An Act To Establish Guidelines for the Stocking and Administration of Epinephrine Autoinjectors in Schools

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 203.
Reference to the Committee on Education and Cultural Affairs suggested and ordered printed.

Presented by Representative PETERS of Rumford.
Cosponsored by Senator JOHNSON of Lincoln and Representatives: DAUGTRY of Brunswick, GRAHAM of North Yarmouth, HUBBELL of Bar Harbor, KORNFIELD of Bangor, MacDONALD of Boothbay, SCHNECK of Bangor, SHORT of Pittsfield.
Be it enacted by the People of the State of Maine as follows:

Sec. 1. 20-A MRSA §6305 is enacted to read:

§6305. Epinephrine autoinjectors; guidelines; emergency administration

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Designated school personnel" means those employees, agents or volunteers of a school designated by the governing body of a school to provide or administer an epinephrine autoinjector to a student who have completed the training required by rule to provide or administer an epinephrine autoinjector to a student.

B. "Epinephrine autoinjector" means a device that automatically injects a premeasured dose of epinephrine.

C. "School" means a public or approved private school.

2. Epinephrine autoinjectors maintained by school. A school may maintain a supply of epinephrine autoinjectors if the epinephrine autoinjectors are used in accordance with subsection 3 and prescribed in the name of the school by:

A. A physician licensed to practice medicine in the State;  
B. An advanced practice registered nurse licensed under Title 32, chapter 31; or  
C. A physician assistant licensed under Title 32, chapter 48.

3. Use of epinephrine autoinjectors. The governing body of a school may authorize school nurses and designated school personnel to:

A. Provide an epinephrine autoinjector to a student to self-administer the epinephrine autoinjector in accordance with a prescription specific to the student on file with the school nurse;  
B. Administer an epinephrine autoinjector to a student in accordance with a prescription specific to the student on file with the school nurse; or  
C. Administer an epinephrine autoinjector to a student on school premises, whether or not the student has a prescription for an epinephrine autoinjector, if the student's parent has approved the administration of an epinephrine autoinjector and the school nurse or designated school personnel in good faith believe the student is experiencing anaphylaxis. The administration must be in accordance with a standing protocol from:

1. A physician licensed to practice medicine in the State;  
2. An advanced practice registered nurse licensed under Title 32, chapter 31; or  
3. A physician assistant licensed under Title 32, chapter 48.

4. Manufacturer or supplier arrangement. A school may enter into an arrangement with a manufacturer of epinephrine autoinjectors or a 3rd-party supplier of
epinephrine autoinjectors to obtain epinephrine autoinjectors at fair market prices or reduced prices or for free.

5. Guidelines. By December 1, 2014, the department in consultation with the Department of Health and Human Services shall develop and make available to all schools guidelines for the management of students with life-threatening allergies. The guidelines must include, but are not limited to:

A. Education and training for school personnel on the management of students with life-threatening allergies, including training related to the administration of an epinephrine autoinjector;

B. Procedures for responding to life-threatening allergic reactions;

C. A process for the development of individualized health care and allergy action plans for students with known life-threatening allergies; and

D. Protocols to prevent exposure to allergens.

6. Plan. By January 1, 2015, the governing body of a school shall:

A. Implement a plan based on the guidelines developed pursuant to subsection 5 for the management of students with life-threatening allergies enrolled in the schools under its jurisdiction; and

B. Make the plan under paragraph A available on the governing body's publicly accessible website or the publicly accessible website of each school under the governing body's jurisdiction or, if such websites do not exist, make the plan publicly available through other means as determined by the governing body.

The governing body of the school shall annually attest to the department that the schools under its jurisdiction are implementing the plan in accordance with the provisions of this subsection.

7. Immunity. A school and its employees and agents, including a physician licensed to practice medicine in the State, an advanced practice registered nurse licensed under Title 32, chapter 31 or a physician assistant licensed under Title 32, chapter 48 providing a prescription or standing protocol for school epinephrine autoinjectors, are not liable for damages for any injuries that result from the administration or self-administration of an epinephrine autoinjector that may constitute ordinary negligence, regardless of whether authorization was given by the student's parent or by the student's physician, physician assistant or advanced practice registered nurse as long as the administration of an epinephrine autoinjector is in accordance with this section. This immunity does not apply to acts or omissions constituting gross, willful or wanton negligence. The administration of an epinephrine autoinjector in accordance with this section is not the practice of medicine. The immunity from liability provided under this subsection is in addition to and not in lieu of that provided under Title 14, section 164.

Sec. 2. Rules. By December 1, 2014, the Department of Education and the Department of Health and Human Services shall adopt rules necessary to carry out the provisions of the Maine Revised Statutes, Title 20-A, section 6305. Rules adopted
pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. The rules must:

1. Require each school to submit to the Department of Education, on a form developed by the Department of Education, a report of each incident at the school or a school event involving a severe allergic reaction or the administration of an epinephrine autoinjector;

2. Provide for the development and publication, without disclosing personally identifying information, of an annual report by the Department of Education compiling, summarizing and analyzing all incident reports submitted pursuant to subsection 1; and

3. Establish detailed standards for training programs that must be completed by designated school personnel in order to provide or administer an epinephrine autoinjector in accordance with Title 20-A, section 6305. The training program may be conducted online and must, at a minimum, cover:

   A. Techniques on how to recognize symptoms of severe allergic reactions, including anaphylaxis;

   B. Standards and procedures for the storage and administration of epinephrine autoinjectors; and

   C. Emergency follow-up procedures.

SUMMARY

This bill establishes guidelines for the stocking and administering of epinephrine autoinjectors by schools.