



Senate Fiscal Agency
P. O. Box 30036
Lansing, Michigan 48909-7536



BILL ANALYSIS

Telephone: (517) 373-5383
Fax: (517) 373-1986
TDD: (517) 373-0543

Senate Bill 335 (as enrolled)
Sponsor: Senator Gilda Z. Jacobs
Senate Committee: Health Policy
House Committee: Health Policy

PUBLIC ACT 120 of 2005

Date Completed: 12-21-05

RATIONALE

Some people experience severe and even life-threatening allergic reactions, known as anaphylaxis, to insect bites and stings, medication, food, and other substances. Symptoms can include hives; swelling of the lips, tongue, eyes, or throat; nausea and vomiting; and difficulty breathing. If a person knows that he or she is allergic to something, he or she can try to avoid contact with the allergen or carry an epinephrine auto-injector, or Epi-pen, in case it is needed. Public Act 73 of 2004 amended the Revised School Code to allow a student to possess and use an epinephrine auto-injector or epinephrine inhaler at school to treat anaphylaxis.

Several years earlier, Public Act 10 of 2000 amended the Revised School Code to allow a student to possess and use an inhaler in school to alleviate asthmatic symptoms or prevent the onset of those symptoms. Asthma is a chronic disorder characterized by a tightness in the chest, shortness of breath, and a suffocating feeling in people who suffer from the disease. To control acute asthma attacks, children who have it take a variety of medications, including medicine that is administered through an inhaler device.

It was suggested that children attending day camps also should be permitted to possess and use an epinephrine auto-injector or inhaler to treat anaphylaxis, or an inhaler to treat the symptoms of asthma.

CONTENT

The bill amended the child care licensing Act to allow a child to possess and use a metered dose or dry powder inhaler, or an epinephrine auto-injector or inhaler at a children's camp. The bill took effect on September 22, 2005.

Under the bill, if certain conditions (described below) are met, notwithstanding any children's camp policy to the contrary, a minor child may possess and use any of the following at the camp, on camp-sponsored transportation, or at any activity, event, or program sponsored by the camp or in which the child is participating:

- A metered dose inhaler or a dry powder inhaler to alleviate asthmatic symptoms or for use before exercise to prevent the onset of asthmatic symptoms.
- An epinephrine auto-injector or epinephrine inhaler to treat anaphylaxis.

A minor child may possess and use the devices only if all of the following conditions are met:

- The child has written approval to possess and use the inhaler or auto-injector from his or her physician or other health care provider authorized by law to prescribe an inhaler or epinephrine auto-injector and from the child's parent or legal guardian.
- The director or other chief administrator of the camp has received a copy of the written approval.
- There is on file at the camp a written emergency care plan that contains specific instructions for the child's needs,

that was prepared by a licensed physician in collaboration with the child and his or her parent or legal guardian, and that is updated as necessary for changing circumstances.

A children's camp or an owner, director, or employee is not liable for damages in a civil action for injury, death, or loss to person or property allegedly arising from either of the following:

- A camp employee's having prohibited a child from using an inhaler or auto-injector because the specified conditions had not been satisfied.
- A camp employee's having permitted a child to use or possess an inhaler or auto-injector because the prescribed conditions had been satisfied.

The bill specifies that this provision does not eliminate, limit, or reduce any other immunity or defense that a camp or an owner, director, or employee may have under other State law.

A camp may request that a child's parent provide an extra inhaler or auto-injector to designated camp personnel for use in case of emergency. A parent or legal guardian, however, is not required to do so.

A director or other chief administrator of a camp who is aware that a child possesses an inhaler or epinephrine auto-injector as authorized under the bill must notify each camp employee who supervises the child of that fact and the bill's provisions.

MCL 722.117a

ARGUMENTS

(Please note: The arguments contained in this analysis originate from sources outside the Senate Fiscal Agency. The Senate Fiscal Agency neither supports nor opposes legislation.)

Supporting Argument

The bill will help ensure the health and safety of children at day camps. Previously, a child's medication could only be stored with camp personnel or in an office. When a child goes into anaphylactic shock or experiences asthmatic symptoms, however, time is of the essence. Without immediate access to his or her medication, there is a high risk of death. Public Acts 10 of 2000 and 73 of 2004 were passed in response to

incidents in which delays in the provision of appropriate medication precipitated fatal asthma episodes and allergic reactions in school settings.

Self-management of asthma and allergies is an accepted part of treatment protocol today for children, and their ability to possess and use inhalers and auto-injectors is an integral part of self-management plans for these children. The quick-relief measured-dose inhalers and Epi-pens customarily prescribed today are very safe and have few side effects.

The bill will help save lives while limiting the liability of camp employees who permit, or do not permit, a child to use an inhaler or Epi-pen because the bill's requirements have or have not been met.

Legislative Analyst: Julie Koval

FISCAL IMPACT

The bill will have no fiscal impact on State or local government.

Fiscal Analyst: Constance Cole

A0506\S335ea

This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.