

SENATE BILL REPORT

SHB 1060

As Reported by Senate Committee On:
Early Learning & K-12 Education, March 28, 2017

Title: An act relating to the administration of marijuana to students for medical purposes.

Brief Description: Concerning the administration of marijuana to students for medical purposes.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Blake, J. Walsh, Appleton and Chapman).

Brief History: Passed House: 3/03/17, 78-19.

Committee Activity: Early Learning & K-12 Education: 3/27/17, 3/28/17 [DP-WM].

Brief Summary of Bill

- Requires school districts to permit a student who meets state law requirements for medical use of marijuana to consume marijuana on school grounds, aboard a school bus, or while attending a school-sponsored event.
- Directs school districts to adopt a policy related to the consumption of medical marijuana by a student if requested by a parent or guardian of a student who is a qualifying patient.

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Majority Report: Do pass and be referred to Committee on Ways & Means.

Signed by Senators Zeiger, Chair; Fain, Vice Chair; Rolfes, Ranking Minority Member; Billig, Mullet, Rivers and Warnick.

Staff: Ailey Kato (786-7434)

Background: Medical Use of Marijuana. In 1998, voters approved Initiative 692, which permitted the use of marijuana for medical purposes by qualifying patients. In order to qualify for the use of medical marijuana, patients must have a terminal or debilitating medical condition such as cancer, the human immunodeficiency virus (HIV), multiple sclerosis, intractable pain, glaucoma, Crohn's disease, hepatitis C, nausea or seizure diseases,

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

or a disease approved by the Medical Quality Assurance Commission, and the diagnosis of this condition must be made by a health care professional. The health care professional who determines that a person would benefit from the medical use of marijuana must provide that patient with valid documentation written on tamper-resistant paper.

Medical Use of Marijuana by a Minor. Health care professionals may authorize the medical use of marijuana for qualifying patients who are under the age of 18 if:

- the minor's parent or guardian participates in the minor's treatment and agrees to the medical use of marijuana by the minor; and
- the parent or guardian acts as the designated provider for the minor and has sole control over the minor's marijuana.

Both the minor and the parent or guardian who is acting as the designated provider must be entered in the medical marijuana authorization database and hold a recognition card.

A health care professional who authorizes the medical use of marijuana by a minor must do so as part of the course of treatment of the minor's terminal or debilitating medical condition. If authorizing a minor for the medical use of marijuana, the health care professional must:

- consult with other health care providers involved in the minor's treatment, as medically indicated, before authorization or reauthorization of the medical use of marijuana; and
- reexamine the minor at least once every six months or more frequently as medically indicated.

Medical Use of Marijuana on School Grounds. Under current state law, schools are not required to accommodate the use of marijuana on school grounds or in a school bus. However, a school may permit a minor who meets the state requirements to consume marijuana on school grounds in accordance with school policy relating to medication use on school grounds.

Federal Response to State Marijuana Law. Washington is one of a number of states that have passed legislation allowing the use of marijuana for medicinal purposes—although some of these states permit the use of high cannabidiol products only. Marijuana is classified as a Schedule I substance under the federal Controlled Substances Act. The manufacture, possession, or distribution of Schedule I substances is a criminal offense. Under the previous federal administration, federal prosecutors were instructed to focus investigative and prosecutorial resources related to marijuana on specific enforcement priorities including preventing the distribution of marijuana to minors.

Summary of Bill: A school district must permit a student who meets the requirements of state law to consume marijuana on school grounds, aboard a school bus, or while attending a school-sponsored event. The use must be in accordance with school policy.

Upon the request of a parent or guardian of a student who meets the requirements for use of medical marijuana, the school district board of directors must adopt a policy to authorize parents or guardians to administer marijuana to a student for medical purposes. The policy must, at a minimum:

- require that the student to meet the requirements related to medical use of marijuana by a minor;
- require the parent or guardian to act as the designated provider and assist the student with the consumption of the marijuana;
- establish protocols for verifying the student is authorized to use marijuana for medical purposes such as valid recognition cards;
- authorize parents or guardians of students to administer marijuana to the student;
- identify locations on school grounds where medical marijuana may be administered; and
- prohibit the administration of medical marijuana to a student by smoking or other methods involving inhalation.

Civil, criminal, and professional protections are established for school district officials, employees, volunteers, students, parents, and guardians. If any part of the act is found to conflict with federal requirements, then those conflicting provisions must be declared inoperative.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

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

Staff Summary of Public Testimony: PRO: Medical marijuana can greatly benefit children who have certain medical conditions. It can help when other medications do not, and it can save lives. This bill would allow parents to give their child a mid-day dose of their medical marijuana at school and will help give normalcy to students. This bill is narrow and has protections for school districts. Students would never the carry the product; it would always be with the parents. Medical marijuana can provide rescue doses for people with seizures, which could help a student aboard a school bus. Parents may ride school buses with their children for field trips.

CON: There are disconnects between the progressive vision of Washington and federal policies. School districts are concerned about the liability of adopting a policy that violates federal law and putting federal funding at risk. The policy would need to be updated regularly.

OTHER: Another state entity like the Department of Health or the Office of Superintendent of Public Instruction could possibly be involved to get around school districts' liability concerns. School principals have practical concerns. School buses are not private places to administer medical marijuana.

Persons Testifying: PRO: Representative Brian Blake, Prime Sponsor; Meagan Holt, Viper PAC Project PC; Michael Scott, Project PC Founder; John Barclay, FAE57; Jedidiah Haney; Sarah Rasor.

CON: Jessica Vavrus, Washington State School Directors' Association.

OTHER: Charlie Brown, Federal Way Public Schools; Jerry Bender, Association of Washington School Principals.

Persons Signed In To Testify But Not Testifying: No one.