Standards of Delegation for School Nurses
In
New Hampshire

The New Hampshire School Nurses Association has prepared this guide as the standard of nursing delegation in the school setting.

The purpose is to deliver the safest health care for each and every student during the school day.

Revised March 3, 2022
**What is Delegation?**

According to the National Council State Boards of Nursing (NCSBN) and the American Nurses Association (ANA) delegation is a process that is utilized by the nurse to direct assistive personnel to perform nursing tasks or activities. However, the NCSBN defines it as a transfer of authority, whereas, the ANA defines it as a transfer of responsibility. In both of these definitions the nurse is delegating another person to perform a nursing task or activity which that individual would not normally be allowed to perform. Both the NCSBN and the ANA state that the nurse always retains accountability for the delegation. (NCSBN, ANA 2019)

**The NH Board of Nursing (NHBON) Rules NUR 101.08 and 101.07 defines delegation and delegatee as follows:**

Nur 101.08 “Delegation” means the transfer, at the discretion of the nurse, of authority for the performance of a task of client care from the licensed nurse with authority to perform the task to someone who does not otherwise have such authority. **Source.** (See Revision Note at chapter heading for Nur 100) #5887, eff 8-26-94; ss by #6778, eff 6-26-98; ss by #7736, eff 8-6-02; ss by #8777, eff 12-23-06; ss by #10296, eff 3-22-13; ss by #10569, eff 4-17-14 (from Nur 101.07)

Nur 101.07 “Delegatee” means the person to whom a licensed nurse delegates a task of client care. **Source.** (See Revision Note at chapter heading for Nur 100) #5887, eff 8-26-94; ss by #6778, eff 6-26-98; ss by #7736, eff 8-6-02; ss by #8777, eff 12-23-06; ss by #10296, eff 3-22-13; ss by #10569, eff 4-17-14 (from Nur 101.06)

The NH BON delegation rules indicate that the nurse delegates nursing *related* activities or tasks. Nur 404.03 **Definitions** (c) “Nursing task” means a procedure that requires nursing education and a license as a registered nurse or licensed practical nurse to perform.

One of the five principles of the National Association of School Nurses (NASN) 21st Century School Nursing Frameworks is Care Coordination. Within the Care Coordination Principle, one of the components is that of Delegation. The component of delegation requires communication and collaboration between the school nurse, healthcare providers, school administrators, parents, teachers, staff and the assistive personnel (AP) in order for the nurse to properly institute this component. (NASN, 2017)
New Hampshire Board of Nursing Rules on Delegation

Before delegating, the school nurse must review the NH BON rules, NUR 404.01-404.12, for delegating to licensed and unlicensed personnel.

Per New Hampshire Board of Nursing, Nur 404.01 Purpose. (a) The purpose of Nur 404.01 to Nur 404.07 is to regulate the delegation of tasks of client care by licensed nurses to licensed and unlicensed persons, pursuant to RSA 326-B:28 and RSA 326-B:29. Per NHBON Nur 404.06 Delegation of Nursing Tasks.

(a) To delegate a nursing task, the delegating nurse shall:

(1) Assess the client to ensure the client’s condition is stable and predictable pursuant to Nur 101.21;

(2) Ensure the task does not require nursing assessment and consider:
   a. The nature of the task, the complexity, and the risks involved;
   b. The delegate skills necessary to safely perform the task within the care setting and without the direct supervision of the delegating nurse; and
   c. The willingness of the delegate to perform the task;

(3) Teach the task to the prospective delegate;

(4) Observe the prospective delegate performing the task to ensure that the task is performed safely and accurately;

(5) Upon finding the delegate competent at the task, delegate the task and instruct the delegate that the delegation is specific to the specified client only and not transferable to another client;

(6) Document the delegation and the delegation process and leave written instructions with the delegate, as appropriate;

(7) Supervise the delegate and provide ongoing evaluation at a frequency determined by consideration of the following: a. The complexity of the delegated task of client care; b. The condition of the client; c. The skill level of the delegate; and d. The familiarity of the delegate with the environment in which the task is to be performed; and

(8) Rescind the delegation if: a. The client’s condition changes in a way that renders the delegation no longer safe or appropriate; b. The delegate proves unwilling or incompetent to
perform the delegated task; c. The client objects to the delegation; or d. The delegating nurse is no longer able to supervise the performance of the delegated task. The delegating nurse shall notify the delegate and the delegatee’s supervisor of a rescission.

