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# OHIO LEGISLATIVE SERVICE COMMISSION

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H.B. 606  
134<sup>th</sup> General Assembly

## Bill Analysis

**Version:** As Introduced

**Primary Sponsors:** Reps. Bird and Ingram

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CORRECTED VERSION\*

### SUMMARY

- Requires public and chartered nonpublic schools to create an individualized seizure action plan for each enrolled student who has an active seizure disorder diagnosis.
- Requires at least one employee at each school to be trained on implementing seizure action plans.
- Entitles the bill “Sarah’s Law for Seizure Safe Schools Act.”

### DETAILED ANALYSIS

#### Seizure action plans

The bill requires city, local, exempted village, and joint vocational school districts, other public schools (community schools, STEM schools, and college preparatory boarding schools), and chartered nonpublic schools to create an individualized seizure action plan in collaboration with the student’s parent or guardian for each enrolled student who has an active seizure disorder diagnosis. Each plan must include:

1. A written request signed by a parent, guardian, or other person having care or charge of the student to have one or more drugs prescribed for a seizure disorder administered to the student, in accordance with the school’s staff drug administration policy (see “**Background**” below);
2. A written statement from the student’s treating practitioner providing the drug information required under continuing law for each drug prescribed to the student for a seizure disorder;

\* Removes incorrect dot point regarding age-appropriate instruction for students regarding seizure disorders.

3. Any other component required by the State Board of Education.<sup>1</sup>

Seizure action plans are effective only for the school year in which a written request is submitted and must be renewed at the beginning of each school year. Plans must be maintained in the school nurse's office, or school administrator's office if the school does not employ a full-time school nurse.<sup>2</sup>

For each student who has a seizure action plan in force, a school nurse or school administrator must notify each school employee, contractor, and volunteer who (1) regularly interacts with the student, (2) has legitimate educational interest in the student, or (3) is responsible for the direct supervision or transportation of the student in writing regarding the existence and content of the student's plan.

Further, each school nurse or school administrator must identify each individual who has received training under the seizure action plan in the administration of drugs prescribed for seizure disorders (see below). A school nurse or another district employee also must coordinate seizure disorder care at each school and ensure that all required staff are trained in the care of students with seizure disorders.<sup>3</sup>

Finally, a drug prescribed to a student with a seizure disorder must be provided to the school nurse or another person at the school who is authorized to administer it to a student. The drug also must be provided in the container in which it was dispensed by the prescriber or licensed pharmacist.<sup>4</sup>

### **Training on seizure action plans**

The bill requires districts and schools to train or arrange to have trained at least one employee at each school, aside from a school nurse, on the implementation of seizure action plans every two years. Training must be consistent with guidelines and best practices established by a nonprofit organization that supports the welfare of individuals with epilepsy and seizure disorders, such as the Epilepsy Alliance Ohio,<sup>5</sup> Epilepsy Foundation of Ohio,<sup>6</sup> or other similar organizations as determined by the Department of Education. Training must address the following:

1. Recognizing the signs and symptoms of a seizure;
2. Appropriate treatment for a student exhibiting the symptoms of a seizure;
3. Administering seizure disorder drugs prescribed for the student.

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<sup>1</sup> R.C. 3313.7117(B), 3314.03(A)(11)(d), 3326.11, and 3328.24.

<sup>2</sup> R.C. 3313.7117(E) and (F).

<sup>3</sup> R.C. 3313.7117(C).

<sup>4</sup> R.C. 3313.7117(D).

<sup>5</sup> <https://www.epilepsy-ohio.org/>.

<sup>6</sup> <https://www.ohioepilepsy.org/>.

The bill limits a seizure training program to one hour and qualifies the required seizure disorder training as a professional development activity for educator license renewal. If the training is provided to a district or school on portable media by a nonprofit entity, the training must be provided free of charge.<sup>7</sup>

Districts and schools also must require each person employed as an administrator, guidance counselor, teacher, or bus driver to complete a minimum of one hour of self-study or in-person training on seizure disorders within 12 months after the bill's effective date. Any such individual employed after that date must complete a training within 90 days of employment.<sup>8</sup>

### **Qualified immunity**

The bill provides a qualified immunity in a civil action for money damages for a school, school district, members of a school district board or school governing authority, and a district's or school's employees for injury, death, or other loss allegedly arising from providing care or performing duties under the bill. The immunity does not apply if any act or omission constitutes willful or wanton misconduct.<sup>9</sup>

### **Background – administration of drugs**

Continuing law requires each school district and chartered nonpublic school to have a general policy on the administration of drugs that have been prescribed for its students. That policy must either (1) prohibit the district's or school's employees from administering prescription drugs or (2) authorize designated employees to do so. A district or school that permits the administration of prescription drugs must adopt a policy designating the employees authorized to administer them. Those employees must be licensed health professionals or individuals who have completed a drug administration training program conducted by a licensed health professional and considered appropriate by the district board. Conversely, a district or school that does not permit the administration of prescription drugs must adopt a policy stating that no employee may do so, except as required by federal special education law. The law is silent on whether other public schools must adopt such a policy.<sup>10</sup>

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## **HISTORY**

Action	Date
Introduced	03-28-22

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<sup>7</sup> R.C. 3313.7117(G).

<sup>8</sup> R.C. 3313.7117(H).

<sup>9</sup> R.C. 3313.7117(I).

<sup>10</sup> R.C. 3313.713, not in the bill.