

CHAPTER.....

AN ACT relating to controlled substances; authorizing certain health care professionals to issue an order for an opioid antagonist to a public or private school; authorizing public and private schools to obtain and maintain opioid antagonists under certain conditions; providing immunity to certain persons for acts or omissions relating to the acquisition, possession, provision or administration of auto-injectable epinephrine or opioid antagonists in certain circumstances; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law authorizes certain physicians, physician assistants and advanced practice registered nurses to prescribe and dispense an opioid antagonist to a person at risk of experiencing an opioid-related drug overdose, or to a family member, friend or other person who is in a position to assist a person experiencing an opioid-related drug overdose. (Chapter 453C of NRS, NRS 453C.100) Existing law also authorizes certain health care professionals to issue an order for auto-injectable epinephrine to a public or private school to be maintained at the school for the treatment of anaphylaxis that may be experienced by any pupil at the school. (NRS 630.374, 632.239, 633.707) **Section 1** of this bill authorizes certain health care professionals to issue such an order for opioid antagonists to a public or private school for the treatment of an opioid-related drug overdose that may be experienced by any person at the school. **Section 1** also provides that a health care professional is not subject to disciplinary action for issuing such an order to a school.

Existing law requires each public school, including each charter school, to obtain an order from certain health care professionals for auto-injectable epinephrine to maintain the drug at the school. (NRS 386.870) Existing law similarly authorizes a private school to obtain and maintain auto-injectable epinephrine at the school. (NRS 394.1995) **Sections 5 and 8** of this bill authorize a public or private school, respectively, to obtain an order for an opioid antagonist. If a public or private school obtains such an order, **sections 2, 5 and 8** of this bill authorize a school nurse or other designated employee of the public or private school, as applicable, who has received training in the storage and administration of opioid antagonists to administer an opioid antagonist to any person on the premises of the school who is reasonably believed to be experiencing an opioid-related drug overdose. **Section 4** of this bill: (1) establishes requirements relating to the storage, handling and transportation of opioid antagonists in public schools; and (2) requires each school district and charter school to report to the Division of Public and Behavioral Health of the Department of Health and Human Services the number of doses of opioid antagonists administered at each public school during each school year. **Sections 5 and 8** require the board of trustees of each school district and the governing body of each charter or private school that obtains an order for an opioid antagonist to establish a policy to ensure: (1) that emergency assistance is sought each time a person experiences an opioid-related drug overdose on the premises of the school; and (2) the parent or guardian of a pupil to whom an opioid antagonist is administered is notified as soon as practicable. **Sections 5-8** of this bill require training in the storage and administration of opioid antagonists to be provided to



designated employees of a public or private school that obtains an order for an opioid antagonist. **Sections 5 and 8** exempt a school, school district, employee of a school and certain other persons affiliated with a school from liability for certain damages relating to the acquisition, possession, provision or administration of auto-injectable epinephrine or an opioid antagonist not amounting to gross negligence or reckless, willful or wanton conduct, if the auto-injectable epinephrine or opioid antagonist is provided or administered during the rendering of emergency care or assistance during an emergency.

Section 9 of this bill requires a registered pharmacist to transfer an order for an opioid antagonist to another registered pharmacist at the request of a public or private school for which the order was issued. **Section 9** also exempts a pharmacist who dispenses an opioid antagonist pursuant to such an order from liability for certain damages relating to the acquisition, possession, provision or administration of an opioid antagonist not amounting to gross negligence or reckless, willful or wanton conduct.

EXPLANATION – Matter in *bolded italics* is new; matter between brackets ~~omitted material~~ is material to be omitted.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 453C of NRS is hereby amended by adding thereto a new section to read as follows:

1. Notwithstanding any other provision of law, a health care professional authorized to prescribe an opioid antagonist may issue to a public or private school an order to allow the school to obtain and maintain an opioid antagonist at the school, regardless of whether any person at the school has been diagnosed with a condition which may cause the person to require such medication for the treatment of an opioid-related drug overdose.

