

SENATE, No. 1830

STATE OF NEW JERSEY 218th LEGISLATURE

INTRODUCED FEBRUARY 8, 2018

Sponsored by:

Senator M. TERESA RUIZ

District 29 (Essex)

Senator CHRISTOPHER "KIP" BATEMAN

District 16 (Hunterdon, Mercer, Middlesex and Somerset)

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Senator Stack

SYNOPSIS

Requires certain schools to maintain supply of opioid antidotes and permits emergency administration of opioid antidote by school nurse or trained employee.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/8/2018)

1 AN ACT concerning the emergency administration of opioid
2 antidotes in schools, supplementing chapter 40 of Title 18A of
3 the New Jersey Statutes, and amending P.L.2013, c.46.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. (New section) As used in this act:

9 “Opioid antidote” means naloxone hydrochloride, or any other
10 similarly acting drug approved by the United States Food and Drug
11 Administration for the treatment of an opioid overdose.

12 “Opioid overdose” means an acute condition including, but not
13 limited to, extreme physical illness, decreased level of
14 consciousness, respiratory depression, coma, or death resulting
15 from the consumption or use of an opioid drug or another substance
16 with which an opioid drug was combined, and that a layperson
17 would reasonably believe to require medical assistance.

18 “School-sponsored function” means any activity, event, or
19 program occurring on or off school grounds, whether during or
20 outside of regular school hours, that is organized or supported by
21 the school.

22
23 2. (New section) a. Each board of education, board of trustees
24 of a charter school, and chief school administrator of a nonpublic
25 school shall develop a policy, in accordance with guidelines
26 established by the Department of Education pursuant to section 3 of
27 this act, for the emergency administration of an opioid antidote to a
28 student, staff member, or other person who is experiencing an
29 opioid overdose. The policy shall:

30 (1) require each school that includes any of the grades nine
31 through 12, and permit any other school, to obtain a standing order
32 for opioid antidotes pursuant to section 4 of the “Overdose
33 Prevention Act,” P.L.2013, c.46 (C.24:6J-4), and to maintain a
34 supply of opioid antidotes under the standing order in a secure but
35 unlocked and easily accessible location; and

36 (2) permit the school nurse, or a trained employee designated
37 pursuant to subsection c. of this section, to administer an opioid
38 antidote to any person whom the nurse or trained employee in good
39 faith believes is experiencing an opioid overdose.

40 b. (1) Opioid antidotes shall be maintained by a school
41 pursuant to paragraph (1) of subsection a. of this section in
42 quantities and types deemed adequate by the board of education,
43 board of trustees of a charter school, or chief school administrator
44 of a nonpublic school, in consultation with the Department of
45 Education and the Department of Human Services.

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

1 (2) The opioid antidotes shall be accessible in the school during
2 regular school hours and during school-sponsored functions that
3 take place in the school or on school grounds adjacent to the school
4 building. A board of education, board of trustees of a charter
5 school, or chief school administrator of a nonpublic school may, in
6 its discretion, make opioid antidotes accessible during school-
7 sponsored functions that take place off school grounds.

8 c. (1) The school nurse shall have the primary responsibility
9 for the emergency administration of an opioid antidote in
10 accordance with a policy developed under this section. The board
11 of education, board of trustees of a charter school, or chief school
12 administrator of a nonpublic school shall designate additional
13 employees of the school district, charter school, or nonpublic school
14 who volunteer to administer an opioid antidote in the event that a
15 person experiences an opioid overdose when the nurse is not
16 physically present at the scene. The designated employees shall
17 only be authorized to administer opioid antidotes after receiving the
18 training required under subsection b. of section 3 of this act.

19 (2) In the event that a licensed athletic trainer volunteers to
20 administer an opioid antidote pursuant to this act, it shall not
21 constitute a violation of the "Athletic Training Licensure Act,"
22 P.L.1984, c.203 (C.45:9-37.35 et seq.).

23 d. A policy developed pursuant to this section shall require the
24 transportation of an overdose victim to a hospital emergency room
25 by emergency services personnel after the administration of an
26 opioid antidote, even if the person's symptoms appear to have
27 resolved.

