CERTIFICATION OF ENROLLMENT

SUBSTITUTE HOUSE BILL 1709

Chapter 356, Laws of 2025

69th Legislature
2025 Regular Session

SCHOOLS—STUDENTS WITH ADRENAL INSUFFICIENCY

EFFECTIVE DATE: July 27, 2025

Passed by the House April 22, 2025
Yeas 97 Nays 0

LAURIE JINKINS

Speaker of the House of Representatives

Passed by the Senate April 16, 2025
Yeas 49 Nays 0

DENNY HECK

President of the Senate

Approved May 19, 2025 2:48 PM

BOB FERGUSON

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 1709** as passed by the House of Representatives and the Senate on the dates hereon set forth.

BERNARD DEAN

Chief Clerk

FILED

May 20, 2025

Secretary of State
State of Washington

SUBSTITUTE HOUSE BILL 1709

AS AMENDED BY THE SENATE

Passed Legislature - 2025 Regular Session

State of Washington 69th Legislature 2025 Regular Session

By House Education (originally sponsored by Representatives Callan, Steele, Goodman, Reed, and Hill)

READ FIRST TIME 02/21/25.

AN ACT Relating to the care of students with adrenal insufficiency by parent-designated adults; amending RCW 28A.210.350; adding a new section to chapter 28A.210 RCW; and creating a new section.

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

NEW SECTION. **Sec. 1.** (1)(a) The legislature recognizes that not every public school has a full-time school nurse and that there are restrictions on who can provide nursing care, including medication administration, to students.

(b) The legislature further recognizes that parent-designated adults are volunteers, who may be school employees, and who provide care for the student consistent with the student's individual health plan. Legislation enacted in 2002 authorized parent-designated adults to provide care for students with diabetes. Legislation enacted in 2013 authorized parent-designated adults to provide care for students with seizure disorders, including epilepsy.

(2) The legislature finds that adrenal insufficiency is a rare condition in which the adrenal glands do not produce enough cortisol. If cortisol levels drop too low, which can happen when a person is stressed, ill, or injured, a person will experience abdominal pain, fatigue, dizziness, and ultimately go into shock. Acute severe

adrenal insufficiency is a life-threatening situation that requires emergency treatment with cortisol or similar medication to prevent shock or other severe complications.

(3) Therefore, the legislature intends to authorize parent-designated adults to provide care for students with adrenal insufficiency.

NEW SECTION. **Sec. 2.** A new section is added to chapter 28A.210 RCW to read as follows:

(1) School districts shall provide individual health plans for students with adrenal insufficiency, subject to the following conditions:

(a) The board of directors of the school district shall adopt and periodically revise policies governing the care of students with adrenal insufficiency. At a minimum, the policies must address:

(i) The acquisition of parent requests and instructions;

(ii) The acquisition of orders from licensed health professionals prescribing within the scope of their prescriptive authority for monitoring and treatment of adrenal insufficiency at school;

(iii) The provision for storage of medical equipment and medication provided by the parent;

(iv) The establishment of necessary exceptions to school policies to accommodate the specific needs of students with adrenal insufficiency, as described in the students' individual health plan;

(v) The development of emergency care plans;

(vi) The distribution of individual health plans and emergency care plans to appropriate staff based on the students' needs and staff level of contact with the student;

(vii) The possession of legal documents for parent-designated adults to provide care, if needed; and

(viii) The updating of the individual health plan at least annually;

(b) The administration of medications under the policies required in (a) of this subsection (1) must also comply with conditions outlined in RCW 28A.210.260; and

(c) The policies required by (a) of this subsection (1) may be incorporated into school district policies related broadly to students with health conditions or those concerning parent-designated adults.

(2)(a) Parents of a child with adrenal insufficiency who assign a parent-designated adult to care for the child shall authorize the parent-designated adult to perform procedures consistent with the child's individual health plan.

(b) Parent-designated adults must complete training selected by the child's parents in the proper procedures to care for the child, including in the administration of an emergency injection of corticosteroid during an adrenal crisis, that are consistent with the child's individual health plan. The training may be provided by an organization that offers training for staff caring for students with adrenal insufficiency or an organization that offers training for caretakers of children with adrenal insufficiency.

(c) To be eligible to be a parent-designated adult for a child with adrenal insufficiency, a school district employee not licensed under chapter 18.79 RCW shall file, without coercion by the employer, a voluntary written, current, and unexpired letter of intent stating the employee's willingness to be a parent-designated adult. If a school district employee who is not licensed under chapter 18.79 RCW chooses not to file a letter under this section, the employee may not be subject to any employer reprisal or disciplinary action for refusing to file a letter.

(3)(a) For the purposes of this section, "parent-designated adult" means an adult who: (i) Is authorized by the parents of a child with adrenal insufficiency to provide care for the child consistent with the child's individual health plan; (ii) volunteers for the designation; (iii) receives additional training selected by the parents; and (iv) provides care for the child consistent with the child's individual health plan.

(b) A parent-designated adult may be a school district employee.

(4) Nothing in this section is intended to supersede or otherwise modify nurse delegation requirements established in RCW 18.79.260.

(5) This section applies beginning with the 2025-26 school year.

Sec. 3. RCW 28A.210.350 and 2021 c 29 s 3 are each amended to read as follows:

A school district, school district employee, agent, or parent-designated adult who, acting in good faith and in substantial compliance with the student's individual health plan and the instructions of the student's licensed health care professional, provides assistance or services under RCW 28A.210.330 ((~~or~~)),

28A.210.355, or section 2 of this act shall not be liable in any criminal action or for civil damages in his or her individual or marital or governmental or corporate or other capacities as a result of the services provided under RCW 28A.210.330 to students with diabetes ((~~or~~)), under RCW 28A.210.355 to students with epilepsy or other seizure disorders, or under section 2 of this act to students with adrenal insufficiency.

Passed by the House April 22, 2025.
Passed by the Senate April 16, 2025.
Approved by the Governor May 19, 2025.
Filed in Office of Secretary of State May 20, 2025.

--- END ---