2. An order issued pursuant to subsection 1 must contain:

(a) The name and signature of the health care professional and the address of the health care professional if not immediately available to the pharmacist;

(b) The classification of the license of the health care professional;

(c) The name of the public or private school to which the order is issued;

(d) The name, strength and quantity of the opioid antagonist authorized to be obtained and maintained by the order; and

(e) The date of issue.

3. A health care professional is not subject to disciplinary action solely for issuing a valid order pursuant to subsection 1 to a public or private school and without knowledge of a specific natural person who requires the medication.



4. *A health care professional is not liable for any error or omission concerning the acquisition, possession, provision or administration of an opioid antagonist maintained by a public or private school pursuant to an order issued by the health care professional pursuant to subsection 1 not resulting from gross negligence or reckless, willful or wanton conduct of the health care professional.*

5. *As used in this section:*

(a) *“Private school” has the meaning ascribed to it in NRS 394.103.*

(b) *“Public school” has the meaning ascribed to it in NRS 385.007.*

Sec. 2. NRS 454.303 is hereby amended to read as follows:

454.303 **1.** A school nurse or other employee of a public or private school who is authorized pursuant to NRS 386.870 or 394.1995 to administer auto-injectable epinephrine *or an opioid antagonist* may possess and administer auto-injectable epinephrine *or an opioid antagonist, as applicable*, maintained by the school if the school nurse or other employee has received training in the proper storage and administration of auto-injectable epinephrine *or the opioid antagonist, as applicable*, as required by NRS 386.870 or 394.1995.

2. *As used in this section, “opioid antagonist” has the meaning ascribed to it in NRS 453C.040.*

Sec. 3. Chapter 386 of NRS is hereby amended by adding thereto a new section to read as follows:

As used in NRS 386.865, 386.870 and 386.875, “opioid antagonist” has the meaning ascribed to it in NRS 453C.040.

Sec. 4. NRS 386.865 is hereby amended to read as follows:

386.865 **1.** Each public school shall ensure that auto-injectable epinephrine *and any opioid antagonist* maintained at the school is stored in a designated, secure location that is unlocked and easily accessible.

2. Each school district shall establish a policy for the schools within the district, other than charter schools, regarding the proper handling and transportation of auto-injectable epinephrine ~~and~~ *and opioid antagonists.*

3. Not later than 30 days after the last day of each school year, each school district and charter school shall submit a report to the Division of Public and Behavioral Health of the Department of Health and Human Services identifying the number of doses of auto-injectable epinephrine *and opioid antagonists* that were



administered at each public school within the school district or charter school, as applicable, during the school year.

Sec. 5. NRS 386.870 is hereby amended to read as follows:

386.870 1. Each public school, including, without limitation, each charter school, shall obtain an order from a physician, osteopathic physician, physician assistant or advanced practice registered nurse, for auto-injectable epinephrine pursuant to NRS 630.374, 632.239 or 633.707 and acquire at least two doses of the medication to be maintained at the school. If a dose of auto-injectable epinephrine maintained by the public school is used or expires, the public school shall ensure that at least two doses of the medication are available at the school and obtain additional doses to replace the used or expired doses if necessary.

2. *A public school, including, without limitation, a charter school, may obtain an order from a health care professional for an opioid antagonist pursuant to section 1 of this act to be maintained at the school. If a dose of an opioid antagonist maintained by the public school is used or expires, the public school may obtain an additional dose of the opioid antagonist to replace the used or expired opioid antagonist.*

3. Auto-injectable epinephrine *or an opioid antagonist* maintained by a public school pursuant to this section may be administered:

(a) At a public school other than a charter school, by a school nurse or any other employee of the public school who has been designated by the school nurse and has received training in the proper storage and administration of auto-injectable epinephrine ~~{}~~ *or the opioid antagonist, as applicable;* or

(b) At a charter school, by ~~{the}~~ *an* employee designated to be authorized to administer auto-injectable epinephrine *or the opioid antagonist, as applicable*, pursuant to NRS 388A.547 if the person has received the training in the proper storage and administration of auto-injectable epinephrine ~~{}~~ *or the opioid antagonist, as applicable.*

~~{3}~~ 4. A school nurse or other designated employee of a public school may administer ~~{auto-injectable}~~ :

(a) *Auto-injectable* epinephrine maintained at the school to any pupil on the premises of the public school during regular school hours whom the school nurse or other designated employee reasonably believes is experiencing anaphylaxis.

