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HOUSE BILL NO. 134

AMENDMENT IN THE NATURE OF A SUBSTITUTE (Proposed by the Senate Committee on Education and Health on February 20, 2014)

(Patron Prior to Substitute—Delegate Cole)

A BILL to amend and reenact § 22.1-274 of the Code of Virginia and to amend the Code of Virginia by adding a section numbered 22.1-274.01:1, relating to the care of students who have been diagnosed with diabetes.

Be it enacted by the General Assembly of Virginia:

1. That § 22.1-274 of the Code of Virginia is amended and reenacted and that the Code of Virginia is amended by adding a section numbered 22.1-274.01:1 as follows:

§ 22.1-274. School health services.

- A. A school board shall provide pupil personnel and support services in compliance with § 22.1-253.13:2. A school board may employ school nurses, physicians, physical therapists, occupational therapists, and speech therapists. No such personnel shall be employed unless they meet such standards as may be determined by the Board of Education. Subject to the approval of the appropriate local governing body, a local health department may provide personnel for health services for the school division.
- B. In implementing subsection O of § 22.1-253.13:2, relating to providing support services that are necessary for the efficient and cost-effective operation and maintenance of its public schools, each school board may strive to employ, or contract with local health departments for, nursing services consistent with a ratio of at least one nurse (i) per 2,500 students by July 1, 1996; (ii) per 2,000 students by July 1, 1997; (iii) per 1,500 students by July 1, 1998; and (iv) per 1,000 students by July 1, 1999. In those school divisions in which there are more than 1,000 students in average daily membership in school buildings, this section shall not be construed to encourage the employment of more than one nurse per school building. Further, this section shall not be construed to mandate the aspired-to ratios.
- C. The Board of Education shall monitor the progress in achieving the ratios set forth in subsection B and any subsequent increase in prevailing statewide costs, and the mechanism for funding health services, pursuant to subsection O of § 22.1-253.13:2 and the appropriation act. The Board shall also determine how school health funds are used and school health services are delivered in each locality and shall provide, by December 1, 1994, a detailed analysis of school health expenditures to the House Committee on Education, the House Committee on Appropriations, the Senate Committee on Education and Health, and the Senate Committee on Finance.
- D. With the exception of school administrative personnel and persons employed by school boards who have the specific duty to deliver health-related services, no licensed instructional employee, instructional aide, or clerical employee shall be disciplined, placed on probation, or dismissed on the basis of such employee's refusal to (i) perform nonemergency health-related services for students or (ii) obtain training in the administration of insulin and glucagon. However, instructional aides and clerical employees may not refuse to dispense oral medications.

For the purposes of this subsection, "health-related services" means those activities that, when performed in a health care facility, must be delivered by or under the supervision of a licensed or certified professional.

E. Each school board shall ensure that in school buildings with an instructional and administrative staff of 10 or more (i) at least three employees have current certification or training in emergency first aid, cardiopulmonary resuscitation, and the use of an automated external defibrillator and (ii) if one or more students diagnosed as having diabetes attend such school, at least two employees have been trained in the administration of insulin and glucagon. In school buildings with an instructional and administrative staff of fewer than 10, school boards shall ensure that (a) at least two employees have current certification or training in emergency first aid, cardiopulmonary resuscitation, and the use of an automated external defibrillator and (b) if one or more students diagnosed as having diabetes attend such school, at least one employee has been trained in the administration of insulin and glucagon. "Employee" includes any person employed by a local health department who is assigned to the public school pursuant to an agreement between the local health department and the school board. When a registered nurse, nurse practitioner, physician, or physician assistant is present, no employee who is not a registered nurse, nurse practitioner, physician, or physician assistant shall assist with the administration of insulin or administer glucagon. Prescriber authorization and parental consent shall be obtained for any employee who is not a registered nurse, nurse practitioner, physician, or physician assistant to assist with the administration of insulin and administer glucagon.

HB134S1 2 of 2

F. The training in the administration of insulin and glucagon required by subsection E shall include training in (i) administering a bolus of insulin via an insulin pump, (ii) entering a blood sugar reading into an insulin pump, (iii) entering a carbohydrate count into an insulin pump, (iv) removing or stopping the flow of insulin from an insulin pump, and (v) changing the battery in an insulin pump.

G. The superintendent of each local school division, or his designee, shall provide annually to the local school board written certification that to the best of his knowledge after exercising his due diligence all schools within the division are in compliance with the provisions of subsection E and that the training in the administration of insulin and glucagon required by subsection E complies with subsection F and is in accordance with the Board's Manual for Training Public School Employees in the Administration of Insulin and Glucagon.

§ 22.1-274.01:1. Students who are diagnosed with diabetes; self-care.

A. Each local school board shall permit each enrolled student who is diagnosed with diabetes, with parental consent and written approval from the prescriber, as that term is defined in § 54.1-3401, to (i) carry with him and use supplies, including a reasonable and appropriate short-term supply of carbohydrates, an insulin pump, and equipment for immediate treatment of high and low blood glucose levels, and (ii) self-check his own blood glucose levels on a school bus, on school property, and at a school-sponsored activity.

2. That by July 1, 2015, the Department of Education shall review and update its Manual for Training Public School Employees in the Administration of Insulin and Glucagon to address training requirements for school personnel in the identification and management of symptoms of high and low blood glucose levels, the administration of medications to treat high and low blood glucose levels, the use of diabetes medication management devices, and the operation of glucose monitoring equipment.