

SESSION OF 2005

**CONFERENCE COMMITTEE REPORT BRIEF  
ON SENATE BILL NO. 10**

As Agreed to March 30, 2005

**Brief\***

The bill would amend current law concerning the self-administration by elementary and secondary students of medication used to treat serious allergic reactions (anaphylaxis) and asthma. Specifically, the bill would:

- Further define “medication,” “school,” and create a definition for “self-administration” of medication;
- Require each school district to adopt a policy authorizing self-administration of medication for students in kindergarten and grades 1 through 5 in addition to the currently authorized grades 6 through 12;
- Require that each school district adopt policy provisions as set out in the bill;
- Add additional policy requirements as follows:
  - a requirement that the student demonstrate to the student’s health care provider or designee and to the school nurse or designee the skill level necessary to use the medication (if there is no school nurse, the school would designate someone to whom students would demonstrate the required skills);
  - a requirement that the health care provider has prepared a written treatment plan for managing asthma or anaphylaxis episodes and for medication use during school hours;

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- a requirement that any written documentation as required by the school has been completed and submitted to the school by the student's parent or guardian, including the written treatment plan and documents related to liability;
  - a requirement that school personnel who supervise students authorized to self-medicate be notified of the authorization;
  - any other requirement imposed by the school district pursuant to the relevant sections of the legislation;
- Require each school district to annually renew the parental authorization for self-administration of medication;
  - Specify that school district officers are not liable in any action for damage or death resulting directly or indirectly from self-administration of medication (Under current law, only school district employees and agents are protected from liability for injury resulting from self-administration);
  - Require that any back-up medication be kept at the student's school in a location to which the student has immediate access in the event of an asthma or anaphylaxis emergency;
  - Require that the information regarding self-administration of medication be kept on file at the student's school in a location easily accessible in the event of an asthma or anaphylaxis emergency;
  - Require that the student's self-administration authorization allow the student to possess and use the medication wherever the student is subject to the jurisdiction or supervision of the school district;
  - Permit a board of education to adopt policies regarding self-administration of medication; and
  - Remove the law's sunset provision.

## **Conference Committee Action**

The Conference Committee agreed to reinsert and clarify the provision removed from the bill by the House Committee. That provision would authorize schools that do not have a school nurse to designate a person to whom students would demonstrate their self-medication skills.

## **Background**

SB 340, enacted in 2004, authorized the self-administration of medication by students in grades 6 through 12 and permitted the authorization for students in kindergarten and grades 1 through 5. The legislation included a one-year sunset provision.

As part of its Committee Report to the 2005 Legislature, the Legislative Educational Planning Committee recommended amendments to the 2004 law to incorporate provisions in recently enacted federal law. The federal law would give states, that have self-medication policies that extend to elementary children, preference with regard to certain federal grants. Additionally, the Legislative Educational Planning Committee recommended that students who self-medicate demonstrate the appropriate skill level; inclusion of a requirement that, if provided, schools keep back-up medication; clarification that the self-administration policies would apply anywhere a student is subject to the jurisdiction or supervision of the school district; and extension of the sunset provision.

Conferees who testified regarding SB 10 included the Kansas National Education Association, the Kansas Association of School Boards, the Kansas Medical Society, and the American Lung Association of Kansas. Comments also were submitted by Representative Willa DeCastro and representatives of the Kansas School Nurses Organization. The conferees and those who submitted comments were supportive of the bill. Consideration was requested to delete the sunset provision; to require that back-up medication be provided to the school; to require that each school district adopt all the policy components listed in the bill; to require the school to designate another nurse if the school nurse is not available; and, that the teachers with whom the student comes in contact be informed of the permission to self-medicate.

The Senate Committee on Public Health and Welfare amendments to SB 10 included:

- Requiring that the policy components specified in the legislation be included in the school district's self-administration of medication policy;
- Reinserting language that limits liability only for school boards that are in compliance with the Act;
- Inserting the word "any" in the section regarding back-up medication to require the school to keep back-up medication if it is provided;
- Adding a new requirement that school personnel who supervise students authorized to self-medicate be notified of the authorization;
- Changing the authority of a board of education from adopting a "resolution" to adopting a "policy"; and
- Removing the legislation's sunset provision.

The House Committee on Health and Human Services amendment removed the provision that would have allowed a school that does not employ a school nurse to designate a person to act in the place of the school nurse for the purpose of determining whether a student has sufficient skill to self-administer medication. The amendment was requested by both a representative of the National Association of School Nurses and the Coordinator for Health Services of Wichita.

The fiscal note prepared by the Director of the Budget on the introduced version of the bill states that enactment of SB 10 would have no fiscal impact on the Department of Education.