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SENATE BILL NO. 726

Offered January 19, 2024

A *BILL to amend and reenact §§ 22.1-253.13:4 and 54.1-3408 of the Code of Virginia and to amend the Code of Virginia by adding sections numbered 22.1-206.01 and 22.1-274.4:1, relating to public secondary schools; naloxone procurement, possession, and administration; school board employee training and certification; opioid overdose prevention and reversal instruction; guidelines and requirements.*

Patrons—Pillion and Pekarsky

Referred to Committee on Education and Health

Be it enacted by the General Assembly of Virginia:

1. That §§ 22.1-253.13:4 and 54.1-3408 of the Code of Virginia are amended and reenacted and that the Code of Virginia is amended by adding sections numbered 22.1-206.01 and 22.1-274.4:1 as follows:

§ 22.1-206.01. Instruction concerning opioid overdose prevention and reversal; high school graduation requirements.

A. Each local school board shall develop a plan, in accordance with the guidelines and model curriculum developed by the Department of Health in collaboration with the Department of Education, in accordance with the protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health, for providing at each public secondary school that includes grades nine through 12 a program of instruction on opioid overdose prevention and reversal. Such program of instruction shall include instruction in identifying the signs of a possible opioid overdose and training in the administration of naloxone for the reversal of a potentially life-threatening opioid overdose.

B. Each public secondary school that includes grades nine through 12 shall provide an opioid overdose prevention and reversal program of instruction, at such grade level as the local school board deems appropriate, and shall require such program of instruction to be completed by each student prior to graduation pursuant to subdivision D 7 of § 22.1-253.13:4.

§ 22.1-253.13:4. Standard 4. Student achievement and graduation requirements.

A. Each local school board shall award diplomas to all secondary school students, including students who transfer from nonpublic schools or from home instruction, who meet the requirements prescribed by the Board and meet such other requirements as may be prescribed by the local school board and approved by the Board. Provisions shall be made to facilitate the transfer and appropriate grade placement of students from other public secondary schools, from nonpublic schools, or from home instruction as outlined in the standards for accreditation. The standards for accreditation shall include provisions relating to the completion of graduation requirements through Virtual Virginia. Further, reasonable accommodation to meet the requirements for diplomas shall be provided for otherwise qualified students with disabilities as needed.

In addition, each local school board may devise, vis-a-vis the award of diplomas to secondary school students, a mechanism for calculating class rankings that takes into consideration whether the student has taken a required class more than one time and has had any prior earned grade for such required class expunged.

Each local school board shall notify the parents of rising eleventh and twelfth grade students of (i) the requirements for graduation pursuant to the standards for accreditation and (ii) the requirements that have yet to be completed by the individual student.

B. Students identified as disabled who complete the requirements of their individualized education programs and meet certain requirements prescribed by the Board pursuant to regulations but do not meet the requirements for any named diploma shall be awarded Applied Studies diplomas by local school boards. The Board shall develop and implement statewide requirements for earning an Applied Studies diploma for implementation at the beginning of the 2022-2023 school year.

Each local school board shall notify the parent of such students with disabilities who have an individualized education program and who fail to meet the graduation requirements of the student's right to a free and appropriate education to age 21, inclusive, pursuant to Article 2 (§ 22.1-213 et seq.) of Chapter 13.

The Department shall develop guidance, in multiple languages, for students and parents conveying (i) the limitations of the applied studies diploma, (ii) key curriculum and testing decisions that reduce the likelihood that a student will be able to obtain a standard diploma, and (iii) a statement that the pursuit

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59 of an applied studies diploma may preclude a student's ability to pursue a standard diploma.

60 Each local school board shall provide guidance from the Department to parents of students with
61 disabilities regarding the Applied Studies diploma and its limitations at a student's annual individualized
62 education program meeting corresponding to grades three through 12 when curriculum or statewide
63 assessment decisions are being made that impact the type of diploma for which the student can qualify.

64 C. Students who have completed a prescribed course of study as defined by the local school board
65 shall be awarded certificates of program completion by local school boards if they are not eligible to
66 receive a Board-approved diploma.

67 Each local school board shall provide notification of the right to a free public education for students
68 who have not reached 20 years of age on or before August 1 of the school year, pursuant to Chapter 1
69 (§ 22.1-1 et seq.), to the parent of students who fail to graduate or who have failed to achieve
70 graduation requirements as provided in the standards for accreditation. If such student who does not
71 graduate or complete such requirements is a student for whom English is a second language, the local
72 school board shall notify the parent of the student's opportunity for a free public education in accordance
73 with § 22.1-5.

74 D. In establishing graduation requirements, the Board shall:

75 1. Develop and implement, in consultation with stakeholders representing elementary and secondary
76 education, higher education, and business and industry in the Commonwealth and including parents,
77 policymakers, and community leaders in the Commonwealth, a Profile of a Virginia Graduate that
78 identifies the knowledge and skills that students should attain during high school in order to be
79 successful contributors to the economy of the Commonwealth, giving due consideration to critical
80 thinking, creative thinking, collaboration, communication, and citizenship.

