

---

## Education Committee

---

### HB 2390

**Brief Description:** Regulating opioid medications at educational institutions.

**Sponsors:** Representatives Pollet, Haler, Tarleton, McBride, Peterson, Dolan, Frame, Valdez, Kilduff, Senn, Stanford, Kloba, Clibborn, Macri, Ryu, Doglio, Riccelli and Gregerson.

#### Brief Summary of Bill

- Allows kindergarten through twelfth grade (K-12) schools to obtain, maintain, and administer opioid overdose medication through a standing order from a health care practitioner for the purpose of assisting a person at risk of experiencing an opioid-related overdose.
- Includes provisions related to K-12 school opioid-overdose policies, staff trainings, and liability.
- Requires certain public institutions of higher education to develop plans for the maintenance and administration of opioid overdose medication in and around the residence halls.
- Includes reporting requirements.

**Hearing Date:** 1/16/18

**Staff:** Megan Wargacki (786-7194).

#### 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. However, an exception 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:**

#### Kindergarten Through Twelfth Grade Schools.

For the purpose of assisting a person at risk of experiencing an opioid-related overdose, schools may obtain and maintain opioid overdose medication through a standing order, rather than having to receive a written request from a parent or guardian and a licensed health care practitioner to administer opioid overdose medication to a specific student. School is defined to mean a public school, school district, or educational service district with any of grades kindergarten through twelve (K-12).

The following personnel may distribute or administer the school-owned opioid overdose medication to respond to symptoms of an opioid-related overdose: school nurses, designated trained school personnel, and health care professionals or trained staff located at a health care clinic on public school property or under contract with the district. Opioid overdose medication may be used on school property, including the school bus, and during field trips or sanctioned excursions away from the property. School nurses and designated trained school personnel may carry an appropriate supply of school-owned opioid overdose medication on field trips or sanctioned excursions.

By the 2018-19 school year, the Office of the Superintendent of Public Instruction (OSPI), in consultation with the Department of Health (DOH), must develop opioid-related overdose policy guidelines and training requirements for public schools and school districts. These policy

guidelines and training requirements must include information about: The identification of opioid-related overdose symptoms; how to obtain and maintain opioid overdose medication on school property issued through a standing order; the distribution and administration of opioid overdose medication by designated trained school personnel; and sample standing orders for opioid overdose medication. Training for school personnel who have been designated to distribute or administer opioid overdose medication must meet the OSPI's training requirements.

Beginning January 1, 2019, the following school districts must adopt a policy that meets the OSPI's policy guidelines and training requirements: (1) school districts with a school that obtains, maintains, distributes, or administers opioid overdose medication; and (2) school districts with 2,000 or more students.

Subject to funding by the Legislature, the OSPI must develop and administer a grant program to provide funding to public schools with any of grades K-12 and public institutions of higher education (IHE) to train personnel on the administration of opioid overdose medication to respond to symptoms of an opioid-related overdose. The OSPI must publish on its web site a list of annual grant recipients, including award amounts.

#### Higher Education Institutions.

By the beginning of the 2018-19 academic year, public IHEs with a residence hall housing at least 100 students must develop a plan: For the maintenance and administration of opioid overdose medication in and around the residence hall; and for the training of designated personnel to administer opioid overdose medication to respond to symptoms of an opioid-related overdose.

#### Reports.

Annually, beginning September 1, 2019, K-12 public schools and public IHEs must report to the OSPI, the DOH, and their local health department with certain information related to opioid overdose medication, including: The doses of opioid overdose medication obtained and administered; the number and categories of personnel trained to administer the medication; and the number of overdose incidents. Annually, beginning November 1, 2019, the DOH and the OSPI must coordinate to prepare summaries of the opioid-related overdose information, and publish it on their websites in a format that is easy to understand by members of the public.

**Appropriation:** None.

**Fiscal Note:** Requested on January 11, 2018.

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