28
29 3. (New section) a. The Department of Education, in
30 consultation with the Department of Human Services and
31 appropriate medical experts, shall establish guidelines for the
32 development of a policy by a school district, charter school, or
33 nonpublic school for the emergency administration of opioid
34 antidotes. Each board of education, board of trustees of a charter
35 school, and chief school administrator of a nonpublic school shall
36 implement the guidelines in developing a policy pursuant to section
37 2 of this act.

38 b. The guidelines shall include a requirement that each school
39 nurse, and each employee designated pursuant to subsection c. of
40 section 2 of this act, receive training on standardized protocols for
41 the administration of an opioid antidote to a person who
42 experiences an opioid overdose. The training shall include the
43 overdose prevention information described in subsection a. of
44 section 5 of the "Overdose Prevention Act," P.L.2013, c.46
45 (C.24:6J-5). The guidelines shall specify an appropriate entity or
46 entities to provide the training, and a school nurse shall not be
47 solely responsible to train the employees designated pursuant to
48 subsection c. of section 2 of this act.

1 4. (New section) No school employee, including a school
2 nurse, or any other officer or agent of a board of education, charter
3 school, or nonpublic school, or a prescriber of opioid antidotes for a
4 school through a standing order, shall be held liable for any good
5 faith act or omission consistent with the provisions of this act.
6 Good faith shall not include willful misconduct, gross negligence,
7 or recklessness.

8
9 5. (New section) A school district may enter into a shared
10 services arrangement with another school district for the provision
11 of opioid antidotes pursuant to section 2 of this act if the
12 arrangement will result in cost savings for the districts.

13
14 6. (New section) Notwithstanding any law to the contrary,
15 funds appropriated or otherwise made available pursuant to
16 P.L.1991, c.226 (C.18A:40-23 et seq.) may be used to comply with
17 the requirements of section 2 of this act in nonpublic schools.

18
19 7. Section 3 of P.L.2013, c.46 (C.24:6J-3) is amended to read
20 as follows:

21 3. As used in this act:

22 "Commissioner" means the Commissioner of Human Services.

23 "Drug overdose" means an acute condition including, but not
24 limited to, physical illness, coma, mania, hysteria, or death resulting
25 from the consumption or use of a controlled dangerous substance or
26 another substance with which a controlled dangerous substance was
27 combined and that a layperson would reasonably believe to require
28 medical assistance.

29 "Emergency medical response entity" means an organization,
30 company, governmental entity, community-based program, or
31 healthcare system that provides pre-hospital emergency medical
32 services and assistance to opioid or heroin addicts or abusers in the
33 event of an overdose.

34 "Emergency medical responder" means a person, other than a
35 health care practitioner, who is employed on a paid or volunteer
36 basis in the area of emergency response, including, but not limited
37 to, an emergency medical technician acting in that person's
38 professional capacity.

39 "Health care practitioner" means a prescriber, pharmacist, or
40 other individual whose professional practice is regulated pursuant to
41 Title 45 of the Revised Statutes, and who, in accordance with the
42 practitioner's scope of professional practice, prescribes or dispenses
43 an opioid antidote.

44 "Medical assistance" means professional medical services that
45 are provided to a person experiencing a drug overdose by a health
46 care practitioner, acting within the practitioner's scope of
47 professional practice, including professional medical services that

1 are mobilized through telephone contact with the 911 telephone
2 emergency service.

3 "Opioid antidote" means naloxone hydrochloride, or any other
4 similarly acting drug approved by the United States Food and Drug
5 Administration for the treatment of an opioid overdose.

6 "Patient" means a person who is at risk of an opioid overdose or
7 a person who is not at risk of an opioid overdose who, in the
8 person's individual capacity, obtains an opioid antidote from a
9 health care practitioner, professional, or professional entity for the
10 purpose of administering that antidote to another person in an
11 emergency, in accordance with subsection c. of section 4 of
12 P.L.2013, c.46 (C.24:6J-4). "Patient" includes a professional who is
13 acting in that professional's individual capacity, but does not
14 include a professional who is acting in a professional capacity.

15 "Prescriber" means a health care practitioner authorized by law
16 to prescribe medications who, acting within the practitioner's scope
17 of professional practice, prescribes an opioid antidote. "Prescriber"
18 includes, but is not limited to, a physician, physician assistant, or
19 advanced practice nurse.