81 2. Emphasize the development of core skill sets in the early years of high school.

82 3. Establish multiple paths toward college and career readiness for students to follow in the later
83 years of high school. Each such pathway shall include opportunities for internships, externships, and
84 credentialing.

85 4. Provide for the selection of integrated learning courses meeting the Standards of Learning and
86 approved by the Board to satisfy graduation requirements, which shall include Standards of Learning
87 testing, as necessary.

88 5. Require students to complete at least one course in fine or performing arts or career and technical
89 education, one course in United States and Virginia history, and two sequential elective courses chosen
90 from a concentration of courses selected from a variety of options that may be planned to ensure the
91 completion of a focused sequence of elective courses that provides a foundation for further education or
92 training or preparation for employment.

93 6. Require that students (i) complete an Advanced Placement, honors, International Baccalaureate, or
94 dual enrollment course; (ii) complete a high-quality work-based learning experience, as defined by the
95 Board; or (iii) earn a career and technical education credential that has been approved by the Board,
96 except when a career and technical education credential in a particular subject area is not readily
97 available or appropriate or does not adequately measure student competency, in which case the student
98 shall receive satisfactory competency-based instruction in the subject area to earn credit. The career and
99 technical education credential, when required, could include the successful completion of an industry
100 certification, a state licensure examination, a national occupational competency assessment, the Armed
101 Services Vocational Aptitude Battery, or the Virginia workplace readiness skills assessment. The
102 Department shall develop, maintain, and make available to each local school board a catalogue of the
103 testing accommodations available to English language learners for each such certification, examination,
104 assessment, and battery. Each local school board shall develop and implement policies to require each
105 high school principal or his designee to notify each English language learner of the availability of such
106 testing accommodations prior to the student's participation in any such certification, examination,
107 assessment, or battery.

108 7. Require students to be trained in emergency first aid, cardiopulmonary resuscitation, ~~and~~ the use
109 of automated external defibrillators, including hands-on practice of the skills necessary to perform
110 cardiopulmonary resuscitation, *and opioid overdose prevention and reversal, including instruction on*
111 *recognizing the signs of opioid overdose and hands-on training in naloxone administration, pursuant to*
112 *§ 22.1-206.01.*

113 8. Make provision in its regulations for students with disabilities to earn a diploma.

114 9. Require students to complete one virtual course, which may be a noncredit-bearing course.

115 10. Provide that students who complete elective classes into which the Standards of Learning for any
116 required course have been integrated and achieve a passing score on the relevant Standards of Learning
117 test for the relevant required course receive credit for such elective class.

118 11. Establish a procedure to facilitate the acceleration of students that allows qualified students, with
119 the recommendation of the division superintendent, without completing the 140-hour class, to obtain
120 credit for such class upon demonstrating mastery of the course content and objectives and receiving a

passing score on the relevant Standards of Learning assessment. Nothing in this section shall preclude relevant school division personnel from enforcing compulsory attendance in public schools.

12. Provide for the award of credit for passing scores on industry certifications, state licensure examinations, and national occupational competency assessments approved by the Board.

School boards shall report annually to the Board the number of Board-approved industry certifications obtained, state licensure examinations passed, national occupational competency assessments passed, Armed Services Vocational Aptitude Battery assessments passed, and Virginia workplace readiness skills assessments passed, and the number of career and technical education completers who graduated. These numbers shall be reported as separate categories on the School Performance Report Card.

For the purposes of this subdivision, "career and technical education completer" means a student who has met the requirements for a career and technical concentration or specialization and all requirements for high school graduation or an approved alternative education program.

In addition, the Board may:

a. For the purpose of awarding credit, approve the use of additional or substitute tests for the correlated Standards of Learning assessment, such as academic achievement tests, industry certifications, or state licensure examinations; and

b. Permit students completing career and technical education programs designed to enable such students to pass such industry certification examinations or state licensure examinations to be awarded, upon obtaining satisfactory scores on such industry certification or licensure examinations, appropriate credit for one or more career and technical education classes into which relevant Standards of Learning for various classes taught at the same level have been integrated. Such industry certification and state licensure examinations may cover relevant Standards of Learning for various required classes and may, at the discretion of the Board, address some Standards of Learning for several required classes.

13. Provide for the waiver of certain graduation requirements and the subsequent award of a high school diploma (i) upon the Board's initiative, (ii) at the request of a local school board, or (iii) upon the request of the parent of any high school senior who died in good standing prior to graduation during the student's senior year. Such waivers shall be granted only for good cause and shall be considered on a case-by-case basis.

14. Consider all computer science course credits earned by students to be science course credits, mathematics course credits, or career and technical education credits. The Board shall develop guidelines addressing how computer science courses can satisfy graduation requirements.

