**Frequently asked Questions Regarding SB 1266 Emergency Epinephrine Auto-injectors:**

**Will this bill REQUIRE all school districts to provide emergency epinephrine auto-injectors?**

-According to 49414 (a) “School districts, county offices of education, and charter schools shall provide emergency epinephrine auto-injectors to school nurses or trained personnel who have volunteered pursuant to subdivision (d), and school nurses or trained personnel may use epinephrine auto-injectors to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an anaphylactic reaction.”

**When will this bill be enacted and when do schools need to be in compliance?**

-The law takes effect on January 1, 2015. The State Superintendent’s office will be making final arrangements for implementation and the final timeline is still being determined.

**What does the law state regarding ‘trained volunteer’?**

-Volunteer means an “employee who has volunteered to administer an emergency epinephrine auto-injector, has received training in the use of an epinephrine auto-injector, and has been designated by the school as a trained volunteer who will administer epinephrine auto-injector to a pupil if the pupil is suffering or reasonably believed to be suffering from anaphylaxis.”

**How will volunteers be identified?**

-“A school district, county office of education, or charter school shall distribute a notice at least once per school year to all staff that contains the following information: A description of the volunteer request stating that the request is for volunteers to be trained to administer an epinephrine auto-injector as well as a description of the training the volunteer will have to undergo.”

**What constitutes ‘training’?**

-There are current guidelines regarding epinephrine auto-injectors in place on the California Department of Education website, but they will be updated per the legislation. “The (State) Superintendent shall consult with organizations and providers with expertise in administering epinephrine auto-injectors and administering medication in a school environment, including, but not limited to, the State Department of Public Health, the Emergency Medical Services Authority, the American Academy of Allergy, Asthma and Immunology, the California School Nurses Organization, the California Medical Association, the American Academy of Pediatrics, Food Allergy Research and Education, the California Society of Allergy, Asthma and Immunology, the American College of Allergy, Asthma and Immunology, the Stanford Allergy Center, and others. Every five years, or sooner as deemed necessary by the (State) Superintendent, the Superintendent shall review minimum standards of training for the administration of epinephrine auto-injectors. Training established pursuant to this subdivision shall include all of the following:

* Techniques for recognizing the symptoms of anaphylaxis
* Standards and procedures, for the storage, restocking and emergency use of emergency epinephrine auto-injectors.
* Emergency follow up procedures, including calling EMS
* Recommendation on the necessity of CPR certification
* Instruction on how to determine whether to use an adult epinephrine auto-injector or a junior epinephrine auto injector-which shall include consideration of grade level or age as a guideline of equivalency for appropriate pupil weight determination.
* Written material covering the information”

**How many staff must be trained?**

-“Each school may designate one or more school personnel on a voluntary basis to be trained.” However, CSNO strongly feels that a minimum number of staff trained should be at least 2-3 per site.

**How frequently must the staff be trained?**

-“Volunteer personnel shall receive initial and annual refresher training.” CSNO believes that school nurses and/or qualified supervisors of health should determine the frequency of training, with a minimum of at least once a year.

**Who provides the training?**

-Training is provided either by the ‘school nurse or other qualified person designated by the physician or surgeon employed or contracted by the LEA, the medical director of the local health department or the local emergency medical services director’.

**Is there protection for volunteers who act in an emergency and administer the emergency epinephrine auto-injector?**

-Yes, “a school district, county office of education or charter school shall ensure that each employee who volunteers will be provided defense and indemnification by the school district, county office of education or charter school for any and all civil liability”.

**Are the emergency epinephrine auto-injectors required to be available for off-site school activities?**

-“The emergency epinephrine auto-injectors are furnished exclusively for use at a school district site, county office of education or charter school.” The law does not address field trips or other off site school activities. CSNO recommends that school nurses work with their districts to develop policies and procedures that address activities outside of the school site, considering school nurse staffing and other challenges with regards to evenings and weekends.

**Who is responsible for obtaining the prescription?**

-“A school nurse or if not available, a school administrator or employee who has volunteered shall obtain from a physician employed by or contracting with the LEA, the medical director of the local health department or the local emergency medical services director.” (Suggestions include contracting with your Workers Comp clinic or physician, your sports physician, or local physician such as an ED or other practitioner who is willing to contract with the school district to review Standing Orders and write a prescription).

**If the prescription is “non-patient specific”, whose name should be on it?**

-The current law doesn’t specify how the emergency epinephrine auto-injectors are labeled. This would be the prescribing physician and/or pharmacy’s decision. Some may wish to have the school’s name on the prescription and on the label attached to the container in which the epinephrine auto-injectors are packaged. However, the current program that provides free epinephrine auto-injectors are provided with no specific labeling/name information.

**How many emergency epinephrine auto injectors must a school obtain?**

-“An elementary school should obtain *at minimum*, one regular epinephrine auto-injector and one junior epinephrine auto-injector. For junior and high schools, one regular epinephrine auto injector, unless they have students who meet the criteria for a junior epinephrine auto injector.” However, CSNO supports having at least 2 epinephrine auto-injectors per site.

**If the emergency epinephrine auto injector is used, when does it need to be restocked by?**

-“If an emergency epinephrine auto-injector is used, it shall be restocked as soon as reasonably possible, *but no later than 2 weeks after the use*.”

**Is the use of an emergency epinephrine auto-injector required to be reported-and to whom?**

-Currently, the reporting portion is still unclear (whether the use will need to be reported to the County Office or State Department of Education), but CSNO recommends that school nurses work with their school district to develop/implement documentation procedures that ensure that appropriate care and follow up was taken and that the medication was restocked in a timely manner). Additionally, CSNO would like the information to be reported to the CSNO/NASN data points located on the CSNO website (<http://www.csno.org/index.html>) .

**Which epinephrine auto-injector should a school get?**

- The statute does not specify a particular “brand” of epinephrine auto-injector-however the prescribing physician may indicate which epinephrine auto-injector to dispense. There are a number of epinephrine auto-injectors that have been approved by the FDA and are available, with a prescription for the management of life threatening allergies. The devices operate in different ways, so it is critically important that schools and pharmacies ensure that the designated school personnel are trained to use the specific epinephrine auto-injector that is prescribed and dispensed. Different auto-injectors have different operational instructions. When an auto-injector is needed, seconds matter.

**Is there funding for the emergency epinephrine auto-injectors?**

-Currently, (and they have assured us that they will continue) Mylan (who markets the Epi Pen) will provide 4 FREE Epi pens (either regular or junior) for EACH school site through [www.epipen4schools.org](http://www.epipen4schools.org) program. A school district just needs to provide them with a written prescription for the total number of Epi pens requested.

**Are there any current resources for Standing Orders, Board Policies, additional information, etc?**

-Yes, CSNO has a link that will provide templates and resources <http://www.csno.org/school-nurse-resources.html>. Scroll down to Allergies and Anaphylaxis.

**What if a District cannot contract with a physician who is willing to write the order or if a school nurse covers multiple sites/districts (or there is no school nurse or qualified supervisor of health?**

-The law states that “school districts, county offices of education and charter schools ***shall*** provide emergency epinephrine auto-injectors to school nurses or trained personnel who have volunteered” and that they ‘shall obtain from a physician….’ It is not ‘permissive’ (it is ‘shall’ not ‘may’). Discussions are continuing with regards to access to physician services for districts.

-However, if a district does not provide epinephrine auto-injectors because they do not have a school nurse or trained volunteer, parents should be encouraged to contact their superintendent and inquire as to why their child is not being provided equal protection under the law, with regards to access to emergency epinephrine.