

SENATE BILL REPORT

SB 5085

As Reported By Senate Committee On:
Education, February 22, 2001

Title: An act relating to administering emergency services to school students experiencing severe hypoglycemia.

Brief Description: Administering glucagon to hypoglycemic students.

Sponsors: Senators Haugen, Winsley, Prentice and McAuliffe.

Brief History:

Committee Activity: Education: 2/5/01, 2/22/01 [DPS].

SENATE COMMITTEE ON EDUCATION

Majority Report: That Substitute Senate Bill No. 5085 be substituted therefor, and the substitute bill do pass.

Signed by Senators McAuliffe, Chair; Eide, Vice Chair; Carlson, Finkbeiner, Hewitt, Hochstatter, Johnson, Kastama, Kohl-Welles, Prentice, Rasmussen, Regala and Zarelli.

Staff: Casey Bui (786-7448)

Background: Hypoglycemia is an acute condition where the blood sugar level in diabetics drops below normal. One solution to this condition is to administer a glucagon shot. Currently, registered nurses are allowed to administer shots to students while non-licensed school employees are not. Current law does not require school districts to have nurses on staff. School districts use a variety of personnel to provide student health services, where allowed by law.

Summary of Substitute Bill: Public school districts may provide for the administration of glucagon shots by non-licensed school employees to students who experience severe hypoglycemia when the students are in the custody of the school district. Parents must request, and physicians must authorize, such service. Instructions from an advanced nurse practitioner or registered nurse must be on file that designates the school employee(s) authorized to administer glucagon shots as well as the nature and extent of supervision required.

Non-licensed school employees must file a letter of intent stating the employee's willingness to administer glucagon shots. An employee who refuses to file such a letter may not be subject to reprisal or disciplinary action.

Administration of glucagon must be made in compliance with new rules set forth by the State Nursing Care Quality Assurance Commission in consultation with OSPI. School districts must adopt written policies outlining procedures for the administration of glucagon.

Employees who administer glucagon shots in compliance with rules adopted by the Nursing Care Quality Assurance Commission and the written policies of the school district are immune from criminal action or from civil damages.

Substitute Bill Compared to Original Bill: Non-licensed public school employees must file a written letter of intent stating their willingness to administer glucagon shots. If an employee refuses to file such a letter, they may not be subject to employer reprisal or disciplinary action. Also, private schools are removed from the bill.

Appropriation: None.

Fiscal Note: Requested on February 1, 2001.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: This bill would allow school employees to assist diabetic students in emergency situations. Not all schools have a nursing staff. By limiting who can administer glucagon we are putting diabetic children at risk by not allowing employees to help them in an emergency with a safe and simple solution. Where a nurse is not on staff, students experiencing hypoglycemia would have to wait for a paramedic or registered nurse to show up, risking permanent harm such as brain damage.

Testimony Against: Incidences of severe hypoglycemia in schools are rare. This bill is unnecessary and redundant since the state already has an emergency plan in place. This bill adds an additional burden on school employees. We should not be asking school employees to do a job that trained medical staff should be doing. Instead, we should focus on hiring more school nurses.

Testified: PRO: Senator Mary Margaret Haugen, prime sponsor; Kyle Meyer, Cody Meyer, Lara Teigen, Carolyn Tolas, diabetics; Jan Wolfram, registered nurse; Laurel Oates, Tina Meyer, Sandra Schmitz, parents; Laura Thelander, ADA; CON: Judy Maire, OSPI; Ann Simon, SNOW; Doug Nelson, PSE.