15. Permit local school divisions to waive the requirement for students to receive 140 clock hours of instruction upon providing the Board with satisfactory proof, based on Board guidelines, that the students for whom such requirements are waived have learned the content and skills included in the relevant Standards of Learning.

16. Provide for the award of verified units of credit for a satisfactory score, as determined by the Board, on the Preliminary ACT (PreACT) or Preliminary SAT/National Merit Scholarship Qualifying Test (PSAT/NMSQT) examination.

17. Permit students to exceed a full course load in order to participate in courses offered by an institution of higher education that lead to a degree, certificate, or credential at such institution.

18. Permit local school divisions to waive the requirement for students to receive 140 clock hours of instruction after the student has completed the course curriculum and relevant Standards of Learning end-of-course assessment, or Board-approved substitute, provided that such student subsequently receives instruction, coursework, or study toward an industry certification approved by the local school board.

19. Permit any English language learner who previously earned a sufficient score on an Advanced Placement or International Baccalaureate foreign language examination or an SAT II Subject Test in a foreign language to substitute computer coding course credit for any foreign language course credit required to graduate, except in cases in which such foreign language course credit is required to earn an advanced diploma offered by a nationally recognized provider of college-level courses.

20. Permit a student who is pursuing an advanced diploma and whose individualized education program specifies a credit accommodation for world language to substitute two standard units of credit in computer science for two standard units of credit in a world language. For any student that elects to substitute a credit in computer science for credit in world language, his or her school counselor must provide notice to the student and parent or guardian of possible impacts related to college entrance requirements.

E. In the exercise of its authority to recognize exemplary performance by providing for diploma seals:

1. The Board shall develop criteria for recognizing exemplary performance in career and technical education programs by students who have completed the requirements for a Board of Education-approved diploma and shall award seals on the diplomas of students meeting such criteria.

2. The Board shall establish criteria for awarding a diploma seal for science, technology, engineering, and mathematics (STEM) for the Board-approved diplomas. The Board shall consider including criteria for (i) relevant coursework; (ii) technical writing, reading, and oral communication skills; (iii) relevant training; and (iv) industry, professional, and trade association national certifications.

3. The Board shall establish criteria for awarding a diploma seal for excellence in civics education and understanding of our state and federal constitutions and the democratic model of government for the Board-approved diplomas. The Board shall consider including criteria for (i) successful completion of history, government, and civics courses, including courses that incorporate character education; (ii) voluntary participation in community service or extracurricular activities that includes the types of activities that shall qualify as community service and the number of hours required; and (iii) related requirements as it deems appropriate.

4. The Board shall establish criteria for awarding a diploma seal of biliteracy to any student who demonstrates proficiency in English and at least one other language for the Board-approved diplomas. The Board shall consider criteria including the student's (i) score on a College Board Advanced Placement foreign language examination, (ii) score on an SAT II Subject Test in a foreign language, (iii) proficiency level on an ACTFL Assessment of Performance toward Proficiency in Languages (AAPPL) measure or another nationally or internationally recognized language proficiency test, or (iv) cumulative grade point average in a sequence of foreign language courses approved by the Board.

F. The Board shall establish, by regulation, requirements for the award of a general achievement adult high school diploma for those persons who are not subject to the compulsory school attendance requirements of § 22.1-254 and have (i) achieved a passing score on a high school equivalency examination approved by the Board; (ii) successfully completed an education and training program designated by the Board; (iii) earned a Board-approved career and technical education credential such as the successful completion of an industry certification, a state licensure examination, a national occupational competency assessment, the Armed Services Vocational Aptitude Battery, or the Virginia workplace readiness skills assessment; and (iv) satisfied other requirements as may be established by the Board for the award of such diploma.

G. To ensure the uniform assessment of high school graduation rates, the Board shall collect, analyze, report, and make available to the public high school graduation and dropout data using a formula prescribed by the Board.

H. The Board shall also collect, analyze, report, and make available to the public high school graduation and dropout data using a formula that excludes any student who fails to graduate because such student is in the custody of the Department of Corrections, the Department of Juvenile Justice, or local law enforcement. For the purposes of the Standards of Accreditation, the Board shall use the graduation rate required by this subsection.

I. The Board may promulgate such regulations as may be necessary and appropriate for the collection, analysis, and reporting of such data required by subsections G and H.

§ 22.1-274.4:1. Naloxone procurement, storage, and maintenance; staff and faculty training; policies and requirements.

