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(FORM UPDATED: 08/11/2010)

## WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

# 1997-98

(session year)

## Senate

(Assembly, Senate or Joint)

## Committee on Education...

### COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**

### INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... **Appt** (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... **CRule** (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)  
(**ab** = Assembly Bill)                      (**ar** = Assembly Resolution)                      (**ajr** = Assembly Joint Resolution)  
(**sb** = Senate Bill)                              (**sr** = Senate Resolution)                              (**sjr** = Senate Joint Resolution)
- Miscellaneous ... **Misc**

\* Contents organized for archiving by: Stefanie Rose (LRB) (December 2012)

## Senate

### Record of Committee Proceedings

#### **Committee on Education**

##### **Senate Bill 445**

Relating to: allowing pupils to possess and use metered dose and dry powder inhalers while in school.

By Senators C. Potter, Burke, Rude, Chvala and Grobschmidt; cosponsored by Representatives Jensen, Harsdorf, Kunicki, Duff and Ward.

February 5, 1998      Referred to committee on Education.

February 25, 1998      **PUBLIC HEARING HELD**

Present:      (7)      Senators C. Potter, Shibilski, Grobschmidt,  
Darling, Huelsman, Roessler and Fitzgerald.  
Absent:      (1)      Senator Jauch.

##### Appearances for

- Senator Cal Potter
- Basil Varkey M.D. of Brookfield
- Carol Thornton for Milwaukee Health Department
- Janet McMahon of Wauwatosa for American Lung Association
- Katie Schultz Stout for WEAC/WFT
- Randall Radtke for American Lung Association

##### Appearances against

- None.

##### Appearances for Information Only

- None.

##### Registrations for

- Dick Becker for DPI
- Jim Lynch for School Administrators Alliance
- Senn Brown for Wisconsin Association of School Boards
- Kathy Andersen for State Medical Society
- Kara Oakley for Children's Hospital of Wisconsin
- Senator Brian Burke
- James Buckley for Wisconsin Association of School Nurses
- Representative Sheila Harsdorf

##### Registrations against

- None.

February 25, 1998

**EXECUTIVE SESSION**

Present: (6) Senators C. Potter, Shibilski, Grobschmidt,  
Darling, Huelsman and Roessler.  
Absent: (2) Senators Jauch and Fitzgerald.

Moved by Senator Darling, seconded by Senator Grobschmidt, that  
**LRBa1854/1** be recommended for introduction and adoption.

Ayes: (8) Senator C. Potter, Jauch (by polling),  
Shibilski, Grobschmidt, Darling, Huelsman,  
Roessler and Fitzgerald (by polling).  
Noes: (0) None.  
Absent: (0) None.

INTRODUCTION AND ADOPTION RECOMMENDED, Ayes 8,  
Noes 0, Absent 0

Moved by Senator Grobschmidt, seconded by Senator Darling, that  
**Senate Bill 445** be recommended for passage as amended.

Ayes: (8) Senators C. Potter, Jauch (by polling),  
Shibilski, Grobschmidt, Darling, Huelsman,  
Roessler and Fitzgerald (by polling).  
Noes: (0) None.  
Absent: (0) None.

PASSAGE AS AMENDED RECOMMENDED, Ayes 8, Noes 0,  
Absent 0

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Paul Rusk  
Committee Clerk



Children's  
Hospital  
of Wisconsin <sup>TM</sup>

9000 West Wisconsin Avenue • P.O. Box 1997 • Milwaukee, WI 53201 (414) 266-2000

Randy Radtke c/o  
American Lung Association of Wisconsin  
150 S. Sunny Slope Rd. Suite #105  
Brookfield, WI 53005-6461

February 23, 1998

Dear Mr. Radtke,

I am writing this letter to applaud your efforts and express the support of Children's Hospital of Wisconsin for Assembly Bill 783 and Senate Bill 445. I understand hearings on this "inhaler bill" begin tomorrow.

We believe it is crucial for all children to have access to the drugs they need.

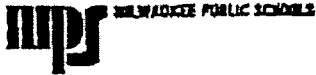
In the case of asthma, it is particularly important for medication to be used as prescribed – namely before exercise to prevent the onset of symptoms, or to alleviate asthmatic symptoms once an asthma attack is underway. A delay in treatment can cause an asthma attack to become much more severe than it would otherwise have been – not only because the attack is allowed to progress, but also because of the anxiety and stress a child experiences if medication is not available when it is needed.

Good medical practice requires that youngsters with asthma be allowed to use the medications prescribed for them in the manner directed by their physicians. Anything less than that is substandard medical care.

