

Policy

MEDICAL MARIJUANA

The board of education recognizes that physical discomfort associated with certain debilitating medical conditions can negatively impact a student's ability to benefit from educational services provided by the school district. The board of education also recognizes that a student diagnosed with a debilitating medical condition may, through the legally prescribed use of medical marijuana, alleviate physical symptoms associated with the debilitating condition that occur during school hours, potentially increasing the student's availability to receive instruction. Therefore in accordance with law (P.L. 2015, c.158), a student who is legally prescribed medical marijuana and who possesses a current registry identification card from the New Jersey Department of Health (NJDOH), may be administered prescribed marijuana by a NJDOH registered primary caregiver.

The New Jersey Compassionate Use Medical Marijuana Act (N.J.S.A. 24:6I-3) provides that medical marijuana may be prescribed for the following debilitating medical conditions:

- A. Seizure disorder, including epilepsy; intractable skeletal muscular spasticity; or glaucoma if any of these conditions are resistant to conventional medical therapy;
- B. Positive status for human immunodeficiency virus; acquired immune deficiency syndrome; or cancer; if any treatment of these conditions cause severe or chronic pain, severe nausea or vomiting, cachexia, or wasting syndrome;
- C. Amyotrophic lateral sclerosis, multiple sclerosis, terminal cancer, muscular dystrophy, or inflammatory bowel disease, including Crohn's disease;
- D. Terminal illness, if the student's physician has determined a prognosis of less than 12 months of life; or
- E. Any other medical condition or its treatment that is approved by the NJDOH by regulation.

New Jersey Department of Health Medical Marijuana Program Authorization

Students authorized to use medical marijuana, including adult students, are not authorized by law to self-administer the medication on school grounds, on the school bus or at school sponsored activities. In all cases, a primary caregiver shall be required to assist with the administration of the prescribed medical marijuana on school grounds, on the school bus, or at school sponsored activities subject to law and this board policy.

In order for the prescribed medical marijuana to be legally administered, the student and primary caregiver shall possess a current registry identification card. The NJDOH shall issue a registry identification card only upon certification from a licensed physician in the State with whom a qualifying patient has a bona fide physician-patient relationship. The physician must be registered with the New Jersey Medical Marijuana Program to legally prescribe medical marijuana.

According to the Medical Marijuana Program the primary caregiver:

- A. Shall be a resident of New Jersey who is at least 18 years old;
- B. Has agreed to assist with a registered qualifying patient's medical use of marijuana, is not currently serving as primary caregiver for another qualifying patient, and is not the qualifying patient's physician;
- C. Has never been convicted of possession or sale of a controlled dangerous substance, unless such conviction occurred after July 19, 2010 and was for a violation of federal law related to possession or sale of marijuana that is authorized under the Compassionate Use Medical Marijuana Act;

- D. Has registered with the NJDOH, and has satisfied the criminal history record background check requirement; and
- E. Has been designated as primary caregiver on the qualifying patient's application or renewal for a registry identification card or in other written notification to the NJDOH.

Verification of Registration Status

The chief school administrator shall submit a written request to the NJDOH Medical Marijuana Program seeking verification of the registration status of the student and the caregiver.

Verification of the registration status of the student and the caregiver shall be requested not less than annually. Documentation of the request made to the NJDOH and any response the district receives from the NJDOH shall be kept in the student's confidential medical records and maintained in the office of the school nurse.

Administration of the Prescribed Medical Marijuana

While on school grounds, the primary caregiver shall be permitted to administer the prescribed medical marijuana in the office of the school nurse. The school nurse may designate other locations on school grounds. When an alternate location on school grounds other than the nurse's office is requested or required for the administration of the prescribed medical marijuana, the school nurse shall document the designated location in the appropriate student record (i.e. confidential medical record, individualized health care plan).

No student shall be permitted to carry the prescribed marijuana medication on school grounds, on school buses or at school sponsored activities. The prescribed medical marijuana shall not be stored on school grounds. It shall be the sole responsibility of the primary caregiver to maintain and administer the medication.

