
Health Care & Wellness Committee

HB 1039

Brief Description: Concerning opioid overdose medication at kindergarten through twelfth grade schools and higher education institutions.

Sponsors: Representatives Pollet, Cody, Slatter, Leavitt, Callan, Senn, Lekanoff, Kloba, Peterson, Valdez, Kilduff, Ryu, Irwin, Appleton, Jinkins, Macri, Wylie, Goodman, Doglio, Stanford, Stonier and Frame.

Brief Summary of Bill

- Requires high schools in school districts with over 2,000 students, and allows other public schools, to obtain and store opioid overdose medication to assist a person at risk for an opioid-related overdose.
- Directs the Office of the Superintendent of Public Instruction to develop opioid-related overdose guidelines and training requirements for public schools and school districts.
- Requires certain public institutions of higher education to develop a plan to maintain and administer opioid overdose medication in residence halls.

Hearing Date: 1/25/19

Staff: Chris Blake (786-7392).

Background:

Naloxone is a legend drug that is used to prevent opioid-related overdoses. Opioids, such as heroin, morphine, and oxycodone, act on opioid receptors in the brain and nervous system, causing depression of the central nervous system and respiratory system. An excess amount of opioid in the body can cause extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death. Naloxone, and other opioid overdose medications, block the body's opioid receptors and reverse the effects of the opioid. Naloxone may be injected in muscle or intravenously, or sprayed into the nose.

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.

A health care practitioner who is authorized to prescribe legend drugs may prescribe, dispense, distribute, and deliver an opioid overdose medication by a standing order or protocol to a recipient in a position to assist a person at risk of experiencing an opioid-related overdose. "Standing order" and "protocol" mean written or electronically recorded instructions prepared by a prescriber for distribution and administration of a drug by designated and trained staff or volunteers, as well as other actions and interventions to be used upon the occurrence of defined clinical events to improve patients' timely access to treatment. At the time of prescribing, dispensing, distributing, or delivering the opioid overdose medication, the practitioner must inform the recipient that, as soon as possible after administration, the person at risk of experiencing an overdose should be transported to a hospital or a first responder should be summoned.

Any person or entity may lawfully possess, store, deliver, distribute, or administer an opioid overdose medication pursuant to a practitioner's prescription or standing order. Such persons and entities are not subject to civil or criminal liability for their authorized actions related to opioid overdose medication or the outcomes of their authorized actions if they act in good faith and with reasonable care.

In general, the school code specifies that before trained school personnel may administer medication to a student, the public school district or private school must receive a written, current, unexpired request from a parent or guardian and a prescription from a health care practitioner, among other requirements. An exception, however, is provided for the maintenance and administration of epinephrine to respond to a potentially life-threatening allergic reaction, where the epinephrine is prescribed by standing order.

Summary of Bill:

Public schools, school districts, and educational service districts may obtain and store opioid overdose medication through a standing order to assist a person at risk for an opioid-related overdose. A school district with at least 2,000 students must have at least one set of opioid overdose medication doses at each high school.

The school-owned opioid overdose medication may be distributed or administered by a school nurse, a health care professional or trained staff person at a school-based health clinic, or designated trained school personnel. The medication may be used on school property and on field trips or sanctioned excursions.

By the 2019-20 academic year, the Office of the Superintendent of Public Instruction (OSPI), in consultation with the Department of Health, must develop opioid-related overdose policy guidelines and training requirements for public schools and school districts. The guidelines and training requirements must include information about identifying opioid-related overdose symptoms, obtaining and maintaining opioid overdose medication on school property through a standing order, distributing and administering opioid overdose medication by designated trained personnel, and sample standing orders for opioid overdose medication. In addition, the guidelines may include recommendations for storing opioid overdose medication and may allow for opioid overdose medication to be obtained, maintained, distributed, and administered by health care professionals and trained staff at a school-based health clinic.

By January 1, 2020, school districts must adopt a policy if they have a school within the district that obtains, maintains, distributes, or administers opioid overdose medication or if the school district has more than 2,000 students.

A person or entity is not subject to civil or criminal liability for their lawfully authorized actions related to opioid overdose medication or the outcomes of their lawfully authorized actions if they act in good faith and with reasonable care. If a student is injured or harmed due to the administration of opioid overdose medication that a health care practitioner has prescribed and a pharmacist has dispensed to a school, the practitioner and pharmacist may not be held responsible for the injury unless he or she acted with conscious disregard for safety.

Beginning with the 2019-20 academic year, a public institution of higher education with a residence hall that houses at least 100 students must develop a plan to maintain and administer opioid overdose medication in and around the residence hall, and to train designated personnel to administer opioid overdose medication. The plan may identify the ratio of students to opioid overdose medication doses, the designated trained personnel, and whether designated trained personnel may cover more than one residence hall.

The OSPI must develop a grant program for public schools and public higher education institutions to train personnel on the administration of opioid overdose medication. In addition, training may be offered by nonprofit organizations, higher education institutions, and local public health organizations.

Legislative findings are made regarding the number of deaths from opioids, options for preventing opioid overdose deaths, ways to expand access to opioid overdose medications, and the lack of data regarding opioid overdoses occurring at schools and whether schools have opioid overdose medication and training for using opioid overdose medication. Legislative recognition is made for the steps taken to respond to the opioid overdose epidemic.

Appropriation: None.

Fiscal Note: Not requested.

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