Sincerely yours,

Caryl H. Sewell  
Director, Public Relations

AB 783  
SB 445



**RELEASE FORM FOR INHALER USE**

Date \_\_\_\_\_

\_\_\_\_\_ has been instructed in the proper use of  
(child's full name)  
\_\_\_\_\_ inhaler.

We, \_\_\_\_\_ and \_\_\_\_\_ request  
(Physician) (Parent/Legal Guardian)

that \_\_\_\_\_ be permitted to carry the inhaler on his/her  
(Child's full name)

person or to keep same in his/her classroom or locker, as we consider him/her responsible. He/She has been instructed in and understands the purpose and appropriate method and frequency of use of his/her inhaler.

We, the undersigned physician and parent/guardian absolve the school district and its employees, agents and officers of any responsibility in safeguarding our child's inhaler.

\_\_\_\_\_  
(Physician's Signature)

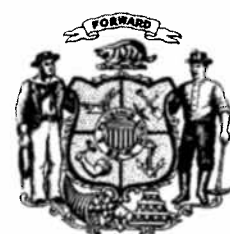
\_\_\_\_\_  
(Parent/Legal Guardian Signature)

\_\_\_\_\_  
(School Principal's Signature)

\_\_\_\_\_  
(School Nurse's Signature)



# WISCONSIN STATE LEGISLATURE





# State Medical Society of Wisconsin

*Advancing the Science and Art of Medicine*

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**TO: Senator Calvin Potter, Chair  
Members, Senate Education Committee**

**FROM: Kathy Andersen, Associate Director  
Government Relations**

**DATE: February 25, 1998**

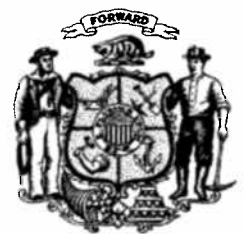
**RE: Support for Senate Bill 445**

On behalf of the 8,500 members of the State Medical Society of Wisconsin, I urge your support for SB 445, which would allow children to possess and use asthma inhalers in school. Children with asthma can and should be encouraged to participate in physical activity. With one-third of the state's adult population overweight, we need to emphasize fun and safe exercise for all youth. Children who need asthma inhalers have been trained when and how to use them safely. This proposal replaces, with a reasonable and appropriate approach, the fragmented policies which exist statewide.

SANDRA L. OSBORN, MD, *President*  
JOHN D. RIESCH, MD, *President-Elect*  
JOHN E. PATCHETT, JD, *Executive Vice President*  
JACK M. LOCKHART, MD, *Treasurer*



# WISCONSIN STATE LEGISLATURE





*Carl Patten*

**Asthma Inhaler Legislation  
Senate Bill 445 / Assembly Bill 87-83**

**Facts About Asthma (Wisconsin data)**

9% of all children in Wisconsin have been told by a doctor that they have asthma  
10% among children aged 5-14 and 7% among children aged 1-4. (Family Health Survey, 1990-1994, Center For Health Statistics, Wisconsin Dept. of Health and Family Services, WDHFS)

The estimated prevalence of pediatric asthma (<age 18) is 93,039. (based on the 1994 National Health Interview Survey, and reported in "The Estimated Incidence and Prevalence of Lung Disease" by the American Lung Association).

Asthma is the leading serious chronic illness of children and the number one cause of school absences attributed to chronic conditions. (Lung Disease Data 1997, American Lung Association)

Asthma is the most frequent reason for preventable hospital admissions among children. In 1994, there were 2.6 hospitalizations for asthma per 1,000 children under the age of 6. (WDHFS)

Over two-thirds (69%) of the children hospitalized for asthma were admitted to the hospital from the emergency room. (WDHFS)

The total hospital charges for asthma hospitalizations of children under six in 1994 amounted to \$3.4 million with an average charge of \$3,085 per child. (WDHFS)

**Talking Points**

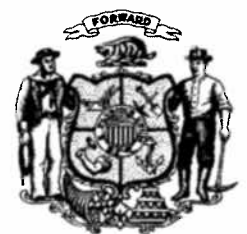
Describe what happens during an asthma attack: airways are very sensitive, become inflamed, muscle constriction, mucus production = difficulty breathing. It is serious and can be life-threatening.

Asthma attacks can happen at any time or any place and sometimes without warning. Children need to have their emergency medicine (inhaler) with them at all times in case of such emergencies. Time is critical; even the time it takes to go from the classroom or playground to the office where the medicine is stored.

