SHB 1060 - S COMM AMD

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By Committee on Early Learning & K-12 Education

- 1 Strike everything after the enacting clause and insert the 2 following:
- 3 "Sec. 1. RCW 28A.210.260 and 2017 c 186 s 2 are each amended to 4 read as follows:
 - (1) Public school districts and private schools which conduct any of grades kindergarten through the twelfth grade may provide for the administration of oral medication, topical medication, eye drops, ear drops, or nasal spray, of any nature to students who are in the custody of the school district or school at the time of administration, but are not required to do so by this section, subject to the following conditions:
 - $((\frac{1}{1}))$ (a) The board of directors of the public school district or the governing board of the private school or, if none, the chief administrator of the private school shall adopt policies which address the designation of employees who may administer oral medications, topical medications, eye drops, ear drops, or nasal to students, the acquisition of parent requests instructions, and the acquisition of requests from licensed health professionals prescribing within the scope of their prescriptive authority and instructions regarding students who require medication for more than fifteen consecutive school days, the identification of medication to be administered, the means of safekeeping medications with special attention given to the safeguarding of legend drugs as defined in chapter 69.41 RCW, and the means maintaining a record of the administration of such medication;
- $((\frac{(2)}{2}))$ (b) The board of directors shall seek advice from one or more licensed physicians or nurses in the course of developing the foregoing policies;
- (((3))) <u>(c)</u> The public school district or private school is in receipt of a written, current and unexpired request from a parent, or a legal guardian, or other person having legal control over the student to administer the medication to the student;

 $((\langle 4 \rangle))$ (d) The public school district or the private school is in receipt of $((\langle a \rangle))$: (i) A written, current and unexpired request from a licensed health professional prescribing within the scope of his or her prescriptive authority for administration of the medication, as there exists a valid health reason which makes administration of such medication advisable during the hours when school is in session or the hours in which the student is under the supervision of school officials((, and (b))); and (ii) written, current and unexpired instructions from such licensed health professional prescribing within the scope of his or her prescriptive authority regarding the administration of prescribed medication to students who require medication for more than fifteen consecutive workdays;

 $((\frac{5}{1}))$ (e) The medication is administered by an employee designated by or pursuant to the policies adopted pursuant to (a) of this subsection (((1) of this section)) and in substantial compliance with the prescription of a licensed health professional prescribing within the scope of his or her prescriptive authority or the written instructions provided pursuant to (d) of this subsection ((4) of this section)). If a school nurse is on the premises, a nasal spray that is a legend drug or a controlled substance must be administered by the school nurse. If no school nurse is on the premises, a nasal spray that is a legend drug or a controlled substance may be administered by a trained school employee or parent-designated adult who is not a school nurse. The board of directors shall allow school personnel, who have received appropriate training and volunteered for such training, to administer a nasal spray that is a legend drug or a controlled substance. After a school employee who is not a school nurse administers a nasal spray that is a legend drug or a controlled substance, the employee shall summon emergency medical assistance as soon as practicable;

((6)) (f) The medication is first examined by the employee administering the same to determine in his or her judgment that it appears to be in the original container and to be properly labeled; and

 $((\langle 7 \rangle))$ (g) The board of directors shall designate a professional person licensed pursuant to chapter 18.71 RCW or chapter 18.79 RCW as it applies to registered nurses and advanced registered nurse practitioners, to delegate to, train, and supervise the designated school district personnel in proper medication procedures $((\dot{\tau}))$.

- (((8))) (2)(a) For the purposes of this section, "parent-designated adult" means a volunteer, who may be a school district employee, who receives additional training from a health care professional or expert in epileptic seizure care selected by the parents, and who provides care for the child consistent with the individual health plan.
- (b) To be eligible to be a parent-designated adult, a school district employee not licensed under chapter 18.79 RCW must file, without coercion by the employer, a voluntary written, current, and unexpired letter of intent stating the employee's willingness to be a parent-designated adult. If a school employee who is not licensed under chapter 18.79 RCW chooses not to file a letter under this section, the employee shall not be subject to any employer reprisal or disciplinary action for refusing to file a letter((\div)).
- $((\frac{9}{1}))$ (3) The board of directors shall designate a professional person licensed under chapter 18.71, 18.57, or 18.79 RCW as it applies to registered nurses and advanced registered practitioners, to consult and coordinate with the student's parents and health care provider, and train and supervise the appropriate school district personnel in proper procedures for care for students with epilepsy to ensure a safe, therapeutic learning environment. Training may also be provided by an epilepsy educator who nationally certified. Parent-designated adults who are employees are required to receive the training provided under this subsection. Parent-designated adults who are not school employees must show evidence of comparable training. The parent-designated adult must also receive additional training as established subsection $((\frac{8}{(8)}))$ (2)(a) of this section for the additional care the parents have authorized the parent-designated adult to provide. The professional person designated under this subsection responsible for the supervision of the parent-designated adult for those procedures that are authorized by the parents(($\dot{\tau}$

(10)))<u>.</u>

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- (4) This section does not apply to topical sunscreen products regulated by the United States food and drug administration for over-the-counter use. Provisions related to possession and application of topical sunscreen products are in RCW 28A.210.278.
- 38 <u>(5) School districts may not inquire into the type of legal</u>
 39 product or medication that parents or guardians administer to their

- 1 <u>children while on school grounds, aboard a school bus, or attending a</u>
- 2 school-sponsored event.

