



General Assembly

February Session, 2022

Raised Bill No. 5244

LCO No. 1543



Referred to Committee on COMMITTEE ON CHILDREN

Introduced by:
(KID)

***AN ACT CONCERNING THE PROVISION OF OPIOID ANTAGONISTS
IN SCHOOLS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective July 1, 2022*) For the fiscal year ending June
2 30, 2023, and each fiscal year thereafter, the Department of Education
3 shall provide grants to local and regional boards of education for the
4 acquisition and maintenance of opioid antagonists in accordance with
5 the provisions of section 10-212a of the general statutes, as amended by
6 this act. The department shall not award a grant to a local or regional
7 board of education under this section unless such board includes
8 training in screening, brief intervention and referral to treatment as part
9 of the in-service training program provided by such board pursuant to
10 section 10-220a of the general statutes.

11 Sec. 2. Section 10-212a of the general statutes is repealed and the
12 following is substituted in lieu thereof (*Effective from passage*):

13 (a) (1) A school nurse or, in the absence of such nurse, any other nurse
14 licensed pursuant to the provisions of chapter 378, including a nurse
15 employed by, or providing services under the direction of a local or

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

48 (2) Each local and regional board of education that allows a school
49 nurse or, in the absence of such nurse, any other nurse licensed pursuant

50 to the provisions of chapter 378, including a nurse employed by, or
51 providing services under the direction of a local or regional board of
52 education at, a school-based health clinic, who shall administer medical
53 preparations only to students enrolled in such school-based health clinic
54 in the absence of a school nurse, the principal, any teacher, licensed
55 athletic trainer, licensed physical or occupational therapist employed by
56 a school district, coach of intramural and interscholastic athletics or
57 school paraprofessional of a school to administer medicine or that
58 allows a student to possess, self-administer or possess and self-
59 administer medicine, including medicine administered through the use
60 of an asthmatic inhaler or an automatic prefilled cartridge injector or
61 similar automatic injectable equipment, shall adopt written policies and
62 procedures, in accordance with this section and the regulations adopted
63 pursuant to subsection (c) of this section, that shall be approved by the
64 school medical advisor, if any, or other qualified licensed physician.
65 Once so approved, such administration of medication shall be in
66 accordance with such policies and procedures.

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

80 (b) Each school wherein any controlled drug is administered under
81 the provisions of this section shall keep such records thereof as are
82 required of hospitals under the provisions of subsections (f) and (h) of
83 section 21a-254 and shall store such drug in such manner as the

84 Commissioner of Consumer Protection shall, by regulation, require.

85 (c) The State Board of Education, in consultation with the
86 Commissioner of Public Health, shall adopt regulations, in accordance
87 with the provisions of chapter 54, determined to be necessary by the
88 board to carry out the provisions of this section, including, but not
89 limited to, regulations that (1) specify conditions under which a coach
90 of intramural and interscholastic athletics may administer medicinal
91 preparations, including controlled drugs specified in the regulations
92 adopted by the commissioner, to a child participating in such intramural
93 and interscholastic athletics, (2) specify conditions and procedures for
94 the administration of medication by school personnel to students,
95 including, but not limited to, (A) the conditions and procedures for the
96 storage and administration of epinephrine by school personnel to
97 students for the purpose of emergency first aid to students who
98 experience allergic reactions and who do not have a prior written
99 authorization for the administration of epinephrine, in accordance with
100 the provisions of subdivision (2) of subsection (d) of this section, and (B)
101 the conditions and procedures for the storage and administration of
102 opioid antagonists by school personnel to students who experience an
103 opioid-related drug overdose and who do not have a prior written
104 authorization for the administration of an opioid antagonist, in
105 accordance with the provisions of subdivision (1) of subsection (g) of
106 this section, and (3) specify conditions for the possession, self-
107 administration or possession and self-administration of medication by
108 students, including permitting a child diagnosed with: (A) Asthma to
109 retain possession of an asthmatic inhaler at all times while attending
110 school for prompt treatment of the child's asthma and to protect the
111 child against serious harm or death provided a written authorization for
112 self-administration of medication signed by the child's parent or
113 guardian and an authorized prescriber is submitted to the school nurse;
114 and (B) an allergic condition to retain possession of an automatic
115 prefilled cartridge injector or similar automatic injectable equipment at
116 all times, including while attending school or receiving school
117 transportation services, for prompt treatment of the child's allergic

