

SENATE BILL REPORT

SB 5464

As of February 13, 2019

Title: An act relating to opioid overdose medication at schools with grades seven through twelve and higher education institutions.

Brief Description: Concerning opioid overdose medication at schools with grades seven through twelve and higher education institutions.

Sponsors: Senators Frockt, Das, Darneille, Takko, Palumbo, Sheldon, Keiser, Wilson, C., Hunt, Saldaña and Kuderer.

Brief History:

Committee Activity: Health & Long Term Care: 2/08/19.

Brief Summary of Bill

- Permits public schools to obtain and store opioid overdose medication.
- Requires public schools with any of the grades 7-12 in school districts with over 2000 students to obtain and store opioid overdose medication.
- Directs the Office of the Superintendent of Public Instruction to develop opioid related overdose guidelines, training requirements and grant program for public schools and school districts.
- Requires certain public higher education institutions to develop a plan to maintain and administer opioid overdose medication in residence halls.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Staff: LeighBeth Merrick (786-7445)

Background: Opioids include prescription pain medication, heroin, and synthetic opioids such as fentanyl. An excess amount of opioid in the body can cause extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death. Opioid overdose medications such as, Narcan, Naloxone, and Evzio, can be administered to an individual experiencing an opioid overdose, to rapidly restore normal breathing. These medications 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 the opioid overdose medication is provided, 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, and not be 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.

Under state law, 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 is provided for maintaining and administering 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 2000 students must have at least one set of opioid overdose medication doses in each school with any of the grades 7-12.

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 2000 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 the practitioner and pharmacist acted with conscious disregard for safety.

Beginning with the 2019-20 academic year, a public higher education institution 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.

OSPI must develop a grant program for public schools with any of the grades 7-12 and public higher education institutions to train personnel on administering opioid overdose medication. In addition, training may be offered by nonprofit organizations, higher education institutions, and local public health organizations.

Appropriation: The bill contains a section or sections to limit implementation to the availability of amounts appropriated for that specific purpose.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

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

Staff Summary of Public Testimony: PRO: Opioid overdose medications saves lives as should be treated similarly to epi-pens and defibrillators that are permitted to be used in schools. Most of the opioid overdose medications are being targeted towards systems that serve adults. It is important schools be included in this since youth are reporting that they have abused opioids. This should not be limited to grades 7-12 and should include all of K-12.

Persons Testifying: PRO: Senator David Frockt, Prime Sponsor; Corina Pfeil; Nicole Klein, Office of the Superintendent of Public Instruction; Ed Petersen, Pierce County Recovery Coalition.

Persons Signed In To Testify But Not Testifying: No one.