A primary caregiver shall bring the medication to school to administer the medication in the school nurse's office and shall leave school grounds with any remaining medication. Any packaging, containers or other materials associated with the caregiver's administration of the prescribed medical marijuana to the student shall be disposed of in the appropriate receptacle for hazardous materials in the nurse's office and at no other location on school property.

Any form of medical marijuana that is smoked is prohibited on school grounds, on school buses or at school sponsored events.

Liability

Any person in possession of prescribed medical marijuana or using prescribed medical marijuana and acting within the provisions of N.J.S.A. 2C:35-18 Exemption, Burden of Proof and in accordance with the Compassionate Use of Medical Marijuana Act (N.J.S.A. 24:6I-1) shall be immune from criminal liability and professional disciplinary action.

Possession of, or application for, a registry identification card shall not alone constitute probable cause to search the person or property of the person possessing or applying for the registry identification card, or otherwise subject the person or his/her property to inspection.

Date: January 27, 2016
First Reading: February 24, 2016
Second Reading/Adoption: March 22, 2016

Legal References: N.J.S.A. 2C:35-18
N.J.S.A. 24:6I-1 et seq.
See particularly

Exemption, burden of proof
New Jersey Compassionate Use of Medical Marijuana Act

N.J.S.A. 24:6I-4, -5
N.J.S.A. 26:3D-55 et seq. New Jersey Smoke-Free Air Act
N.J.A.C. 8:64-1.1 et seq. Medical Marijuana Program rules
See particularly
N.J.S.A. 8:64-1.1 Confidentiality

P.L. 2015, c.158 concerning medical marijuana

Cross References:

*5131.6	Drugs, alcohol, tobacco (substance abuse)
*5141	Health
*5141.1	Accidents
*5141.2	Illness
*5141.3	Health examinations and immunizations
*5141.21	Administration of medication
*6153	Field trips

*Indicates policy is included in the Critical Policy Reference Manual.

Exhibit

MEDICAL MARIJUANA

CONSENT FOR RELEASE OF MEDICAL INFORMATION

New Jersey Department of Health, Medical Marijuana Program

P. O. Box 360
Trenton, New Jersey 08625-0360

Student Name: _____ Date of Birth _____

Address _____

I understand that as the parent/guardian of the above-named student, I am not obligated to authorize disclosure of any information provided to the New Jersey Department of Health and that refusal to authorize disclosure shall in no way affect my rights or the rights of the above-named student to use medicinal marijuana.

I authorize the New Jersey Department of Health Medicinal Marijuana Program to disclose, to the school district, information verifying the registration and authorization status of the above-named student to use medicinal marijuana for a qualifying medical condition(s) pursuant to the *Compassionate Use Act, N.J.S.A. 24:6l-1 et al.* I understand that the disclosure may contain confidential health information pertaining to the student's medical diagnosis and treatment.

This consent is granted for the sole purpose of verifying the registration status and ongoing authorization of the student according to *N.J.S.A.24:6l-1 et al.* and for no other purpose.

Signature of student's parent/guardian _____

Relationship to Student _____

Date _____

Signature of the school nurse _____

Date _____

MEDICAL MARIJUANA

PRIMARY CAREGIVER CONSENT FOR RELEASE OF INFORMATION

New Jersey Department of Health, Medical Marijuana Program
P. O. Box 360
Trenton, New Jersey 08625-0360

Primary Caregiver Name: _____ Date of Birth _____

Address _____

Student Name: _____ Date of Birth _____

Address _____

I understand that as the primary caregiver of the above-named student, I am not obligated to authorize disclosure of any information provided to the New Jersey Department of Health and that refusal to authorize disclosure shall in no way affect my right to assist the above-named student in the use of medicinal marijuana.

I authorize the New Jersey Department of Health Medicinal Marijuana Program to disclose, to the school district, information verifying my registration and authorization status to assist in the above-named student's use of medicinal marijuana for a qualifying medical condition(s) pursuant to the *Compassionate Use Act, N.J.S.A. 24:61-1 et al.*

This consent is granted for the sole purpose of verifying the registration status and ongoing authorization of the primary caregiver to assist in the use of medicinal marijuana according to *N.J.S.A.24:61-1 et al.* and for no other purpose.

Signature of the primary caregiver _____

Relationship to Student _____

Date _____

Signature of the school nurse _____

Date _____