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- 3 **Sec. 2.** RCW 69.51A.060 and 2015 c 70 s 31 are each amended to 4 read as follows:
- 5 (1) It shall be a class 3 civil infraction to use or display 6 medical marijuana in a manner or place which is open to the view of 7 the general public.
 - (2) Nothing in this chapter establishes a right of care as a covered benefit or requires any state purchased health care as defined in RCW 41.05.011 or other health carrier or health plan as defined in Title 48 RCW to be liable for any claim for reimbursement for the medical use of marijuana. Such entities may enact coverage or noncoverage criteria or related policies for payment or nonpayment of medical marijuana in their sole discretion.
- 15 (3) Nothing in this chapter requires any health care professional 16 to authorize the medical use of marijuana for a patient.
 - (4) Nothing in this chapter requires any accommodation of any onsite medical use of marijuana in any place of employment((, in any school bus or on any school grounds,)) in any youth center, in any correctional facility, or smoking marijuana in any public place or hotel or motel. ((However, a school may permit a minor who meets the requirements of RCW 69.51A.220 to consume marijuana on school grounds. Such use must be in accordance with school policy relating to medication use on school grounds.))
 - (5) Nothing in this chapter authorizes the possession or use of marijuana, marijuana concentrates, useable marijuana, or marijuana-infused products on federal property.
 - (6) Nothing in this chapter authorizes the use of medical marijuana by any person who is subject to the Washington code of military justice in chapter 38.38 RCW.
 - (7) Employers may establish drug-free work policies. Nothing in this chapter requires an accommodation for the medical use of marijuana if an employer has a drug-free workplace.
- 34 (8) No person shall be entitled to claim the protection from 35 arrest and prosecution under RCW 69.51A.040 or the affirmative 36 defense under RCW 69.51A.043 for engaging in the medical use of 37 marijuana in a way that endangers the health or well-being of any 38 person through the use of a motorized vehicle on a street, road, or

- 1 highway, including violations of RCW 46.61.502 or 46.61.504, or
- 2 equivalent local ordinances.

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- 3 **Sec. 3.** RCW 69.51A.220 and 2015 c 70 s 20 are each amended to 4 read as follows:
- 5 (1) Health care professionals may authorize the medical use of 6 marijuana for qualifying patients who are under the age of eighteen 7 if:
- 8 (a) The minor's parent or guardian participates in the minor's 9 treatment and agrees to the medical use of marijuana by the minor; 10 and
- 11 (b) The parent or guardian acts as the designated provider for 12 the minor and has sole control over the minor's marijuana.
 - (2) The minor may not grow plants or purchase marijuana-infused products, useable marijuana, or marijuana concentrates from a marijuana retailer with a medical marijuana endorsement.
 - (3) Both the minor and the minor's parent or guardian who is acting as the designated provider must be entered in the medical marijuana authorization database and hold a recognition card.
 - (4) A health care professional who authorizes the medical use of marijuana by a minor must do so as part of the course of treatment of the minor's terminal or debilitating medical condition. If authorizing a minor for the medical use of marijuana, the health care professional must:
 - (a) Consult with other health care providers involved in the minor's treatment, as medically indicated, before authorization or reauthorization of the medical use of marijuana; and
 - (b) Reexamine the minor at least once every six months or more frequently as medically indicated. The reexamination must:
- 29 (i) Determine that the minor continues to have a terminal or 30 debilitating medical condition and that the condition benefits from 31 the medical use of marijuana; and
- 32 (ii) Include a follow-up discussion with the minor's parent or 33 guardian to ensure the parent or guardian continues to participate in 34 the treatment of the minor.
- 35 (5) A parent or quardian may administer marijuana for the medical 36 use of the minor, who meets the requirements of this section, on 37 school grounds, aboard a school bus, or while attending a school-38 sponsored event so long as it is not open to the view of the general

- 1 public and the administration is not by smoking or other methods
- 2 involving inhalation."

SHB 1060 - S COMM AMD

By Committee on Early Learning & K-12 Education

- On page 1, line 2 of the title, after "purposes;" strike the
- 4 remainder of the title and insert "and amending RCW 28A.210.260,
- 5 69.51A.060, and 69.51A.220."
 - <u>EFFECT:</u> (1) Removes sections that require school districts to adopt a policy to authorize parents or guardians to administer marijuana to a student for medical use while the student is on school grounds, aboard a school bus, or attending a school-sponsored event and requiring school districts to permit such action.
 - (2) Provides that school districts shall not inquire into the type of legal product or medicine that parents or guardians administer to their children while on school grounds, aboard a school bus, or attending a school-sponsored event.
 - (3) Provides that parents or guardians may administer marijuana for the medical use of a minor on school grounds, aboard a school bus, or while attending a school-sponsored event so long as the general public does not see it and the administration is not by smoking or inhalation.

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