Rulemaking Advisory Committee

OAR 333-055-0000 through 0035

9/29/2026 Meeting Notes and Follow-Up

Facilitators from Oregon Health Authority, Public Health Division:

Corinna Brower, State School Nurse Consultant, Adolescent and School Health Programs

Stefanie Murray, Adolescent and School Health Program Manager

Abby Krumholz, Senior Policy Analyst, Reproductive Health Program

RAC Members

Affiliation	Name	Role	Present 9/29/26	Email or Other Input
American Diabetes Association	Matt Prokop	Government Relations Director	Yes	Yes
Community Member, parent of food-allergic child	Terry Newhouse	Constituent of Rep. Scharf	Yes	Yes
Legislative Representative for Senator Wagnor	McKenzie Worthington	District Director to the Oregon Senate President (D Rob Wagner)	Yes (observing)	No
Multnomah Education Services District	Clarisa Jimenez	Nurse Consultant, Communicable Disease and Health Education	Yes	Yes
Oregon Board of Pharmacy	Gary Runyon	Executive Director	Yes	Yes
Oregon Department of Education	Ely Sanders	School Health Services Specialist	Yes	Yes

Oregon Health Authority, Emergency Medical Services Program	Rebecca Long	Professional Standards Representative, Emergency Medical Services Program	Yes	Yes
Oregon Health Authority, Health Care Regulation and Quality Improvement	Mellony Bernal	Operations and Policy Analyst, Legislative and Administrative Rules	Yes	Yes
Oregon Health Authority, Emergency Medical Services Program	Leslie Huntington	Education Coordinator, Emergency Medical Services Program	Yes	Yes
Oregon Medical Board	Elizabeth Ross	Rules Coordinator	Yes	Yes
Oregon Pediatric Society	Kelly Coates	Executive Director	Yes	Yes
Oregon School Board Association	Spencer Lewis	Director of Policy Services	Yes	Yes
Oregon School Nurses Association	McKayla Bullock	Board President	No	Yes
Oregon Society of Physician Associates	Brian Mills	OSPA member; PA with Childhood Health Associates of Salem	Yes	No
Oregon State Ambulance Association	Sabrina Riggs	Exec. Director; Senior Vice President of Dalton Advocacy, Inc.	Yes	No
Oregon State Board of Nursing	Patrick Owen	OPA, Nursing Policy	Yes	Yes

RAC INPUT NOTES ARE FORMATTED AS FOLLOWS:

00:00 Time Subject.

OHA facilitator presents rule/topic.

The summary of changes for each rule, and the track changes document, refer to the versions shared with RAC members on 9/21/2026.

Input during meeting:

RAC: input from RAC members.

- Response from facilitators regarding potential implications or edits.

Follow up:

Description of actions after RAC meeting, edits or other information identified.

Note: some follow-up reflects additional input e.g. from emails. That input is reported in separate documents.

10:00am RAC members admitted to Zoom meeting.

10:03am Opening statements.

S. Murray OHA presents slides on screen.

A. Krumholz OHA calls roll.

Review of meeting expectations, agenda, and next steps. RAC members have the opportunity to submit written comments after the meeting, until October 6th.

10:15am Review of OAR 333-055-0000 Purpose

S. Murray OHA reads summary of changes.

C. Brower OHA displays rule text with track changes on screen.

Input during meeting:

RAC: request for clarification of the meeting of "school setting."

- Noted. Relates to possible concern about limiting use of training or related immunity clauses.

Follow up:

Added definition of “school setting”; see OAR 333-055-0006.

10:18am Review of OAR 333-055-0006 Definitions

S. Murray OHA reads summary of changes.

C. Brower OHA displays rule text with track changes on screen.

Input during meeting:

RAC: request for clarification of the meeting of “school setting”; possibly more critical in this rule than in the previous.

RAC: in definition of “other treatments” for hypoglycemia, concern that the phrase food or drink may not clearly include glucose tablets or gels, which are used by people with diabetes.

- Noted. May need to clarify definitions or add to examples within the definition.

RAC: some definitions now tie back to statute for the statutory definitions [“adrenal crisis”; “allergic reaction”; “hypoglycemia”] while others don’t. Curious about rationale. Also noting, Oregon Health Authority isn’t defined but “Authority” is used throughout the rules.

- Rationale for referral to statute in condition definitions is brevity and increased emphasis on additional ways conditions are defined.

RAC: For “authority-approved equivalent,” would like explanation of the last part of the sentence, alterations permitted.

- Relates to most recent updates for hypoglycemia/glucose and intended changes to other protocols; the addition of slides or notes in manual, content which is not mandatory or content that may be presented in other formats, as well as the option for authorized trainers to add setting-specific content such as location of medications or how to active EMS in the setting.

RAC: related to “assigned by” wondering if paramedic needs to be added, i.e. not just RN who would require prescribing professional to permit use of their credentials to distribute an Authorization to Obtain epinephrine.

- Noted. Addition of paramedic appears to align with authorized trainer list.

RAC: concern that definition of "school nurse" is different from that in ORS 342; creation of multiple definitions of the same term could cause confusion.

- Noted. Will review to edit for closer alignment or refer to existing definitions. Also shared background information, ORS 342 defines school nurse as RN with additional TSPC certification, currently held by about 12% of RNs working in Oregon schools, per OHA surveys. School nurse is also defined within school medication rules OAR 581-021-0037 as RN "familiar with the delivery of health services in schools."

Follow up:

Edited definition of "assigned by" to include both RN and paramedic.

Edited definition of "other treatment" to include glucose tabs and gel.

Edited definition of "school nurse" to align with existing statute and rule.