~~{4}~~ (b) *An opioid antagonist maintained at the school to any person on the premises of the public school whom the school*



nurse or other designated employee reasonably believes is experiencing an opioid-related drug overdose.

5. The governing body of each charter school and the board of trustees of each school district that obtains an order for an opioid antagonist pursuant to subsection 2 shall adopt a policy to ensure that:

(a) Emergency assistance is sought each time a person experiences an opioid-related drug overdose on the premises of the school; and

(b) The parent or guardian of each pupil to whom an opioid antagonist is administered is notified as soon as practicable.

6. A public school may accept gifts, grants and donations from any source for the support of the public school in carrying out the provisions of this section, including, without limitation, the acceptance of auto-injectable epinephrine or opioid antagonists from a manufacturer or wholesaler of auto-injectable epinephrine or opioid antagonists.

7. A public school, school district, member of the board of trustees of a school district or governing body of a charter school or employee of a school district or charter school is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine or an opioid antagonist maintained at a public school pursuant to this section not resulting from gross negligence or reckless, willful or wanton conduct of the school, school district, member or employee, as applicable, if the auto-injectable epinephrine or opioid antagonist is provided or administered during the rendering of emergency care or assistance during an emergency.

8. As used in this section:

(a) "Health care professional" has the meaning ascribed to it in NRS 453C.030.

(b) "Opioid-related drug overdose" has the meaning ascribed to it in NRS 453C.050.

Sec. 6. NRS 388A.547 is hereby amended to read as follows:

388A.547 1. Each charter school shall designate one or more employees of the school who is authorized to administer auto-injectable epinephrine.

2. *Each charter school that obtains an order from a health care professional for an opioid antagonist pursuant to section 1 of this act shall designate at least two employees of the school who are authorized to administer the opioid antagonist.*

3. Each charter school shall ensure that each person so designated *to administer medication pursuant to subsection 1 or 2*



receives training in the proper storage and administration of auto-injectable epinephrine ~~[]~~ *or opioid antagonists, as applicable.*

4. As used in this section, "opioid antagonist" has the meaning ascribed to it in NRS 453C.040.

Sec. 7. NRS 391.291 is hereby amended to read as follows:

391.291 1. The provision of nursing services in a school district by school nurses and other qualified personnel must be under the direction and supervision of a chief nurse who is a registered nurse as provided in NRS 632.240 and who:

(a) Holds an endorsement to serve as a school nurse issued pursuant to regulations adopted by the Commission; or

(b) Is employed by a state, county, city or district health department and provides nursing services to the school district in the course of that employment.

2. A school district shall not employ a person to serve as a school nurse unless the person holds an endorsement to serve as a school nurse issued pursuant to regulations adopted by the Commission.

3. The chief nurse shall ensure that each school nurse:

(a) Coordinates with the principal of each school to designate ~~[employees]~~ :

(1) Employees of the school who are authorized to administer auto-injectable epinephrine; and

(2) If the school has obtained an order for an opioid antagonist pursuant to subsection 2 of NRS 386.870, at least two employees of the school who are authorized to administer the opioid antagonist.

(b) Provides the employees so designated with training concerning the proper storage and administration of auto-injectable epinephrine ~~[]~~ *or opioid antagonists, as applicable.*

4. As used in this section, "opioid antagonist" has the meaning ascribed to it in NRS 453C.040.

Sec. 8. NRS 394.1995 is hereby amended to read as follows:

394.1995 1. A private school may obtain an order from a physician, osteopathic physician, physician assistant or advanced practice registered nurse for auto-injectable epinephrine pursuant to NRS 630.374, 632.239 or 633.707 to be maintained at the school. If a dose of auto-injectable epinephrine maintained by the private school is used or expires, the private school may obtain additional doses of auto-injectable epinephrine to replace the used or expired auto-injectable epinephrine.