A. Each local school board shall develop a plan, in accordance with subsection X of § 54.1-3408 and the guidelines developed by the Department of Health in collaboration with the Department of Education, for the procurement, placement, maintenance, and use of naloxone for the purposes of opioid overdose reversal in every public secondary school that includes grades nine through 12. Such plan shall develop policies and procedures for ensuring each public secondary school that includes grades nine through 12 maintains at all times at least two unexpired doses of naloxone, including:

1. Policies requiring each such secondary school to inspect the naloxone at least annually and maintain a record of the date of inspection, the expiration date on each dose, and, in the event that a dose of naloxone was administered for overdose reversal to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose, the date of naloxone administration;

2. Procedures for requesting a replacement dose of naloxone any time a naloxone dose has expired, was administered for overdose reversal, or was otherwise rendered unusable; and

3. Policies relating to the proper and safe storage of naloxone doses in each such secondary school.

B. Each local school board shall, in accordance with the guidelines and policies developed by the Department of Health in collaboration with the Department of Education, place at least two unexpired doses of naloxone in every public secondary school that includes grades nine through 12 in the local school division. Each local school board shall provide to each public secondary school that includes grades nine through 12 additional doses of naloxone as necessary to ensure that each such secondary school possesses at least two unexpired doses of naloxone at all times.

C. Each local school board shall adopt and implement policies, in accordance with the provisions of subsection X of § 54.1-3408, for the possession and administration of naloxone in each public secondary school that includes grades nine through 12 by any school nurse, employee of the school board, employee of a local governing body, or employee of a local health department who is authorized by a

prescriber and trained in the administration of naloxone to any student, faculty, or staff member who is believed to be experiencing or about to experience a life-threatening opioid overdose. Such policies shall require each public secondary school that includes grades nine through 12 to ensure that at least one faculty or staff member is authorized by a prescriber and has been trained and is certified in the administration of naloxone by an organization authorized by the Department of Behavioral Health and Developmental Services to provide naloxone administration and certification and has the means to access at all times during regular school hours any such naloxone that is stored in a locked or otherwise generally inaccessible container or area.

D. Each public secondary school that includes grades nine through 12 shall ensure that at least one faculty or staff member employed at such school is authorized by a prescriber and has been trained and is certified in the administration of naloxone for opioid overdose reversal by an organization authorized by the Department of Behavioral Health and Developmental Services to provide naloxone administration or certification.

§ 54.1-3408. Professional use by practitioners.

A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine, a licensed advanced practice registered nurse pursuant to § 54.1-2957.01, a licensed certified midwife pursuant to § 54.1-2957.04, a licensed physician assistant pursuant to § 54.1-2952.1, or a TPA-certified optometrist pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 shall only prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic purposes within the course of his professional practice. A licensed midwife pursuant to § 54.1-2957.7 shall only obtain, possess, and administer controlled substances in good faith for medicinal or therapeutic purposes within the course of his professional practice.

B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may cause drugs or devices to be administered by:

1. A nurse, physician assistant, or intern under his direction and supervision;
2. Persons trained to administer drugs and devices to patients in state-owned or state-operated hospitals or facilities licensed as hospitals by the Board of Health or psychiatric hospitals licensed by the Department of Behavioral Health and Developmental Services who administer drugs under the control and supervision of the prescriber or a pharmacist;

3. Emergency medical services personnel certified and authorized to administer drugs and devices pursuant to regulations of the Board of Health who act within the scope of such certification and pursuant to an oral or written order or standing protocol;

4. Persons who are employed or engaged at a medical care facility, as defined in § 32.1-3, who have a valid emergency medical services provider certification issued by the Board of Health as a requirement of being employed or engaged at the medical care facility within the scope of such certification, pursuant to an oral or written order or standing protocol to administer drugs and devices at the medical care facility; or

5. A licensed respiratory therapist as defined in § 54.1-2954 who administers by inhalation controlled substances used in inhalation or respiratory therapy.

C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used in the diagnosis or treatment of disease.

D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course of his professional practice, such prescriber may authorize registered nurses and licensed practical nurses to possess (i) epinephrine and oxygen for administration in treatment of emergency medical conditions and (ii) heparin and sterile normal saline to use for the maintenance of intravenous access lines.

Pursuant to the regulations of the Board of Health, certain emergency medical services technicians may possess and administer epinephrine in emergency cases of anaphylactic shock.

Pursuant to an order or standing protocol issued by the prescriber within the course of his professional practice, any school nurse, school board employee, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

Pursuant to an order or standing protocol that shall be issued by the local health director within the course of his professional practice, any school nurse, licensed athletic trainer under contract with a local school division, school board employee, employee of a local governing body, or employee of a local health department who is authorized by the local health director and trained in the administration of albuterol inhalers and valved holding chambers or nebulized albuterol may possess or administer an albuterol inhaler and a valved holding chamber or nebulized albuterol to a student diagnosed with a

305 condition requiring an albuterol inhaler or nebulized albuterol when the student is believed to be
306 experiencing or about to experience an asthmatic crisis.

307 Pursuant to an order or a standing protocol issued by the prescriber within the course of his
308 professional practice, any employee of a school for students with disabilities, as defined in § 22.1-319
309 and licensed by the Board of Education, or any employee of a private school that is accredited pursuant
310 to § 22.1-19 as administered by the Virginia Council for Private Education who is authorized by a
311 prescriber and trained in the administration of (a) epinephrine may possess and administer epinephrine
312 and (b) albuterol inhalers or nebulized albuterol may possess or administer an albuterol inhaler or
313 nebulized albuterol to a student diagnosed with a condition requiring an albuterol inhaler or nebulized
314 albuterol when the student is believed to be experiencing or about to experience an asthmatic crisis.

