



General Assembly

Amendment

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LCO No. 8621



Offered by:
SEN. MINER, 30th Dist.

To: Subst. Senate Bill No. 1069

File No. 642

Cal. No. 303

(As Amended)

***"AN ACT CONCERNING VARIOUS REVISIONS AND ADDITIONS
TO THE EDUCATION STATUTES."***

1 After the last section, add the following and renumber sections and
2 internal references accordingly:

3 "Sec. 501. Section 10-212a of the general statutes is repealed and the
4 following is substituted in lieu thereof (*Effective July 1, 2019*):

5 (a) (1) A school nurse or, in the absence of such nurse, any other
6 nurse licensed pursuant to the provisions of chapter 378, including a
7 nurse employed by, or providing services under the direction of a local
8 or regional board of education at, a school-based health clinic, who
9 shall administer medical preparations only to students enrolled in such
10 school-based health clinic in the absence of a school nurse, the
11 principal, any teacher, licensed athletic trainer, licensed physical or
12 occupational therapist employed by a school district, or coach of
13 intramural and interscholastic athletics of a school may administer,

14 subject to the provisions of subdivision (2) of this subsection,
15 medicinal preparations, including such controlled drugs as the
16 Commissioner of Consumer Protection may, by regulation, designate,
17 to any student at such school pursuant to the written order of a
18 physician licensed to practice medicine, or a dentist licensed to practice
19 dental medicine in this or another state, or an optometrist licensed to
20 practice optometry in this state under chapter 380, or an advanced
21 practice registered nurse licensed to prescribe in accordance with
22 section 20-94a, or a physician assistant licensed to prescribe in
23 accordance with section 20-12d, and the written authorization of a
24 parent or guardian of such child. The administration of medicinal
25 preparations by a nurse licensed pursuant to the provisions of chapter
26 378, a principal, teacher, licensed athletic trainer, licensed physical or
27 occupational therapist employed by a school district, or coach shall be
28 under the general supervision of a school nurse. No such school nurse
29 or other nurse, principal, teacher, licensed athletic trainer, licensed
30 physical or occupational therapist employed by a school district, coach
31 or school paraprofessional administering medication pursuant to this
32 section shall be liable to such student or a parent or guardian of such
33 student for civil damages for any personal injuries that result from acts
34 or omissions of such school nurse or other nurse, principal, teacher,
35 licensed athletic trainer, licensed physical or occupational therapist
36 employed by a school district, coach or school paraprofessional
37 administering medication pursuant to this section in administering
38 such preparations that may constitute ordinary negligence. This
39 immunity does not apply to acts or omissions constituting gross, wilful
40 or wanton negligence.

41 (2) Each local and regional board of education that allows a school
42 nurse or, in the absence of such nurse, any other nurse licensed
43 pursuant to the provisions of chapter 378, including a nurse employed
44 by, or providing services under the direction of a local or regional
45 board of education at, a school-based health clinic, who shall
46 administer medical preparations only to students enrolled in such
47 school-based health clinic in the absence of a school nurse, the

48 principal, any teacher, licensed athletic trainer, licensed physical or
49 occupational therapist employed by a school district, coach of
50 intramural and interscholastic athletics or school paraprofessional of a
51 school to administer medicine or that allows a student to possess, self-
52 administer or possess and self-administer medicine, including
53 medicine administered through the use of an asthmatic inhaler or an
54 automatic prefilled cartridge injector or similar automatic injectable
55 equipment, shall adopt written policies and procedures, in accordance
56 with this section and the regulations adopted pursuant to subsection
57 (c) of this section, that shall be approved by the school medical
58 advisor, if any, or other qualified licensed physician. Once so
59 approved, such administration of medication shall be in accordance
60 with such policies and procedures.

