Committee Substitute
for
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for
Senate Bill 195

BY SENATOR RUCKER
[Originating in the Committee on Education; reported on February 17, 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 Glucagon for Schools Act; defining terms; allowing prescription for undesignated glucagon in the name of a school district or school; allowing school to maintain a supply of undesignated glucagon; allowing trained school personnel to administer undesignated glucagon if the student’s prescribed glucagon is not available on-site or has expired; prohibiting licensed health professional with prescribing authority and pharmacist from being held responsible for harm due to the administration of undesignated glucagon in certain instances; declaring school personnel, the school district or school of employment, members of the governing school board, and the chief administrator are not liable in any criminal action or for civil damages as a result of administering undesignated glucagon in certain instances; requiring a school to call local emergency assistance and notify certain others immediately after the administration of undesignated glucagon; stating that each school should have an easily accessible glucometer on site; allowing all school personnel in schools that have students with diabetes to receive certain training; allowing designated school personnel to be trained to perform tasks necessary to assist a student with diabetes in accordance with his or her diabetes care plan; allowing school district to coordinate staff training; allowing school nurses, where available, or certain health care providers to provide technical assistance, consultation, or both to school personnel; and requiring an information sheet to be provided to any school employee who transports a student for school-sponsored activities.

Be it enacted by the Legislature of West Virginia:

ARTICLE 2L. THE GLUCAGON FOR SCHOOLS ACT.

§18-2L-1. Title of article.

This article shall be known as the Glucagon 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.


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

(2) A school may maintain a supply of undesignated glucagon in any secure location that is immediately accessible to school personnel. Any supply of glucagon shall be maintained in accordance with the manufacturer’s instructions. Trained school personnel may administer undesignated glucagon if the student’s prescribed glucagon is not available on-site or has expired.
(3) Glucagon may be used on school property, including the school building, playground, and school bus, as well as during field trips or school sponsored excursions away from school property.

(4) School personnel may only administer glucagon 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 undesignated glucagon 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 undesignated glucagon in good faith to a student who is believed 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, 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 undesignated glucagon, 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.

(d) Each school should but is not required to have an easily accessible glucometer on site.

§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) Designated 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; and (4) respond in an emergency, including administering glucagon and calling local emergency assistance, such as 911.

(c) The school district may coordinate staff training.

(d) School nurses, where available, or health care providers with expertise in pediatric diabetes may provide technical assistance, 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.