315 Pursuant to an order or a standing protocol issued by the prescriber within the course of his
316 professional practice, any nurse at an early childhood care and education entity, employee at the entity,
317 or employee of a local health department who is authorized by a prescriber and trained in the
318 administration of epinephrine may possess and administer epinephrine.

319 Pursuant to an order or a standing protocol issued by the prescriber within the course of his
320 professional practice, any employee of a public institution of higher education or a private institution of
321 higher education who is authorized by a prescriber and trained in the administration of epinephrine may
322 possess and administer epinephrine.

323 Pursuant to an order or a standing protocol issued by the prescriber within the course of his
324 professional practice, any employee of an organization providing outdoor educational experiences or
325 programs for youth who is authorized by a prescriber and trained in the administration of epinephrine
326 may possess and administer epinephrine.

327 Pursuant to an order or a standing protocol issued by the prescriber within the course of his
328 professional practice, and in accordance with policies and guidelines established by the Department of
329 Health, such prescriber may authorize any employee of a restaurant licensed pursuant to Chapter 3
330 (§ 35.1-18 et seq.) of Title 35.1 to possess and administer epinephrine on the premises of the restaurant
331 at which the employee is employed, provided that such person is trained in the administration of
332 epinephrine.

333 Pursuant to an order issued by the prescriber within the course of his professional practice, an
334 employee of a provider licensed by the Department of Behavioral Health and Developmental Services or
335 a person providing services pursuant to a contract with a provider licensed by the Department of
336 Behavioral Health and Developmental Services may possess and administer epinephrine, provided such
337 person is authorized and trained in the administration of epinephrine.

338 Pursuant to an order or standing protocol issued by the prescriber within the course of his
339 professional practice, any employee of a public place, as defined in § 15.2-2820, who is authorized by a
340 prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

341 Pursuant to an oral or written order or standing protocol issued by the prescriber within the course of
342 his professional practice, such prescriber may authorize pharmacists to possess epinephrine and oxygen
343 for administration in treatment of emergency medical conditions.

344 E. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course
345 of his professional practice, such prescriber may authorize licensed physical therapists to possess and
346 administer topical corticosteroids, topical lidocaine, and any other Schedule VI topical drug.

347 F. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course
348 of his professional practice, such prescriber may authorize licensed athletic trainers to possess and
349 administer topical corticosteroids, topical lidocaine, or other Schedule VI topical drugs; oxygen and IV
350 saline for use in emergency situations; subcutaneous lidocaine for wound closure; epinephrine for use in
351 emergency cases of anaphylactic shock; and naloxone or other opioid antagonist for overdose reversal.

352 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the
353 course of his professional practice, and in accordance with policies and guidelines established by the
354 Department of Health pursuant to § 32.1-50.2, such prescriber may authorize registered nurses or
355 licensed practical nurses under the supervision of a registered nurse to possess and administer tuberculin
356 purified protein derivative (PPD) in the absence of a prescriber. The Department of Health's policies and
357 guidelines shall be consistent with applicable guidelines developed by the Centers for Disease Control
358 and Prevention for preventing transmission of mycobacterium tuberculosis and shall be updated to
359 incorporate any subsequently implemented standards of the Occupational Safety and Health
360 Administration and the Department of Labor and Industry to the extent that they are inconsistent with
361 the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe the
362 categories of persons to whom the tuberculin test is to be administered and shall provide for appropriate
363 medical evaluation of those in whom the test is positive. The prescriber shall ensure that the nurse
364 implementing such standing protocols has received adequate training in the practice and principles
365 underlying tuberculin screening.

366 The Health Commissioner or his designee may authorize registered nurses, acting as agents of the

Department of Health, to possess and administer, at the nurse's discretion, tuberculin purified protein derivative (PPD) to those persons in whom tuberculin skin testing is indicated based on protocols and policies established by the Department of Health.

H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his professional practice, such prescriber may authorize, with the consent of the parents as defined in § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 as administered by the Virginia Council for Private Education who is trained in the administration of insulin and glucagon to assist with the administration of insulin or administer glucagon to a student diagnosed as having diabetes and who requires insulin injections during the school day or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed nurse, an advanced practice registered nurse, a physician, or a physician assistant is not present to perform the administration of the medication.

Pursuant to a written order or standing protocol issued by the prescriber within the course of his professional practice, such prescriber may authorize an employee of a public institution of higher education or a private institution of higher education who is trained in the administration of insulin and glucagon to assist with the administration of insulin or administration of glucagon to a student diagnosed as having diabetes and who requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed nurse, an advanced practice registered nurse, a physician, or a physician assistant is not present to perform the administration of the medication.