61 (3) A director of a school readiness program as defined in section
62 10-16p or a before or after school program exempt from licensure by
63 the Department of Public Health pursuant to subdivision (1) of
64 subsection (b) of section 19a-77, or the director's designee, may
65 administer medications to a child enrolled in such a program in
66 accordance with regulations adopted by the State Board of Education
67 in accordance with the provisions of chapter 54. No individual
68 administering medications pursuant to this subdivision shall be liable
69 to such child or a parent or guardian of such child for civil damages for
70 any personal injuries that result from acts or omissions of such
71 individual in administering such medications which may constitute
72 ordinary negligence. This immunity shall not apply to acts or
73 omissions constituting gross, wilful or wanton negligence.

74 (b) Each school wherein any controlled drug is administered under
75 the provisions of this section shall keep such records thereof as are
76 required of hospitals under the provisions of subsections (f) and (h) of
77 section 21a-254 and shall store such drug in such manner as the
78 Commissioner of Consumer Protection shall, by regulation, require.

79 (c) The State Board of Education, in consultation with the
80 Commissioner of Public Health, shall adopt regulations, in accordance

81 with the provisions of chapter 54, determined to be necessary by the
82 board to carry out the provisions of this section, including, but not
83 limited to, regulations that (1) specify conditions under which a coach
84 of intramural and interscholastic athletics may administer medicinal
85 preparations, including controlled drugs specified in the regulations
86 adopted by the commissioner, to a child participating in such
87 intramural and interscholastic athletics, (2) specify conditions and
88 procedures for the administration of medication by school personnel to
89 students, including the conditions and procedures for the storage and
90 administration of epinephrine by school personnel to students for the
91 purpose of emergency first aid to students who experience allergic
92 reactions and who do not have a prior written authorization for the
93 administration of epinephrine, in accordance with the provisions of
94 subdivision (2) of subsection (d) of this section, and (3) specify
95 conditions for the possession, self-administration or possession and
96 self-administration of medication by students, including permitting a
97 child diagnosed with: (A) Asthma to retain possession of an asthmatic
98 inhaler at all times while attending school for prompt treatment of the
99 child's asthma and to protect the child against serious harm or death
100 provided a written authorization for self-administration of medication
101 signed by the child's parent or guardian and an authorized prescriber
102 is submitted to the school nurse; and (B) an allergic condition to retain
103 possession of an automatic prefilled cartridge injector or similar
104 automatic injectable equipment at all times, including while attending
105 school or receiving school transportation services, for prompt
106 treatment of the child's allergic condition and to protect the child
107 against serious harm or death provided a written authorization for
108 self-administration of medication signed by the child's parent or
109 guardian and an authorized prescriber is submitted to the school
110 nurse. The regulations shall require authorization pursuant to: (i) The
111 written order of a physician licensed to practice medicine in this or
112 another state, a dentist licensed to practice dental medicine in this or
113 another state, an advanced practice registered nurse licensed under
114 chapter 378, a physician assistant licensed under chapter 370, a
115 podiatrist licensed under chapter 375, or an optometrist licensed under

116 chapter 380; and (ii) the written authorization of a parent or guardian
117 of such child.

118 (d) (1) (A) With the written authorization of a student's parent or
119 guardian, and (B) pursuant to the written order of a qualified medical
120 professional, a school nurse and a school medical advisor, if any, may
121 jointly approve and provide general supervision to an identified
122 school paraprofessional to administer medication, including, but not
123 limited to, medication administered with a cartridge injector, to a
124 specific student with a medically diagnosed allergic condition that
125 may require prompt treatment in order to protect the student against
126 serious harm or death.

127 (2) A school nurse or, in the absence of a school nurse, a qualified
128 school employee shall maintain epinephrine in cartridge injectors for
129 the purpose of emergency first aid to students who experience allergic
130 reactions and do not have a prior written authorization of a parent or
131 guardian or a prior written order of a qualified medical professional
132 for the administration of epinephrine. A school nurse or a school
133 principal shall select qualified school employees to administer such
134 epinephrine under this subdivision, and there shall be at least one such
135 qualified school employee on the grounds of the school during regular
136 school hours in the absence of a school nurse. A school nurse or, in the
137 absence of such school nurse, such qualified school employee may
138 administer such epinephrine under this subdivision, provided such
139 administration of epinephrine is in accordance with policies and
140 procedures adopted pursuant to subsection (a) of this section. Such
141 administration of epinephrine by a qualified school employee shall be
142 limited to situations when the school nurse is absent or unavailable.
143 No qualified school employee shall administer such epinephrine under
144 this subdivision unless such qualified school employee annually
145 completes the training program described in section 10-212g. The
146 parent or guardian of a student may submit, in writing, to the school
147 nurse and school medical advisor, if any, that epinephrine shall not be
148 administered to such student under this subdivision.