20 "Professional" means a person, other than a health care
21 practitioner, who is employed on a paid basis or is engaged on a
22 volunteer basis in the areas of substance abuse treatment or therapy,
23 criminal justice, or a related area, and who, acting in that person's
24 professional or volunteer capacity, obtains an opioid antidote from a
25 health care practitioner for the purposes of dispensing or
26 administering that antidote to other parties in the course of business
27 or volunteer activities. "Professional" includes, but is not limited
28 to, a sterile syringe access program employee, or a law enforcement
29 official.

30 "Professional entity" means an organization, company,
31 governmental entity, community-based program, sterile syringe
32 access program, or any other organized group that employs two or
33 more professionals who engage, during the regular course of
34 business or volunteer activities, in direct interactions with opioid or
35 heroin addicts or abusers or other persons susceptible to opioid
36 overdose, or with other persons who are in a position to provide
37 direct medical assistance to opioid or heroin addicts or abusers in
38 the event of an overdose.

39 "Recipient" means a patient, professional, professional entity,
40 emergency medical responder, **[or]** emergency medical response
41 entity, school, school district, or school nurse who is prescribed or
42 dispensed an opioid antidote in accordance with section 4 of
43 P.L.2013, c.46 (C.24:6J-4).
44 (cf: P.L.2015, c.10, s.1)
45

46 8. Section 4 of P.L.2013, c.46 (C.24:6J-4) is amended to read
47 as follows:

1 4. a. (1) A prescriber or other health care practitioner, as
2 appropriate, may prescribe or dispense an opioid antidote:

3 (a) directly or through a standing order, to any recipient who is
4 deemed by the health care practitioner to be capable of
5 administering the opioid antidote to an overdose victim in an
6 emergency;

7 (b) through a standing order, to any professional or emergency
8 medical responder who is not acting in a professional or volunteer
9 capacity for a professional entity, or an emergency medical
10 response entity, but who is deemed by the health care practitioner to
11 be capable of administering opioid antidotes to overdose victims, as
12 part of the professional's regular course of business or volunteer
13 activities;

14 (c) through a standing order, to any professional who is not
15 acting in a professional or volunteer capacity for a professional
16 entity, but who is deemed by the health care practitioner to be
17 capable of dispensing opioid antidotes to recipients, for
18 administration thereby, as part of the professional's regular course
19 of business or volunteer activities;

20 (d) through a standing order, to any professional entity or any
21 emergency medical response entity, which is deemed by the health
22 care practitioner to employ professionals or emergency medical
23 responders, as appropriate, who are capable of administering opioid
24 antidotes to overdose victims as part of the entity's regular course of
25 business or volunteer activities;

26 (e) through a standing order, to any professional entity which is
27 deemed by the health care practitioner to employ professionals who
28 are capable of dispensing opioid antidotes to recipients, for
29 administration thereby, as part of the entity's regular course of
30 business or volunteer activities ;

31 (f) through a standing order, to a school, school district, or
32 school nurse pursuant to the provisions of section 2 of P.L. _____,
33 c. (C. _____) (pending before the Legislature as this bill).

34 (2) (a) For the purposes of this subsection, whenever the law
35 expressly authorizes or requires a certain type of professional or
36 professional entity to obtain a standing order for opioid antidotes
37 pursuant to this section, such professional, or the professionals
38 employed or engaged by such professional entity, as the case may
39 be, shall be presumed by the prescribing or dispensing health care
40 practitioner to be capable of administering or dispensing the opioid
41 antidote, consistent with the express statutory requirement.

42 (b) For the purposes of this subsection, whenever the law
43 expressly requires a certain type of emergency medical responder or
44 emergency medical response entity to obtain a standing order for
45 opioid antidotes pursuant to this section, such emergency medical
46 responder, or the emergency medical responders employed or
47 engaged by such emergency medical response entity, as the case
48 may be, shall be presumed by the prescribing or dispensing health

1 care practitioner to be capable of administering the opioid antidote,
2 consistent with the express statutory requirement.

3 (c) For the purposes of this subsection, whenever the law
4 expressly authorizes or requires a school or school district to obtain
5 a standing order for opioid antidotes pursuant to this section, the
6 school nurses employed or engaged by the school or school district
7 shall be presumed by the prescribing or dispensing health care
8 practitioner to be capable of administering the opioid antidote,
9 consistent with the express statutory requirement.