Pursuant to a written order issued by the prescriber within the course of his professional practice, such prescriber may authorize an employee of a provider licensed by the Department of Behavioral Health and Developmental Services or a person providing services pursuant to a contract with a provider licensed by the Department of Behavioral Health and Developmental Services to assist with the administration of insulin or to administer glucagon to a person diagnosed as having diabetes and who requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia, provided such employee or person providing services has been trained in the administration of insulin and glucagon.

I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is not physically present, by (i) licensed pharmacists, (ii) registered nurses, or (iii) licensed practical nurses under the supervision of a registered nurse. A prescriber acting on behalf of and in accordance with established protocols of the Department of Health may authorize the administration of vaccines to any person by a pharmacist, nurse, or designated emergency medical services provider who holds an advanced life support certificate issued by the Commissioner of Health under the direction of an operational medical director when the prescriber is not physically present. The emergency medical services provider shall provide documentation of the vaccines to be recorded in the Virginia Immunization Information System.

J. A dentist may cause Schedule VI topical drugs to be administered under his direction and supervision by either a dental hygienist or by an authorized agent of the dentist.

Further, pursuant to a written order and in accordance with a standing protocol issued by the dentist in the course of his professional practice, a dentist may authorize a dental hygienist under his general supervision, as defined in § 54.1-2722, or his remote supervision, as defined in subsection E or F of § 54.1-2722, to possess and administer topical oral fluorides, topical oral anesthetics, topical and directly applied antimicrobial agents for treatment of periodontal pocket lesions, and any other Schedule VI topical drug approved by the Board of Dentistry.

In addition, a dentist may authorize a dental hygienist under his direction to administer Schedule VI nitrous oxide and oxygen inhalation analgesia and, to persons 18 years of age or older, Schedule VI local anesthesia.

K. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course of his professional practice, such prescriber may authorize registered professional nurses certified as sexual assault nurse examiners-A (SANE-A) under his supervision and when he is not physically present to possess and administer preventive medications for victims of sexual assault as recommended by the Centers for Disease Control and Prevention.

L. This section shall not prevent the administration of drugs by a person who has satisfactorily completed a training program for this purpose approved by the Board of Nursing and who administers such drugs in accordance with a prescriber's instructions pertaining to dosage, frequency, and manner of administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to security and record keeping, when the drugs administered would be normally self-administered by (i) an individual receiving services in a program licensed by the Department of Behavioral Health and

428 Developmental Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision
429 Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the
430 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program
431 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of
432 any facility authorized or operated by a state or local government whose primary purpose is not to
433 provide health care services; (vi) a resident of a private children's residential facility, as defined in §
434 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department of
435 Behavioral Health and Developmental Services; or (vii) a student in a school for students with
436 disabilities, as defined in § 22.1-319 and licensed by the Board of Education.

437 In addition, this section shall not prevent a person who has successfully completed a training
438 program for the administration of drugs via percutaneous gastrostomy tube approved by the Board of
439 Nursing and been evaluated by a registered nurse as having demonstrated competency in administration
440 of drugs via percutaneous gastrostomy tube from administering drugs to a person receiving services from
441 a program licensed by the Department of Behavioral Health and Developmental Services to such person
442 via percutaneous gastrostomy tube. The continued competency of a person to administer drugs via
443 percutaneous gastrostomy tube shall be evaluated semiannually by a registered nurse.

444 M. Medication aides registered by the Board of Nursing pursuant to Article 7 (§ 54.1-3041 et seq.)
445 of Chapter 30 may administer drugs that would otherwise be self-administered to residents of any
446 assisted living facility licensed by the Department of Social Services. A registered medication aide shall
447 administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to
448 dosage, frequency, and manner of administration; in accordance with regulations promulgated by the
449 Board of Pharmacy relating to security and recordkeeping; in accordance with the assisted living
450 facility's Medication Management Plan; and in accordance with such other regulations governing their
451 practice promulgated by the Board of Nursing.

452 N. In addition, this section shall not prevent the administration of drugs by a person who administers
453 such drugs in accordance with a physician's instructions pertaining to dosage, frequency, and manner of
454 administration and with written authorization of a parent, and in accordance with school board
455 regulations relating to training, security and record keeping, when the drugs administered would be
456 normally self-administered by a student of a Virginia public school. Training for such persons shall be
457 accomplished through a program approved by the local school boards, in consultation with the local
458 departments of health.

