



To: House Committee on Education  
From: Richard Donovan, Legislative Services Specialist  
Re: Senate Bill 665-A  
Date: April 26, 2019

Chair Doherty, Vice Chairs Helt and Alonso Leon, and members of the committee:

On behalf of OSBA membership, including 197 school districts, 19 Education Service Districts, and 17 community colleges throughout the state of Oregon, thank you for the opportunity to testify in support of Senate Bill 665-A.

The bill is a result of the request of Tillamook school board member Nick Troxel, a detective in Tillamook. He would like the option for his school district to store Naloxone, or any similar medication that is designed to rapidly reverse an overdose of an opioid drug, in the school district office.

Naloxone is a nasal spray. It is prescribed to the person administering the spray, so that it is readily available in the case of an overdose. If administered, it should stop an opioid-induced overdose. If administered to a person that is not experiencing an opioid overdose, it should do no harm. The Legislature, in HB 3440 (2017), extended Naloxone a good-faith exception from liability.

SB 665-A is necessary because there is an existing administrative rule, OAR 581-021-0037(3), that requires medication administered in schools to be prescribed in the name of the person using the medication, not the person administering it. This rule needs to be changed.

Mr. Troxel's testimony is available on OLIS from the March 27 hearing in the Senate Committee on Education. I encourage you to review it, including the portion where he describes the accidental exposure one of his colleagues experienced in the course of a legal search, and how the administration of naloxone immediately reversed an accidental overdose.

OSBA requests your support for SB 665-A. There is no known cost to the bill and no known opposition. I have included on the record a short memorandum that was earlier distributed to your offices with further explanation on the bill, for your reference. I ask that you move the bill out of committee at your earliest convenience to accommodate the subsequent referral to the Committee on Health Care.

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