10 (3) (a) Whenever a prescriber or other health care practitioner
11 prescribes or dispenses an opioid antidote to a professional or
12 professional entity pursuant to a standing order issued under
13 paragraph (1) of this subsection, the standing order shall specify
14 whether the professional or professional entity is authorized thereby
15 to directly administer the opioid antidote to overdose victims; to
16 dispense the opioid antidote to recipients, for their administration to
17 third parties; or to both administer and dispense the opioid antidote.
18 If a standing order does not include a specification in this regard, it
19 shall be deemed to authorize the professional or professional entity
20 only to administer the opioid antidote with immunity, as provided
21 by subsection c. of this section, and it shall not be deemed to
22 authorize the professional or professional entity to engage in the
23 further dispensing of the antidote to recipients, unless such
24 authority has been granted by law, as provided by subparagraph (b)
25 of this paragraph.

26 (b) Notwithstanding the provisions of this paragraph to the
27 contrary, if the law expressly authorizes or requires a certain type of
28 professional, professional entity, emergency medical responder,
29 **[or]** emergency medical response entity , school, school district, or
30 school nurse to administer or dispense opioid antidotes pursuant to
31 a standing order issued hereunder, the standing order issued
32 pursuant to this section shall be deemed to grant the authority
33 specified by the law, even if such authority is not expressly
34 indicated on the face of the standing order.

35 (4) Any prescriber or other health care practitioner who
36 prescribes or dispenses an opioid antidote in good faith, and in
37 accordance with the provisions of this subsection, shall not, as a
38 result of the practitioner's acts or omissions, be subject to any
39 criminal or civil liability, or any professional disciplinary action
40 under Title 45 of the Revised Statutes for prescribing or dispensing
41 an opioid antidote in accordance with P.L.2013, c.46 (C.24:6J-1 et
42 seq.).

43 b. (1) Any professional or professional entity that has obtained
44 a standing order, pursuant to subsection a. of this section, for the
45 dispensing of opioid antidotes, may dispense an opioid antidote to
46 any recipient who is deemed by the professional or professional
47 entity to be capable of administering the opioid antidote to an
48 overdose victim in an emergency.

1 (2) Any professional or professional entity that dispenses an
2 opioid antidote in accordance with paragraph (1) of this subsection,
3 in good faith, and pursuant to a standing order issued under
4 subsection a. of this section, shall not, as a result of any acts or
5 omissions, be subject to any criminal or civil liability or any
6 professional disciplinary action for dispensing an opioid antidote in
7 accordance with P.L.2013, c.46 (C.24:6J-1 et seq.).

8 c. (1) Any emergency medical responder or emergency medical
9 response entity that has obtained a standing order, pursuant to
10 subsection a. of this section, for the administration of opioid
11 antidotes, may administer an opioid antidote to overdose victims.

12 (2) Any emergency medical responder or emergency medical
13 response entity that administers an opioid antidote, in good faith, in
14 accordance with paragraph (1) of this subsection, and pursuant to a
15 standing order issued under subsection a. of this section, shall not,
16 as a result of any acts or omissions, be subject to any criminal or
17 civil liability, or any disciplinary action, for administering the
18 opioid antidote in accordance with P.L.2013, c.46 (C.24:6J-1 et
19 seq.)

20 d. (1) Any person who is the recipient of an opioid antidote,
21 which has been prescribed or dispensed for administration purposes
22 pursuant to subsection a. or b. of this section, and who has received
23 overdose prevention information pursuant to section 5 of P.L.2013,
24 c.46 (C.24:6J-5), may administer the opioid antidote to another
25 person in an emergency, without fee, if the antidote recipient
26 believes, in good faith, that the other person is experiencing an
27 opioid overdose.

28 (2) Any person who administers an opioid antidote pursuant to
29 paragraph (1) of this subsection shall not, as a result of the person's
30 acts or omissions, be subject to any criminal or civil liability for
31 administering the opioid antidote in accordance with P.L.2013, c.46
32 (C.24:6J-1 et seq.).

33 e. In addition to the immunity that is provided by this section
34 for authorized persons who are engaged in the prescribing,
35 dispensing, or administering of an opioid antidote, the immunity
36 provided by section 7 or section 8 of P.L.2013, c.46 (C.2C:35-30 or
37 C.2C:35-31) shall apply to a person who acts in accordance with
38 this section, provided that the requirements of those sections, as
39 applicable, have been met.

