

Senate File 368 - Introduced

SENATE FILE 368
BY COMMITTEE ON EDUCATION

(SUCCESSOR TO SF 111)

A BILL FOR

1 An Act relating to school personnel training, including by
2 implementing provisions related to emergency care planning,
3 authorizations for assisting, and limitations of liability
4 concerning students with epilepsy or seizure disorder, and
5 requiring the department of education to convene a health
6 care-related training for school personnel work group.

7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

unofficial

1 Section 1. NEW SECTION. **280.13D Seizure action plan and**
2 **training requirements.**

3 1. For the purposes of this section, unless the context
4 otherwise requires:

5 a. "*Individual health plan*" means the confidential, written,
6 preplanned, and ongoing special health service developed for a
7 student who requires such service to be incorporated with the
8 student's educational program.

9 b. "*School nurse*" means a registered nurse holding current
10 licensure recognized by the board of nursing who practices in
11 the school setting to promote and protect the health of the
12 school population by using knowledge from the nursing, social,
13 and public health sciences.

14 c. "*School personnel*" means principals, guidance counselors,
15 teachers, and other relevant employees who have direct contact
16 with and supervise children, including school bus drivers and
17 para-educators.

18 d. "*Seizure action plan*" means a written set of instructions
19 designed to direct caregivers and staff to intervene in the event
20 of a seizure occurrence and is considered a plan for emergencies
21 as a part of an individual health plan.

22 2. a. Starting with the school year beginning July 1,
23 2025, the board of directors of each school district and the
24 authorities in charge of each accredited nonpublic school shall
25 have at least one school employee at each school who has met the
26 training requirements necessary to administer or assist with the
27 self-administration of all of the following:

28 (1) A medication approved by the United States food and drug
29 administration to treat seizure disorder symptoms or a medication
30 approved by the United States food and drug administration as a
31 seizure rescue medication.

32 (2) A manual dose of prescribed electrical stimulation using
33 a vagus nerve stimulator magnet approved by the United States
34 food and drug administration.

35 b. The presence of a school nurse employed full-time by

1 a school district or accredited nonpublic school who assumes
2 responsibility for the administration of seizure medications and
3 the administration oversight of vagus nerve stimulation shall
4 fulfill the requirements of paragraph "a". This section shall
5 not be construed to require school personnel, other than a school
6 nurse, to administer a suppository to a student.

7 3. a. On or before December 31, 2026, each public school and
8 each accredited nonpublic school shall provide training to all
9 school personnel on how to recognize the signs and symptoms of
10 seizures and the appropriate steps for seizure first aid.

11 b. Each public school and each accredited nonpublic school
12 shall require school personnel responsible for the supervision
13 or care of students to undergo seizure recognition and first aid
14 training on a biennial basis.

15 4. Any training programs or guidelines adopted by a state
16 agency for the training of school personnel in the health care
17 needs of students diagnosed with a seizure disorder shall be
18 consistent with training programs and guidelines developed by the
19 epilepsy foundation of America or any successor organization.

20 5. This section shall not be construed to limit the authority
21 of a school district, an accredited nonpublic school, or the
22 department of education to require additional seizure disorder
23 training.

24 6. a. Prior to school personnel administering medication
25 prescribed to treat a student's seizure disorder symptoms, a
26 school or accredited nonpublic school shall obtain a signed and
27 dated authorization from the student's parent or guardian that
28 authorizes a person who meets the requirements of subsection 2 to
29 administer medication in accordance with the school's policy and
30 procedures.

31 b. Authorizations required pursuant to paragraph "a" shall
32 be effective for the school year in which the authorization is
33 granted and must be renewed each school year.

34 7. Upon the request of a student's parent or guardian, a
35 school district or accredited nonpublic school shall collaborate

1 with the parent or guardian and relevant licensed health care
2 professionals, including the school nurse or education team, in
3 the development of an individual health plan, and a seizure
4 action plan if appropriate, consistent with rules adopted by
5 the state board of education. The individual health plan or
6 seizure action plan shall be based on the student's needs and
7 may include but is not limited to assessment, nursing diagnosis,
8 outcomes, planning, interventions, student goals, and a plan for
9 emergencies to provide direction in managing the student's health
10 needs. The plan shall be updated consistent with timelines for
11 individual health plans and with rules adopted by the state board
12 of education.

13 8. a. Each school district and each accredited nonpublic
14 school shall maintain all authorizations pursuant to subsection
15 6, individual health plans, and seizure action plans for enrolled
16 students on file in the office of the school nurse or school
17 administrator.

18 b. Each school district and each accredited nonpublic school
19 shall distribute information regarding a student's seizure action
20 plan to any school personnel responsible for the supervision or
21 care of the student.

22 9. The requirements of subsections 6, 7, and 8 shall only
23 apply to a school district or accredited nonpublic school that
24 has either of the following:

25 a. An enrolled student with a known diagnosis of epilepsy or
26 seizure disorder.

