluation process. Training updates that include procedural changes shall be treated as an initial training, and therefore, must be first provided by the RN.

Following training by the RN assigned to the school or the RN supervising the clinical practice of the LPN assigned to the school, trained unlicensed school personnel may assist students with regularly scheduled medications during school-sponsored functions if the RN or LPN on staff full-time at the school is absent or not available. Assisting with medications includes the acts of reminding a student of the time to take a medication; opening the container that is properly labeled; and/or assisting the individual to place the medication in the mouth or properly apply the medication. Assisting with medications does *not* include injectable medications, insulin in any form, instillation of medications into the eye or ear, or insertion of rectal or vaginal medications. School-sponsored functions may include those conducted during regular school hours on school grounds, before- and after-school activities conducted by the school on school property, transit to or from school or school-sponsored activities when the vehicles are owned or leased by the school district, and any school-sponsored activity in which the student is a participant. Examples of school-sponsored activities are field trips, interscholastic sporting events, and fine arts events in which the student is a participant. The RN will determine on a case-by-case basis whether

trained unlicensed school personnel may assist a specific student with regularly scheduled medications at school-sponsored functions outside of regular school hours if the RN or LPN is absent or not available. A licensed healthcare prescriber or a RN must be available via telecommunications to answer questions that the trained unlicensed school employee may have when assisting students with medications in the absence of the RN or LPN assigned to the school.

The skills taught to unlicensed school personnel by the RN or LPN may be used only at school or school-sponsored functions and are not transferable to other settings. Once trained, the unlicensed school employees may not delegate the tasks to others or supervise others in performing the tasks. Because of risks for anaphylaxis and/or other serious untoward reactions, an unlicensed person must never assist students with the initial dose of a routinely scheduled medication.

When implementing the guidelines included in this Board of Nursing Advisory it is critical that school districts involve RNs in the planning process. A RN or LPN cannot legally be required by school officials to delegate the practice of nursing, nor to delegate nursing tasks to unlicensed school personnel where, in the nurse's judgment, the safety of the student would be endangered. A school principal/administrator cannot by law require a school nurse to delegate the practice of nursing in any way that is contrary to the requirements of the laws and regulations governing nursing practice, nor can a school principal/administrator who is not licensed to practice nursing legally delegate nursing tasks.

The South Carolina Board of Nursing has adopted the following guidelines as minimally acceptable standards for RNs and LPNs to follow.

A. Definitions

1. Administration of medications: The administration of medications includes the acts of preparing and giving drugs in accordance with the orders of a licensed, authorized advanced practice registered nurse (i.e., nurse practitioner, certified nurse-midwife, clinical nurse specialist), or a physician, dentist, or other authorized licensed prescribing provider as to drug, dosage, route and frequency; observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy; intervening when emergency care is required as a result of drug therapy; appropriately instructing the student regarding the medication; recognizing accepted prescribing limits and reporting deviations to the prescribing advanced practice registered nurse, physician, dentist, or other authorized licensed prescribing provider.
2. Assisting with medications: Assisting with medications includes the acts of reminding a student of the time to take a medication; opening the container that is properly labeled; and/or assisting the individual to place the medication in the mouth or properly apply the medication. Assisting with medications does not include injectable medications, insulin in any form, instillation of medications into the eye or ear, or insertion of rectal or vaginal

medications. See Board of Nursing Advisory # 49 for exceptions related to training unlicensed school personnel to administer medications that may be needed for medical emergencies.

3. Evaluation: Evaluation is the planned process by which a RN observes and directs the performance of the trained unlicensed school employee in assisting students with medications. The purpose of evaluation is the continuous determination of and assurance of competency.
4. Unlicensed School Personnel / Unlicensed School Employee: Unlicensed school personnel are employees of a school district who are not currently licensed to practice nursing by the South Carolina Board of Nursing.
5. Regularly Scheduled Medications: Regularly scheduled medications are medicinal products that a student takes at a set time or on an “as needed” basis for specific health conditions or to alleviate specific symptoms.

B. Determination of Training Appropriateness

Note: In schools where there is a RN or LPN on staff full-time to provide health services for students, the RN assigned to the school or the RN supervising the clinical practice of the LPN assigned to the school in collaboration with the LPN may select, train, determine the competency of, and evaluate unlicensed school personnel for assisting students with medications in situations where the RN or LPN on staff at the school is absent or not available. Unlicensed school personnel may be trained to assist students with regularly scheduled medications only if there is a RN or LPN employed at the school full-time to provide health services for students.

1. The RN assigned to the school or the RN supervising the clinical practice of the LPN assigned to the school shall determine if it is safe to train unlicensed school personnel to assist students with medications.
2. To determine if training of unlicensed school personnel is appropriate, the RN shall consider the following:
 - whether the students’ conditions are stable and predictable;
 - the nature and complexity of the medications;
 - the risk to the students in the event of a medication error;
 - the necessary knowledge, skills and abilities needed to assist the students with the medications;
 - the competency of unlicensed school personnel;
 - whether the outcome anticipated is stable and predictable; and
 - the number of unlicensed school personnel that can safely be evaluated by the RN.
3. The RN shall consult with students’ healthcare practitioners, as necessary, for advice regarding training unlicensed school personnel to provide specific medications.

C. Selection of Unlicensed Persons to Assist Students

Note: In schools where there is a RN or LPN on staff full-time to provide health services for students, the RN assigned to the school or the RN supervising the clinical practice of the LPN assigned to the school in collaboration with the LPN may select, train, determine the competency of, and evaluate unlicensed school personnel for assisting students with medications in situations where the RN or LPN on staff at the school is absent or not available. Unlicensed school

personnel may be trained to assist students with regularly scheduled medications only if there is a RN or LPN employed at the school full-time to provide health services for students.

