

Department of Planning and Budget 2024 Session Fiscal Impact Statement

1. Bill Number: HB732S1

House of Origin	<input type="checkbox"/>	Introduced	<input type="checkbox"/>	Substitute	<input type="checkbox"/>	Engrossed
Second House	<input type="checkbox"/>	In Committee	<input checked="" type="checkbox"/>	Substitute	<input type="checkbox"/>	Enrolled

2. Patron: Sewell

3. Committee: Education and Health

4. Title: Public secondary schools; naloxone procurement, possession, and administration; school board.

5. Summary: Requires each local school board to develop a plan, in accordance with the guidelines and model curriculum developed by the Department of Health in collaboration with the Department of Education, for providing at each public secondary school that includes grades nine through 12 a program of instruction on opioid overdose prevention and reversal. Requires that each public secondary school shall provide an opioid overdose prevention and reversal program of instruction at such grade level as the local school board deems appropriate and shall adopt policies for the purpose of encouraging each student to complete such opioid overdose prevention and reversal program of instruction prior to graduation. Requires each local school board to develop a plan and policies and procedures, in accordance with the guidelines developed by the Department of Health in collaboration with the Department of Education, that: (i) provide for the procurement, storage, and maintenance of at least two unexpired doses of opioid antagonists at each public elementary and secondary school; (ii) require each such school to inspect its opioid antagonist supply at least annually and maintain a record of the date of inspection, the expiration date on each dose, and in the event that a dose is administered for overdose reversal, the date of such administration; and (iii) relate to the proper and safe storage of such opioid antagonist supply in each school. The bill requires that each local school board shall develop policies and procedures relating to the possession and administration of opioid antagonists by any school nurse or employee of the school board who is authorized by a prescriber and trained in the administration of opioid antagonist including: (i) policies requiring each public school to ensure that at least one employee is authorized by a prescriber and has been trained and is certified in the administration of an opioid antagonist and has the means to access at all times during regular school hours any such opioid antagonist supply; and (ii) policies and procedures for partnering with a program administered or approved by the Department of Health to provide training in opioid antagonist administration and maintaining records of each employee of each such school who is trained and certified in the administration of an opioid antagonist. The bill states that any employee of a public school, school board, or local health department who, during regular school hours, on school premises, or during a school-sponsored activity, in good faith administers an opioid antagonist for opioid overdose reversal to any individual who is believed to be experiencing or about to experience a life-

threatening opioid overdose, regardless of whether such employee was trained in administration of an opioid antagonist, shall be immune from any disciplinary action or civil or criminal liability for any act or omission made in connection with the administration of an opioid antagonist in such incident, unless such act or omission was the result of gross negligence or willful misconduct. Finally, the bill directs the Department of Health and the Department of Education to collaborate to develop guidelines and policies for the implementation of the provisions of the bill and for the Department of Education to submit such guidelines to the House Committee on Appropriations, the House Committee on Education, the Senate Committee on Education and Health, and the Senate Committee on Finance and Appropriations by January 1, 2025. The bill requires such guidelines and policies to be implemented by each school board by the beginning of the 2025-2026 school year.

6. Budget Amendment Necessary: No

7. Fiscal Impact Estimates: Preliminary, see item 8.

8. Fiscal Implications: The Department of Health and the Department of Education can absorb any costs to develop the guidelines and policies required by this bill.

Any fiscal impact to local school divisions is indeterminate.

9. Specific Agency or Political Subdivisions Affected: Department of Health, Department of Education, local school divisions

10. Technical Amendment Necessary: No

11. Other Comments: This bill is similar to SB726.