(b) A licensed nurse shall report to the board an attempt to coerce the delegation of a task of client “care in violation of RSA 326-B: 29, II. Source. #7741, eff 8-13-02; ss by #8873, eff 4-24-07; ss by #10299, eff 3-22-13; ss by #10571, eff 4-17-14; renumbered by #10953 (from Nur 404.05); ss by #11082, eff 4-26-16

The New Hampshire Department of Education (NH DOE)

Ed 311.02 (d) the school nurse may delegate the administration of medications, if appropriate, to others pursuant to RSA 326-B and NUR 404.

Ed 311.02 (f) if the school Nurse is not available the building principal or designee is permitted to assist the student in taking required medications by

1. Making such medications available to the student; and

2. Observing the student as he/she takes or does not take his/her medication;

3. Recording whether the student did or did not take his/her medication.

How is “a school day” defined when it comes to medication administration during the school day?

In New Hampshire, a school day includes any and all school sponsored activities in which students participate. All students, including students with special healthcare needs, have the right to participate in all school sponsored activities including field trips and events scheduled outside of regular school hours such as sports, clubs, social activities.

NH Department of Education rules include:

311.02 For the purpose of this rule School Day means any time during the day, afternoon, or evening when a child is attending school or other school related activity.
306.12 School Activities are field trips, school sports events, and other such gatherings that are planned for students.

What if the school nurse feels that delegation is not safe?

If the school nurse care cannot be safely delegated, a licensed nurse will need to accompany the student on a field trip and/or to a school sponsored activity.
How to determine when to delegate in the school setting

Nurses are accountable to: (1) state laws, rules, and regulations; (2) employer/agency regulations, and (3) standards of professional school nursing practice, including those pertaining to delegation. The decision to delegate is a serious responsibility that the school nurse determines on a case-by-case basis based on the needs and condition of the student, stability and acuity of the student’s condition, potential for harm, complexity of the task, and predictability of the outcome.

Prior to delegation, a student assessment is required to guide the school nurse in determining the level of training and supervision required for safe delegation for this specific student and assignment. Only the school nurse determines how closely and often an unlicensed individual must be supervised and reassessed. If an individual who has been assigned by a school administrator is not suitable for the task, whether it is due to lack of education, attentiveness, availability or proximity, the registered nurse must work with administration to locate a better suited individual. The school nurse adheres to the state nurse practice act and standards of nursing practice, even if it conflicts with an administrator’s directives.

The school nurse alone makes the decision to delegate for the safe delivery of healthcare in the school setting. When the school nurse determines that delegation is appropriate, the school nurse must develop an individualized healthcare plan (IHP) outlining the level of care and health care interventions needed by the student and indicating which tasks can and cannot be delegated. Further, the continuous process of evaluation should be based on outcomes of care, ensuring that the delegated task is completed properly and produces the desired outcome. The school nurse delegating a nursing related activity or task within the student’s individualized health care plan must be available to the delegatee for consultation either in person or by phone. The NH Department of Education makes the following provision around school nurse delegation to a LNA/LPN working in the public school setting. When a Licensed Practical Nurse (LPN) or LNA works in the public school setting, they must work under the supervision of the School Registered Nurse (RN) as per RSA 200:31.