2. A private school may obtain an order from a health care professional for an opioid antagonist pursuant to section 1 of this



act to be maintained at the school. If a dose of an opioid antagonist maintained by the private school is used or expires, the private school may obtain an additional dose of the opioid antagonist to replace the used or expired opioid antagonist.

3. Auto-injectable epinephrine *or an opioid antagonist* maintained by a private school pursuant to this section may be administered by a school nurse or any other employee of the private school who has received training in the proper storage and administration of auto-injectable epinephrine ~~[3.]~~ *or an opioid antagonist, as applicable.*

~~[3.]~~ 4. A school nurse or other trained employee may administer ~~[auto-injectable]~~ :

(a) *Auto-injectable* epinephrine maintained at the school to any pupil on the premises of the private school during regular school hours whom the school nurse or other trained employee reasonably believes is experiencing anaphylaxis.

(b) *An opioid antagonist maintained at the school to any person on the premises of the school whom the school nurse or other designated employee reasonably believes is experiencing an opioid-related drug overdose.*

~~[4.]~~ 5. A private school shall ensure that auto-injectable epinephrine *or any opioid antagonist* maintained at the school is stored in a designated, secure location that is unlocked and easily accessible.

6. *The governing body of each private school that obtains an order for an opioid antagonist pursuant to subsection 2 shall adopt a policy to ensure that:*

(a) *Emergency assistance is sought each time a person experiences an opioid-related drug overdose on the premises of the school; and*

(b) *The parent or guardian of each pupil to whom an opioid antagonist is administered is notified as soon as practicable.*

7. *A private school or member of the governing body or employee thereof is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine or an opioid antagonist maintained at the private school pursuant to this section not resulting from gross negligence or reckless, willful or wanton conduct of the school, member or employee, as applicable, if the auto-injectable epinephrine or opioid antagonist is provided or administered during the rendering of emergency care or assistance during an emergency.*

8. *As used in this section:*



(a) *“Health care professional” has the meaning ascribed to it in NRS 453C.030.*

(b) *“Opioid antagonist” has the meaning ascribed to it in NRS 453C.040.*

(c) *“Opioid-related drug overdose” has the meaning ascribed to it in NRS 453C.050.*

Sec. 9. NRS 639.2357 is hereby amended to read as follows:

639.2357 1. Upon the request of a patient, or a public or private school or an authorized entity for which an order was issued pursuant to NRS 630.374, 632.239 or 633.707, *or section 1 of this act*, a registered pharmacist shall transfer a prescription or order to another registered pharmacist.

2. A registered pharmacist who transfers a prescription or order pursuant to subsection 1 shall comply with any applicable regulations adopted by the Board relating to the transfer.

3. The provisions of this section do not authorize or require a pharmacist to transfer a prescription or order in violation of:

(a) Any law or regulation of this State;

(b) Federal law or regulation; or

(c) A contract for payment by a third party if the patient is a party to that contract.

4. A pharmacist is not liable for any error or omission concerning the acquisition, possession, provision or administration of auto-injectable epinephrine *or an opioid antagonist* that the pharmacist has dispensed to a public or private school or authorized entity pursuant to an order issued pursuant to NRS 630.374, 632.239 or 633.707 *or section 1 of this act* not resulting from gross negligence or reckless, willful or wanton conduct of the pharmacist.

5. As used in this section ~~[, “authorized”]~~ :

(a) *“Authorized entity” has the meaning ascribed to it in NRS 450B.710.*

(b) *“Opioid antagonist” has the meaning ascribed to it in NRS 453C.040.*

Sec. 10. 1. This section becomes effective upon passage and approval.

2. Sections 1 to 9, inclusive, of this act become effective:

(a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and

(b) On July 1, 2021, for all other purposes.