149 (3) In the case of a student with a medically diagnosed life-
150 threatening allergic condition, (A) with the written authorization of
151 such student's parent or guardian, and (B) pursuant to the written
152 order of a qualified medical professional, such student may possess,
153 self-administer or possess and self-administer medication, including,
154 but not limited to, medication administered with a cartridge injector,
155 to protect such student against serious harm or death.

156 (4) For purposes of this subsection, (A) "cartridge injector" means an
157 automatic prefilled cartridge injector or similar automatic injectable
158 equipment used to deliver epinephrine in a standard dose for
159 emergency first aid response to allergic reactions, (B) "qualified school
160 employee" means a principal, teacher, licensed athletic trainer, licensed
161 physical or occupational therapist employed by a school district, coach
162 or school paraprofessional, and (C) "qualified medical professional"
163 means (i) a physician licensed under chapter 370, (ii) an optometrist
164 licensed to practice optometry under chapter 380, (iii) an advanced
165 practice registered nurse licensed to prescribe in accordance with
166 section 20-94a, or (iv) a physician assistant licensed to prescribe in
167 accordance with section 20-12d.

168 (e) (1) With the written authorization of a student's parent or
169 guardian, and (2) pursuant to a written order of the student's physician
170 licensed under chapter 370 or the student's advanced practice
171 registered nurse licensed under chapter 378, a school nurse or a school
172 principal shall select, and a school nurse shall provide general
173 supervision to, a qualified school employee to administer medication
174 with injectable equipment used to administer glucagon to a student
175 with diabetes that may require prompt treatment in order to protect
176 the student against serious harm or death. Such authorization shall be
177 limited to situations when the school nurse is absent or unavailable.
178 No qualified school employee shall administer medication under this
179 subsection unless (A) such qualified school employee annually
180 completes any training required by the school nurse and school
181 medical advisor, if any, in the administration of medication with
182 injectable equipment used to administer glucagon, (B) the school nurse

183 and school medical advisor, if any, have attested, in writing, that such
184 qualified school employee has completed such training, and (C) such
185 qualified school employee voluntarily agrees to serve as a qualified
186 school employee. For purposes of this subsection, "injectable
187 equipment used to administer glucagon" means an injector or
188 injectable equipment used to deliver glucagon in an appropriate dose
189 for emergency first aid response to diabetes. For purposes of this
190 subsection, "qualified school employee" means a principal, teacher,
191 licensed athletic trainer, licensed physical or occupational therapist
192 employed by a school district, coach or school paraprofessional.

193 (f) (1) (A) With the written authorization of a student's parent or
194 guardian, and (B) pursuant to the written order of a physician licensed
195 under chapter 370 or an advanced practice registered nurse licensed
196 under chapter 378, a school nurse and a school medical advisor, if any,
197 shall select, and a school nurse shall provide general supervision to, a
198 qualified school employee to administer antiepileptic medication,
199 including by rectal syringe, to a specific student with a medically
200 diagnosed epileptic condition that requires prompt treatment in
201 accordance with the student's individual seizure action plan. Such
202 authorization shall be limited to situations when the school nurse is
203 absent or unavailable. No qualified school employee shall administer
204 medication under this subsection unless (i) such qualified school
205 employee annually completes the training program described in
206 subdivision (2) of this subsection, (ii) the school nurse and school
207 medical advisor, if any, have attested, in writing, that such qualified
208 school employee has completed such training, (iii) such qualified
209 school employee receives monthly reviews by the school nurse to
210 confirm such qualified school employee's competency to administer
211 antiepileptic medication under this subsection, and (iv) such qualified
212 school employee voluntarily agrees to serve as a qualified school
213 employee. For purposes of this subsection, "qualified school employee"
214 means a principal, teacher, licensed athletic trainer, licensed physical
215 or occupational therapist employed by a school district, coach or
216 school paraprofessional.

