

HOUSE BILL REPORT

HB 1530

As Reported By House Committee On:
Education

Title: An act relating to medicinal and catheterization administration in public schools.

Brief Description: Providing medical assistance in public schools.

Sponsors: Representatives Quall, Talcott, Doumit, Lantz, Kenney, Veloria, Santos, Bush and Rockefeller.

Brief History:

Committee Activity:

Education: 2/10/99, 2/25/99 [DPS].

Brief Summary of Substitute Bill

- School districts and private schools must obtain written agreements from employees who do not have nursing training before requiring the employees to administer oral medications to students.
- School employees who do not have nursing training may refuse to administer oral medications or bladder catheterizations to students if student safety is involved. The employees cannot be dismissed or terminated, but their hours may be reduced if their employer needs to hire additional personnel to perform those services.

HOUSE COMMITTEE ON EDUCATION

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 14 members: Representatives Quall, Democratic Co-Chair; Talcott, Republican Co-Chair; Haigh, Democratic Vice Chair; Schindler, Republican Vice Chair; Carlson; Cox; Keiser; Rockefeller; Santos; D. Schmidt; Schual-Berke; Stensen; Sump and Wensman.

Staff: Susan Morrissey (786-7111).

Background:

Federal and state laws require the state to assure that appropriate special education and related services are provided to children with disabilities. In Irving Independent School District v. Tatro, the United States Supreme Court held that clean intermittent catheterization is both a related and supportive service under the federal Education of the Handicapped Act. Any school that receives funds under the act is required to provide this service if the procedure is necessary for a student to benefit from the student's educational program.

State law requires school districts and private schools to adopt policies on the administration of oral medication or the provision of bladder catheterization if schools provide this service for students during school hours. The policies must address, among other things, which employees may administer the medications or the catheterization, and how schools acquire parent and physician requests to medicate or catheterize. Nonlicensed school employees who provide oral medication or catheterization for students must receive training from a physician or registered nurse.

Oral Medication

Before school personnel administer oral medication, certain procedures must be followed. The school must obtain the following: a written request from a parent or legal guardian; a written explanation from a licensed physician or dentist on why the medication needs to be administered during school hours; and directions from the dentist or doctor for administering the medicine. The public or private school employee who administers the medication has to follow the prescription, and ensure that the medication appears to be in its original container and is properly labeled. A registered nurse or advanced registered nurse practitioner must train any public or private school employee who administers oral medication in proper medication procedures.

Catheterization

Public and private schools may require employees to provide clean, intermittent bladder catheterization of students, or help students in performing a self-catheterization. If a school district or private school provides catheterization services, then the school must comply with rules adopted by the Washington State Nursing Care Quality Assurance Commission. The rules require the school to obtain a written request for the catheterization from the parents or guardian and the student's physician and written instructions from a registered nurse or advanced registered nurse practitioner. The instructions must designate the person to provide the catheterization and indicate any necessary supervision. Finally, training is required of any employee who performs catheterization or assists a student in self-catheterization, if the employee is not a licensed practical nurse. The training must be provided by a physician, advanced registered nurse practitioner, or registered nurse. The school

must develop the catheterization policy in accordance with collective bargaining agreements.

Summary of Substitute Bill:

School districts and private schools must obtain written agreements from employees who do not have nursing training before requiring the employees to administer oral medication to students. The schools must maintain a record of the agreements.

With some exceptions, school employees may file a written letter of refusal to administer oral medications to students or to perform clean intermittent bladder catheterizations for students if student safety is involved. This letter of refusal may not constitute grounds for employee dismissal or termination of employment. However, it may result in a reduction of the employees' work hours if the school district must hire additional personnel to administer the medications or the catheterization procedures as a result of the refusal.

These provisions do not apply to registered nurses, practical nurses, registered nurse practitioners, nurse practitioners, or nursing assistants.

Substitute Bill Compared to Original Bill: The ability of school employees to refuse to administer oral medications or catheterization procedures must be based on student safety. If the refusal results in a need to hire additional personnel, the employees' work hours may be reduced.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: Ninety days after adjournment of session in which bill is passed.

Testimony For: (Original bill) In Washington, the number of school nurses per school district is below the national average. Therefore, some untrained and undertrained teachers and classified staff are required to perform medical services for students. This situation is stressful for employees, and potentially dangerous for students. The types and volume of these medical services assigned to school secretaries and paraprofessionals is growing at a rapid pace. School bus drivers are also impacted by the escalating medical requirements that students bring to school. Employees who have not received nursing training should have the same right to refuse to provide medical services as that given by law to nursing assistants. If schools were able to hire more nurses, this problem would probably not exist.

Testimony Against: (Original bill) Although the goal of this legislation is laudatory, it is potentially very expensive for school districts. If the Legislature passes the law without providing the funding necessary to hire more nursing staff, it will be handing the districts an unfunded mandate. The entire statute needs to be overhauled, so changing it piecemeal will only complicate the issue of health care in schools.

Testified: (Support)(Original bill) Rep. Quall, prime sponsor; Doug Nelson and Pat Wenzel, Public School Employees; Catherine Pitts, Washington Association of Education Office Professionals; Bonnie Boehnke, Public School Employees and Washington Education Association; Ann Simons, School Nurse Organization of Washington; and Gary King, Washington Education Association.

(Support with concerns)(Original bill) Joan Yoshitomi and Judy Maire, Office of Superintendent of Public Instruction.

(Opposed)(Original bill) Lorraine Wilson, Washington State School Directors' Association; and Barbara Mertens, Washington Association of School Administrators.