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**SUBSTITUTE SENATE BILL 5240**

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**State of Washington**

**69th Legislature**

**2025 Regular Session**

**By** Senate Early Learning & K-12 Education (originally sponsored by Senators Wellman, Slatter, Boehnke, Hasegawa, Nobles, Stanford, Trudeau, and C. Wilson)

READ FIRST TIME 02/12/25.

1 AN ACT Relating to anaphylaxis medications in schools; and  
2 amending RCW 28A.210.383 and 28A.210.380.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 **Sec. 1.** RCW 28A.210.383 and 2024 c 81 s 2 are each amended to  
5 read as follows:

6 (1) School districts and (~~nonpublic~~) private schools may  
7 maintain at a school in a designated location a supply of epinephrine  
8 (~~and~~), including epinephrine autoinjectors, based on the number of  
9 students enrolled in the school.

10 (2)(a) A licensed health professional with the authority to  
11 prescribe epinephrine, including, but not limited to, the secretary  
12 of health or the secretary's designee in accordance with RCW  
13 43.70.827, may prescribe epinephrine, including epinephrine  
14 autoinjectors, in the name of the school district or school to be  
15 maintained for use when necessary. Epinephrine prescriptions must be  
16 accompanied by a standing order issued in accordance with this  
17 section or RCW 43.70.827 for the administration of school-supplied,  
18 undesignated epinephrine and epinephrine autoinjectors for  
19 potentially life-threatening allergic reactions.

1 (b) There are no changes to current prescription or self-  
2 administration practices for children with existing epinephrine  
3 autoinjector prescriptions or a guided anaphylaxis care plan.

4 (c) Epinephrine and epinephrine autoinjectors may be obtained  
5 from donation sources, but must be accompanied by a prescription.

6 (3) (a) When a student has a prescription for ~~((an))~~ epinephrine  
7 ~~((autoinjector))~~ on file, the school nurse may utilize the school  
8 district or school supply of epinephrine, authorized under subsection  
9 (1) of this section, and the school nurse and the designated trained  
10 school personnel may utilize the school district or school supply of  
11 epinephrine ~~((autoinjectors))~~ or any available epinephrine on school  
12 property to respond to an anaphylactic reaction under a standing  
13 protocol according to RCW 28A.210.380.

14 (b) When a student does not have ~~((an))~~ epinephrine  
15 ~~((autoinjector))~~ or a prescription for ~~((an))~~ epinephrine  
16 ~~((autoinjector))~~ on file, the school nurse may utilize the school  
17 district or school supply of epinephrine ~~((or—epinephrine~~  
18 ~~autoinjectors))~~ authorized under subsection (1) of this section or  
19 any available epinephrine on school property to respond to an  
20 anaphylactic reaction under a standing protocol according to RCW  
21 28A.210.380.

22 (c) In the event a school nurse or other school employee  
23 administers any available epinephrine on school property, the school  
24 district or private school must reimburse the cost of the epinephrine  
25 to the owner if it is not school-owned epinephrine and not owned by  
26 the individual who received the epinephrine.

27 (d) Epinephrine and epinephrine autoinjectors may be used on  
28 school property, including the school building, playground, and  
29 school bus, as well as during field trips or sanctioned excursions  
30 away from school property. The school nurse or designated trained  
31 school personnel may carry an appropriate supply of school-owned  
32 epinephrine or epinephrine autoinjectors on field trips or  
33 excursions.

34 (4) (a) If a student is injured or harmed due to the  
35 administration of epinephrine that a licensed health professional  
36 with prescribing authority has prescribed and a pharmacist has  
37 dispensed to a school under this section, the licensed health  
38 professional with prescribing authority and pharmacist may not be  
39 held responsible for the injury unless he or she issued the  
40 prescription with a conscious disregard for safety.

1 (b) (i) In the event a school nurse or other school employee  
2 administers epinephrine in substantial compliance with a student's  
3 prescription that has been prescribed by a licensed health  
4 professional within the scope of the professional's prescriptive  
5 authority or by statewide standing order in accordance with RCW  
6 43.70.827, if applicable, and written policies of the school district  
7 or private school, then the school employee, the employee's school  
8 district or school of employment, and the members of the governing  
9 board and chief administrator thereof are not liable in any criminal  
10 action or for civil damages in their individual, marital,  
11 governmental, corporate, or other capacity as a result of providing  
12 the epinephrine.