Many children with exercise induced asthma need to use their inhaler 15-20 minutes prior to physical education class. Children of all ages are very self conscious. To avoid calling attention to themselves, missing class or interrupting the teacher, many of these students don't go to the office to use their inhaler and take dangerous chances instead.



# WISCONSIN STATE LEGISLATURE



Ch. 232 COMPULSORY SCHOOL ATTENDANCE; CHILD WELFARE F.S. 1995

programs in conjunction with teacher education centers, vocational-technical centers, community colleges, or state universities that assist instructional personnel in the attainment of standards required for designation as a teacher athletic trainer. Such programs may be conducted at the district, regional, or state level.

(c) To recommend minimum standards for developing and implementing an athletic injuries prevention and treatment program.

History.—s. 1, ch. 85-257; s. 16, ch. 85-238.

232.44 Audit of records of nonprofit corporations and associations handling interscholastic activities.—

(1) The Auditor General shall, at least every 6 months, audit the books and records of any nonprofit association or corporation which operates for the purpose of supervising and controlling interscholastic activities of the public high schools in the state and whose membership is composed of duly certified representatives of public high schools in the state, and whose rules and regulations are established by members thereof.

(2) Any such nonprofit association or corporation shall keep adequate and complete records of all moneys received by it, including the source and amount, and all moneys spent by it, including salaries, fees, expenses, travel allowances, and all other items of expense. All records of any such organization shall be open for inspection by the Auditor General or the Auditor General's employees.

History.—s. 1, ch. 86-171; s. 6, ch. 88-82; s. 1276, ch. 86-147.

232.45 Eye-protective devices required in certain chemical laboratory courses.—

(1) Eye-protective devices shall be worn by students, teachers and visitors in courses including, but not limited to, chemistry, physics, or chemical-physical laboratories, at any time at which the individual is engaged in or observing an activity or the use of hazardous substances likely to cause injury to the eyes. Activity or the use of hazardous substances likely to cause injury to the eye includes:

(a) Heat treatment; tampering or kiln firing of any metal or other materials;

(b) Working with caustic or explosive materials;

(c) Working with hot liquids or solids, including chemicals which are flammable, caustic, toxic, or irritating.

(2) School boards shall furnish plano safety glasses or devices for students, may provide such glasses to teachers, and shall furnish such equipment for all visitors to such classrooms or laboratories, or may purchase such plano safety glasses or devices in large quantities and sell them at cost to students and teachers, but shall not purchase, furnish, or dispense prescription glasses or lenses.

History.—s. 1-4, ch. 85-625; s. 1, ch. 87-128; s. 6, ch. 87-181; s. 1, ch. 88-300; s. 57, ch. 88-353; s. 15, ch. 96-130.

232.46 Administration of medication by school district personnel.—

(1) Notwithstanding the provisions of the Nurse Practice Act, chapter 464, school district personnel shall be authorized to assist students in the administration of prescription medication when the following conditions have been met:

(a) Each district school board shall include in its approved school health services plan a procedure to provide training to the school personnel designated by the principal to assist students in the administration of prescribed medication.

(b) Each district school board shall adopt policies and procedures governing the administration of prescription medication by school district personnel. The policies and procedures shall include, but not be limited to, the following provisions:

1. For each prescribed medication, the student's parent or guardian shall provide to the school principal a written statement which shall grant to the principal or the principal's designee permission to assist in the administration of such medication and which shall explain the necessity for such medication to be provided during the school day, including any occasion when the student is away from school property on official school business. The school principal or the principal's trained designee shall assist the student in the administration of such medication.

2. Each prescribed medication to be administered by school personnel shall be received and stored in its original container. When the medication is not in use, it shall be stored in its original container in a secure fashion under lock and key in a location designated by the principal.

(2) There shall be no liability for civil damages as a result of the administration of such medication when the person administering such medication acts as an ordinarily reasonably prudent person would have acted under the same or similar circumstances.

History.—s. 1, ch. 85-271; s. 81, ch. 86-80; s. 1276, ch. 86-147.

232.47 Asthmatic students; possession of inhalers.—

An asthmatic student shall be able to carry a metered dose inhaler on their person while in school when they have approval from their parents and their physician. The school principal shall be provided with a copy of the parent's and physician's approval.

History.—s. 2, ch. 88-173.

232.50 Child abuse and neglect policy.—Every school board shall by March 1, 1985:

(1) Post in a prominent place in each school a notice that, pursuant to chapter 415, all employees or agents of the district school board have an affirmative duty to report all actual or suspected cases of child abuse or neglect, have immunity from liability if they report such cases in good faith, and have a duty to comply with child protective investigations and all other provisions of law relating to child abuse and neglect. The notice shall also include the statewide toll-free telephone number of the state abuse registry.

