# SB52 ENGROSSED



- 1 HGMT38-2
- 2 By Senator Orr
- 3 RFD: Education Policy
- 4 First Read: 07-Mar-23

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6	A BILL
7	TO BE ENTITLED
8	AN ACT
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10	Relating to the Alabama Safe at Schools Act; to add
11	Section 16-30A-3.1 to the Code of Alabama 1975 and to amend
12	Sections 16-30A-5 and 16-30A-7, Code of Alabama 1975; to
13	include adrenal insufficiency as a condition for which the
14	State Board of Education is required to develop guidelines to
15	train school employees under the act; to authorize certain
16	school employees to administer injectable medications to
17	students with an adrenal insufficiency; and to require local
18	boards of education to ensure that students with an adrenal
19	insufficiency have their medical needs met and are not
20	excluded from certain activities.
21	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
22	Section 1. Section 16-30A-3.1 is added to the Code of
23	Alabama 1975, to read as follows:
24	\$16-30A-3.1
25	(a) For the purposes of this section, the term "adrenal
26	insufficiency" means a hormonal disorder that occurs when the
27	adrenal glands do not produce enough hormones.



- 28 (b) No later than the beginning of the 2024-2025 school year, the State Board of Education, in consultation with the 29 30 Alabama Board of Nursing, shall develop guidelines for the 31 training of school employees in the necessary care for 32 students with medical needs related to an adrenal 33 insufficiency according to the student's Individual Health Plan. The medical authorizations earned from the training 34 shall be limited to permitting the administration of 35 36 injectable medications specific to the adrenal insufficiency of the student. The quidelines shall be developed in 37 38 consideration of the recommendations of the American Academy of Pediatrics and other appropriate published medical 39 guidelines relating to adrenal insufficiency, as approved by 40 41 the State Board of Education and the Board of Nursing. Each local board of education shall ensure that adrenal 42 insufficiency training programs are provided for all school 43 nurses and unlicensed medication assistants at schools under 44 its jurisdiction. 45 (c)(1) The lead nurse of a school system, in 46 consultation with the local superintendent of education, may 47 recommend that school nurses be placed at particular schools 48 based on the Individual Health Plans of students with adrenal 49 insufficiency and the overall health needs of students. 50
  - (2) Each local board of education shall ensure that

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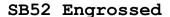


- 52 each student in the school system with an adrenal
- insufficiency receives appropriate care as specified in his or
- 54 her Individual Health Plan.
- (d) No school employee shall be required to serve as an
- unlicensed medication assistant or be subject to any penalty
- or disciplinary action for refusing to serve as an unlicensed
- 58 medication assistant. The decision of a school employee to
- 59 serve or not to serve as an unlicensed medication assistant
- 60 may not be considered in any employment decision including,
- but not limited to, termination, non-renewal of contract,
- 62 reduction-in-force, or transfer. No school administrator or
- 63 supervisor shall threaten, harass, or otherwise coerce a
- 64 school employee into serving as an unlicensed medication
- 65 assistant.
- (e) The parent or guardian of each student who is
- 67 identified as having an adrenal insufficiency shall submit an
- order to be considered in the development of the student's
- 69 Individual Health Plan pursuant to Section 16-30A-4.
- 70 (f) A private K-12 school may provide training for
- 71 employees and care for students who have an adrenal
- 72 insufficiency in accordance with this chapter.
- 73 Section 2. Sections 16-30A-5 and 16-30A-7, Code of
- 74 Alabama 1975, are amended to read as follows:
- 75 "\$16-30A-5



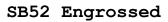
76 (a) The local board of education shall ensure that each
77 student in the school or system with a diabetic condition or
78 an adrenal insufficiency receives appropriate care as
79 specified in his or her Individual Health Plan.

- (b) The school nurse or a trained unlicensed medication assistant, to the extent required by the student's Individual Health Plan, shall be on site and available to provide care to each student with diabetes or an adrenal insufficiency during regular school hours and school-sponsored before school and after school care programs, during field trips, extended off-site excursions, extracurricular activities in which the student is a direct participant, and on buses when the bus driver is not a trained unlicensed medication assistant."
- (a) For the purposes of this section, the term "medical condition" refers to a diabetic condition or an adrenal insufficiency.
- (b) A student with diabetes a medical condition in public school may attend the school the student would otherwise attend if the student did not have diabetes that medical condition, and the diabetes medical care specified in Section 16-30A-5 shall be provided at the school. A school system may not restrict a student who has diabetes a medical condition from attending any school on the basis that the





100 student has diabetes of that medical condition, that the school does not have a full-time school nurse, or that the 101 school does not have trained unlicensed medication assistants. 102 103 A student with diabetes a medical condition may participate in extracurricular and co-curricular activities to the same 104 105 extent as a student without diabetes a medical condition. In addition, a school shall not require or pressure parents or 106 guardians to provide care for a student with diabetes a 107 medical condition at school or at school-sponsored activities 108 in which the student is a direct participant as set forth in 109 110 Section 16-30A-5. However, if the parent or quardian of a student with diabetes a medical condition does not supply the 111 medication, the order from a physician, certified registered 112 113 nurse practitioner operating under a valid collaborative 114 agreement, or physician assistant operating under a valid supervisory agreement, supplies, or a signed parental and 115 prescriber authorization, the parent or guardian shall be 116 responsible for providing diabetic medical care to the student 117 at school or at school-sponsored activities in which the 118 student is a direct participant." 119 120 Section 3. This act shall become effective immediately 121 following its passage and approval by the Governor, or its 122 otherwise becoming law.





123 124 125	Senate
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126 127	Read for the first time and referred07-Mar-23 to the Senate committee on Education
128 129	Policy
130 131 132 133	Read for the second time and placed21-Mar-23 on the calendar: 0 amendments
134 135 136 137 138 139	Read for the third time and passed23-Mar-23 as amended  Yeas 31  Nays 0  Abstains 0
140 141 142 143	Patrick Harris, Secretary.