

# FINAL BILL REPORT

## SHB 1085

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Synopsis as Enacted

**Brief Description:** Promoting a safe learning environment for students with seizure disorders.

**Sponsors:** House Committee on Education (originally sponsored by Representatives Kloba, Vick, Volz, Leavitt, Ramel, Hoff, Graham, Chopp, Lovick, Stokesbary and Pollet).

**House Committee on Education**  
**Senate Committee on Early Learning & K-12 Education**

### **Background:**

#### Administration of Medications to Students and Provisions Governing Care to Students with Epilepsy.

School districts and private schools may provide for the administration of medications to students in their custody at the time of administration, subject to specified requirements, including:

- adopting policies to address the designation of employees and parent-designated adults who may administer medications in accordance with received parent requests and instructions;
- seeking advice from one or more licensed physicians or nurses in developing the policies; and
- designating a licensed physician or nurse to delegate to, train, and supervise the designated school district personnel in proper medication procedures.

School districts that provide for the administration of medications to students with epilepsy must adhere to related requirements. For example, the school district must designate a licensed physician or nurse to consult and coordinate with the student's parents and health care provider, and to train and supervise the appropriate school district personnel in proper procedures for student care. The training may also be provided by a nationally certified epilepsy educator.

If the parents have designated a volunteering school employee who is not a nurse to

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.*

administer medications to the student, the school employee must receive the epilepsy care training. If the parent-designated adult is not a school employee, the designee must show evidence of comparable training. Additionally, parent-designated adults, whether school employees or not, must:

- receive additional training from a health care professional or expert in epileptic seizure care selected by the parents;
- provide care that is consistent with the applicable individual health plan (IHP) for the student; and
- receive training for any additional care the parents have authorized the designee to provide.

#### Individual Health Plans for Students with Diabetes.

School districts are required to provide IHPs for students with diabetes. Among other obligations, school districts that meet this requirement must adopt policies that address:

- the acquisition of parent requests and instructions;
- the acquisition of orders from licensed health professionals prescribing within the scope of their prescriptive authority for monitoring and treatment at school;
- the storage of medical equipment and medication provided by the parent;
- the development of individual emergency plans;
- the distribution of the IHP to appropriate staff based on the students' needs and staff level of contact with the student; and
- the possession of legal documents for parent-designated adults to provide care, if needed.

Requirements governing IHPs for students with diabetes also include provisions related to:

- consultation with medical professionals;
- designating adults who may provide care to students; and
- training requirements.

#### Immunity for Good Faith Provision of Assistance or Services to Students with Diabetes.

A school district, school district employee, agent, or parent-designated adult who, acting in good faith and in substantial compliance with the student's IHP and the instructions of the student's licensed health care professional, provides assistance or services to a student with diabetes is not liable in any criminal action or for civil damages resulting from the services provided.

#### Washington State School Directors' Association.

The Washington State School Directors' Association (WSSDA) is the state agency that provides advice and assistance to local school boards. The WSSDA is charged with coordinating policymaking, control, and management of the state's school districts. Among other actions, the WSSDA develops model policies and procedures, often in response to legislative directives, that school districts may adopt.

#### **Summary:**

### Individual Health Plans for Students with Epilepsy or other Seizure Disorders.

New and modified provisions governing the care of public school students with epilepsy are established. Beginning in the 2022-23 school year, school districts must provide IHPs for students with epilepsy or other seizure disorders. In complying with IHP requirements, school districts must adopt and periodically revise policies that address specific subjects, examples of which include:

- the acquisition of parent requests and instructions;
- the acquisition of orders from licensed health professionals prescribing within the scope of their prescriptive authority for monitoring and treatment of seizure disorders at school;
- the storage of medical equipment and medication provided by the parent;
- the development of individual emergency plans;
- the distribution of the IHP to appropriate staff based on the students' needs and staff level of contact with the student; and
- the possession of legal documents for parent-designated adults to provide care, if needed.

School districts, in the course of developing the policies, must consult with one or more licensed physicians or nurses, or appropriate personnel from a national epilepsy organization that offers seizure training and education for school nurses and other school personnel.

School districts also must designate a medical professional to consult and coordinate with the student's parents and health care provider, and to train and supervise the appropriate school district personnel in proper procedures of care for students with epilepsy or other seizure disorders. The required epilepsy or other seizure disorder training may be provided by a national organization that offers training programs for school nurses and for school personnel.

Parents may designate an adult who may be a school employee to provide care for the student that is consistent with the student's IHP. If the parent-designated adult is a school district employee, the designee must receive the epilepsy or other seizure disorder training. If the parent-designated adult is not a school district employee, the designee must show evidence of training in proper procedures for care of students with epilepsy or other seizure disorders.

If the parent-designated adult is a school district employee who is not a licensed nurse, the employee must file a written, current, and unexpired letter of intent stating the employee's willingness to be a parent-designated adult. If a school district employee chooses not to file a letter of intent, the employee may not be subject to any employer reprisal or disciplinary action for refusing to do so.

### Immunity for Good Faith Provision of Assistance or Services to Students with Epilepsy or Other Seizure Disorders.

Provisions establishing criminal and civil liability immunity for persons who provide good faith assistance or services to students with diabetes are extended to persons who provide good faith assistance or services to students with epilepsy or other seizure disorders.

Model Policy and Procedure.

The WSSDA, in consultation with the Office of the Superintendent of Public Instruction, must adopt a model policy and procedure that school districts may use to implement the IHP requirements for students with epilepsy or other seizure disorders. The model policy and procedure, which must be developed by December 15, 2021, must be periodically reviewed by the WSSDA and may be revised as necessary.

Administration of Medications to Students.

School district and private school policies may not permit a school nurse to delegate the responsibility to administer student medications to a parent-designated adult who is not a school employee.

Provisions governing the administration of a nasal spray that is a legend drug or controlled substance to public school students by school nurses, trained school employees, and parent-designated adults who are not school employees, are repealed. The repealed provisions include training requirements and obligations to summon emergency medical assistance.

**Votes on Final Passage:**

House	98	0
Senate	46	0

**Effective:** July 25, 2021