(2) Provide that the superintendent, or the superintendent's designee, at the request of the Department of Health and Rehabilitative Services, will act as a liaison to the Department of Health and Rehabilitative Services and the child protection team, as defined in s. 415.503, when in a case of suspected child abuse or neglect or an unlawful sexual offense involving a child the case is referred to such a team; except that this subsection may in no instance be construed as relieving or restricting the Department of Health and Rehabilitative Services from

discharging its investigate and of child abuse involving a child

Each district sh

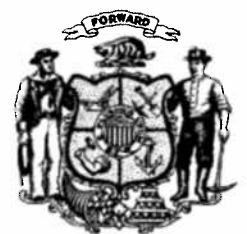
9-10-97  
To: R+A  
Jli Brander  
Here in the  
state law  
allows students  
to keep their  
MDI's on  
themselves.



Post-It Fax Note	7871	Due 9/10/97	1 of 1 pages
To: Brenda Olsen		From: David Suhrweir	
Conver Amer. Lung Assoc.		Agency Health Care Admin.	
Phone: 386-2065		Phone: 414-87-2164	
Fax: 422-1894		Fax: 414-6952	



# WISCONSIN STATE LEGISLATURE



# Teachers unprepared on asthma, lung group says

Survey highlights risks as disorder affects more kids

By MIKE JOHNSON  
of the Journal Sentinel staff

Waukesha — Few physical education teachers in the state are fully prepared to deal with a

student's asthma attack even though the number of children with asthma is on the rise, according to a survey by the American Lung Association of Wisconsin.

In response, the Brookfield-based association said it is developing an asthma education program for teachers and students.

Terry Schuh, the association's program director, said that while the survey wasn't scientific, it showed more must be done to help teachers be ready for an asthma attack, which can be fatal.

The association sent surveys to 560 physical education teachers across the state — exercise

often can trigger an asthma episode — and 216 responded.

The results:

■ Only 9% of the teachers responding said they were fully prepared to deal with an asthma attack.

Schuh said teachers are fully prepared when they are able to recognize the signs of an asthma

attack — coughing, wheezing, shortness of breath and a tightness in the chest — and know what kind of medication to give and whom to call.

■ 51% said they do not have individualized plans on file for dealing with students' asthma emergencies.

Please see ASTHMA page 4

## Asthma/Lung group says teachers unready to help kids in distress

From page 1

■ Nine of 10 teachers responding said they would like more information on how to respond to an asthma episode.

■ 99% of those who responded said asthma interferes with the physical activity of children in their classes at least occasionally.

■ 43% said it interferes weekly or daily.

The push for an asthma education program comes at a time when childhood asthma cases have increased sharply.

More than 14.6 million people nationwide have asthma; about 4.8 million of them are children.

Between 1982 and 1994, childhood asthma cases increased 72%.

Between 1979 and 1994, the annual number of deaths attributed to asthma increased 111%, from 2,598 to 5,487.

Doctors are uncertain about what causes asthma and have not been able to determine why it is increasing.

About 95,000 children in Wisconsin have asthma, according to the association. And 80% to 90% of all people with asthma are susceptible to exercise-induced asthma attacks.

In the Waukesha School District, 1,023 students reported they have asthma this year, up 12.9% over the 906 who reported having the disorder last year.

In Waukesha last month, tragedy was averted when a Summit View Elementary School physical education teacher and an aide revived a girl who collapsed from an asthma attack and had no pulse.

The pupil, fifth-grader Jessica Ranieri, had difficulty breathing while running during a physical education class on Nov. 11. Her teacher took her to the health room, where Jessica collapsed.

The teacher and the health-room aide performed cardiopul-

### Inhaler Use Urged

One way to prevent an asthma attack during exercise is to have students inhale asthma medication 15 to 20 minutes before the workout begins, Schuh said.

Only 43% of teachers responding to the survey said their students with asthma follow this practice.

Some school districts don't allow students to carry their inhalers with them, although the Waukesha district and Milwaukee Public Schools do, Schuh said.

The Waukesha district also requires parents of asthmatic children to fill out a care plan, which is shared with physical education teachers, said Twyla Lato, one of the district's school nurses.

The district last year also conducted teacher workshops on asthma.

MPS runs a program called "Awesome Asthma School Days" at its Health Education Center, 153 N. Liver Center Drive in Schlitz Park, to help pupils deal with their asthma.

Each week, 50 to 100 pupils from several elementary schools attend the daylong program.

Cheryl Gotts, MPS curriculum specialist for health and physical education, estimated that 10% of the district's nearly 100,000 students have asthma.