217 (2) The Department of Education, in consultation with the School
218 Nurse Advisory Council, established pursuant to section 10-212f, and
219 the Association of School Nurses of Connecticut, shall develop an
220 antiepileptic medication administrating training program. Such
221 training program shall include instruction in (A) an overview of
222 childhood epilepsy and types of seizure disorders, (B) interpretation of
223 individual student's emergency seizure action plan and recognition of
224 individual student's seizure activity, (C) emergency management
225 procedures for seizure activity, including administration techniques
226 for emergency seizure medication, (D) when to activate emergency
227 medical services and postseizure procedures and follow-up, (E)
228 reporting procedures after a student has required such delegated
229 emergency seizure medication, and (F) any other relevant issues or
230 topics related to emergency interventions for students who experience
231 seizures.

232 (g) (1) A school nurse or, in the absence of a school nurse, a qualified
233 school employee shall maintain opioid antagonists for the purpose of
234 emergency first aid to students who experience a drug overdose and
235 do not have a prior written authorization of a parent or guardian or a
236 prior written order of a qualified medical professional for the
237 administration of an opioid antagonist. A school nurse or a school
238 principal shall select qualified school employees to administer such
239 opioid antagonist under this subdivision, and there shall be at least
240 one such qualified school employee on the grounds of the school
241 during regular school hours in the absence of a school nurse. A school
242 nurse or, in the absence of such school nurse, such qualified school
243 employee may administer such opioid antagonist under this
244 subdivision, provided such administration of an opioid antagonist is in
245 accordance with policies and procedures adopted pursuant to
246 subsection (a) of this section. Such administration of an opioid
247 antagonist by a qualified school employee shall be limited to situations
248 when the school nurse is absent or unavailable. No qualified school
249 employee shall administer such opioid antagonist under this
250 subdivision unless such qualified school employee annually completes

251 the training program described in section 502 of this act.

252 (2) For purposes of this subsection, (A) "opioid antagonist" means
253 naloxone hydrochloride or any other similarly acting and equally safe
254 drug approved by the federal Food and Drug Administration for the
255 treatment of drug overdose, (B) "qualified school employee" means a
256 principal, teacher, licensed athletic trainer, licensed physical or
257 occupational therapist employed by a school district, coach or school
258 paraprofessional, and (C) "qualified medical professional" means (i) a
259 physician licensed under chapter 370, (ii) an optometrist licensed to
260 practice optometry under chapter 380, (iii) an advanced practice
261 registered nurse licensed to prescribe in accordance with section 20-
262 94a, or (iv) a physician assistant licensed to prescribe in accordance
263 with section 20-12d.

264 Sec. 502. (NEW) (*Effective July 1, 2019*) Not later than December 31,
265 2019, the Departments of Education and Public Health shall jointly
266 develop, in consultation with the School Nurse Advisory Council,
267 established pursuant to section 10-212f of the general statutes, an
268 annual training program regarding emergency first aid to students
269 who experience a drug overdose. Such annual training program shall
270 include instruction in (1) cardiopulmonary resuscitation, (2) first aid,
271 (3) the signs and symptoms of a drug overdose, (4) prevention and
272 risk-reduction strategies, (5) emergency management and
273 administration of an opioid antagonist, as defined in section 10-212a of
274 the general statutes, as amended by this act, (6) follow-up and
275 reporting procedures after a student has experienced a drug overdose,
276 (7) carrying out the provisions of subsection (g) of section 10-212a of
277 the general statutes, as amended by this act, and (8) any other relevant
278 issues and topics related to emergency first aid to students who
279 experience a drug overdose. The Department of Education shall make
280 such annual training program available to local and regional boards of
281 education."

This act shall take effect as follows and shall amend the following sections:		
Sec. 501	<i>July 1, 2019</i>	10-212a
Sec. 502	<i>July 1, 2019</i>	New section