118 condition and to protect the child against serious harm or death
119 provided a written authorization for self-administration of medication
120 signed by the child's parent or guardian and an authorized prescriber is
121 submitted to the school nurse. The regulations shall require
122 authorization pursuant to: (i) The written order of a physician licensed
123 to practice medicine in this or another state, a dentist licensed to practice
124 dental medicine in this or another state, an advanced practice registered
125 nurse licensed under chapter 378, a physician assistant licensed under
126 chapter 370, a podiatrist licensed under chapter 375, or an optometrist
127 licensed under chapter 380; and (ii) the written authorization of a parent
128 or guardian of such child.

129 (d) (1) (A) With the written authorization of a student's parent or
130 guardian, and (B) pursuant to the written order of a qualified medical
131 professional, a school nurse and a school medical advisor, if any, may
132 jointly approve and provide general supervision to an identified school
133 paraprofessional to administer medication, including, but not limited to,
134 medication administered with a cartridge injector, to a specific student
135 with a medically diagnosed allergic condition that may require prompt
136 treatment in order to protect the student against serious harm or death.

137 (2) A school nurse or, in the absence of a school nurse, a qualified
138 school employee shall maintain epinephrine in cartridge injectors for the
139 purpose of emergency first aid to students who experience allergic
140 reactions and do not have a prior written authorization of a parent or
141 guardian or a prior written order of a qualified medical professional for
142 the administration of epinephrine. A school nurse or a school principal
143 shall select qualified school employees to administer such epinephrine
144 under this subdivision, and there shall be at least one such qualified
145 school employee on the grounds of the school during regular school
146 hours in the absence of a school nurse. A school nurse or, in the absence
147 of such school nurse, such qualified school employee may administer
148 such epinephrine under this subdivision, provided such administration
149 of epinephrine is in accordance with policies and procedures adopted
150 pursuant to subsection (a) of this section. Such administration of
151 epinephrine by a qualified school employee shall be limited to situations

152 when the school nurse is absent or unavailable. No qualified school
153 employee shall administer such epinephrine under this subdivision
154 unless such qualified school employee annually completes the training
155 program described in section 10-212g. The parent or guardian of a
156 student may submit, in writing, to the school nurse and school medical
157 advisor, if any, that epinephrine shall not be administered to such
158 student under this subdivision.

159 (3) In the case of a student with a medically diagnosed life-
160 threatening allergic condition, (A) with the written authorization of
161 such student's parent or guardian, and (B) pursuant to the written order
162 of a qualified medical professional, such student may possess, self-
163 administer or possess and self-administer medication, including, but
164 not limited to, medication administered with a cartridge injector, to
165 protect such student against serious harm or death.

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

178 (e) (1) With the written authorization of a student's parent or
179 guardian, and (2) pursuant to a written order of the student's physician
180 licensed under chapter 370 or the student's advanced practice registered
181 nurse licensed under chapter 378, a school nurse or a school principal
182 shall select, and a school nurse shall provide general supervision to, a
183 qualified school employee to administer medication with injectable
184 equipment used to administer glucagon to a student with diabetes that

185 may require prompt treatment in order to protect the student against
186 serious harm or death. Such authorization shall be limited to situations
187 when the school nurse is absent or unavailable. No qualified school
188 employee shall administer medication under this subsection unless (A)
189 such qualified school employee annually completes any training
190 required by the school nurse and school medical advisor, if any, in the
191 administration of medication with injectable equipment used to
192 administer glucagon, (B) the school nurse and school medical advisor,
193 if any, have attested, in writing, that such qualified school employee has
194 completed such training, and (C) such qualified school employee
195 voluntarily agrees to serve as a qualified school employee. For purposes
196 of this subsection, "injectable equipment used to administer glucagon"
197 means an injector or injectable equipment used to deliver glucagon in
198 an appropriate dose for emergency first aid response to diabetes. For
199 purposes of this subsection, "qualified school employee" means a
200 principal, teacher, licensed athletic trainer, licensed physical or
201 occupational therapist employed by a school district, coach or school
202 paraprofessional.

