
Education Committee

SSB 5804

Brief Description: Concerning opioid overdose reversal medication in public schools.

Sponsors: Senate Committee on Early Learning & K-12 Education (originally sponsored by Senators Kuderer, Wellman, Dhingra, Frame, Hasegawa, Hunt, Lias, Lovelett, Nguyen, Nobles, Stanford, Valdez and Wilson, C.).

Brief Summary of Substitute Bill

- Requires all school districts, charter schools, and state-tribal education compact schools, not just school districts with 2,000 or more students, to obtain and maintain opioid overdose reversal medication in each school and to adopt a related policy.
- Directs the Washington State School Directors' Association to update a model policy that meets specified guidelines.
- Makes available to all public schools a grant program for purchasing opioid overdose reversal medication and training personnel to administer the medication.

Hearing Date: 2/15/24

Staff: Megan Wargacki (786-7194).

Background:

Opioid Overdose Reversal Medication.

Opioids, such as heroin, morphine, oxycodone, and fentanyl, act on opioid receptors in the brain and nervous system. An excess amount of opioid in the body can cause extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death.

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

Opioid overdose medications block the body's opioid receptors and reverse the effects of the opioid. These medications may be injected in a muscle or sprayed into the nose.

To assist a person at risk of experiencing an opioid-related overdose, high schools are authorized to obtain and maintain opioid overdose reversal medication through a standing order.

Administration.

The school-owned opioid overdose reversal medication may be administered by a school nurse, a health care professional or trained staff person located at a health care clinic on public school property or under contract with the school district, or other designated trained school personnel. Each high school is encouraged to designate and train at least one school personnel to distribute and administer opioid overdose reversal medication if the high school does not have a full-time school nurse or trained health care clinic staff.

School District Requirements.

A school district with 2,000 or more students must obtain and maintain through a standing order at least one set of opioid overdose reversal medication doses in each of its high schools. However, a school district that demonstrates a good faith effort to obtain the opioid overdose reversal medication through a donation source, but is unable to do so, is exempt from the requirement.

Policies and Procedures.

Legislation enacted in 2019 directed the Office of the Superintendent of Public Instruction (OSPI), in consultation with the Department of Health and the Washington State School Directors' Association (WSSDA), to develop opioid-related overdose policy guidelines and training requirements for public schools and school districts. In addition, the WSSDA was directed to collaborate with the OSPI to either update existing model policy or develop a new model policy that complies with the policy guidelines.

The following school districts are required to adopt an opioid-related overdose policy: (1) school districts with a school that obtains, maintains, distributes, or administers opioid overdose reversal medication; and (2) school districts with 2,000 or more students.

Grants.

Subject to appropriation, the OSPI must administer a grant program to provide funding to public schools with any of grades 9 through 12 and public higher education institutions to purchase opioid overdose reversal medication and train personnel on the administration of the medication to respond to symptoms of an opioid-related overdose.

Summary of Bill:

All school districts, charter schools, and state-tribal education compact schools (referred to collectively as public schools) must obtain and maintain at least one set of opioid overdose reversal medication doses in each of its schools. Each public school is encouraged to designate

and train at least one school personnel to distribute and administer opioid overdose reversal medication if the school does not have a full-time school nurse or trained health care clinic staff.

All school districts are required to adopt an opioid-overdose policy. The Washington State School Directors' Association must, by September 1, 2024, collaborate with the Office of the Superintendent of Public Instruction (OSPI) and the Department of health, to either update existing model policy or develop a new model policy that meets specified policy guidelines.

The OSPI grant program to provide funding to purchase opioid overdose reversal medication and train personnel on the administration of opioid overdose reversal medication is made available to public schools of all grades.

Appropriation: None.

Fiscal Note: Requested on February 6, 2024.

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