

Testimony in Support of House Bill 2488 House Education Committee Presented by Kimber Kasitz, President Kansas School Nurses Organization January 30, 2020

Chairman Huebert and Members of the Committee:

Thank you for the opportunity to testify on behalf of Kansas School Nurses Organization in support of HB 2488, which will remove barriers and allow more Kansas schools to implement lifesaving stock emergency medications.

Kansas School Nurses Organization (KSNO) board members developed a "Request for revised and renamed Epi kits legislation with addition of stock Albuterol" document. The document included background information, the original statute and the rationale for the proposed changes to the statute. KSNO collaborated with Kansas Medical Society, Kansas Association of School Boards, Kansas Board of Pharmacy and Kansas State Board of Nursing for feedback on the revised statute and incorporated recommendations from the multidisciplinary group.

The majority of school districts in Kansas, including Wichita Public Schools, has experienced barriers in implementing stock emergency medication programs with the current statute. The current statute has some drawbacks:

- Pharmacists have been hesitant to take on the responsibilities of stock medication inventory not under their control, thereby, limiting school districts from being able to implement stock emergency medications.
 - The consultant pharmacist shall have supervisory responsibility for maintaining the epinephrine kit.
 - The consultant pharmacist shall be responsible for developing procedures, proper control and accountability for the epinephrine kit.
 - An epinephrine kit shall be maintained under the control of the consultant pharmacist.
- No protection against civil liability is provided for physicians and pharmacists.
- If a member of the public was having an anaphylactic reaction while attending an event at a school, on school grounds or at a school sponsored event, they could not receive epinephrine from the stock supply.
 - o Epinephrine can only be administered to a student or member of the school staff.

It is important to remember that deaths from severe life-threatening allergies or asthma can be prevented when we remove barriers to access life-saving emergency medications. No child should ever die from these treatable diseases!

The good news is that HB 2488 removes barriers and provides more guidance along with integrating evidence-based safe practices for schools:

- Requires physician or mid-level practitioner to review district policies and procedures for emergency stock medications prior to writing the required order.
- The pharmacist's role is to distribute the stock supply with a physician or mid-level practitioner order. There is no requirement of pharmacist oversite for the program.
- Includes language that protects prescriber, pharmacist and person administering the emergency medication from civil liability.
- Expansion of the persons who may receive the emergency medications to be any individual and not limited to a student or school staff.
- Requires development of school policy and procedures that include:
 - Storage of emergency medication in a safe, accessible, temperature controlled location.
 - o Emergency stock medication must be monitored periodically.
 - O Designated personnel who administer emergency medications must receive training at least annually and include the minimum training requirements:
 - 1) Recognition of the signs and symptoms of anaphylaxis and respiratory distress;
 - 2) Administration of emergency medications; 3) Calling 911 to initiate emergency medical system; 4) Monitoring the individual's condition after emergency medication is given: 5) Notification of the parent, guardian, or next of kin; and 6) Safe disposal and sanitation of used equipment.
- Publish information related to the school's emergency medication policies and procedures and keep records of the training provided.
- Provides examples of funding sources that may be utilized to implement the stock emergency medication program. (monetary gifts, grants, donations of emergency medication and supplies from a manufacturer or wholesaler)

The addition of stock albuterol has been incorporated into HB 2488. It makes sense to include albuterol as a stock emergency medication when it is estimated that 8.4% of children and 7.5% of adults have asthma (CDC, 2019). Asthma is the leading cause of chronic disease in children (CDC, 2018a) and is the top reason for missed school days (Zahran, et al., 2018). Many families struggle with providing an extra "back-up" inhaler for their child since insurance companies typically only cover one inhaler for a specified amount of time. Students who self-carry their inhaler may lose it and not have a back-up inhaler at school. Most families cannot afford to pay for an extra inhaler out of their pocket.

Students with chronic health conditions such as severe life-threatening allergies or asthma, have a right to feel safe at school. HB 2488 will allow school nurses and trained personnel to not only save lives, but also impact student health and safety which will ultimately increase attendance and student achievement.

On behalf of Kansas School Nurses Organization, I strongly support House Bill 2488.

Respectfully submitted,

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