A school nurse and LPN/LNA can work as a team in the same health office. The school nurse has a multi-faceted role in the school setting by supporting the physical, mental, emotional, and
social health of all students in order to maximize success in the learning process. The school nurse has the health expertise essential to school educational teams, reducing the health related barriers to learning, as well as, ensuring a safe environment for the school community. It is the breadth of the nursing activities contained in the school nurse role in the unique nonmedical setting of a school that differentiates the professional registered nurse. The school nurse assigns specific tasks. An LPN/LNA cannot work alone to run the health office. A school health office is a walk-in clinic for unpredictable emergencies and illnesses and the assessment required and evaluation of implemented health care is at the RN level. LPN’s are, per scope of practice under RSA 326-B:13, “(b) planning nursing care for clients with stable conditions”. For example, the school nurse has written a health care plan for a student with diabetes and delegates which aspect of the plan is appropriate for the LPN to implement. If the school nurse determines the student with diabetes is stable, then an LPN could provide the nursing services on a field trip with the student’s written health care plan. The LPN would plan the nursing care for the fieldtrip from the written health care plan. The School Nurse must keep in mind the younger the student, the more difficult the student’s ability to communicate their health care problem.

When an RN or LPN is not available to a school, at least one other person who has a current first aid and CPR certification shall be available per ED 306.12 School Health Services. For clarification, the LPN scope of practice does not allow independent practice. If an LPN is working in the school, the school nurse provides supervision in the same health office or assigns LPN specific health care tasks to individual students based on the care plan. In order to ensure that one trained person is indeed available to students during school hours and during scheduled school activities, it may necessitate training a variety of personnel. Being available means they must be on school grounds during school hours or present at scheduled school activities so that they can provide emergency care immediately. Per NH DOE Technical Advisory 306:12 School Health Services (2016)

**Can the School Nurse delegate?**

Yes, however school nurses are accountable to the NH Nurse Practice Act, the NH State Department of Education and the NH Board of Pharmacy and must follow all applicable laws. This includes the delegation of routine and/or emergency medication.
Can a parent delegate in the school setting?

Per NH Department of Education Technical Advisory re: Ed 311.02 A school nurse alone has the authority to delegate medication administration and may delegate only if appropriate under the Nurse Practice Act. Parents may not delegate medication administration directly in the public school setting.

Ed 311.02 (d) the school nurse may delegate the administration of medications, if appropriate, to others pursuant to RSA 326-B and NUR 404.

Ed 311.02 (f) if the school Nurse is not available the building principal or designee is permitted to assist the student in taking required medications by:

1. Making such medications available to the student; a
2. Observing the student as he/she takes or does not take his/her medication;
3. Recording whether the student did or did not take his/her medication.

Any prescription medication to be taken by a public school student, during the school day, requires the involvement of a school nurse regardless of the route of administration. The school nurse must verify the prescription, parental authorization, and accuracy of emergency contact information. The school nurse must also have in place a system to document adverse reactions to the medication and to safely store the medication. After the above requirements are met, the principal or designee may assist students with their prescriptions if the nurse is unavailable. This assistance consists of providing the medication to the student then observing and documenting that the student took the medication. However, if the medication requires administration, that is, the student cannot take the medication by themselves with the assistance described, only the school nurse or an appropriate delegate may administer the prescription. A school nurse alone has the authority to delegate medication administration and may delegate only if appropriate under the Nurse Practice Act. Parents may not delegate medication administration directly in the public school setting. Ideally, the school nurse will work with the parent and/or guardian to identify appropriate delegates since parental approval and authorization is required. (Per NH Department of Education Technical Advisory re: Ed 311.02)
If, in conjunction with medication administration, the student requires a comprehensive nursing assessment and/or evaluation, this must be done by an RN and cannot be delegated. Supervision will be provided. The nurse shall develop a system to ensure the delegatee will follow a care plan or an emergency care plan, especially if the school nurse will not be available for consultation or assistance at the time the medication will be administered. The established plan must take into consideration the individual student needs and the context when the medication may be needed (e.g., location, activities, availability of EMS, availability of parent or guardian). It may include instructions for calling 911 and/or the parent as appropriate as well as ensuring immediate and adequate first aid if needed. (Per NH Department of Education Technical Advisory re: Ed 311.02)

