

AN ACT

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

To amend the Student Access to Treatment Act of 2007 to require the Department of Health to develop and implement an Undesignated Emergency Medications Action Plan that would authorize public schools to possess and administer undesignated emergency medications determined by the Department of Health, to require the Department of Health to oversee the procurement and distribution of undesignated emergency medications and maintain records regarding the types and quantities of undesignated emergency medications to ensure an adequate supply, to require at least 2 employees or agents of each public school to be certified in the use of undesignated emergency medications, and to require the Office of the State Superintendent of Education to oversee school compliance with the employee certification requirement and provide schools with resources for the storage of undesignated emergency medications and dissemination of public school employee contact information.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Access to Emergency Medications Amendment Act of 2023.”

Sec. 2. The Student Access to Treatment Act of 2007, effective February 2, 2008 (D.C. Law 17-107; D.C. Official Code § 38-651.01 *et seq.*), is amended as follows:

(a) Section 2 (D.C. Official Code § 38-651.01) is amended as follows:

(1) A new paragraph (5B) is added to read as follows:

“(5B) “Undesignated emergency medications” means:

“(A) Albuterol;

“(B) Glucagon; and

“(C) Any other medication designated by the Department of Health by rule pursuant to section 13 that would be administered in emergency circumstances to a student without a prescription for that medication on file with the school.”.

(2) A new paragraph (7A) is added to read as follows:

“(7A) “UEMA plan” means the undesignated emergency medications action plan established pursuant to section 7.”.

(b) Section 7 (D.C. Official Code § 38-651.06) is amended to read as follows:

“Sec. 7. Student access to undesignated emergency medications.

“(a) By February 1, 2024, the Department of Health (“Department”) shall establish a UEMA plan that authorizes a public school to possess and administer undesignated emergency medications to students without prescriptions for those medications.

“(b) By June 1, 2024, the Department shall obtain a standing order signed by at least one physician, physician assistant, or advanced practice nurse licensed in the District to permit public schools to use undesignated emergency medications.

“(c) Under the UEMA plan, the Department shall:

“(1) Ensure that undesignated emergency medications are procured and distributed to public schools for use in emergency circumstances;

“(2) Ensure the removal and replacement of expired undesignated emergency medications in a timely manner;

“(3) Monitor the supply of undesignated emergency medications and ensure sufficient supply is provided to public schools;

“(4) Maintain records of the types and quantities of undesignated emergency medications at each public school;

“(5) Maintain records regarding the procurement, distribution, and disposition of undesignated emergency medications for 3 years; and

“(6) Establish written protocols for schools to notify a student’s responsible person and health suite personnel after the school’s certified staff or agent administers an undesignated emergency medication.

“(d)(1) Beginning July 1, 2024, each public school shall:

“(A) Designate at least 2 employees or agents of the school to be certified in the use of undesignated emergency medications who are available to administer medications during all hours of the school day;

“(B) Store undesignated emergency medications in a secure but easily accessible location in accordance with the manufacturer’s instructions; and

“(C) Communicate the contact information of the school’s certified employees or agents to all staff and personnel at the school.

“(2) For the purposes of this subsection, the term “certified” means an individual who has obtained a certificate of completion of the Department’s medication administration training program established by section 5.

“(e) OSSE shall:

“(1) Require written proof of compliance with subsection (d) of this section from each public school on an annual basis;

“(2) Require any public school not in compliance to submit a plan outlining the steps the school shall take to address the noncompliance;

“(3) Provide public schools with resources to implement the requirements of subsection (d) of this section; and

“(4) Maintain records regarding each public school’s compliance with subsection (d) of this section for 3 years.

“(f)(1) An employee or agent of a public school who is certified pursuant to this section may administer an undesignated emergency medication to a student whom the employee or agent believes in good faith to immediately require the medication.

“(2)(A) Undesignated emergency medications may be used on public school property, including the school building, playground, and school bus, as well as during field trips or sanctioned excursions away from public school property.

“(B) The certified employee or agent of the public school may carry an appropriate supply of the public school’s undesignated emergency medications on field trips or excursions; provided, that there remains a sufficient supply of the undesignated emergency medication in the school building.

“(3) Within one business day of administering an undesignated emergency medication to a student, the public school shall notify the Department, who shall in turn:

“(A) Notify OSSE;

“(B) Notify the physician, physician assistant, or advance practice nurse who provided the standing order for the undesignated emergency medication; and

“(C) Provide guidance to the school on how to notify the student’s responsible person and health suite personnel that undesignated emergency medication was administered.

“(g) An employee or agent of a public school who is certified pursuant to this section may also administer medication for which they are trained to a student to whom it is prescribed, who the employee or agent believes in good faith requires the immediate use of the medication.

“(h) The Department shall develop a procedure by which the responsible person may request that the student not receive treatment in emergency circumstances.”.

(c) Section 13 (D.C. Official Code § 38-651.12) is amended by adding a new subsection (e) to read as follows:

“(e) The Department of Health shall issue rules to implement the provisions of section 7, including the creation of a list designating specific medications that would be administered in emergency circumstances.”.

Sec. 3. Applicability.

(a) Amendatory section 7(b) through (h) within section 2(b) shall apply upon the date of inclusion of its fiscal effect in an approved budget and financial plan.

(b) The Chief Financial Officer shall certify the date of the inclusion of the fiscal effect in an approved budget and financial plan, and provide notice to the Budget Director of the Council of the certification.

(c)(1) The Budget Director shall cause the notice of the certification to be published in the District of Columbia Register.

(2) The date of publication of the notice of the certification shall not affect the applicability of this act.

Sec. 4. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 4a of the General Legislative Procedures Act of 1975, approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

Sec. 5. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.

Chairman
Council of the District of Columbia

Mayor
District of Columbia