AN ACT concerning education.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

Section 5. The School Code is amended by changing Section 22-30 as follows:

(105 ILCS 5/22-30)

Sec. 22-30. Self-administration <u>and self-carry</u> of <u>asthma</u> medication and <u>epinephrine auto-injectors; administration of undesignated epinephrine auto-injectors school nurse administration</u>.

(a) For the purpose of this Section only, the following terms shall have the meanings set forth below In this Section:

"Asthma inhaler" means a quick reliever asthma inhaler.

"Epinephrine auto-injector" means a <u>single-use device used</u>
<u>for the automatic injection of a pre-measured dose of</u>
<u>epinephrine into the human body medical device for immediate</u>
<u>self administration by a person at risk of anaphylaxis</u>.

"Asthma medication Medication" means a medicine, prescribed by (i) a physician licensed to practice medicine in all its branches, (ii) a physician assistant who has been delegated the authority to prescribe asthma medications by his or her supervising physician, or (iii) an advanced practice registered nurse who has a written collaborative agreement with

a collaborating physician that delegates the authority to prescribe asthma medications, for a pupil that pertains to the pupil's asthma and that has an individual prescription label.

"School nurse" means a registered nurse working in a school with or without licensure endorsed in school nursing.

"Self-administration" means a pupil's discretionary use of and ability to carry his or her prescribed asthma medication or epinephrine auto-injector.

"Self-carry" means a pupil's ability to carry his or her prescribed asthma medication or epinephrine auto-injector.

"Standing protocol" may be issued by (i) a physician licensed to practice medicine in all its branches, (ii) a physician assistant who has been delegated the authority to prescribe asthma medications or epinephrine auto-injectors by his or her supervising physician, or (iii) an advanced practice nurse who has a collaborative agreement with a collaborating physician that delegates authority to issue a standing protocol for asthma medications or epinephrine auto-injectors.

"Trained personnel" means any school employee or volunteer personnel authorized in Sections 10-22.34, 10-22.34a, and 10-22.34b of this Code who has completed training under subsection (g) of this Section to recognize and respond to anaphylaxis.

"Undesignated epinephrine auto-injector" means an epinephrine auto-injector prescribed in the name of a school district, public school, or nonpublic school.

- (b) A school, whether public or nonpublic, must permit the self-administration and self-carry of asthma medication by a pupil with asthma or the self-administration and self-carry use of an epinephrine auto-injector by a pupil, provided that:
 - (1) the parents or guardians of the pupil provide to the school (i) written authorization from the parents or guardians for (A) the self-administration and self-carry of asthma medication or (B) the self-carry of asthma medication or (ii) for (A) the self-administration and self-carry of an epinephrine auto-injector or (B) the self-carry use of an epinephrine auto-injector, written authorization from the pupil's physician, physician assistant, or advanced practice registered nurse; and
 - (2) the parents or guardians of the pupil provide to the school (i) the prescription label, which must contain the name of the <u>asthma</u> medication, the prescribed dosage, and the time at which or circumstances under which the <u>asthma</u> medication is to be administered, or (ii) for <u>the self-administration or self-carry use</u> of an epinephrine auto-injector, a written statement from the pupil's physician, physician assistant, or advanced practice registered nurse containing the following information:
 - (A) the name and purpose of the epinephrine auto-injector;
 - (B) the prescribed dosage; and
 - (C) the time or times at which or the special

circumstances under which the epinephrine auto-injector is to be administered.

The information provided shall be kept on file in the office of the school nurse or, in the absence of a school nurse, the school's administrator.

(b-5) A school district, public school, or nonpublic school may authorize the provision of a student-specific or undesignated an epinephrine auto-injector to a student or any personnel authorized under a student's Individual Health Care Action Plan, Illinois Food Allergy Emergency Action Plan and Treatment Authorization Form, or plan pursuant to Section 504 of the federal Rehabilitation Act of 1973 to administer an epinephrine auto-injector to the student, that meets the student's prescription on file.

