

FLORIDA HOUSE OF REPRESENTATIVES BILL ANALYSIS

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BILL #: [HB 597](#)

TITLE: Diabetes Management In Schools

SPONSOR(S): Smith

COMPANION BILL: None

LINKED BILLS: None

RELATED BILLS: [SB 772](#) (Calatayud)

Committee References

[Education Administration](#)



[Health Professions & Programs](#)



[Education & Employment](#)

SUMMARY

Effect of the Bill:

The bill expands diabetes management in public schools by authorizing school districts and charter schools to acquire and maintain a supply of undesignated glucagon for use on students with diabetes experiencing hypoglycemic emergencies. School districts and charter schools are authorized to obtain the glucagon through a prescription from a county health department or health care provider or through arrangements with manufacturers or suppliers.

The bill outlines storage, maintenance, and administration requirements for the acquired glucagon and provides immunity to the school and its employees along with the glucagon supplier so long as any injury is not the result of gross negligence or deliberate misconduct.

Fiscal or Economic Impact:

Public schools that choose to act under the authority granted by the bill may incur costs associated with implementing provisions of the bill.

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ANALYSIS

EFFECT OF THE BILL:

The bill amends [diabetic management services in public schools](#) for students with diabetes by authorizing a school district or charter school to annually request a prescription for glucagon from a county health department or health care provider licensed to issue prescriptions to enable the school to acquire and maintain a supply of undesignated glucagon to treat a student with diabetes who experiences a hypoglycemic emergency or whose prescribed glucagon is not available on site or has expired.

The bill authorizes a licensed pharmacist to dispense undesignated glucagon to school districts or charter schools. The schools may also enter into arrangements with manufacturers of glucagon or other suppliers of glucagon to obtain the products free of charge or at fair market or reduced prices and may obtain monetary donations or apply for grants to purchase glucagon.

The bill requires a school's undesignated glucagon to be stored in a location that is immediately accessible to the school nurse and other school personnel who have been trained to administer glucagon.

A school district or charter school employee or agent trained in the administration of glucagon is responsible for the storage, maintenance, and administration of glucagon stocked by a school in accordance with the manufacturer's instructions. The undesignated glucagon must be authorized and made available for administration to students with diabetes as prescribed in the student's diabetes management plan or health care provider's orders and written accommodations plan.

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Immediately after the administration of undesignated glucagon, the bill requires a school district or charter school employee to call for emergency assistance and notify a school nurse and the student's parent or guardian or emergency contact.

The bill provides that a school district or charter school and its employees and agents who acquire, maintain, and administer undesignated glucagon, and the undesignated glucagon prescriber or furnisher, are not liable for any injury or loss to person or property which allegedly results from an act or omission associated with procuring, maintaining, accessing, or using undesignated glucagon unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct. (Section [1](#)).

The effective date of the bill is July 1, 2025. (Section [2](#)).

RULEMAKING:

The bill creates rulemaking authority, requiring the Department of Health, with input from the American Diabetes Association and Florida Association of School Nurses, to adopt rules to implement provisions relating to the acquisition and use of undesignated glucagon in public schools.

Lawmaking is a legislative power; however, the Legislature may delegate a portion of such power to executive branch agencies to create rules that have the force of law. To exercise this delegated power, an agency must have a grant of rulemaking authority and a law to implement.

FISCAL OR ECONOMIC IMPACT:

LOCAL GOVERNMENT:

The bill may have an insignificant, indeterminate, negative fiscal impact on school districts. Schools that choose to exercise this authority may incur costs related to acquiring and storing glucagon to treat students with diabetes.

RELEVANT INFORMATION

SUBJECT OVERVIEW:

[Diabetic Management Services in Public Schools](#)

Diabetes is a disease that impairs the body's ability to produce or properly use insulin, a hormone that is needed to convert food into energy.¹ This causes blood sugar, also known as blood glucose, to be too high. Over time, high blood glucose can cause other health problems, such as heart disease, nerve damage, eye problems, and kidney disease.²

In Florida's public schools, 7,006 students were reported to have type 1 diabetes and 917 had type 2 diabetes during the 2020–2021 school year, totaling 7,923 students managing diabetes in a school setting. Of these, 3,588 required glucose monitoring, 3,060 required carbohydrate counting, and 3,304 required insulin administration while at school.³

In Florida, students with diabetes, with written consent from their healthcare provider and parent, are permitted to self-manage their medication, supplies, and equipment based on the student's diabetes medical management

¹ Rule 6A-6.0253, F.A.C.

² National Institute of Diabetes and Digestive and Kidney Disease, *Health Information*, <https://www.niddk.nih.gov/health-information/health-statistics/diabetes-statistics> (last visited Feb. 27, 2025).

³ Florida Diabetes Advisory Council, *2023 Florida Diabetes Report*, at 17, available at <https://www.floridahealth.gov/provider-and-partner-resources/dac/documents/2023-dac-report.pdf>.

plan⁴ without additional assistance or supervision.⁵ Students may manage and care for their diabetes while in school, participating in school-sponsored activities, or in transit to or from school or school sponsored activities to the extent authorized by the parent and physician.⁶

School districts are required to have personnel, whether licensed nurses or trained school staff, assigned to each school a student with diabetes would otherwise attend if he or she did not have diabetes. These personnel must be available to provide necessary diabetes care throughout the school day and during school-sponsored activities.⁷

The Department of Education, in collaboration with the Department of Health, is required to develop technical assistance regarding the care of students with diabetes. This includes identifying and providing sources to school districts for training school personnel to ensure proper management and care of diabetic students in schools.⁸

OTHER RESOURCES:

[Florida Department of Education School Health Services](#)

BILL HISTORY

COMMITTEE REFERENCE	ACTION	DATE	STAFF DIRECTOR/ POLICY CHIEF	ANALYSIS PREPARED BY
Education Administration Subcommittee			Sleap	Dixon
Health Professions & Programs Subcommittee				
Education & Employment Committee				

⁴ A Diabetes Medical Management Plan is a medical authorization for diabetes treatment that includes medication orders from student’s healthcare provider for routine and emergency care.

⁵ Rule 6A-6.0253(3), F.A.C.

⁶ S. [1002.20\(3\)\(j\), F.S.](#)

⁷ Rule 6A-6.0253(2), F.A.C.

⁸ Rule 6A-6.0253(4), F.A.C.