The Maryland Association of Boards of Education (MABE) supports Senate Bill 299 with amendments to address concerns primarily related to the bill's troubling mandated delegation of nursing duties to non-medical school staff.

MABE supports the bill’s provisions calling for school health guidelines devoted to seizure disorders and the value of broader awareness among school staff of appropriate responses to seizures. MABE has supported legislation in recent years to ensure that school health guidelines are updated and strengthened to adequately address students with health conditions such as diabetes and sickle cell disease. In this context, MABE supports this bill’s proposal that parents, healthcare providers, and school health personnel and administrators develop seizure action plans for students with a seizure disorder. However, this bill goes much further by requiring that school nurses train and certify that non-nursing school staff are approved to administer not only first aid but also emergency medication.

MABE requests amendments to:
- Insert on page 2 in line 10 after “YEAR,” “IN ACCORDANCE WITH THE STATE APPROVED SCHOOL HEALTH SERVICES GUIDELINES”.
- On page 2 in line 27 strike “ONE OF” to clarify that only health professionals may be required to be trained in administering medication.
- Strike lines 29 through 31 on page 2, which include confusing provisions governing the non-nursing staff serving as trained personnel.
- Amend lines 4 through 17 on page 3 to remove the requirement that the biannual training be provided by the nursing or other trained staff, as opposed to any other individuals or entities designated by the school system.
- On page 5 in lines 23-28, the helpful provision granting immunity to “AN EMPLOYEE OR OTHER SCHOOL PERSONNEL” acting in good faith should be amended to reflect the fact that school nurses are often not school employees. Specifically, amend lines 23-24 to read “AN EMPLOYEE OR OTHER SCHOOL PERSONNEL OR SCHOOL NURSE OR CERTIFIED NURSING ASSISTANT OR CERTIFIED MEDICATION TECHNICIAN”.

The development of legislation ultimately enacted to revamp school health guidelines and health services for students with diabetes involved similar questions of whether and how to allow non-medical staff to administer medication. That legislation stopped short of mandating the training and authorization of a minimum number of staff to administer insulin or glucagon. MABE and local boards are deeply troubled that Senate Bill 299, as introduced and amended in the Senate, would continue to inappropriately mandate that each school system require non-medical staff to be trained to administer emergency medication to treat seizures. MABE appreciates the adoption of amendments to address these concerns.
Again, MABE has recently supported legislation to ensure that school health plans ensure a high degree of care and heightened awareness among school personnel regarding the needs of students with certain health conditions and supports the intent of this bill to provide similar assurances for students with seizure disorders.

Local boards of education place a very high priority on student health, by ensuring that schools are operating in accordance with adopted state school health guidelines and local policies and procedures intended to provide a health and safe school environment conducive to student learning. Under the law, MSDE and the Maryland Department of Health must provide technical assistance to schools to: implement the adopted guidelines, train school personnel at the local level, and develop a process to monitor the implementation of the guidelines. The law also establishes the office of the school health services program coordinator, who is responsible for implementing State and local health policies in the public schools, ensuring that public schools adhere to local health services guidelines, and communicating State and local health policies to the parents and guardians of public school students.

For these reasons, MABE requests a favorable report on Senate Bill 299 with the amendments outlined above.