SENATE BILL NO. _____ HOUSE BILL NO. _____

A BILL to amend and reenact § 22.1-274.2 of the Code of Virginia, relating to local school boards; policies for possession and administration of undesignated stock albuterol inhalers and valved holding chambers; authorization.

Be it enacted by the General Assembly of Virginia:

1. That § 22.1-274.2 of the Code of Virginia is amended and reenacted as follows:

§ 22.1-274.2. Possession and administration of inhaled asthma medications, epinephrine, glucagon, and seizure rescue medications by certain students or school board employees.

A. Local school boards shall develop and implement policies permitting a student with a diagnosis of asthma or anaphylaxis, or both, to possess and self-administer inhaled asthma medications or auto-injectable epinephrine, or both, as the case may be, during the school day, at school-sponsored activities, or while on a school bus or other school property. Such policies shall include, but not be limited to, provisions for:

1. Written consent of the parent, as defined in § 22.1-1, of a student with a diagnosis of asthma or anaphylaxis, or both, that the student may self-administer inhaled asthma medications or auto-injectable epinephrine, or both, as the case may be.

2. Written notice from the student's primary care provider or medical specialist, or a licensed physician or licensed advanced practice registered nurse, that (i) identifies the student; (ii) states that the student has a diagnosis of asthma or anaphylaxis, or both, and has approval to self-administer inhaled asthma medications or auto-injectable epinephrine, or both, as the case may be, that have been prescribed or authorized for the student; (iii) specifies the name and dosage of the medication, the frequency in which it is to be administered and certain circumstances which may warrant the use of inhaled asthma medications or auto-injectable epinephrine, such as before exercising or engaging in physical activity to prevent the onset of asthma symptoms or to alleviate asthma symptoms after the onset of an asthma episode; and (iv) attests to the student's demonstrated ability to safely and effectively self-administer inhaled asthma medications or auto-injectable epinephrine, or both, as the case may be.

3. Development of an individualized health care plan, including emergency procedures for any life-threatening conditions.

4. Consultation with the student's parent before any limitations or restrictions are imposed upon a student's possession and self-administration of inhaled asthma medications and auto-injectable epinephrine, and before the permission to possess and self-administer inhaled asthma medications and auto-injectable epinephrine at any point during the school year is revoked.

5. Self-administration of inhaled asthma medications and auto-injectable epinephrine to be consistent with the purposes of the Virginia School Health Guidelines and the Guidelines for Specialized Health Care Procedure Manuals, which are jointly issued by the Department of Education and the Department of Health.

6. Disclosure or dissemination of information pertaining to the health condition of a student to school board employees to comply with §§ 22.1-287 and 22.1-289 and the federal Family Education Rights and Privacy Act of 1974, as amended, 20 U.S.C. § 1232g, which govern the disclosure and dissemination of information contained in student scholastic records.

B. The permission granted a student with a diagnosis of asthma or anaphylaxis, or both, to possess and self-administer inhaled asthma medications or auto-injectable epinephrine, or both, shall be effective for one school year. Permission to possess and self-administer such medications shall be renewed annually. For the purposes of this section, "one school year" means 365 calendar days.

C. Local school boards shall adopt and implement policies for the possession and administration of epinephrine in every school, to be administered by any school nurse, employee of the school board, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of epinephrine to any student believed to be having an anaphylactic reaction. Such policies shall require that at least one school nurse, employee of the school board, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of epinephrine has the means to access at all times during regular school hours any such epinephrine that is stored in a locked or otherwise generally inaccessible container or area.

D. Each local school board shall adopt and implement policies for the possession and administration of undesignated stock albuterol inhalers and valved holding chambers in every public school in the local school division, to be administered by any school nurse, licensed athletic trainer under contract with a local school division, employee of the school board, employee of a local governing body, or employee of a local health department who is authorized by the local health director or a prescriber and trained in the administration of albuterol inhalers and valved holding chambers for any student believed in good faith to be in need of such medication.

E. Any local school board may adopt and implement policies for the possession and administration of undesignated nasal or injectable glucagon in each public elementary or secondary school in the local school division, provided that such policies are consistent with the guidance outlined in the most recent revision of the Diabetes Management In School: Manual for Unlicensed Personnel published by the Department and include guidance outlining the following:

1. One or more locations in each public elementary or secondary school in the local school division in which doses of such undesignated glucagon shall be stored;

2. The conditions under which doses of such undesignated glucagon shall be stored, replaced, and disposed;

3. The individuals who are authorized to access and administer doses of such undesignated glucagon in an emergency and training requirements for such individuals; and

4. A process for requesting emergency medical services and notifying appropriate personnel immediately after a dose of such undesignated glucagon is administered.

F. Any public elementary or secondary school may maintain a supply of nasal or injectable glucagon in any secure location that is immediately accessible to any school nurse or other employee trained in the administration of nasal and injectable glucagon prescribed to the school by a prescriber, as defined in § 54.1-3401. Any such school shall ensure that such a supply consists of at least two doses. Any school nurse or other authorized employee who is trained in the administration of nasal and injectable glucagon consistent with the guidance outlined in the most recent revision of the Diabetes Management In School: Manual for Unlicensed Personnel published by the Department may administer nasal or

injectable glucagon from undesignated inventory with parental consent and if the student's prescribed glucagon is not available on school grounds or has expired.

G. Any school board may accept donations of nasal or injectable glucagon from a wholesale distributor of glucagon or donations of money from any individual to purchase nasal or injectable glucagon for the purpose of maintenance and administration in a public school in the local school division as permitted pursuant to subsection F.

H. Any school board may adopt and implement policies:

1. Permitting any student enrolled in any secondary school in the local school division who has a diagnosis of a condition causing seizures to possess seizure rescue medications during the school day, at school-sponsored activities, or while on a school bus or other school property if (i) the student's parent has submitted a seizure management and action plan in accordance with § 22.1-274.6 that includes written consent of the parent and written approval of the student's primary care provider for such self-possession and (ii) the school nurse has been notified of such self-possession; or

2. For the administration of seizure rescue medications to any student enrolled in any elementary or secondary school in the local school division who has a diagnosis of a condition causing seizures, consistent with the provisions of subsection CC of § 54.1-3408.

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