27 b. An enrolled student who is known to currently be taking
28 medication prescribed by a health care provider as that term is
29 defined in section 10A.711, and approved by the United States
30 food and drug administration to treat seizure disorder symptoms.

31 10. The state board of education shall adopt rules to
32 establish a seizure education program for the purpose of
33 providing school districts and accredited nonpublic schools an
34 age-appropriate program on seizures and seizure disorders. The
35 seizure education program shall be consistent with guidelines

1 published by the epilepsy foundation of America or any successor
2 organization, and participation in the program shall be optional.

3 11. A school district or accredited nonpublic school, an
4 employee of a school district or accredited nonpublic school,
5 or an agent of a school district or accredited nonpublic school
6 acting reasonably, in good faith, and in compliance with a
7 student's individual health plan and seizure action plan shall
8 not be liable for any claim for injuries or damages arising
9 from actions taken to assist a student with the student's needs
10 related to epilepsy or a seizure disorder.

11 Sec. 2. DEPARTMENT OF EDUCATION — HEALTH CARE-RELATED
12 TRAINING FOR SCHOOL PERSONNEL WORK GROUP.

13 1. The department of education shall convene and provide
14 administrative support to a health care-related training for
15 school personnel work group. The work group shall review and
16 develop a plan to ensure Iowa educators have the health care
17 training necessary to perform their duties and responsibilities,
18 and shall consider and submit recommendations for delivery and
19 implementation of training required under state law or rule.

20 2. The work group shall include all of the following:

21 a. (1) Two members who are staff members from the department
22 of education, one of whom shall be an administrative consultant
23 in the bureau of nutrition and health services. A member
24 appointed under this subparagraph shall coordinate the work group
25 and act as chairperson for the organizational meeting.

26 (2) One member who is a staff member from the Iowa department
27 of health and human services.

28 b. Members who shall represent each of the following:

29 (1) One member from a statewide organization representing
30 teachers.

31 (2) One member from a statewide organization representing
32 school board members.

33 (3) One member from a statewide organization representing
34 school administrators.

35 (4) One member from a statewide organization representing

1 authorities in charge of accredited nonpublic schools.

2 (5) One member representing the area education agencies.

3 (6) One member from a statewide organization representing
4 physicians.

5 (7) One member from a statewide organization representing
6 athletic trainers.

7 (8) One member from a statewide organization representing
8 emergency management services.

9 (9) One member from a statewide organization representing
10 health care organizations.

11 (10) One member from a statewide organization representing
12 school nurses.

13 3. Any expenses incurred by a member of the work group shall
14 be the responsibility of the individual member or the respective
15 entity represented by the member.

16 4. The director of the department of education or the
17 director's designee shall compile and provide to the work group a
18 list of, and the purposes for, the health care training programs
19 that school personnel are required to complete, as well as any
20 requirements school personnel must meet following such training,
21 in order be in compliance with state law or administrative rule.

22 5. The work group shall do all of the following:

23 a. Identify which trainings can be best provided over the
24 internet, and how such training can be rotated on a five-year
25 basis for school personnel.

26 b. Develop a plan for a regular cycle of health care-related
27 training for school personnel review, with the goal of removing
28 or modifying training or training programs that are no longer
29 relevant, and identifying less costly and more efficient options
30 that still provide the appropriate level of training to school
31 personnel.

32 c. Standardize the process of establishing new training
33 requirements in state law or rule to manage stakeholder
34 expectations relating to the timeline for establishing the
35 requirements.

1 d. Create an ongoing review process to find efficiencies,
2 identify training options that better utilize time and financial
3 resources, and offer a continuous improvement model for the
4 system moving forward.

5 e. Study and make any recommended changes on rules adopted by
6 the state board of education under 281 IAC ch. 14, relating to
7 individual health plans prepared for students with various health
8 conditions.

9 f. Ensure a public comment process for patient advocacy
10 groups and parents to provide input on the recommendations of the
11 work group.

12 6. If the work group recommends elimination or significant
13 modification of certain health care-related training for
14 school personnel, the department of education shall identify
15 stakeholders who would potentially be affected by such
16 change, and shall invite representatives from organizations
17 representing such stakeholders to submit comments before or at
18 an upcoming work group meeting before the work group makes final
19 recommendations.

20 7. The department of education shall compile the work group's
21 findings and recommendations and shall submit the compilation,
22 including any proposal for legislation, in a report to the
23 general assembly, the governor, and the state board of education
24 by December 1, 2025.

25 EXPLANATION

26 The inclusion of this explanation does not constitute agreement with
27 the explanation's substance by the members of the general assembly.

28 This bill relates to school personnel training, including
29 by implementing provisions related to emergency care planning,
30 authorizations for assisting, and limitations of liability
31 concerning students with epilepsy or seizure disorder, and
32 requires the department of education to convene a health
33 care-related training for school personnel work group.