203 (f) (1) (A) With the written authorization of a student's parent or
204 guardian, and (B) pursuant to the written order of a physician licensed
205 under chapter 370 or an advanced practice registered nurse licensed
206 under chapter 378, a school nurse and a school medical advisor, if any,
207 shall select, and a school nurse shall provide general supervision to, a
208 qualified school employee to administer antiepileptic medication,
209 including by rectal syringe, to a specific student with a medically
210 diagnosed epileptic condition that requires prompt treatment in
211 accordance with the student's individual seizure action plan. Such
212 authorization shall be limited to situations when the school nurse is
213 absent or unavailable. No qualified school employee shall administer
214 medication under this subsection unless (i) such qualified school
215 employee annually completes the training program described in
216 subdivision (2) of this subsection, (ii) the school nurse and school
217 medical advisor, if any, have attested, in writing, that such qualified
218 school employee has completed such training, (iii) such qualified school

219 employee receives monthly reviews by the school nurse to confirm such
220 qualified school employee's competency to administer antiepileptic
221 medication under this subsection, and (iv) such qualified school
222 employee voluntarily agrees to serve as a qualified school employee. For
223 purposes of this subsection, "qualified school employee" means a
224 principal, teacher, licensed athletic trainer, licensed physical or
225 occupational therapist employed by a school district, coach or school
226 paraprofessional.

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

241 (g) (1) A school nurse or, in the absence of a school nurse, a qualified
242 school employee may maintain opioid antagonists for the purpose of
243 emergency first aid to students who experience an opioid-related drug
244 overdose and do not have a prior written authorization of a parent or
245 guardian or a prior written order of a qualified medical professional for
246 the administration of such opioid antagonist. A school nurse or a school
247 principal shall select qualified school employees to administer such
248 opioid antagonist under this subdivision, and there shall be at least one
249 such qualified school employee on the grounds of the school during
250 regular school hours in the absence of a school nurse. A school nurse or,
251 in the absence of such school nurse, such qualified school employee may
252 administer such opioid antagonist under this subdivision, provided

253 such administration of the opioid antagonist is in accordance with
254 policies and procedures adopted pursuant to subsection (a) of this
255 section. Such administration of an opioid antagonist by a qualified
256 school employee shall be limited to situations when the school nurse is
257 absent or unavailable. No school nurse or qualified school employee
258 shall administer such opioid antagonist under this subdivision unless
259 such school nurse or qualified school employee annually completes
260 training in the distribution and administration of an opioid antagonist
261 under an agreement entered into pursuant to section 21a-286. The
262 parent or guardian of a student may submit a request, in writing, to the
263 school nurse and school medical advisor, if any, that an opioid
264 antagonist shall not be administered to such student under this
265 subdivision.

266 (2) Not later than July 1, 2022, the Department of Education, in
267 consultation with the Departments of Consumer Protection and Public
268 Health, shall develop guidelines for use by local and regional boards of
269 education on the storage and administration of opioid antagonists in
270 schools in accordance with the provisions of this subsection.

271 (3) For purposes of this subsection, (A) "opioid antagonist" means
272 naloxone hydrochloride or any other similarly acting and equally safe
273 drug approved by the federal Food and Drug Administration for the
274 treatment of a drug overdose, (B) "qualified school employee" means a
275 principal, teacher, licensed athletic trainer, licensed physical or
276 occupational therapist employed by a school district, coach or school
277 paraprofessional, and (C) "qualified medical professional" means (i) a
278 physician licensed under chapter 370, (ii) an optometrist licensed to
279 practice optometry under chapter 380, (iii) an advanced practice
280 registered nurse licensed to prescribe in accordance with section 20-94a,
281 or (iv) a physician assistant licensed to prescribe in accordance with
282 section 20-12d.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2022	New section

Sec. 2	<i>from passage</i>	10-212a
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Statement of Purpose:

To provide grants to school districts for the acquisition of opioid antagonists if they include training in screening, brief intervention and referral to treatment (SBIRT) to educators as part of the school district's in-service training program, and to authorize the administration of opioid antagonists in schools in emergency situations.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]