1. The RN assigned to a school or the LPN in consultation with his/her RN supervisor should work with the school's principal/administrator to identify staff members or faculty who agree to assist students with medications if the RN or LPN is absent or not available.
2. Training may be offered to all staff or faculty members who volunteer. However, the RN will recommend to the school's principal/administrator only those trainees who complete the training and pass the outlined competency requirements for assignment to assist students with medications.
3. The school principal, with written authorization from a student's parent(s) or legal guardian(s), may assign one or more of the individuals recommended by the RN the duties of assisting students with medications.
4. Parents or guardians should be made aware of and understand the difference between administration of medications and assisting with medications.

D. Training & Determining Competency

Note: In schools where there is a RN or LPN on staff full-time to provide health services for students, the RN assigned to the school or the RN supervising the clinical practice of the LPN assigned to the school in collaboration with the LPN may select, train, determine the competency of, and evaluate unlicensed school personnel for assisting students with medications in situations where the RN or LPN on staff at the school is absent or not available. Unlicensed school personnel may be trained to assist students with regularly scheduled medications only if there is a RN or LPN employed at the school full-time to provide health services for students.

1. A RN must provide the initial training and competency determination of unlicensed school employees. The RN may delegate training updates that do not include procedural changes and periodic re-evaluation of an unlicensed school employee's competency to a LPN only after the RN has determined and documented that the LPN is competent to perform the tasks. The RN should develop a checklist for the LPN to use during training updates and the re-evaluation process. Training updates that include procedural changes shall be treated as an initial training, and therefore, must be first provided by a RN.
2. Unlicensed school personnel may be trained to assist students with medications in the absence of the RN or LPN on staff full-time at the school to provide health services for students, if the school district has:
 - a written policy that authorizes the training of unlicensed school personnel by a RN or LPN under the direction of a RN and provides for error reporting and error tracking, and
 - written procedures outlining task specific trainings and quality assurance measures including competency determination, post-emergency evaluation, error reporting, and error tracking.
3. Training for unlicensed persons may include the skills necessary for assisting students with medications to be given by oral (including feeding tubes), topical, nasal, and sublingual routes, and medications that are inhaled (e.g., asthma inhalers). Unlicensed school personnel may not be trained to give routinely scheduled injectable medications, instill drops into the eye or ear, insert medications rectally or vaginally, or to give any form of insulin. See Advisory # 49 for exceptions related to training unlicensed school personnel to administer medications that may be needed for medical emergencies. See

Advisory # 50 for guidance regarding training unlicensed school personnel for select tasks such as gastric tube feedings.

4. The instructional plan must include:
 - Step by step instructions and rationale for the tasks;
 - Return demonstration of the tasks to evaluate competency and to assure accuracy and safety;
 - Observation of the unlicensed school employee performing the tasks to evaluate competency and to assure accuracy and safety;
 - An evaluation of knowledge related to the tasks to measure understanding of pertinent concepts;
 - Provision of written instructions as a reference;
 - A plan for seeking advice and/or emergency assistance from qualified licensed healthcare personnel;
 - A plan for ongoing evaluation of student outcomes by a RN;
 - Documentation of instruction provided and a plan for training updates at least annually; and
 - Documentation of initial competency and periodic re-evaluation of competency at least annually.
5. Upon completion of all training sessions, the trainees must be advised that the skills taught are to be used only for meeting the needs of the students for which they have been assigned to assist with medications at school or school-sponsored functions and are not transferable to other settings. The trained unlicensed school district employees cannot delegate the tasks to others or supervise others in performing the tasks. Because of risks for anaphylaxis and/or other untoward reactions, an unlicensed person must never assist students with the initial dose of a routinely scheduled medication.
6. If a portion of the training involves course content for which the RN or LPN is certified to teach to unlicensed persons (e.g., cardiopulmonary resuscitation instruction), and the RN or LPN provides the training according to the specifications of the certifying body, then that portion of the training is transferable to other settings, and the RN or LPN will provide the trainee with the appropriate certificate.

E. Evaluation

Note: In schools where there is a RN or LPN on staff full-time to provide health services for students, the RN assigned to the school or the RN supervising the clinical practice of the LPN assigned to the school in collaboration with the LPN may select, train, determine the competency of, and evaluate unlicensed school personnel for assisting students with medications in situations where the RN or LPN on staff at the school is absent or not available. Unlicensed school personnel may be trained to assist students with regularly scheduled medications only if there is a RN or LPN employed at the school full-time to provide health services for students.

1. The RN shall maintain a training file on each school employee trained.
2. The RN shall ensure that the competencies of unlicensed school employees trained to assist students with medications are re-evaluated at least annually and that training updates of procedural changes are offered in a timely manner.
3. The RN may delegate training updates that do not include procedural changes and periodic re-evaluations of an unlicensed person's competency to a LPN, only after the RN has determined and documented that the LPN is competent to perform the tasks. The

RN should develop a checklist for the LPN to use during the training update and re-evaluation process.

4. Following an absence of the licensed nurse during which a trained unlicensed school employee has assisted students with medications, the full-time RN or LPN assigned to the school shall perform a post-procedural review. The RN or LPN should document the results of the procedural review in the school employee's training file. If the results of the post-procedural review indicate that the expected quality of care was not met, the RN must intervene by providing additional instruction or advising the school principal/administrator to rescind the assignment.
5. A licensed healthcare prescriber or a RN must be available via telecommunications to answer questions that the trained unlicensed school employee may have when assisting students with medications in the absence of the RN or LPN assigned to the school.
6. A plan for the trained unlicensed school employee to follow for emergency situations must be outlined.

This statement is an advisory opinion of the Board of Nursing as to what constitutes competent and safe school nursing practice.