Committee Substitute

for

Senate Bill 195

By Senator Rucker

[Originating in the Committee on Health and Human Resources and then to the Committee on Education; reported on February 8, 2023]
A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new article, designated §18-2L-1, §18-2L-2, §18-2L-3, and §18-2L-4, all relating to the creation of the Ready-to-Use Glucagon Rescue Therapies for Schools Act; defining terms; prescribing ready-to-use undesignated glucagon rescue therapies; and training for school personnel.

Be it enacted by the Legislature of West Virginia:

ARTICLE 2L. THE READY-TO-USE GLUCAGON RESCUE THERAPIES FOR SCHOOLS ACT.

§18-2L-1. Title of article.
This article shall be known as the "Ready-to-Use Glucagon Rescue Therapies for Schools Act".

§18-2L-2. Definitions.
As used in this article:
"Diabetes care plan" means a document that specifies the diabetes-related services needed by a student at school and at school-sponsored activities and also identifies the appropriate staff to provide and supervise these services.
"Health care provider" means a physician licensed to practice medicine in all of its branches, advanced practice registered nurse who has a written collaboration agreement with a collaborating physician who authorizes the provision of diabetes care, or a physician assistant who has a written collaboration agreement with a collaborating physician who authorizes the provision of diabetes care.
"Principal" means the principal of the school.
"School" means any primary or secondary public, charter, or private school located in this State.
"School personnel" means a person who is employed by a public school district or private school, a person who is employed by a local health department and assigned to a school, or a
person who contracts with a school or school district to perform services in connection with a student's diabetes care plan.

"Ready-to-use undesignated glucagon rescue therapy" means a glucagon rescue therapy approved by the U.S. Food and Drug Administration that does not require reconstitution for the treatment of severe hypoglycemia in a dosage form and with a delivery system that can be self-administered or rapidly administered to the patient in an emergency, (for example pre-filled injectable or nasally administered glucagon) which is prescribed in the name of a school or school district as provided in §18-2L-1 of this code.

§18-2L-3. Ready-to-use undesignated glucagon rescue therapies.

(a)(1) A licensed health care provider with the authority to prescribe ready-to-use glucagon rescue therapy may prescribe ready-to-use glucagon rescue therapy in the name of the school district or school to be maintained for use when necessary. Ready-to-use undesignated glucagon rescue therapy prescriptions shall be accompanied by a standing order for the administration of school supplied, ready-to-use undesignated glucagon rescue therapy for potentially severe hypoglycemic reactions.

(2) A school may maintain a supply of a ready-to-use undesignated glucagon rescue therapy in any secure location that is immediately accessible to school personnel. Any supply of ready-to-use undesignated glucagon rescue therapies shall be maintained in accordance with the manufacturer's instructions. School personnel may administer a ready-to-use undesignated glucagon rescue therapy that does not require reconstitution if the student's prescribed glucagon is not available on-site or has expired.

(3) Ready-to-use undesignated glucagon rescue therapies may be used on school property, including the school building, playground, and school bus, as well as during field trips or sanctioned excursions away from school property.

(4) School personnel may only administer a ready-to-use undesignated glucagon rescue therapy with the approval of the school nurse, unless said school personnel is the school nurse.
(b)(1) If a student is injured or harmed due to the administration of ready-to-use undesignated glucagon rescue therapy that a licensed health professional with prescribing authority has prescribed and a pharmacist has dispensed to a school under this section, the licensed health professional with prescribing authority and pharmacist may not be held responsible for the injury unless he or she issued the prescription with a conscious disregard for safety.

(2) If school personnel administers ready-to-use undesignated glucagon rescue therapy to a student who the school nurse, in good faith, believes to be experiencing a severe hypoglycemic reaction and administers the medication in accordance with the written policies of the school district or private school, then the school personnel, the school district or school of employment, and the members of the governing school board, and chief administrator thereof are not liable in any criminal action or for civil damages in their individual, marital, governmental, corporate, or other capacity as a result of providing the glucagon.

(c) Immediately after the administration of ready-to-use undesignated glucagon rescue therapy, a school shall call local emergency assistance, such as 911, and notify the school nurse, unless the school nurse was the one administering the undesignated glucagon, and the student's parent or guardian or emergency contact, if known, and health care provider of its use.

§18-2L-4. Training for school personnel.

(a) In schools that have a student with diabetes, all school personnel may receive training in the basics of diabetes care, how to identify when a student with diabetes needs immediate or emergency medical attention, and whom to contact in the case of an emergency during regular in-service training.

(b) Elected school personnel may be trained to perform tasks necessary to assist a student with diabetes in accordance with his or her diabetes care plan, including training to do the following: (1) check blood glucose and record results; (2) recognize and respond to the symptoms of hypoglycemia according to the diabetes care plan; (3) recognize and respond to the symptoms
of hyperglycemia according to the diabetes care plan; (4) estimate the number of carbohydrates in a snack or lunch; (5) administer insulin according to the student's diabetes care plan and keep a record of the amount administered; and (6) respond in an emergency, including administering glucagon and calling local emergency assistance, such as 911.

(c) The school district shall coordinate staff training.

(d) School nurses, where available, or health care providers may provide technical assistance or consultation or both to school personnel.

(e) An information sheet shall be provided to any school employee who transports a student for school-sponsored activities. It shall identify the student with diabetes, identify potential emergencies that may occur as a result of the student's diabetes and the appropriate responses to such emergencies, and provide emergency contact information.

NOTE: The purpose of this bill is to create the Ready-to-Use Glucagon Rescue Therapies for Schools Act. The bill authorizes health care professionals to prescribe glucagon rescue therapies to schools along with a standing order to administer the therapies in emergency hypoglycemic emergencies. The bill also authorizes elected school personnel to receive training for diabetes-related emergencies and general diabetes care.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.