40 f. Any school, school district, school nurse, school employee,
41 or any other officer or agent of a board of education, charter school,
42 or nonpublic school who administers, or permits the administration
43 of, an opioid antidote in good faith in accordance with the
44 provisions of section 2 of P.L. , c. (C.) (pending before the
45 Legislature as this bill), and pursuant to a standing order issued
46 under subsection a. of this section, shall not, as a result of any acts
47 or omissions, be subject to any criminal or civil liability, or any
48 disciplinary action, for administering, or for permitting the

1 administration of, the opioid antidote in accordance with P.L.2013,
2 c.46 (C.24:6J-1 et seq.).
3 (cf: P.L.2015, c.10, s.2)

4

5 9. This act shall take effect on the first day of the fourth month
6 next following the date of enactment, except the Department of
7 Education may take any anticipatory administrative action in
8 advance as shall be necessary for the implementation of this act.

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10

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STATEMENT

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13 This bill would require a board of education, board of trustees of
14 a charter school, and chief school administrator of a nonpublic
15 school to develop a policy, pursuant to Department of Education
16 guidelines, for the emergency administration of an opioid antidote
17 to a student, staff member, or other person who is experiencing an
18 opioid overdose. The policy will: (1) require a school that includes
19 any of the grades nine through 12, and permit any other school, to
20 obtain a standing order for opioid antidotes and to maintain a
21 supply of opioid antidotes in a secure and easily accessible location;
22 and (2) permit the school nurse or trained employees to administer
23 an opioid antidote to any person whom the nurse or trained
24 employee in good faith believes is experiencing an opioid overdose.
25 The opioid antidotes must be accessible in the school during regular
26 school hours and during school-sponsored functions that take place
27 in the school or on school grounds adjacent to the school building.
28 A board of education, board of trustees of a charter school, or chief
29 school administrator of a nonpublic school may, in its discretion,
30 make opioid antidotes accessible during school-sponsored functions
31 that take place off school grounds.

32 Under the policy, the school nurse will have the primary
33 responsibility for the emergency administration of an opioid
34 antidote. The board of education, board of trustees of a charter
35 school, or chief school administrator of a nonpublic school will
36 designate additional employees who volunteer to administer an
37 opioid antidote in the event that a person experiences an opioid
38 overdose when the nurse is not physically present at the scene.

39 The bill directs the Department of Education, in consultation
40 with the Department of Human Services and appropriate medical
41 experts, to establish guidelines for school districts, charter schools,
42 and nonpublic schools in developing their policies for the
43 administration of opioid antidotes. The guidelines will require that
44 each school nurse, and each employee designated by the board of
45 education, board of trustees of a charter school, or chief school
46 administrator of a nonpublic school pursuant to the bill's
47 provisions, receive training on standardized protocols for the
48 administration of an opioid antidote to a person who experiences an

1 opioid overdose. The training will include the overdose prevention
2 information described in subsection a. of section 5 of the “Overdose
3 Prevention Act,” P.L.2013, c.46 (C.24:6J-5).

4 The bill provides immunity from liability for school nurses and
5 other employees or agents of a board of education, charter school,
6 or nonpublic school, and prescribers of opioid antidotes for a
7 school, for good faith acts or omissions consistent with the bill’s
8 provisions. The bill also stipulates that school districts may enter
9 into shared services arrangements for the provision of opioid
10 antidotes; and that funds made available pursuant to P.L.1991,
11 c.226 (C.18A:40-23 et seq.) may be used in nonpublic schools to
12 comply with the provisions of the bill.

13 In addition, the bill amends the “Overdose Prevention Act,”
14 P.L.2013, c.46 (C.24:6J-1 et seq.), to: (1) include schools, school
15 districts, and school nurses among the recipients that may be
16 prescribed opioid antidotes through a standing order; and (2)
17 provide that immunity from liability for opioid antidote
18 administration in accordance with the Overdose Prevention Act will
19 be applicable to schools, school districts, school nurses, and other
20 employees or agents of a board of education, charter school, or
21 nonpublic school who administer, or permit the administration of,
22 opioid antidotes in good faith under the provisions of the bill.