
OLR Bill Analysis

sHB 5521 (as amended by House "A")*

AN ACT CONCERNING THE STORAGE AND ADMINISTRATION OF EPINEPHRINE AT PUBLIC SCHOOLS.

SUMMARY:

This bill requires schools to designate and train nonmedical staff to administer emergency epinephrine in cartridge injectors ("epipens") to students having allergic reactions who were not previously known to have serious allergies. It authorizes the emergency use of epipens by nonmedical staff only if (1) the school nurse is not present or available and (2) certain conditions are met.

The bill permits the following individuals (i.e., "qualified school employees") to be trained and authorized: principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach of school intramural or interscholastic athletics, and school paraprofessional. By law, (1) all of these individuals can, under specific circumstances, administer glucagon via injection to a student with diabetes and (2) a specifically designated paraprofessional can administer an epipen to a student with a known allergy.

The bill requires the school nurse or school principal to select qualified school employees to be trained and administer epipens under the bill's provisions. The professionals must meet training and other requirements before being allowed to administer epipens. Schools must (1) have at least one qualified professional on the school grounds during regular school hours and (2) maintain a store of epipens for emergency use.

The bill also:

1. extends the existing immunity from liability for employees and local boards provided under the existing glycogen and epipen

law to the epinephrine provisions:

2. requires the departments of Education (SDE) and Public Health (DPH) to jointly develop an annual training program for emergency epipen administration, and
3. requires SDE to adopt the necessary regulations to carry out the bill's provisions.

*House Amendment "A":

1. requires SDE and DPH to jointly develop an annual training with specific elements for nonmedical staff to administer epipens in emergencies to students who were not previously known to have severe allergies,
2. removes the provisions that (a) broaden the types of drugs a school-based health center nurse can administer and (b) permits only Connecticut licensed physicians or dentists to authorize the existing asthma and epipen provisions,
3. deletes dentists from the list of personnel authorized to administer emergency epipens, and
4. makes conforming and technical changes.

EFFECTIVE DATE: July 1, 2014

STUDENTS WITH ALLERGIES

Administering Emergency Epinephrine

The bill requires a school nurse or principal to select qualified school professionals to, under certain conditions, give an emergency epipen injection to a student having an allergic reaction without a prior written authorization from a parent or guardian or a written order from a qualified medical professional for the administration of epinephrine. It defines "qualified medical professional" as a Connecticut-licensed physician, optometrist, advanced practice registered nurse, physician assistant, or podiatrist.

Current law only allows (1) nonmedical staff to give emergency glucagon injections to diabetic students requiring prompt treatment to avoid serious harm or death and (2) a specifically designated paraprofessional to administer an epipen to a student with a known allergy. In both scenarios, nonmedical staff can administer injections if there is written authorization from the student's parents and a written order from a physician.

The bill applies the same conditions and training requirements to employees administering epinephrine as currently exist for glucagon, except the new provisions do not require that the employee volunteer to become an epipen administrator.

Nonmedical staff can administer the injections only if the:

1. school nurse is absent or unavailable;
2. employee has completed any annual training in how to administer epinephrine that the school nurse and school medical advisor require; and
3. nurse and medical advisor attest, in writing, that the employee has completed the training.

The school nurse must provide general supervision to the qualified employee.

Maintaining Store of Emergency Epinephrine

The bill requires the school nurse or, in the nurse's absence a qualified school employee, to maintain a store of epinephrine cartridge injectors for emergency use. The bill defines cartridge injector as an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

REQUIREMENTS ON LOCAL AND REGIONAL BOARDS OF EDUCATION

As with glucagon, the bill requires local and regional boards of education to adopt policies and procedures allowing emergency

administration of epinephrine. The policies and procedures must (1) conform with the bill's provisions and with State Board of Education (SBE) regulations and (2) be approved by the local board's medical advisor, or if there is none, a qualified licensed physician.

Each school that administers medication under the bill must record the administration as required by state law and store the medication as prescribed by Department of Consumer Protection regulations.

SBE REGULATIONS

The bill requires SBE, in consultation with DPH, to adopt regulations that specify the conditions and procedures for the storage and administration of epinephrine for emergency first aid for students having allergic reactions who do not have a prior written parental authorization or a prior written order of a qualified medical professional for epinephrine administration.

IMMUNITY FROM LIABILITY

The bill extends the existing immunity from liability for employees and local boards provided under the glycogen law to the epinephrine provisions.

It bars anyone from making a claim against a town, board of education, or school employee for damages resulting from administration of medication under the bill. The immunity covers the qualified school personnel. It does not apply to acts or omissions that constitute gross, wilful, or wanton negligence.

The bill also extends immunity to those acting under an existing statute that allows specified school employees, other than the school nurse, to administer medicinal preparations, including controlled drugs the consumer protection commissioner designates, to a student pursuant to a written medical order. The specified employees are a principal, teacher, licensed nurse, licensed athletic trainer, licensed physical or occupational therapist employed by the school board, or coach

REQUIRED TRAINING

By December 31, 2014, the bill requires SDE and DPH to jointly develop, in consultation with the School Nurse Advisory Council, an annual training program for emergency first aid to students who experience allergic reactions.

The program must include instruction in:

1. cardiopulmonary resuscitation (CPR),
2. first aid,
3. food allergies,
4. signs and symptoms of anaphylaxis,
5. prevention and risk-reduction strategies regarding allergic reactions,
6. emergency management and administration of epinephrine,
7. follow-up and reporting procedures after a student has experienced an allergic reaction,
8. carrying out the bill's provisions, and
9. any other relevant issues related to emergency first aid for students with allergic reactions.

SDE must make the training program available to local and regional boards of education.

COMMITTEE ACTION

Education Committee

Joint Favorable Substitute

Yea 32 Nay 0 (03/21/2014)

Appropriations Committee

Joint Favorable

Yea 48 Nay 2 (04/22/2014)

