



**Board of Education of Howard County
Testimony Submitted to the Maryland Senate,
Education, Health, and Environmental Affairs Committee
April 5, 2022**

**Board of Education
of Howard County**

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**HB0384: UNFAVORABLE
Public and Nonpublic Schools - Bronchodilator and Epinephrine Availability
and Use – Policies**

The Board of Education of Howard County (the Board) opposes **HB0384 Public and Nonpublic Schools - Bronchodilator and Epinephrine Availability and Use - Policies** as an unfunded mandate that should be left to health experts to determine necessary actions.

HB0384 requires county boards to establish a policy for schools to authorize school nurses or other personnel to administer a bronchodilator, if available, to a student who is determined to have asthma, is experiencing asthma-related symptoms or in respiratory distress regardless of whether the student has been diagnosed or has a prescription (unless they are a PreKindergarten student). The policy must include training for nurses and school personnel on recognizing signs and symptoms, procedures for emergency administration, authorization for school nurses to obtain and store at schools, and a requirement for each public school to develop and implement a method for notifying parents of the policy at the start of each school year. Schools may accept donated bronchodilators from licensed pharmacies or manufacturers or obtain grants. Staff using the equipment in good faith cannot be held personally liable for any act or omission. Schools must notify parents of each use, make a record of the incident, and submit a report to MSDE on the number of uses.

The provisions of HB0384 that call for administration regardless of prescription are concerning to Howard County Public School System (HCPSS) Health staff. Medication should only be administered with a physician order, especially for a steroid like a bronchodilator to someone that is “perceived” to be in distress. In schools where a health assistant is utilized, moreover a non-medical school staff volunteer as called for in the amended version of the bill, there would be a concern with conducting assessments, which include evaluation of breathing in the case of respiratory distress. As a measure of the significance of this, a certification for health assistants does not include the ability to assess lung sounds. HCPSS health provisions already direct staff to administer Epi in the case of asthma-related complications and to further call 911.

Additionally, while the bill calls for use of a bronchodilator if available, the required policy that includes training for all schools implies they will be available for use at all

schools. Maintaining these in all HCPSS schools would be costly as they are not interchangeable for multiple uses.

For these reasons, we urge a UNFAVORABLE report of HB0384 from this Committee.