

**Testimony in Opposition to House Bill 384  
Public and Nonpublic Schools - Bronchodilator and Epinephrine Availability  
and Use – Policies**

**Education, Health, and Environmental Affairs  
Tuesday, April 5<sup>th</sup>, 2022  
1:00 p.m.**

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The Maryland State Education Association opposes House Bill 384, which would require each county board of education and authorize nonpublic schools in the State to establish a policy to obtain, administer, and train certain school personnel to administer in emergency situations bronchodilators to a student who is determined to have asthma, is experiencing asthma-related symptoms, or is perceived to be in respiratory distress. It would also require the Department of Education to develop training for school personnel in identification of respiratory distress in students.

MSEA represents 76,000 educators and school employees who work in Maryland's public schools, teaching and preparing our almost 900,000 students for the careers and jobs of the future. MSEA also represents 39 local affiliates in every county across the state of Maryland, and our parent affiliate is the 3-million-member National Education Association (NEA).

This legislation seeks to adjust procedures related to the administration of emergency medicines and treatments in schools, including epinephrine and bronchodilators. While we share the goal of keeping all children safe and healthy in school, we must raise our urgent concerns about the consequences of asking non-clinicians such as teachers to make rapid determinations about the appropriate treatment for a student in medical distress.

Nurses and other clinical staff are essential to our schools because their specialized medical training allows them to assist students in situations where non-clinical personnel are not equipped to provide treatment. This bill proposes that non-clinical



school personnel could be trained to differentiate between anaphylaxis and asthma or respiratory distress, and from there determine the appropriate treatment. This approach increases health risks for students, places an inordinate burden on non-clinical school personnel, and is not an appropriate remedy for emergent health situations. Just as teachers train for years in their certification areas, clinical personnel have highly specialized expertise that cannot be replicated in an hours-long training.

**We urge the committee to issue an Unfavorable Report on House Bill 384.**