Added definition of "school setting," referring to settings addressed by OAR 581-021-0037.

10:38 OAR 333-055-0015 Educational Training

S. Murray OHA reads summary of changes.

C. Brower OHA displays rule text with track changes on screen.

Input during meeting:

RAC: Concern about limiting training to physicians and medical people, versus a company like Red Cross whose trainers are not usually medical people. Want to ensure that first responders who receive training from companies like that don't hesitate to treat for fear of being sued.

- Noted. Will need to consider OHA statutory authority for amendments. OAR 433.815 provides the list of trainers, current rule aligns with that. There may be an option per OAR 433.817 to amend list of trainers to include organizations. Immunity clause refers to those who complete training per these statutes and rules.

RAC: In listing physicians and physician's associates, would like to recognize that that could include telemedicine provider who is not physically in the state of Oregon. Might need to consider assumption or clarifications, license status and whether trainings are live.

- Noted. Plan to review clarification of how trainings are conducted. Former clarifications in protocol instructions relate to classroom-based course and return demonstrations by trainees. Definitions in separate but related rules for schools during the pandemic clarified conditions under which an online training could be considered in-person.

RAC: Considering licensure status of physicians, also wondering of Oregon State Board of Nursing would have an opinion about defining status of licensure.

RAC: (response) Would defer to Dept of Ed to determine if the requirement is a fully unencumbered license. From Board perspective, if the license is current, the Board is unlikely to have an opinion.

Follow up:

Drafted addition of organizations such as Red Cross as trainers within OAR 333-055-0030.

10:46am OAR 333-055-0021 Eligibility for Training

S. Murray OHA reads summary of changes.

C. Brower OHA displays rule text with track changes on screen.

Input during meeting:

No comments during meeting. (No substantive changes. One grammatical change.)

RAC Input via email: "Do you need OAR 333-055-0021, as it's a copy from statute. If keeping, when copying statute, I would suggest a reference, so people know it's statute."

Follow up:

Edited to include reference to ORS 433.810.

10:47am OAR 333-055-0030 Certificates of Completion

S. Murray OHA reads summary of changes.

C. Brower OHA displays rule text with track changes on screen.

Input during meeting:

RAC: Wondering if added subparagraph (c), “Nothing in these rules requires…” is clear enough in intent, that trainee is not required to fill a prescription but still needs to use epinephrine that has been appropriately prescribed.

RAC: Pharmacy has rules in OAR Chapter 855 that would prohibit administering epinephrine except as prescribed, because it is prescription only.

- Noted. Confirm that reference to “premeasured dose” in that added paragraph, connects to the definition in 0006, which includes requirement that the dose be prescribed.

Follow-up:

Edited to emphasize requirement that any epinephrine used by a trainee must be prescribed by an authorized prescriber.

10:52 OAR 333-055-0035 Circumstances in which trained persons may administer…

S. Murray OHA reads summary of changes.

C. Brower OHA displays rule text with track changes on screen.

Input during meeting:

RAC: Noting change from “statement” to “certificate,” willing to cross-reference with pharmacy rules to ensure it won’t become prohibitive as amended.

Follow-up:

Verified certificates contain the word “statement” to increase alignment between public health and pharmacy rules.

10:55 Draft document, Certificates of Completion and Authorization to Obtain Epinephrine

S. Murray OHA reads summary of changes.

C. Brower OHA displays document text with track changes on screen.

Input during meeting:

RAC: Noting three places where “authorized trainer” options are listed, physician’s associate is missing.

RAC: Noting misspelling, “register” versus “registered” nurse.

Follow-up:

Edited certificates to correct omissions and spelling.

Per additional input via email: edited certificates to include trainee address for alignment with requirements of pharmacy rule.

11:02 Meeting 1 Agenda topics concluded.

Moved to Meeting 2 Agenda topics.

C. Brower verbally introduces review of training protocols, clarification that this is a review of type of changes rather than slide-by-slide or line-by-line of training materials.

C. Brower shares summary of proposed changes on screen.

RAC: Somewhere in protocols we need to call out immunity for the first responder that’s going to be on the scene. Red Cross says the person can be sued because their trainings are not included in Good Samaritan law. Trainings should include some wording that says if you help someone with their EpiPen or other forms that they’re immune from prosecution.

RAC: Statute ORS 433.817 may create authority for some amendments to rule that increase clarity about that; could follow up offline.

- Noted. This topic relates to the Immunity of Trained Persons statute [slide with statute text shared on screen]. The statute does not call out specific setting or organization, but does require following the OHA-approved training protocol for the immunity clause to apply.

RAC: regarding possible addition of school-specific content into main epinephrine training, would need to be thoughtful about clarifying which sections are required for schools only, versus trainings in camps or other settings.

- Noted. Currently have example in glucagon update, will review materials for similar clarity if school content is added to epinephrine.

Follow-up:

Edited list of proposed changes to training manuals and slides; combined into single list.

Added proposed edit notes to each of the three manuals and slides; created PDF version for further review. Final edits to be completed and posted publicly per OHA process.

Regarding immunity and OHA approval process for trainings: OHA internal discussion regarding current process and capacity indicates it is not feasible for OHA to review and approve trainings developed by external partners; thus we are proceeding with modifications to OHA-developed materials. Future legislation may change requirements for training (i.e. may require statutory changes, outside the scope of this RAC).

11:25 Meeting concluded.

Requested input via email related to SNFI document, and any additional input from RAC members via email by 10/6. After input was incorporated, requested review of final edits by 10/14. See "2026_RAC_OAR 333-055 Compiled RAC emails_10.14.26."