
HOUSE BILL 2428

State of Washington

66th Legislature

2020 Regular Session

By Representatives Duerr, Walen, Springer, Santos, Ramel, Shewmake, Doglio, Kilduff, Paul, and Pollet

Read first time 01/14/20. Referred to Committee on Education.

1 AN ACT Relating to students' life-threatening allergic reactions;
2 adding a new section to chapter 28A.630 RCW; and providing an
3 expiration date.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** A new section is added to chapter 28A.630
6 RCW to read as follows:

7 (1) (a) The EpiPen work group is established to make
8 recommendations on improving the prevention and treatment of
9 students' life-threatening allergic reactions in schools serving
10 kindergarten through twelfth grade students. One goal of the work
11 group is to recommend policies that will reduce the waste of
12 epinephrine autoinjectors and the costs of purchasing this medication
13 for schools and students' families. Another goal of the work group is
14 to analyze data collected by the office of the superintendent of
15 public instruction in order to make data-informed decisions.

16 (b) The office of the superintendent of public instruction must
17 convene and staff the work group, and must consult the department of
18 health and the health care authority as applicable.

19 (2) (a) The work group must consist of the following members:

20 (i) A school board director recommended by the Washington state
21 school directors' association;

1 (ii) A school superintendent recommended by a Washington
2 association of school administrators;

3 (iii) A school principal recommended by a Washington association
4 of school principals;

5 (iv) A school nurse who works full time at one or two schools
6 recommended by a Washington association of school nurses;

7 (v) A school nurse who is part of the school nurse corps program
8 recommended by a Washington association of school nurses;

9 (vi) A school employee who has agreed to the use of epinephrine
10 autoinjectors as a specific part of their job description recommended
11 by a Washington association of school employees;

12 (vii) A representative of the nursing care quality assurance
13 commission with expertise in standards of nursing practice and the
14 principals of delegation in a school setting recommended by the
15 commission;

16 (viii) A parent of a student with a life-threatening allergy
17 recommended by a nonprofit organization representing people with
18 asthma and allergies for over fifty years;

19 (ix) A student with a life-threatening allergy recommended by a
20 Washington association of parents, teachers, and students;

21 (x) A school health services expert selected by the
22 superintendent of public instruction;

23 (xi) A pediatric physician certified by the American board of
24 allergy and immunology recommended by a Washington association of
25 physicians;

26 (xii) A pharmacist with experience dispensing epinephrine
27 autoinjectors to schools under a standing order recommended by a
28 Washington association of pharmacists; and

29 (xiii) An attorney with experience representing school districts
30 recommended by a Washington association of school attorneys.

31 (b) To the extent possible, the members of the work group must be
32 racially and ethnically diverse and must represent urban, suburban,
33 and rural locations across the state.

34 (c) The work group must elect cochairs from the members described
35 in this subsection (2), one from the education sector and the other
36 from the health sector.

37 (3) The office of the superintendent of public instruction must
38 survey public schools to collect the following data for the 2020-21
39 school year:

1 (a) For students with life-threatening allergic reactions, the
2 number of medication orders, individual health care plans, and
3 emergency care plans; and whether a prescription for an epinephrine
4 autoinjector is on file;

5 (b) The approximate number of epinephrine autoinjectors
6 maintained by schools disaggregated by source;

7 (c) The number of epinephrine autoinjectors administered to and
8 by students, disaggregated by: (i) The source of the medication; (ii)
9 the category of person who administered the medication; (iii) whether
10 the student does or does not have a prescription for an epinephrine
11 autoinjector on file; and (iv) the location of medication
12 administration;

13 (d) The number and types of school personnel designated and
14 trained to administer epinephrine autoinjectors as described in RCW
15 28A.210.383; and

16 (e) The number of letters of refusal to use epinephrine
17 autoinjectors filed compared to the total number of school employees.

18 (4) At a minimum, the work group must:

19 (a) Analyze the survey data collected as required under
20 subsection (3) of this section;

21 (b) Review federal and state laws and state guidelines related to
22 nursing care, children with life-threatening conditions, students
23 with asthma and anaphylaxis, epinephrine autoinjectors in schools,
24 and other relevant laws and guidelines;

25 (c) Discuss topics for which recommendations are required under
26 subsection (5) of this section.

27 (5) By December 15, 2021, and in compliance with RCW 43.01.036,
28 the office of the superintendent of public instruction must report to
29 the appropriate committees of the legislature with a summary of the
30 survey results, the work group's activities, and the work group's
31 recommendations for state agencies and the legislature to improve the
32 prevention and treatment of students' life-threatening allergic
33 reactions in schools serving kindergarten through twelfth grade
34 students. If members of the work group do not agree with the content
35 of the majority report, there may be a minority report included as an
36 addendum to the majority report. At a minimum, the work group must
37 make recommendations on the following topics:

38 (a) Required periodic data collection and analysis related to
39 students' life-threatening allergic reactions, such as the data
40 described in subsection (3) of this section;

1 (b) Whether selling epinephrine autoinjectors singly would reduce
2 epinephrine autoinjector waste without compromising student health
3 and safety;

4 (c) Whether the families of students with life-threatening
5 allergic reactions should be required to provide epinephrine
6 autoinjectors to a school that maintains a school stock of
7 epinephrine autoinjectors and, if not, the minimum number of
8 epinephrine autoinjectors per student that a school should maintain
9 as school stock;

10 (d) Whether to allow or require the administration of over-the-
11 counter allergy medication to treat students' symptoms of allergic
12 reactions, and under what circumstances;

13 (e) Other ways to reduce the waste of epinephrine autoinjectors
14 and the costs of purchasing this medication for schools and students'
15 families, while maintaining students' safety and without increasing
16 schools' liability; and

17 (f) Whether to allow designated trained school employees to
18 administer epinephrine autoinjectors to students without
19 prescriptions for epinephrine autoinjectors who are demonstrating the
20 symptoms of anaphylaxis when a school nurse is not in the vicinity
21 and, if so, policies and procedures to do this safely.

22 (6) This section expires June 30, 2022.

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