

HOUSE BILL REPORT

SSB 5804

As Passed House - Amended:

February 27, 2024

Title: An act relating to opioid overdose reversal medication in public schools.

Brief Description: Concerning opioid overdose reversal medication in public schools.

Sponsors: Senate Committee on Early Learning & K-12 Education (originally sponsored by Senators Kuderer, Wellman, Dhingra, Frame, Hasegawa, Hunt, Lias, Lovelett, Nguyen, Nobles, Stanford, Valdez and Wilson, C.).

Brief History:

Committee Activity:

Education: 2/15/24, 2/19/24 [DPA].

Floor Activity:

Passed House: 2/27/24, 95-0.

Brief Summary of Substitute Bill (As Amended by House)

- Requires all school districts, charter schools, and state-tribal education compact schools, not just school districts with 2,000 or more students, to obtain and maintain opioid overdose reversal medication in each school and to adopt a related policy.
- Directs the Washington State School Directors' Association to update a model policy that meets specified guidelines.
- Makes available to all public schools a grant program for purchasing opioid overdose reversal medication and training personnel to administer the medication.

HOUSE COMMITTEE ON EDUCATION

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

Majority Report: Do pass as amended. Signed by 15 members: Representatives Santos, Chair; Shavers, Vice Chair; Rude, Ranking Minority Member; McEntire, Assistant Ranking Minority Member; Bergquist, Couture, Eslick, Harris, McClintock, Nance, Ortiz-Self, Pollet, Steele, Stonier and Timmons.

Staff: Megan Wargacki (786-7194).

Background:

Opioid Overdose Reversal Medication.

Opioids, such as heroin, morphine, oxycodone, and fentanyl, act on opioid receptors in the brain and nervous system. An excess amount of opioid in the body can cause extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death.

Opioid overdose medications block the body's opioid receptors and reverse the effects of the opioid. These medications may be injected in a muscle or sprayed into the nose.

To assist a person at risk of experiencing an opioid-related overdose, high schools are authorized to obtain and maintain opioid overdose reversal medication through a standing order.

Administration.

The school-owned opioid overdose reversal medication may be administered by a school nurse, a health care professional, or trained staff person located at a health care clinic on public school property or under contract with the school district, or other designated trained school personnel. Each high school is encouraged to designate and train at least one school personnel to distribute and administer opioid overdose reversal medication if the high school does not have a full-time school nurse or trained health care clinic staff.

School District Requirements.

A school district with 2,000 or more students must obtain and maintain through a standing order at least one set of opioid overdose reversal medication doses in each of its high schools. However, a school district that demonstrates a good faith effort to obtain the opioid overdose reversal medication through a donation source, but is unable to do so, is exempt from the requirement.

Policies and Procedures.

Legislation enacted in 2019 directed the Office of the Superintendent of Public Instruction (OSPI), in consultation with the Department of Health and the Washington State School Directors' Association (WSSDA), to develop opioid-related overdose policy guidelines and training requirements for public schools and school districts. In addition, the WSSDA was directed to collaborate with the OSPI to either update existing model policy or develop a new model policy that complies with the policy guidelines.

The following school districts are required to adopt an opioid-related overdose policy: (1) school districts with a school that obtains, maintains, distributes, or administers opioid overdose reversal medication; and (2) school districts with 2,000 or more students.

Grants.

Subject to appropriation, the OSPI must administer a grant program to provide funding to public schools with any of grades 9 through 12 and public higher education institutions to purchase opioid overdose reversal medication and train personnel on the administration of the medication to respond to symptoms of an opioid-related overdose.

Summary of Amended Bill:

All school districts, charter schools, and state-tribal education compact schools (referred to collectively as public schools) must obtain and maintain at least one set of opioid overdose reversal medication doses in each of its schools. Each public school is encouraged to designate and train at least one school personnel to distribute and administer opioid overdose reversal medication if the school does not have a full-time school nurse or trained health care clinic staff.

Public schools are encouraged to:

1. include opioid overdose reversal medication in each first aid kit maintained on school property and in any coach or sports first aid kits maintained by the public school, provided that these kits are not accessible to people other than the school personnel who have been designated to distribute or administer opioid overdose reversal medication; and
2. include at least one location of opioid overdose reversal medication on the school's emergency map.

All school districts are required to adopt an opioid-overdose policy. The Washington State School Directors' Association must, by September 1, 2024, collaborate with the Office of the Superintendent of Public Instruction (OSPI) and the Department of Health, to either update existing model policy or develop a new model policy that meets specified policy guidelines.

The OSPI grant program to provide funding to purchase opioid overdose reversal medication and train personnel on the administration of opioid overdose reversal medication is made available to public schools of all grades.

Appropriation: None.

Fiscal Note: Available. New fiscal note requested on February 6, 2024.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Opioid overdose reversal medication is already permitted in high schools and required in high schools in school districts with 2,000 or more students. This bill expands the requirement to all public schools. This bill serves as a safeguard in the education system, where safety should be paramount.

Since 2019 the annual number of opioid-related deaths has almost doubled. Most recreational drugs are laced with fentanyl. Some people die from unknowingly taking fentanyl. In 2022, 36 Washington youth died from synthetic opioid overdoses and 42 young lives were saved through the administration of opioid overdose reversal medication. The bill recognizes that the opioid crisis is not just impacting adults, but reaches into the schools.

Some youth have been urged by health care professionals and other adults to carry opioid overdose reversal medication in case of emergencies. Two doses of the opioid overdose reversal medication are available for \$50 and the medication is often provided for free. The medications come with easy-to-use instructions. Every person and every school should have this life-saving medication.

This bill protects about 750,000 students. Every drug overdose death is a tragedy and it is even more of a tragedy when the deaths are preventable. If the bill can save even one life, it is worth it.

Most drug addicts begin using drugs when they were pre-teens or teenagers. Many parents think that their children know better than to use drugs. Many people who are homeless have had to use opioid overdose reversal medication. Rural communities are often overlooked for funding, availability, and education.

This bill alone does not provide a comprehensive solution to the opioid epidemic, but it takes a significant step towards fostering a better and safer future for youth. There is hope that, in the future, people will not turn to fentanyl to escape whatever is going on in their lives.

(Opposed) None.

Persons Testifying: Senator Patty Kuderer, prime sponsor; Rian Alam; Reilly Jones; Kassie Montgomery; Petar Damjanovic; Christina Minor; and April Provost, Snohomish County Recovery Coalition.

Persons Signed In To Testify But Not Testifying: None.