13 (ii) In the event a school nurse or other school employee  
14 administers epinephrine in substantial compliance with the written  
15 policies of the school district or private school and the policies  
16 are aligned with the standing protocol developed under RCW  
17 28A.210.380, then the school employee, the employee's school district  
18 or school of employment, and the members of the governing board and  
19 chief administrator thereof are not liable in any criminal action or  
20 for civil damages in their individual, marital, governmental,  
21 corporate, or other capacity as a result of providing the  
22 epinephrine.

23 (c) School employees, except those licensed under chapter 18.79  
24 RCW, who have not agreed in writing to the use of epinephrine  
25 autoinjectors as a specific part of their job description, may file  
26 with the school district a written letter of refusal to use  
27 epinephrine autoinjectors. This written letter of refusal may not  
28 serve as grounds for discharge, nonrenewal of an employment contract,  
29 or other action adversely affecting the employee's contract status.

30 (5) This section governs school operation and management under  
31 RCW 28A.710.040 and 28A.715.020 and applies to charter schools  
32 established under chapter 28A.710 RCW and state-tribal education  
33 compact schools subject to chapter 28A.715 RCW.

34 **Sec. 2.** RCW 28A.210.380 and 2008 c 173 s 1 are each amended to  
35 read as follows:

36 (1) The office of the superintendent of public instruction, in  
37 consultation with the department of health, shall develop  
38 anaphylactic policy guidelines for schools to prevent anaphylaxis and  
39 deal with medical emergencies resulting from it. The policy

1 guidelines shall be developed with input from pediatricians, school  
2 nurses, other health care providers, parents of children with life-  
3 threatening allergies, school administrators, teachers, and food  
4 service directors.

5 The policy guidelines shall include, but need not be limited to:

6 (a) A procedure for each school to follow to develop a treatment  
7 plan including the responsibilities (~~(for [of])~~) of school nurses and  
8 other appropriate school personnel responsible for responding to a  
9 student who may be experiencing anaphylaxis;

10 (b) (i) The content of a training course for appropriate school  
11 personnel for preventing and responding to a student who may be  
12 experiencing anaphylaxis;

13 (ii) The entity that conducts the training shall issue a  
14 certificate, on a form developed or approved by the department of  
15 health, to each person who successfully completes the anaphylaxis  
16 training program, and this form must be kept on file at the school;

17 (c) A procedure for the development of an individualized  
18 emergency health care plan for children with food or other allergies  
19 that could result in anaphylaxis;

20 (d) A communication plan for the school to follow to gather and  
21 disseminate information on students with food or other allergies who  
22 may experience anaphylaxis;

23 (e) Strategies for reduction of the risk of exposure to  
24 anaphylactic causative agents including food and other allergens.

25 (2) For the purpose of this section "anaphylaxis" means a severe  
26 allergic and life-threatening reaction that is a collection of  
27 symptoms, which may include breathing difficulties and a drop in  
28 blood pressure or shock.

29 ~~(3) ((a) By October 15, 2008, the superintendent of public~~  
30 ~~instruction shall report to the select interim legislative task force~~  
31 ~~on comprehensive school health reform created in section 6, chapter~~  
32 ~~5, Laws of 2007, on the following:~~

33 ~~(i) The implementation within school districts of the 2008~~  
34 ~~guidelines for care of students with life-threatening food allergies~~  
35 ~~developed by the superintendent pursuant to section 501, chapter 522,~~  
36 ~~Laws of 2007, including a review of policies developed by the school~~  
37 ~~districts, the training provided to school personnel, and plans for~~  
38 ~~follow-up monitoring of policy implementation; and~~

1       ~~(ii) Recommendations on requirements for effectively implementing~~  
2 ~~the school anaphylactic policy guidelines developed under this~~  
3 ~~section.~~

4       ~~(b) By March 31, 2009, the superintendent of public instruction~~  
5 ~~shall report policy guidelines to the appropriate committees of the~~  
6 ~~legislature and to school districts for the districts to use to~~  
7 ~~develop and adopt their policies.~~

8       (4)) By September 1, 2009, each school district shall use the  
9 guidelines developed under subsection (1) of this section to develop  
10 and adopt a school district policy for each school in the district to  
11 follow to assist schools to prevent anaphylaxis.

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