459 O. In addition, this section shall not prevent the administration of drugs by a person to (i) a child in
460 a child day program as defined in § 22.1-289.02 and regulated by the Board of Education or a local
461 government pursuant to § 15.2-914, or (ii) a student of a private school that is accredited pursuant to
462 § 22.1-19 as administered by the Virginia Council for Private Education, provided such person (a) has
463 satisfactorily completed a training program for this purpose approved by the Board of Nursing and
464 taught by a registered nurse, a licensed practical nurse, an advanced practice registered nurse, a
465 physician assistant, a doctor of medicine or osteopathic medicine, or a pharmacist; (b) has obtained
466 written authorization from a parent or guardian; (c) administers drugs only to the child identified on the
467 prescription label in accordance with the prescriber's instructions pertaining to dosage, frequency, and
468 manner of administration; and (d) administers only those drugs that were dispensed from a pharmacy
469 and maintained in the original, labeled container that would normally be self-administered by the child
470 or student, or administered by a parent or guardian to the child or student.

471 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by
472 persons if they are authorized by the State Health Commissioner in accordance with protocols
473 established by the State Health Commissioner pursuant to § 32.1-42.1 when (i) the Governor has
474 declared a disaster or a state of emergency, the United States Secretary of Health and Human Services
475 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public
476 health emergency, or the Board of Health has made an emergency order pursuant to § 32.1-13 for the
477 purpose of suppressing nuisances dangerous to the public health and communicable, contagious, and
478 infectious diseases and other dangers to the public life and health and for the limited purpose of
479 administering vaccines as an approved countermeasure for such communicable, contagious, and
480 infectious diseases; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such
481 persons have received the training necessary to safely administer or dispense the needed drugs or
482 devices. Such persons shall administer or dispense all drugs or devices under the direction, control, and
483 supervision of the State Health Commissioner.

484 Q. Nothing in this title shall prohibit the administration of normally self-administered drugs by
485 unlicensed individuals to a person in his private residence.

486 R. This section shall not interfere with any prescriber issuing prescriptions in compliance with his
487 authority and scope of practice and the provisions of this section to a Board agent for use pursuant to
488 subsection G of § 18.2-258.1. Such prescriptions issued by such prescriber shall be deemed to be valid
489 prescriptions.

S. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care technicians who are certified by an organization approved by the Board of Health Professions or persons authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.), in the ordinary course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, topical needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for the purpose of facilitating renal dialysis treatment, when such administration of medications occurs under the orders of a licensed physician, an advanced practice registered nurse, or a physician assistant and under the immediate and direct supervision of a licensed registered nurse. Nothing in this chapter shall be construed to prohibit a patient care dialysis technician trainee from performing dialysis care as part of and within the scope of the clinical skills instruction segment of a supervised dialysis technician training program, provided such trainee is identified as a "trainee" while working in a renal dialysis facility.

The dialysis care technician or dialysis patient care technician administering the medications shall have demonstrated competency as evidenced by holding current valid certification from an organization approved by the Board of Health Professions pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.).

T. Persons who are otherwise authorized to administer controlled substances in hospitals shall be authorized to administer influenza or pneumococcal vaccines pursuant to § 32.1-126.4.

U. Pursuant to a specific order for a patient and under his direct and immediate supervision, a prescriber may authorize the administration of controlled substances by personnel who have been properly trained to assist a doctor of medicine or osteopathic medicine, provided the method does not include intravenous, intrathecal, or epidural administration and the prescriber remains responsible for such administration.

V. A physician assistant, nurse, dental hygienist, or authorized agent of a doctor of medicine, osteopathic medicine, or dentistry may possess and administer topical fluoride varnish pursuant to an oral or written order or a standing protocol issued by a doctor of medicine, osteopathic medicine, or dentistry.

W. A prescriber, acting in accordance with guidelines developed pursuant to § 32.1-46.02, may authorize the administration of influenza vaccine to minors by a licensed pharmacist, registered nurse, licensed practical nurse under the direction and immediate supervision of a registered nurse, or emergency medical services provider who holds an advanced life support certificate issued by the Commissioner of Health when the prescriber is not physically present.

X. Notwithstanding the provisions of § 54.1-3303, pursuant to an oral, written, or standing order issued by a prescriber or a standing order issued by the Commissioner of Health or his designee authorizing the dispensing of naloxone or other opioid antagonist used for overdose reversal in the absence of an oral or written order for a specific patient issued by a prescriber, and in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health, a pharmacist, a health care provider providing services in a hospital emergency department, and emergency medical services personnel, as that term is defined in § 32.1-111.1, may dispense naloxone or other opioid antagonist used for overdose reversal and a person to whom naloxone or other opioid antagonist has been dispensed pursuant to this subsection may possess and administer naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose. Law-enforcement officers as defined in § 9.1-101, employees of the Department of Forensic Science, employees of the Office of the Chief Medical Examiner, employees of the Department of General Services Division of Consolidated Laboratory Services, employees of the Department of Corrections designated by the Director of the Department of Corrections or designated as probation and parole officers or as correctional officers as defined in § 53.1-1, employees of the Department of Juvenile Justice designated as probation and parole officers or as juvenile correctional officers, employees of regional jails, school nurses, local health department employees that are assigned to a public school pursuant to an agreement between the local health department and the school board, *school board employees who have completed training and are certified in the administration of naloxone for overdose reversal by an organization authorized by the Department of Behavioral Health and Developmental Services to provide naloxone administration training and certification*, other school board employees or individuals contracted by a school board to provide school health services, and firefighters may also possess and administer naloxone or other opioid antagonist used for overdose reversal and may dispense naloxone or other opioid antagonist used for overdose reversal pursuant to an oral, written, or standing order issued by a prescriber or a standing order issued by the Commissioner of Health or his designee in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health.