34 The bill creates definitions for "individual health plan",
35 "school nurse", "school personnel", and "seizure action plan".

1 The bill requires by the start of the school year beginning
2 July 1, 2025, for the board of directors of each school district
3 and the authorities in charge of each accredited nonpublic school
4 to have at least one school employee at each school who has
5 met the training requirements necessary to administer or assist
6 with the self-administration of a seizure rescue medication or
7 medication prescribed to treat seizure disorder symptoms and
8 approved by the United States food and drug administration
9 and a manual dose of prescribed electrical stimulation using
10 a vagus nerve stimulator magnet approved by the United States
11 food and drug administration. The presence of a school nurse
12 employed full-time by a school who assumes responsibility for
13 the administration of seizure medications and the administration
14 oversight of vagus nerve stimulation fulfills such requirements.
15 These requirements do not require school personnel, other than a
16 school nurse, to administer a suppository to a student.

17 The bill requires by December 31, 2026, each public school
18 and each accredited nonpublic school to provide training to all
19 school personnel on how to recognize the signs and symptoms of
20 seizures and the appropriate steps for seizure first aid.

21 The bill requires each public school and each accredited
22 nonpublic school to have school personnel responsible for the
23 supervision or care of students to undergo seizure recognition
24 and first aid training on a biennial basis.

25 The bill requires any training programs or guidelines adopted
26 by a state agency for the training of school personnel in
27 the health care needs of students diagnosed with a seizure
28 disorder to be consistent with training programs and guidelines
29 developed by the epilepsy foundation of America or any successor
30 organization.

31 The bill authorizes schools and the department of education to
32 require additional seizure disorder training.

33 The bill requires, prior to school personnel administering
34 medication prescribed to treat a student's seizure disorder
35 symptoms, a school, or accredited nonpublic school to obtain

1 signed and dated authorization from the student's parent or
2 guardian that authorizes a person trained to administer or assist
3 with the self-administration of a medication approved by the
4 United States food and drug administration to treat seizure
5 disorder symptoms and a manual dose of prescribed electrical
6 stimulation using a vagus nerve stimulator magnet approved by
7 the United States food and drug administration in accordance
8 with the school's policy and procedures. Such authorizations
9 are effective for the school year in which the authorization is
10 granted and must be renewed each school year.

11 The bill requires, upon the request of a student's parent or
12 guardian, a school to collaborate with the parent or guardian and
13 relevant licensed health care professionals, including the school
14 nurse or education team, in the development of an individual
15 health plan, and a seizure action plan if appropriate, consistent
16 with rules adopted by the state board of education. The
17 individual health plan or seizure action plan must be based
18 on the student's needs and may include but is not limited to
19 assessment, nursing diagnosis, outcomes, planning, interventions,
20 student goals, and a plan for emergencies to provide direction in
21 managing the student's health needs. The plan must be updated
22 consistent with timelines for individual health plans and with
23 rules adopted by the state board of education.

24 The bill requires each school to maintain all authorizations
25 to allow seizure assistance, individual health plans, and seizure
26 action plans for enrolled students on file in the office of the
27 school nurse or school administrator.

28 The bill requires each school to distribute information
29 regarding a student's seizure action plan to any school personnel
30 responsible for the supervision or care of the student.

31 The bill limits the requirements relating to authorizations,
32 individual health plans, and seizure action plans for students
33 to schools that either have an enrolled student with a known
34 diagnosis of epilepsy or seizure disorder or an enrolled student
35 who is known to currently be taking medication prescribed by a

1 health care provider and approved by the United States food and
2 drug administration to treat seizure disorder symptoms.

3 The bill directs the state board of education to adopt rules
4 to establish a seizure education program for the purpose of
5 providing school districts and accredited nonpublic schools an
6 age-appropriate program on seizures and seizure disorders. The
7 seizure education program shall be consistent with guidelines
8 published by the epilepsy foundation of America or any successor
9 organization, and participation in the program shall be optional.

10 The bill makes a school, a school employee, or an agent of a
11 school acting reasonably, in good faith, and in compliance with a
12 student's individual health plan and seizure action plan immune
13 from liability for any claim for injuries or damages arising
14 from actions taken to assist a student with the student's needs
15 related to epilepsy or a seizure disorder.

16 The bill requires the department of education to convene and
17 provide administrative support to a health care-related training
18 for school personnel group. The bill requires the group to
19 review and develop a plan to ensure that Iowa educators have
20 the health care training necessary to perform their duties and
21 to submit recommendations for delivery and implementation of
22 training required under state law or rule. The bill specifies
23 the members the group shall include. The bill requires the group
24 to submit its findings and recommendations in a report to the
25 general assembly, the governor, and the state board of education
26 by December 1, 2025.