In the Germantown School District, physical education teachers help students with asthma recognize their symptoms.

"Kids can handle the exercise if they know their own limits," said Sue Cattle, the curriculum coordinator for physical education in the district.

"Our kids have their inhalers

monary resuscitation for about a minute, and Jessica started breathing on her own.

Schuh said the incident illustrates how knowing what to do when asthma strikes can save a life.

While exercise can trigger an asthma attack, physical workouts are necessary to improve lung function and fitness in children with asthma, Schuh said. Children with asthma who exercise regularly can do more work without developing exercise-induced asthma, he said.

don't, they don't do the exercise that day."

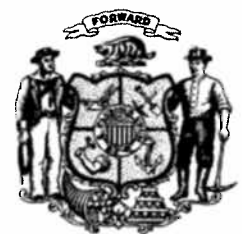
"Getting more education out to districts is important," said Schuh. "Kids should be allowed to have their inhalers with them. If a kid is on the soccer field and has an attack and the inhaler is 200 yards away in an office, who knows what could happen?"

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*For a list of asthma resources available from the American Lung Association of Wisconsin, phone 782-7833 or (800) 586-4872.*



# WISCONSIN STATE LEGISLATURE



# Summit View pupil thanks the staff who saved her life

**Girl suffered asthma attack  
and collapsed out during  
physical education class**

BY MIKE JOHNSON  
of the Journal Sentinel staff

Waukesha - A 9-year-old Summit View Elementary School pupil is giving thanks to the quick action of two school staff members who revived her after she collapsed during an asthma attack and had no pulse.

The girl, Jessica Ranieri, and her parents appeared before the School Board Wednesday night to thank the two women, physical education teacher Penny Kroening and health room aide Renee Steckbauer, who came to the girl's aid Tuesday morning.

Ranieri, a fifth-grader, presented Kroening and Steckbauer each with a single rose and a thank you card. "I'm thankful for them," she said.

Her parents, Greg and Julie Ranieri, gave the teachers plants and hugged them.

"As far as I'm concerned, without these two ladies, my daughter would be dead," Greg Ranieri said in an interview. "If they would not have reacted so fast, she wouldn't be here today. They're angels. They saved a life. If they hadn't done anything, we'd be crying for the next 20 years."

Jessica started having difficulty breathing while running during a physical education class about 9:50 a.m.

Kroening brought Jessica to the health room, where she collapsed. Steckbauer could not find a pulse and she and Kroening began administering CPR while a secretary dialed 911.

After about a minute of CPR, Jessica made a gasping sound and started breathing on her own. Paramedics transported her to a hospital where she was treated and later released.

"I'm just so thankful it turned out the way it did," Kroening said.

Said Steckbauer: "I'm just so thankful I had the training. It

was a real team effort. We all worked so well together and we were able to save her life."

In another matter, the board unanimously approved hiring a suburban Chicago consulting firm to conduct a national search for the district's next superintendent.

The firm, Bickert, Prophet, Warren, Barnes and Associates, of Glen Ellyn, Ill., will receive \$13,500 plus expenses.

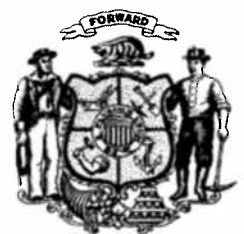
The School Board's Superintendent Selection Committee recommended Bickert over the Wisconsin Association of School Boards' search service, which could have cost about \$5,000 less, because Bickert was "much more geared to search beyond Wisconsin," and Bickert's price included background and credentials checks.

Superintendent David Kampschroer is leaving the district at the end of the school year and board members hope to announce his successor by May.





# WISCONSIN STATE LEGISLATURE



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Cal

Brian Burke  
Brian Rude  
Chvala  
Rick Cr

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Education  
Program

STATE OF WISCONSIN

To Paul

Date 2/4 Time 8:40

WHILE YOU WERE OUT

M Bill

of Joach

Phone 6-3510

Telephoned	Please Call	
Called to See You	Rush	
Returned Your Call	Will Call Again	

Message John Krabel  
AB 2207

2-3422  
Party Receiving Call



STATE OF WISCONSIN

To Paul

Date 2/3/98 Time 4:30

WHILE YOU WERE OUT

M Cindy

of T. Burke

Phone 6-8535

Telephoned	<input checked="" type="checkbox"/> Please Call	<input checked="" type="checkbox"/>
Called to See You	Rush	
Returned Your Call	Will Call Again	

Message \_\_\_\_\_  
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PH  
Party Receiving Call

