# Department Of Human Services Information Bulletin

To: Agency Providers, Distribution

From: Kathy Patrick, Director of the Office of Licensing

**Date:** 7/31/18

Subject: Performing Medical Procedures in the Community

In response to agency inquiries, the Department of Human Services' Office of Program Integrity and Accountability has identified a need for guidelines clarifying the qualifications and training that staff must complete in order to meet the medical needs of individuals with developmental disabilities or persons with head injuries in community residences. Staff who have been otherwise trained in the below-referenced Medical Procedures prior to October 2016 and determined sufficiently competent by the provider agency may be "grandfathered in".

### **Background**

The standards for Community Residences for Individuals with Developmental Disabilities, **N.J.A.C. 10:44A-2.7(c)1i** and for Community Residences for Persons with Head Injuries, **N.J.A.C. 10:44C-2.7(c)1i** state that feeding tube responsibilities shall be delegated to nursing personnel.

**N.J.A.C.** 10:44A-2.7(c)3 and **N.J.A.C.** 10:44C-2.7(c)3 state that persons who work with individuals with seizure disorders, physical disabilities or other identified medical needs shall receive training in the provision of training, assistance and care to those individuals.

### Guidelines

## Feeding tubes

- Surgically implanted feeding tube changing and insertion responsibilities shall be performed only by registered nursing personnel.
- Responsibilities associated with the administration of nutrition, fluids or medication through a feeding tube shall be performed only by licensed nursing personnel.

#### **Medical procedures**

- Procedures including, but not limited to, oral or nasal suctioning, tracheostomy care and management, bladder or supra pubic catheterizations, intramuscular (IM) (including Glucagon) and intravenous (IV) medication administration, and external venous access devices (such as IV tubing, heparin and intrathecal lines) shall only be performed by a registered nurse (RN), or a licensed practical nurse with RN or physician supervision.
- The administration of insulin shall only be performed by unlicensed staff after successful completion of training in insulin administration by a physician, pharmacist, registered nurse or certified diabetes educator, as well as training in the general concepts of diabetes. (See below)
- Testing of blood sugar with a glucometer shall only be performed by unlicensed staff after successful
  completion of training by a trainer who has been determined qualified by a physician, pharmacist,
  registered nurse or certified diabetes educator, using an curriculum approved by a physician,
  pharmacist, registered nurse or certified diabetes educator, as well as training in the general concepts of
  diabetes. (See below)
- Training in the general concepts of diabetes shall be provided by a physician, pharmacist, registered nurse or certified diabetes educator, OR a trainer using an approved curriculum who has been trained, determined qualified, and delegated to do so, by a physician or an RN, OR through the College of Direct Supports (CDS) DDD Disabilities Intensive Course (DIC) on Diabetes.

- The following may only be performed by unlicensed staff after successful completion of training by a trainer who has been trained, determined qualified, and delegated to do so, by a physician or an RN:
  - The monitoring and maintenance of foley and suprapubic catheters, feeding tubes (such as PEG and gastrostomy tubes), implanted devices, (such as vascular access devices (VAD's), Vagal Nerve Stimulators (VNS), pacemakers; and Baclofen pumps);
  - o The management and performance of ostomy care and blood pressure monitoring; and
  - The administration of Epi-Pens, enemas and rectal medications. Epi-pen training provided with First Aid Training is also acceptable.
- Training in medically complex specialized diets must be completed by a qualified trainer, such as a
  dietician, speech therapist, nutritionist or registered nurse, OR a trainer who has been trained by any of
  those professionals and determined qualified. Examples include but are not limited to: PKU, renal,
  cardiac, carbohydrate-controlled, texture-altered, such as nickel or dime sized pieces, chopped, ground,
  pureed, etc.
- The maintenance, monitoring or administration of oxygen, pulse oximitry, nebulizers, C-Pap and Bi-Pap may be performed by unlicensed staff after successful completion of training by a service provider or nursing personnel, or by a trainer who has received such training.