(b-10) The school district, public school, or nonpublic school may authorize a school nurse or trained personnel to do following: (i) provide an undesignated epinephrine auto-injector to a student for self-administration only or any personnel authorized under a student's Individual Health Care Action Plan, Illinois Food Allergy Emergency Action Plan and Treatment Authorization Form, or plan pursuant to Section 504 of the federal Rehabilitation Act of 1973 to administer an epinephrine auto-injector to the student, that meets student's prescription on file; (ii) administer an undesignated epinephrine auto-injector that prescription on file to any student who has an Individual Health Care Action Plan, Illinois Food Allergy Emergency Action Plan and Treatment Authorization Form, or plan pursuant to Section 504 of the federal Rehabilitation Act of 1973 that authorizes the use of epinephrine an **Epinephrine** auto-injector; and (iii) administer an undesignated epinephrine auto-injector to any person student that the school nurse or trained personnel in good faith professionally believes is having an anaphylactic reaction.

(c) The school district, public school, or nonpublic school must inform the parents or guardians of the pupil, in writing, that the school district, public school, or nonpublic school and its employees and agents, including a physician, physician assistant, or advanced practice nurse providing standing prescription for school epinephrine protocol or auto-injectors, are to incur no liability or professional discipline, except for willful and wanton conduct, as a result injury arising from of the administration any self administration of asthma medication or use of epinephrine auto-injector regardless of whether authorization was given by the pupil's parents or guardians or by the pupil's physician, physician physician's assistant, or advanced practice registered nurse. The parents or guardians of the pupil must sign a statement acknowledging that the school district, public school, or nonpublic school and its employees and agents are to incur no liability, except for willful and wanton conduct, as a result of any injury arising from the

administration self-administration of asthma medication or use of an epinephrine auto-injector regardless of whether authorization was given by the pupil's parents or guardians or by the pupil's physician, physician physician's assistant, or advanced practice registered nurse and that the parents or guardians must indemnify and hold harmless the school district, public school, or nonpublic school and its employees and agents against any claims, except a claim based on willful and wanton conduct, arising out of the administration self administration of asthma medication or use of an epinephrine auto-injector regardless of whether authorization was given by the pupil's parents or guardians or by the pupil's physician, physician physician's assistant, or advanced practice registered nurse.

(c-5) Upon the effective date of this amendatory Act of the 98th General Assembly, when When a school nurse or trained personnel administers an undesignated epinephrine auto-injector to a person student whom the school nurse or trained personnel in good faith professionally believes is having an anaphylactic reaction, notwithstanding the lack of notice to the parents or guardians of the pupil or the absence of the parents or guardians signed statement acknowledging no liability, except for willful and wanton conduct, the school district, public school, or nonpublic school and its employees and agents, and including a physician, a physician assistant, or an advanced practice nurse providing standing protocol or prescription for undesignated school epinephrine auto-injectors, are to incur no liability or professional discipline, except for willful and wanton conduct, as a result of any injury arising from the use of an undesignated epinephrine auto-injector regardless of whether authorization was given by the pupil's parents or guardians or by the pupil's physician, physician physician's assistant, or advanced practice registered nurse.

- (d) The permission for self-administration and self-carry of asthma medication or the self-administration and self-carry use of an epinephrine auto-injector is effective for the school year for which it is granted and shall be renewed each subsequent school year upon fulfillment of the requirements of this Section.
- (e) Provided that the requirements of this Section are fulfilled, a pupil with asthma may self-administer and self-carry possess and use his or her asthma medication or a pupil may self-administer and self-carry possess and use an epinephrine auto-injector (i) while in school, (ii) while at a school-sponsored activity, (iii) while under the supervision of school personnel, or (iv) before or after normal school activities, such as while in before-school or after-school care on school-operated property.
- (e-5) Provided that the requirements of this Section are fulfilled, a school nurse or trained personnel may administer an undesignated epinephrine auto-injector to any person whom the school nurse or trained personnel in good faith believes to

be having an anaphylactic reaction (i) while in school, (ii) while at a school-sponsored activity, (iii) while under the supervision of school personnel, or (iv) before or after normal school activities, such as while in before-school or after-school care on school-operated property. A school nurse or trained personnel may carry undesignated epinephrine auto-injectors on his or her person while in school or at a school-sponsored activity.