**What about Emergency Medications?**

The administration of medications to treat an emergent health crisis requires the school nurse to prepare a student-specific Individual Emergency Health Care Plan. This must include a complete and thorough review of the student health history, determination of the potential need for emergency medication, and development of a very specific plan for the administration of necessary medication. Consideration must include the student, family, school administration, and school staff as well as the stability of the student health status. Epinephrine auto injectors and asthma inhalers are part of First Aid training. The school nurse will review the appropriate use of said device as prescribed in the student Emergency Action Plan.

The language of the NH Board of Nursing rules has been changed to include the necessary assessment of the stability of the patient by the Licensed Nurse. In the school setting this would be the School Nurse.

Nur 101.21 “Stable client” means a client whose overall health status, as assessed by a licensed nurse, is at the expected baseline or with predictable or expected responses that can occur with known chronic or long term medical conditions.

**Recommended Criteria for Selection of Emergency Medication Delegate**

In choosing a delegate, it is recommended that the school nurse consider this person’s experience in emergency events/medications.
Before delegating to unlicensed school personnel the following criteria must be met:

1. The individual must be CPR and First Aid hold current CPR and First Aid certification.

2. The individual must be willing to learn how to perform the task of administering the emergency medication during an emergent event.

3. The individual must participate in initial training by the School Registered Nurse, demonstrate skill required, followed by quarterly review of said task.

4. The individual must sign a designated form stating they have been trained and willing (not coerced) to assume responsibility to administer emergency medication.

5. The individual must be an employee of the School District.

Delegation of Glucagon

1. The student must be competent in self-management of his/her diabetes.

2. The student must have a current Individual Health Care Plan and Emergency Health Action Plan that indicates the student self-manages his/her diabetes, signed by parent, student and health care provider.

3. Delegatee is identified in the Individual Health Plan.

4. Delegatee is an individual known to the student.

Delegation of Diastat/midazolam

1. The student must have chronic seizure activity in a predictable pattern.

2. Parent, student, and health care provider document agreement of the delegation of emergency Diastat or Midazolam to be given by an unlicensed school personnel.

3. The student must have a current Individual Health Care Plan and Emergency Health Action Plan that provides detailed description of this student’s seizures and protocol.

4. Delegatee is identified in the Individual Health Care Plan.
5. Delegatee is an individual known to the student.

Helpful Guidance regarding Delegation:

Make sure that the person you delegate to understands that they cannot delegate this task to another person.

When you educate those who will be delegated to be sure that they both hear and understand the training.

When delegating a task be sure that you know the following about the student: (a.) any recent changes in medication (b.) recent 911 calls (c.) recent hospitalizations. If any of these have occurred or you do not know the answer to any of these questions you would not want to delegate a task.

Further consider before delegating: Is the plan for monitoring known chronic medical conditions unchanged for this client? Are medications identified in the medical plan of care unchanged? Is the client free from other medical conditions that may have an impact on their baseline or their expected responses to known chronic/long term medical conditions?

Five Rights of Delegation:

1. The right task
2. Under the right circumstances
3. To the right person
4. With the right directions and communication and
5. Under the right supervision and evaluation

Frequently Asked Questions about Delegation

These questions were generated for an Evening of Discussion that was hosted by the New Hampshire Board of Nursing and the New Hampshire School Nurses Association on August 26th, 2014.

Is it within the NH BON NUR 404 rules to:

1. Delegate emergency Intramuscular medications to unlicensed school personnel (lay person)?

   Yes, providing that the person to whom the task is delegated has been trained/educated, accepts the responsibility and their competency is periodically evaluated.
2. Delegate administration of rectal valium for seizure to unlicensed school personnel (lay person)?