Notwithstanding the provisions of § 54.1-3303, pursuant to an oral, written, or standing order issued by a prescriber or a standing order issued by the Commissioner of Health or his designee authorizing the dispensing of naloxone or other opioid antagonist used for overdose reversal in the absence of an oral or written order for a specific patient issued by a prescriber, and in accordance with protocols developed by

551 the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health, any
552 person may possess and administer naloxone or other opioid antagonist used for overdose reversal, other
553 than naloxone in an injectable formulation with a hypodermic needle or syringe, in accordance with
554 protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the
555 Department of Health.

556 Y. Notwithstanding any other law or regulation to the contrary, a person who is acting on behalf of
557 an organization that provides services to individuals at risk of experiencing an opioid overdose or
558 training in the administration of naloxone for overdose reversal may dispense naloxone, provided that
559 such dispensing is (i) pursuant to a standing order issued by a prescriber and (ii) in accordance with
560 protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the
561 Department of Health. If the person acting on behalf of an organization dispenses naloxone in an
562 injectable formulation with a hypodermic needle or syringe, he shall first obtain authorization from the
563 Department of Behavioral Health and Developmental Services to train individuals on the proper
564 administration of naloxone by and proper disposal of a hypodermic needle or syringe, and he shall
565 obtain a controlled substance registration from the Board of Pharmacy. The Board of Pharmacy shall not
566 charge a fee for the issuance of such controlled substance registration. The dispensing may occur at a
567 site other than that of the controlled substance registration provided the entity possessing the controlled
568 substances registration maintains records in accordance with regulations of the Board of Pharmacy. No
569 person who dispenses naloxone on behalf of an organization pursuant to this subsection shall charge a
570 fee for the dispensing of naloxone that is greater than the cost to the organization of obtaining the
571 naloxone dispensed. A person to whom naloxone has been dispensed pursuant to this subsection may
572 possess naloxone and may administer naloxone to a person who is believed to be experiencing or about
573 to experience a life-threatening opioid overdose.

574 Z. A person who is not otherwise authorized to administer naloxone or other opioid antagonist used
575 for overdose reversal may administer naloxone or other opioid antagonist used for overdose reversal to a
576 person who is believed to be experiencing or about to experience a life-threatening opioid overdose.

577 AA. Pursuant to a written order or standing protocol issued by the prescriber within the course of his
578 professional practice, such prescriber may authorize, with the consent of the parents as defined in
579 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in
580 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19
581 as administered by the Virginia Council for Private Education who is trained in the administration of
582 injected medications for the treatment of adrenal crisis resulting from a condition causing adrenal
583 insufficiency to administer such medication to a student diagnosed with a condition causing adrenal
584 insufficiency when the student is believed to be experiencing or about to experience an adrenal crisis.
585 Such authorization shall be effective only when a licensed nurse, an advanced practice registered nurse,
586 a physician, or a physician assistant is not present to perform the administration of the medication.

587 **2. That the Department of Health and the Department of Education shall collaborate to develop**
588 **guidelines and policies relating to the implementation of the provisions of this act, including**
589 **guidelines and policies for (i) the procurement, possession, storage, and maintenance of at least two**
590 **unexpired doses of naloxone in each secondary school that includes grades nine through 12; (ii) the**
591 **possession and administration of naloxone by school board employees, including: (a) the training**
592 **and certification of at least one school board employee at each secondary school that includes**
593 **grades nine through 12 in the possession and administration of naloxone and (b) the**
594 **administration of naloxone by any such school board employee to any student, faculty, or staff**
595 **member believed to be experiencing or about to experience a life-threatening opioid overdose; (iii)**
596 **the implementation of the opioid overdose prevention and reversal program of instruction at each**
597 **secondary school that includes grades nine through 12 as a requirement for graduation, including**
598 **a model curriculum and any accompanying instructional materials for such program of**
599 **instruction; (iv) informational guidance materials to be made available to students and parents on**
600 **the opioid overdose prevention and reversal program of instruction; and (v) any other policies or**
601 **guidelines deemed necessary and appropriate. The Department of Education shall submit such**
602 **guidelines and policies developed pursuant to this act to the House Committee on Appropriations,**
603 **the House Committee on Education, the Senate Committee on Education and Health, and the**
604 **Senate Committee on Finance and Appropriations by January 1, 2025.**

605 **3. That the provisions of this act shall be implemented by each local school board by the**
606 **beginning of the 2026-2027 school year.**