(f) The school district, public school, or nonpublic school may maintain at a school in a locked, secure location a supply undesignated epinephrine auto-injectors <u>in any secure</u> location where an allergic person is most at risk, including, but not limited to, classrooms and lunchrooms. A physician, a physician assistant who has been delegated prescriptive authority for asthma medication or epinephrine auto-injectors in accordance with Section 7.5 of the Physician Assistant Practice Act of 1987, or an advanced practice nurse who has been delegated prescriptive authority for asthma medication or epinephrine auto-injectors in accordance with Section 65-40 of the Nurse Practice Act may prescribe undesignated epinephrine auto-injectors in the name of the school district, public school, or nonpublic school to be maintained for use when necessary. Any supply of epinephrine auto-injectors shall be maintained in accordance with the manufacturer's instructions. The school district or nonpublic school supply of epinephrine auto injectors may be provided to and utilized by any student

authorized to self-administer that meets the prescription on file or by any personnel authorized under a student's Individual Health Care Action Plan, Illinois Food Allergy Emergency Action Plan and Treatment Authorization Form, or plan pursuant to Section 504 of the federal Rehabilitation Act of 1973 to administer an epinephrine auto injector to the student, that meets the prescription on file. When a student does not have an epinephrine auto injector or a prescription for an epinephrine auto injector on file, the school nurse may utilize the school district or nonpublic school supply of epinephrine auto-injectors to respond to anaphylactic reaction, under a standing protocol from a physician licensed to practice medicine in all its branches and the requirements of this Section.

- (f-5) Upon any administration of an epinephrine auto-injector, a school district, public school, or nonpublic school must immediately activate the EMS system and notify the student's parent, guardian, or emergency contact, if known.
- (f-10) Within 24 hours of the administration of an undesignated epinephrine auto-injector, a school district, public school, or nonpublic school must notify the physician, physician assistant, or advance practice nurse who provided the standing protocol or prescription for the undesignated epinephrine auto-injector of its use.
- (g) Prior to the administration of an undesignated epinephrine auto-injector, trained personnel must submit to

his or her school's administration proof of completion of a training curriculum to recognize and respond to anaphylaxis that meets the requirements of subsection (h) of this Section.

Training must be completed annually. Trained personnel must also submit to his or her school's administration proof of cardiopulmonary resuscitation and automated external defibrillator certification. The school district, public school, or nonpublic school must maintain records related to the training curriculum and trained personnel.

- (h) A training curriculum to recognize and respond to anaphylaxis, including the administration of an undesignated epinephrine auto-injector, may be conducted online or in person. It must include, but is not limited to:
 - (1) how to recognize symptoms of an allergic reaction;
 - (2) a review of high-risk areas within the school and its related facilities;
 - (3) steps to take to prevent exposure to allergens;
 - (4) how to respond to an emergency involving an allergic reaction;
 - (5) how to administer an epinephrine auto-injector;
 - (6) how to respond to a student with a known allergy as well as a student with a previously unknown allergy;
 - (7) a test demonstrating competency of the knowledge required to recognize anaphylaxis and administer an epinephrine auto-injector; and
 - (8) other criteria as determined in rules adopted

pursuant to this Section.

In consultation with statewide professional organizations representing physicians licensed to practice medicine in all of its branches, registered nurses, and school nurses, the Board shall make available resource materials consistent with criteria in this subsection (h) for educating trained personnel to recognize and respond to anaphylaxis. The Board may take into consideration the curriculum on this subject developed by other states, as well as any other curricular materials suggested by medical experts and other groups that work on life-threatening allergy issues. The Board is not required to create new resource materials. The Board shall make these resource materials available on its Internet website.

- (i) Within 3 days after the administration of an undesignated epinephrine auto-injector by a school nurse, trained personnel, or a student at a school or school-sponsored activity, the school must report to the Board in a form and manner prescribed by the Board the following information:
 - (1) age and type of person receiving epinephrine (student, staff, visitor);
 - (2) any previously known diagnosis of a severe allergy;
 - (3) trigger that precipitated allergic episode;
 - (4) location where symptoms developed;
 - (5) number of doses administered;
 - (6) type of person administering epinephrine (school nurse, trained personnel, student); and

HB5892 Enrolled

(7) any other information required by the Board.

- (j) By October 1, 2015 and every year thereafter, the Board shall submit a report to the General Assembly identifying the frequency and circumstances of epinephrine administration during the preceding academic year. This report shall be published on the Board's Internet website on the date the report is delivered to the General Assembly.
- (k) The Board may adopt rules necessary to implement this Section.

(Source: P.A. 96-1460, eff. 8-20-10; 97-361, eff. 8-15-11.)

Section 99. Effective date. This Act takes effect August 1, 2014.