

# HOUSE BILL REPORT

## SHB 1541

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### As Passed Legislature

**Title:** An act relating to expanding the types of medications that a public or private school employee may administer to include nasal spray.

**Brief Description:** Expanding the types of medications that a public or private school employee may administer to include nasal spray.

**Sponsors:** House Committee on Health Care & Wellness (originally sponsored by Representatives Klippert, Cody, Schmick, Green, Harris, Chandler, Kristiansen, Morrell, Ryu, Angel, Jinkins, Van De Wege and Pollet).

### Brief History:

#### Committee Activity:

Health Care & Wellness: 2/15/13, 2/22/13 [DPS].

#### Floor Activity:

Passed House: 3/5/13, 97-0.

Senate Amended.

Passed Senate: 4/15/13, 48-0.

House Concurred.

Passed House: 4/18/13, 94-0.

Passed Legislature.

### Brief Summary of Substitute Bill

- Allows school employees and parent-designated adults to administer nasal sprays.

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### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 16 members: Representatives Cody, Chair; Jinkins, Vice Chair; Schmick, Ranking Minority Member; Hope, Assistant Ranking Minority Member; Angel, Clibborn, Green, Manweller, Moeller, Morrell, Riccelli, Rodne, Ross, Short, Tharinger and Van De Wege.

**Staff:** Jim Morishima (786-7191).

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

## **Background:**

A public or private school employee may administer oral medications, topical medications, eye drops, or ear drops to children who are in the custody of the public or private school at the time of administration if the following conditions are met:

- the school district or the private school has policies that address:
  - the designation of the employees who may administer the medications;
  - the acquisition of parent requests and instructions; and
  - requests from licensed health professionals prescribing within the scope of their prescriptive authority and instructions regarding students who require medication for more than 15 consecutive school days, the identification of the medication to be administered, the means of safekeeping medications, and the means of maintaining records of the administration of the medications;
- the school district or private school possesses a written, current, and unexpired request of a parent, legal guardian, or other person having legal control over the student to administer the medication to the student;
- the public school district or private school possesses:
  - a written, current, and unexpired request from a licensed health professional acting within the scope of his or her prescriptive authority for administration of the medication, because there exists a valid health reason that makes administration of the medication advisable during school hours or the hours when the student is under the supervision of school officials; and
  - written, current, and unexpired instructions from the licensed health professional regarding the administration of the medication to students who require medication for more than 15 consecutive work days;
- the medication is administered by a designated school employee in compliance with the prescription or written instructions;
- the medication is first examined by the employee administering the medication to determine whether it appears to be in the original container and properly labeled; and
- a physician, advanced registered nurse practitioner, or registered nurse has been designated to train and supervise the designated employee in proper medication procedures.

A school employee, school district, or private school is immune from civil or criminal liability arising from the administration of medications in a manner that complies with state law, the applicable prescription, and applicable written instructions. Similarly, a school employee, school district, or private school is immune from criminal or civil liability for the discontinuance of the medication as long as notice has been given to the parent, legal guardian, or other person having legal control over the student.

## **Summary of Substitute Bill:**

The type of medication that may be administered by a school employee is expanded to include nasal spray. If a school nurse is on the premises, he or she must administer a nasal spray that is a legend drug or a controlled substance. If no school nurse is on the premises, a non-nurse employee or parent-designated adult may administer a spray that is a legend drug or a controlled substance as long as he or she summons emergency medical assistance as soon as practicable.

"Parent-designated adult" is defined as a volunteer or school district employee who receives additional training from a health care professional or expert in epileptic seizure care selected by the parents and who provides care consistent with the child's individual health plan. The board of directors of the school district (Board) must allow school personnel who have received appropriate training and volunteered for such training to administer a nasal spray that is a controlled substance or a legend drug.

A parent-designated adult who is a school district employee must file a voluntary, written, current, and unexpired letter of intent stating the employee's willingness to be a parent-designated adult. An employee who refuses to file a letter may not be subjected to reprisal or disciplinary action.

The Board must designate a physician, osteopathic physician, registered nurse, or advanced registered nurse practitioner (who is not responsible for the supervision of the parent-designated adult) to consult and coordinate with the student's parents and health care provider to train and supervise the appropriate school district personnel in proper procedures for care for students with epilepsy to ensure a safe, therapeutic learning environment. The training may also be provided by a nationally certified epilepsy educator. Parent-designated adults who are school employees must receive the training. Parent-designated adults who are not school employees must provide evidence of comparable training. Parent-designated adults must also receive training from a health care professional or expert in epileptic seizure care selected by the parents.

**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony:**

(In support) This bill will save the lives of children by allowing school personnel to administer nasal sprays used to interrupt epileptic seizures. These sprays are easy to administer. A child having a seizure can suffer brain damage within three minutes. To not allow a school employee to administer an anti-seizure nasal spray is unconscionable.

(With concerns) Nasal sprays used to interrupt seizures can result in respiratory depression and other serious consequences. The solution to this issue is not to allow untrained personnel to administer the sprays; the solution is to employ more school nurses. Nurses know what to look for and know how to assess a patient before and after a nasal spray has been administered. The Nursing Care Quality Assurance Commission is considering addressing this issue through an interpretive statement; this bill will interrupt that process. Non-nurse personnel have other responsibilities and it is unfair to place this burden on them.

(Opposed) None.

**Persons Testifying:** (In support) Representative Klippert, prime sponsor; Brent Hewmann, Epilepsy Foundation Northwest; Heather Franklin; and Brian Wiele, Epilepsy Foundation.

(With concerns) Nancy Sutherland, Edmonds School District and School Nurse Organization of Washington; Cindy Novak, Tahoma School District and School Nurse Organization of Washington; and Sofia Aragon, Washington State Nurses Association.

**Persons Signed In To Testify But Not Testifying:** None.