

2024 SESSION POSITION PAPER

BILL: SB 180 - Public and Nonpublic Schools - Auto-Injectable Epinephrine and

Bronchodilators - Use, Availability, Training, and Policies

COMMITTEE: House – Ways & Means Committee

POSITION: Letter of Information

BILL ANALYSIS: Senate Bill 180 requires each local board of education to establish a policy for

public schools to authorize the school nurse and other school personnel (including personnel with no medical training) to administer auto-injectable epinephrine to students perceived to be in anaphylaxis and bronchodilators to a student who is experiencing asthma-related symptoms or perceived to be in respiratory distress, regardless of whether the student has a diagnosis of asthma or has a prescription for a bronchodilator by an authorized licensed health care practitioner. The bill also requires the policy to include paid professional development training, developed by MSDE for school nurses and other personnel on how to recognize the symptoms of asthma, respiratory distress, and anaphylaxis. The bill requires that a student's parents be notified of the administration of a bronchodilator and records be kept and reported to MSDE. The bill also authorizes each nonpublic school to

establish a policy that meets the same requirements.

POSITION RATIONALE: When introduced the Maryland Association of County Health Officers (MACHO) provided a letter of support for the overall goals of SB 180 while respectfully requesting several amende after discussions with both primary bill sponsors in the House and Senate. MACHO supports the intent of the bill to improve student access to potentially life-saving medication such as bronchodilator rescue inhalers and auto-injectable epinephrine. More than half (14) of MACHO's member Health Officers run local health departments which operate the school health program in the school systems in their jurisdictions.

Our amendment to address the reporting requirements to notify students' parents and legal guardians of the use of a bronchodilator and report to the Department the number of incidents of use, was addressed by specifying that reports are only required in instances of the use of a stock bronchodilator in accordance with the bill.

However, our concerns at the root of our other amendments, remain in the bill as amended:

- Add liability protection for both prescribers of school bronchodilators and any pharmacist or pharmacy filling the prescription:
 - O Add to Page 7, line 27 AFTER "CHILD IN DISTRESS": "NOR ANY AUTHORIZED LICENSED PRESCRIBER PROVIDING THE STANDING PROTOCOL OR PRESCRIPTION OF A SCHOOL BRONCHODILATOR AND ANY PHARMACIST OR PHARMACY FILLING THE PRESCRIPTION ARE TO INCUR LIABILITY FOR THE PRESCRIPTION OR ADMINISTRATION OF STOCK BRONCHODILATORS TO STUDENTS WITH ASTHMA OR SUFFERING FROM RESPIRATORY DISTRESS,"

The above changes should be mirrored in Section 7–426.7.

HOU W&M SB 180 MACHO – LOI Page 2

• Requested that the effective date of the bill be moved from July 1, 2024, to a later date, to give schools and school health staff enough time to implement the trainings required by the bill and secure bronchodilators and auto-injectable epinephrine, as available. This might also allow MDH to work with the county boards of education to develop guidance to support the bill's intent.

Lastly, MACHO raised concerns of the intent of the bill to provide treatment access to students who have not received medical care, even a diagnosis, for their chronic asthma symptoms. Management of asthma is complex and requires resources and expertise not available or appropriate in a school health setting, including clinical testing and assessment, daily prevention medication, and teaching on proper medication usage techniques. It is important that the increased access to bronchodilators in schools resulting from this bill not unintentionally divert children away from the appropriate diagnosis and management of chronic asthma by healthcare providers.

MACHO remains very concerned about the school nurse shortage in the state, access to pediatric primary care, and access to pediatric primary care in school-based settings and urges the committee to consider comprehensive policies to ensure that students have access to the appropriate asthma evaluation and medications they need and the appropriate staffing to support these efforts.

For these reasons, MACHO submits this Letter of Information for the Committee's consideration on Senate Bill 180 before the House Ways & Means Committee. For more information, please contact Ruth Maiorana, Executive Director, MACHO, at maiora1@jhu.edu or 410-937-1433. This communication reflects the position of MACHO.