## **SHB 1759** - S COMM AMD

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By Committee on Early Learning & K-12 Education

- Strike everything after the enacting clause and insert the 1 2 following:
- "NEW SECTION. Sec. 1. (1) The legislature recognizes that access to information regarding drug overdoses and the secure storage of medication and firearms can help decrease the risks of related injuries and deaths by aiding parents and students in their efforts to keep children and each other safe. The legislature also recognizes 7 that significant increases in ongoing student behavioral health crises, including increased suicide ideation and completion, requires policymakers to promptly and thoughtfully consider reasonable ways of 11 limiting children's access to lethal means.
  - (2) The legislature finds data involving the unintentional ingestion of medications by children highly concerning. Nationally, in 2017 and 2018 there was an average of 47,500 emergency room visits annually for children under the age of six who had accidentally, and without supervision, ingested medicine. This number equates to approximately 130 emergency room visits per day or more than five per hour. During this same two-year period, 23 children under age six were hospitalized each day for an accidental unsupervised ingestion of medicine. Furthermore, the data for 2017 indicates that 84 percent of children receiving emergency treatment for an unsupervised ingestion of medicine were between one and three years old.
  - (3) Although the unintentional ingestion of medications can be fatal for children, regrettably, that threat is only one of many drug-related concerns plaguing families and children. The decadeslong opioid crisis, for example, has had profound impacts in our state. According to data from the department of health, in 2018 opioids were involved in two-thirds of the drug overdoses in Washington state and in the nation. Also, the 2018 Washington healthy youth survey indicated that about 2,500 12th grade students had tried

heroin at least once, and about 3,500 12th grade students had used pain killers to get high in any given month.

- (4) The legislature also finds that the need for safe secure storage information is evidenced by sobering data. For example, researchers at the University of Washington found in 2018 that 63 percent of Washington firearm owners did not practice secure firearm storage; and nationally, about 50,000 children each year are brought to emergency rooms after unintentionally ingesting a medicine when a caregiver was not watching.
- (5) Researchers estimate that one in three American families with children have at least one firearm in the home. About 75 percent of children aged five through 14 with firearm-owning parents know where the firearms are stored, and more than 20 percent of the children have handled a firearm in the home without their parents' knowledge.
- (6) The legislature recognizes that the impacts of firearms on the health and safety of children is profound. For example, an analysis of school related gun violence found that more than 85 percent of school shooters obtained the firearm at their home or from a friend or relative. Researchers have also found that more than 75 percent of firearms used in youth suicide attempts and unintentional injuries were stored in the residence of the victim, a relative, or a friend. Additionally, the two age groups most likely to be both shooters and victims were youth aged 14 to 17, and preschoolers aged five and younger. Furthermore, firearms are the leading cause of death in suicides and homicides by youth and young adults in Washington state.
- (7) The legislature finds that the challenges of the ongoing COVID-19 pandemic have exacerbated troubling trends with children and firearms. For example, the number of unintentional shooting deaths by children in the United States from the beginning of the COVID-19 pandemic, March of 2020 through December of 2020, was 31 percent higher than the same period one year earlier. Nationally during this same period, there were 314 incidents of unintentional shootings by children resulting in 128 gun deaths and 199 nonfatal injuries.
- (8) The legislature, therefore, in recognition of the critical and ongoing need for life-saving information for items that can accidentally or intentionally inflict great harm on children and families, intends to require that school districts and other public education entities use their websites and other communication resources to provide accurate and easily accessed information about

- 1 substance use trends, overdose symptoms and response, and the secure
- 2 storage of prescription drugs, over-the-counter medications, and
- 3 firearms and ammunition.

- 4 <u>NEW SECTION.</u> **Sec. 2.** A new section is added to chapter 28A.320 5 RCW to read as follows:
  - (1) Within existing resources and beginning in the 2023-24 school year, each school district that maintains a website must post a prominent link on their homepage, and the homepage for each school within the district, to information from the department of health provided in accordance with section 4 of this act that addresses substance use trends, overdose symptoms and response, and the secure storage of prescription drugs, over-the-counter medications, and firearms and ammunition.
  - (2) Beginning in the 2023-24 school year, each school district, for the purpose of informing students, families, and other interested persons about available health and safety resources, must also make the information from the department of health accessible through other internet-based communications, such as social media accounts used by the district and through other digital and nondigital communications of the district. Postings required by this subsection may be made multiple times annually and no less frequently than twice each school year.
- (3) This section governs school operation and management under RCW 28A.710.040 and 28A.715.020, and applies to charter schools established under chapter 28A.710 RCW and state-tribal compact schools established under chapter 28A.715 RCW.
- NEW SECTION. Sec. 3. A new section is added to chapter 28A.310 RCW to read as follows:
  - (1) Within existing resources, each educational service district that maintains a website must post a prominent link on their homepage to information from the department of health provided in accordance with section 4 of this act that addresses substance use trends, overdose symptoms and response, and the secure storage of prescription drugs, over-the-counter medications, and firearms and ammunition.
- 36 (2) Each educational service district, for the purpose of informing students, families, and other interested persons about available health and safety resources, must also make the information Code Rev/CC:akl

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- 1 from the department of health accessible through other internet-based
- 2 communications, such as social media accounts used by the educational
- 3 service district and through other digital and nondigital
- 4 communications of the educational service district. Postings required
- 5 by this subsection must be made multiple times annually and no less
- 6 frequently than quarterly.
- 7 <u>NEW SECTION.</u> **Sec. 4.** A new section is added to chapter 70.54 8 RCW to read as follows:
- 9 The department of health shall post and periodically revise on 10 its website information about substance use trends, overdose symptoms
- and response, and the secure storage of prescription drugs, over-the-
- 12 counter medications, and firearms and ammunition. The information
- 13 must be provided or otherwise made accessible to school districts,
- 14 charter public schools, state-tribal compact schools, and educational
- 15 service districts, and must be formatted for the needs of public
- 16 school students and families as provided in sections 2 and 3 of this
- $\,$  17  $\,$  act. The information also must be in the form of a template that can
- 18 be revised as necessary and that:
- 19 (1) Includes website addresses and telephone numbers of one or 20 more public health agencies with applicable information;
- 21 (2) May include website addresses and telephone numbers of one or 22 more private organizations with applicable information;
  - (3) Can be replicated for other health and safety topics that are germane to public schools;
    - (4) Can be easily and readily shared with schools and districts in accordance with the requirements of section 2(2) of this act; and
- (5) Includes format and content options that schools and school districts may use to reflect regional, demographic, and cultural differences."

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- On page 1, line 6 of the title, after "resources;" strike the remainder of the title and insert "adding a new section to chapter
- 32 28A.320 RCW; adding a new section to chapter 28A.310 RCW; adding a
- new section to chapter 70.54 RCW; and creating a new section."

<u>EFFECT:</u> Retains the provisions of the underlying bill and adds that school districts, charter schools, and state-tribal compact schools must post a prominent link to the Department of Health information and make this information accessible through communications beginning in the 2023-24 school year.

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