Yes, providing the person to whom the task is being delegated has been trained/educated, accepts the responsibility, and their competency is periodically evaluated.

3. Delegate emergency medications, other than the medications that fall under standard first aid program for the layperson (rescue inhalers and epi-pens), to the unlicensed school personnel on a field trip?

Yes, providing the person to whom the task is being delegated has been trained/educated, accepts the responsibility, and their competency is periodically evaluated. The nurse must confirm that the unlicensed person accepts the responsibility and understands that they cannot delegate this task to another person.

4. Can a School Nurse delegate emergency medication when he/she is unavailable to provide supervision, such as after-school activities, evening and weekend programs?

Yes, under education law, the child in the public school setting is entitled to attend any school sponsored event and the parent/guardian is not required to attend. It is the school’s responsibility to provide the necessary health care needs of the child so as to allow access to attend the school sponsored event. The person to whom this task is delegated must be trained/educated by the school nurse and their competency is evaluated periodically. The nurse must confirm that the unlicensed person accepts the responsibility and understands that they cannot delegate this task to another.

Is it within the scope of practice of the school nurse to:

5. Administer over-the-counter medications with a parent/guardian permission and no health care provider medication order?

YES and NH BON reaffirmed this response on February 27, 2021.

However, the first dose of any medication, other than emergency medications, should not be given in school because you do not know how the individual will react to the medication.

Other questions relating to NUR 404 rules:

In the event a non-nurse school administrator who is the school nurse’s superior, directs the school nurse to train an unlicensed employee on emergency medication administration and the school nurse feels this is an inappropriate and unsafe delegation, what should the school nurse do when being coerced into delegation?

The School Nurse should educate the School Administration and School Board, if appropriate regarding the all state regulations pertaining to delegation. The nurse must document her actions and meetings and keep this documentation in her personal (not
What recommendations would you have for a glucagon training program for lay people working in the school setting?

The delegate must be currently certified in CPR and First Aid. The minimum basic training must include:

• The basics of diabetes: the disease process, management of symptoms, the effect of exercise and illness on blood sugars, why care is required at school, the basics of diabetes care at school, short and long term consequences of diabetes.

• How to manage mild to moderate hypoglycemia, as well as severe hypoglycemia Glucagon-what is glucagon? When would it be used?, side effects, administration technique. Review and successfully demonstrate proper administration using checklist provided with this document

• Legal considerations

• Review and document an understanding of the implementation of the student’s Emergency Action Plan.

See the following sample skills checklists provided for Glucagon Administration, Diastat Administration, and Epi-Pen Administration. There are extra columns to use for review dates.
# Glucagon Administration Checklist

Employee Name: _________________________ School: ________________________

Instructor: _______________________________________________________________

Date of Initial Training/Demo __________________ Date of Review: ______________

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<tr>
<td>1.</td>
<td>Put on Gloves</td>
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<tr>
<td>2.</td>
<td>Remove the flip-off seal from the bottle of glucagon. Wipe rubber stopper on the bottle with an alcohol wipe.</td>
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<td>3.</td>
<td>Remove the needle protector from the syringe and inject the entire contents of the syringe into the bottle of glucagon. (held upright) DO NOT REMOVE THE PLASTIC CLIP FROM THE SYRINGE. Remove the syringe from the bottle.</td>
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<td>4.</td>
<td>Swirl the bottle gently until the glucagon dissolves completely. Glucagon should not be used unless the solution is clear and of a water-like consistency.</td>
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5. Using the same syringe, hold the bottle upside down and, making sure the needle tip remains in the solution, gently withdraw all of the solution (1 mg mark on the syringe) from the bottle. (Children who weigh less than 44 lbs will get half of the solution)

6. Remove the needle from the vial, hold the syringe upright, and remove the bubbles from the syringe. To remove the bubbles, flick or tap the syringe until all bubbles move to the top of the syringe and expel the air until only medication is left.

