A State Law Permitting Stock Asthma Rescue Medicines in the School Setting

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We disclose the absence of personal financial relationships with commercial interests relevant to this educational activity within the past 12 months.

PURPOSE

Based on the purpose of this poster is to address: 1) variance in the operationalization of the term “life-threatening asthma emergency”; 2) examples of informational and training resources for school administrators, nurses, and staff; 3) one mid-Missouri school district’s early experience with a HB1188 implementation; and 4) school board authorization to allow school nurses to administer any student the school nurse or trained employee (a school nurse or other school employee trained and supervised by the nurse) “on any student the school nurse or other school employee believes is having a life-threatening asthma emergency episode based on the training in recognizing an acute asthma episode”.

BACKGROUND

HB1188 contains specific language regarding who can administer asthma related rescue medications for use in the care of any student who is having a life-threatening asthma episode. HB1188 Missouri pharmacy laws did not permit dispensing “stock” asthma-related rescue medications to schools. There were no state-approved policies for administration of asthma rescue medications at school without a student’s personal prescription on hand. HB1188 allows a school nurse or other trained employee to administer asthma related rescue medication to a student experiencing a life-threatening asthma attack. This poster describes the approved language of HB1188 and its implementation during the two years since its enactment.

“LIFE-THREATENING ASThmA EMERGENCY”

HB1188 contains specific language regarding who can administer asthma related rescue medications (a school nurse or other school employee trained and supervised by the nurse) “on any student the school nurse or other school employee believes is having a life-threatening asthma emergency episode based on the training in recognizing an acute asthma episode”.

FEEDBACK FROM Missouri SCHOOL NURSES

School nurses were asked to complete a survey and provide feedback regarding HB1188:

1) We have decreased 911 calls this school year with availability of adrenalin (epinephrine) treatments. We face the challenge of families supplying adrenalin, keeping it in the room, and debriefing the student and family.

2) HB1188 has been a blessing for our district. We are able to treat students at the onset of an asthma attack and many times after treatment the student is able to return to their normal activity.

3) More students have used the emergency medication because a potential life-threatening situation was being prevented. It is difficult to clearly define life-threatening...

4) Our nurses... are very happy to have emergency medication because we are located so far away from the hospital.

5) There are concerns from the nurses about liability and diagnosing it as asthma issue and using the stock medications.

6) While it allows us to use adrenalin for asthma emergencies, it also takes responsibility out of parents/guardians hands to provide asthma medication for those students who need it. They fall back on the idea that the school has some so they don’t need to provide it.

EXAMPLES OF TRAINING RESOURCES FOR SCHOOL STAFF

In 2013, Asthma Ready Communities® created web-based HB1188 training resources for school staff. These resources include:

For school staff and school administrators:

- Missouri Students from Life-Threatening Asthma.
- Self-Carry Emergency Medicines at School.

For school nurses and staff training:

- Asthma management scenarios.
- Nebulizer Training.
- Additional resources, such as the HB1188 Reference Guide.

For Pharmacists:

- Addresses concerns related to filling stock medication to schools.

STATEWIDE SURVEY RESULTS ON HB1188

In February 2014, the Missouri Asthma Prevention and Control Program completed a statewide survey of school nurses regarding emergency asthma care practices. Approximately 84% (4,652/5,521) of Missouri public school districts responded. Responding school districts accounted for 861,564 (96.5%) of the total student enrollment in public school districts (886,526). All 115 counties in the state were represented in the sample. Survey results include:

1) Stock asthma rescue medication is available to approximately 48.9% of Missouri students:

- Approximately 56% of school nurses reported at least one student in the district had been given stock rescue medication to treat an asthma episode in the 2013-2014 school year.

2) Albuterol was the most common medication stocked in 80% of school districts with rescue medications available (the majority approved for delivery by nebulizer).

3) Direct Benefit to School Age Children: Approximately 16% of school nurses reported at least one student in the district had been given stock rescue medication to treat an asthma episode in the 2013-2014 school year.

4) School District Policies: Of the 161 school districts with stock rescue medication available, 48 received a new policy for school board approval, and 58 amended or applied an existing policy. Thus, 55.8% of these school districts have specific or general school board authorization. However, 40/161 (24.8%) had not yet developed such a policy. One school board authorization was not required. Fourteen (8.7%) did not know if the school board had provided authorization. The status of school board authorization could not be determined for one school.

FOR ADDITIONAL INFORMATION AND RESOURCES:

www.asthmaready.org

AADL-AACCP, Inc. is accredited by the Accreditation Council for Continuing Medical Education to sponsor this activity. AADL-AACCP, Inc. designates this educational activity for a maximum of 1.0 AMA PRA Category 1 Credit(s)™. Each participant, upon successfully completing this activity, should be able to perform the following in the management of asthma exacerbations:

- Diagnose a life-threatening asthma episode and administer the appropriate therapy.
- Distinguish between life-threatening asthma and less serious asthma (mild, moderate, severe) and list the differences.
- Recognize the signs and symptoms of life-threatening asthma.
- Recognize the appropriate sequence of treatment of life-threatening asthma.
- Use the protocol correctly.

ACKNOWLEDGEMENTS

The Asthma and Allergy Foundation of America, St. Louis Chapter (AABA-STL) outreach and education programs have provided support to school nurses in St. Louis, surrounding counties of St. Louis city and county, and across the state through both equipment and training of other school personnel. Specific examples include:

- AABA-STL, and a community partner (Beverly Hills Pharmacy) were able to supply schools located simply on hand. HB1188 allows a school nurse or other trained employee to administer stock rescue medication to a student experiencing a life-threatening asthma attack. This poster describes the approved language of HB1188 and its implementation during the two years since its enactment.

The purpose of this poster is to address: 1) variance in the operationalization of the term “life-threatening asthma emergency”; 2) examples of informational and training resources for school administrators, nurses, and staff; 3) one mid-Missouri school district’s early experience with a HB1188 implementation; including case reports and lessons learned; 4) a non-profit advocacy organization’s (AABA-AACCP, Inc.) support for HB1188 implementation statewide; 5) estimates of asthma rescue medicine use, permitted under HB1188, measured by statewide survey of school nurses and 6) passage of policies for HB1188 compliance by local school boards.

In 2013, Asthma Ready Communities® created web-based HB1188 training resources for school staff. These resources include:

- Missouri Students from Life-Threatening Asthma.
- Self-Carry Emergency Medicines at School.
- Nebulizer Training.
- Additional resources, such as the HB1188 Reference Guide.

For Pharmacists:

- Addresses concerns related to filling stock medication to schools.

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