

New York State Association of School Nurses

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Memorandum of Opposition

S0385 / A10662

Authorizes school personnel in schools to assist pupils with diabetes care

**The New York State Association of School Nurses (NYSASN) opposes this
legislation**

Best practices for the provision of health care services to students with diabetes in New York:

The gold standard for the provision of health care services to pupils with diabetes in New York's schools is the New York State Department of Health's "*Children with Diabetes: A resource guide for families and schools.*" The proposed legislation seeks to codify most of this standard into NYS Law.

Federal Laws guarantee health care services, including nursing services, for students with chronic health conditions who qualify under Section 504 of the Rehabilitation Act and the Individuals with Disabilities Education Act [IDEA] of 2004.

Our concern with the proposed law:

While NYSASN is supportive of efforts to codify the NYSDOH best practice into New York State law, we are concerned that the proposed legislation deviates from this best practice standard in a significant way: it would permit non-licensed school personnel to provide health services to **respond to blood glucose levels outside of normal range and administer insulin to students with diabetes** as part of their duties as trained diabetes care personnel in accordance with the student's medical management plan.

Insulin identified as a "High-Alert" medication:

Insulin has been designated a 'high-alert' medication by the Institute for Safe Medication Practices (ISMP). **High-alert medications are so named because of their potential to result in serious harm, including death, to the patient.**

According to the American Society of Health-System Pharmacists, insulin “is constantly implicated in causing the most preventable patient harm in hospitals through reporting systems maintained by the US Pharmacopeia and Institute for Safe Medication Practices.”

To guard against the potentially deadly effects of an insulin error, hospitals and other healthcare institutions have specialized procedures in place to mitigate and respond to errors with high-alert drugs.

The proposed legislation will be a major shift in New York State healthcare policy:

It has been argued that a precedent for the proposed legislation exists in New York law. Under New York Public Health law, non-licensed caretakers in daycare settings are permitted to provide diabetes care - including the administration of insulin - to children under their custodial care.

NYSASN provides the following counterargument: In New York, school health services exist as a legally authorized clinical micro-system within the broader education macro-system. The professional health services provided to students in New York’s schools are authorized by and explicitly defined under Article 19 of the NYS Education Law.

This legal authorization to practice a health profession in New York schools is required under New York’s Corporate Practice of the Professions doctrine. This doctrine exists in order “to guarantee that licensed professionals provide professional services to the public without undue influence from other professionals or from unlicensed persons who are not subject to the professional responsibility requirements prescribed in Education Law.”

The proposed legislation would establish a new precedent that we believe poses a downstream threat to the safety of *all* students with chronic medical conditions in New York State. If passed, trained, non-licensed staff would be permitted to provide clinical services including the administration of high-alert medications, to students in New York’s schools.

NYSED’s responsibility to balance the public safety interest with the public protection interest:

NYSASN believes that public policy changes affecting the provision of healthcare in the school setting should occur only after careful consideration of the safety factors involved and a careful balancing of the public safety interest with the public protection interest.

The New York State Education Department’s Office of the Professions is charged with protecting the public through regulation of the professions. NYSED recognizes that there is a public protection interest in having persons trained to administer certain emergency medications by injectable route - such as epinephrine and glucagon - and generally confirms the practice of training unlicensed individuals to administer medications **only in certain emergency circumstances**.

In addition to epinephrine and glucagon, New York State law also permits certain unlicensed individuals to administer Narcan by the injectable route **only in emergency situations as a life-saving measure**. As a high-risk drug, slight miscalculations in dose can have devastating consequences.

Concluding Comments:

The New York State Association of School Nurses (NYSASN) recommends the highest standards for school health services and believes that student safety must be the top priority in all legislation which affects the provision of school health services to New York State's students. Practice changes can only be driven by safety considerations, not as a pragmatic response to a real or perceived shortage of school nurses or funding for school nurse positions.

If the NY Legislature is prepared to relax the rules on insulin administration by non-family caregivers, NYSASN holds that the school setting is arguably the last place they should do this, because, should an error occur, the school is less prepared than other health care settings to respond and rectify the error in a timely manner. Indeed, unlicensed school personnel may not recognize that an error has occurred.

NYSASN takes the position that the proposed structural and process changes outlined in S0385 and A10662 that would permit non-licensed school personnel to administer insulin to students with diabetes will pose serious safety risks to New York's students with diabetes.

For the reasons outlined above, NYSASN OPPOSES the legislation and urges its defeat.