7. Expose the injection site (upper, outer area of arm or thigh). Use the other hand to clean the injection site with alcohol.

8. Insert the needle into the loose tissue under the cleansed injection site and inject all (or ½ for children under 44 lbs) of the solution by pushing the plunger.
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<td>9.</td>
<td>Turn the patient on his/her side. When the unconscious person awakes, he/she may vomit. Turning the patient on his/her side will prevent him/her from choking.</td>
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<td>10.</td>
<td>Call 911 and tell them the glucagon has been used.</td>
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<td>11.</td>
<td>Feed the patient as soon as he/she awakens and is able to swallow by giving them a fast acting source of sugar (soft drink or juice) and a long acting source of sugar (crackers &amp; cheese or a meat sandwich)</td>
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# Diastat Administration Checklist

Employee Name: _________________________  School: _______________________

Instructor: _______________________________________________________________

Date of Initial Training/Demo __________________  Date of Review: _____________

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<tr>
<td>1.</td>
<td>Put on Gloves</td>
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<tr>
<td>2.</td>
<td>Put person on their side where they can’t fall</td>
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<tr>
<td>3.</td>
<td>Get the medicine, open the package, and pull out the syringe of Diazepam.</td>
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<td>4.</td>
<td>Verify the dose which is noted right above the red arrow that says dose on the side of the syringe.</td>
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<td>5.</td>
<td>Push up with your thumb and pull to remove the cap from the syringe. Be sure you see the seal pin is removed with the cap.</td>
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<td>6.</td>
<td>Lubricate the rectal tip with lubricating jelly</td>
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<td>7.</td>
<td>Turn the person on their side facing you</td>
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<td>8.</td>
<td>Bend upper leg forward to expose the rectum</td>
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<td>9.</td>
<td>Separate the buttocks and gently insert the syringe tip into the rectum.</td>
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<tr>
<td>10.</td>
<td>Slowly count to 3 while gently pushing the plunger in until it stops</td>
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<td>11.</td>
<td>Slowly count to 3 before removing the syringe from the rectum</td>
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<tr>
<td>12.</td>
<td>Slowly count to 3 while holding the buttocks together to prevent leakage.</td>
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<td>13.</td>
<td>Keep the person on their side facing you, note the time given and call 911.</td>
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<td>14.</td>
<td>Continue to observe until EMS arrives.</td>
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# Epi-Pen Administration Checklist

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Instructor: ______________________________________________________________ 
Date of Initial Training/Demo _______________  Date of Review: _________________ 

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<td>1.</td>
<td>Grasp auto-injector firmly in your fist</td>
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<td>2.</td>
<td>Have the orange tip pointing down</td>
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<td>3.</td>
<td>Pull off the blue safety release</td>
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<td>4.</td>
<td>Place the Epi-Pen near the outer thigh, with the orange tip pointing directly at the thigh</td>
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<td>5.</td>
<td>Swing and firmly push against outer thigh, keeping it pointed perpendicular (at a 90% angle) to thigh</td>
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<td>6.</td>
<td>After the “click”, hold firmly for 3 seconds. Must document time/date of epi pen administration.</td>
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<td>7.</td>
<td>Call 911 and give the Epi-Pen to the paramedics when they arrive</td>
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RESOURCES

New Hampshire Board of Nursing

Section 326-B:28 Delegation of Nursing Activities and Tasks.

Section 326-B:29 Delegation; Circumstances Not Subject to Disciplinary Action by the Board of Nursing.

National Council State Boards of Nursing Guidelines for Nursing Delegation

National Guidelines for Nursing Delegation

New Hampshire Department of Education

http://www.gencourt.state.nh.us/rules/state_agencies/ed300.html

Ed 306.02 Medications during the school day

New Hampshire Nurses Association


National Association of School Nurses

Nursing Delegation in the School Setting

The Role of the 21st Century School Nurse

American Nurses Association Document—Delegation in the School Setting: Is it a Safe Practice?


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