Sec. 1. STUDENTS AT RISK FOR ANAPHYLAXIS

a) *Welfare Plan*

The Board shall adopt and implement a plan for the care of students with a diagnosed food allergy at risk for anaphylaxis based on "*Guidelines for the Care of Students With Food Allergies At-Risk for Anaphylaxis*," as developed by the Commissioner of State Health Services.

The Board shall annually review and, as necessary, revise its policy for the care of students with a diagnosed food allergy risk for anaphylaxis to ensure the policy is consistent with the most current version of the "*Guidelines for the Care of Students With Food Allergies At-Risk for Anaphylaxis*."

The adoption and implementation of such plan does not waive any liability or immunity of Raul Yzaguirre Schools for Success (RYSS) or its officers or employees, or create any liability for or cause of action against RYSS or its officers or employees.

b) *Required Website Posting*

Each school year, RYSS shall post a summary of the "*Guidelines for the Care of Students With Food Allergies At-Risk for Anaphylaxis*" on the RYSS website, including instructions on obtaining access to the complete guidelines document. The RYSS website must be accessible by each enrolled student and a parent or guardian of each student.

Any forms used by RYSS requesting information from a parent or guardian enrolling a child with a food allergy must include information to access on RYSS's website a summary of the guidelines and instructions on obtaining access to the complete guidelines document.

Education Code 38.0151(b).

Sec. 2. FOOD ALLERGY MANAGEMENT

The Superintendent or designee shall develop and implement a student food allergy management plan for students at risk for anaphylaxis that incorporates the following components:

a) *General Procedures*

Procedures to limit the potential health risks to students with food allergies will include:

1. Specialized training for the employees responsible for the development, implementation, and monitoring of RYSS's food allergy management plan;
2. Training for employees regarding signs and symptoms of food allergies and emergency response in the event of an anaphylactic reaction;
3. General strategies to reduce the risk of exposure to common food allergies;

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4. Methods for requesting and obtaining food allergy information from the parent of a student with a diagnosed food allergy; and
5. The annual review of RYSS's food allergy management plan.

b) *Students at Risk for Anaphylaxis*

Procedures for the care of students with diagnosed food allergies who are at risk for anaphylaxis will include:

1. Development and implementation of food allergy action plans, emergency action plans, and Section 504 plans, as appropriate;
2. Training, as necessary, for employees, including strategies for reducing student risk of exposure to diagnosed allergens; and
3. Periodic review of general procedures to limit the potential health risks to students.

c) *Distribution*

The Superintendent shall distribute information regarding this policy and RYSS's food allergy management plan annually in the student handbook. Information will also be made available at each RYSS campus.

Sec. 3. SEIZURE MANAGEMENT AND TREATMENT PLANS

a) *General Requirements*

The parent or guardian of a student with a seizure disorder may seek care for the student's seizures while the student is at school or participating in a school activity by submitting to RYSS a copy of a seizure management and treatment plan developed by the student's parent or guardian and the physician responsible for the student's seizure treatment. A seizure management and treatment plan must be submitted to and reviewed by RYSS:

1. Before or at the beginning of the school year;
2. On enrollment of the student if the student enrolls after the beginning of the school year; or
3. As soon as practicable following a diagnosis of a seizure disorder for the student.

Education Code 38.032(a).

i. *Requirements for Seizure Management Plans Submitted before January 1, 2024*

A seizure management and treatment plan must:

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1. Identify the health care services the student may receive at school or while participating in a school activity;
2. Evaluate the student's ability to manage and level of understanding of the student's seizures; and
3. Be signed by the student's parent or guardian and the physician responsible for the student's seizure treatment.

ii. *Requirements for Seizure Management Plans Submitted after January 1, 2024*

A seizure management and treatment plan must be submitted on the form adopted by the Texas Education Agency and provide the following:

1. The student's name and date of birth;
2. The names and contact information of the student's parent and the physician responsible for the student's seizure treatment, and at least one other emergency contact;
3. Any medical history significant to the student's seizure disorder;
4. The type, length, and frequency of the student's seizures;
5. A description of each type of seizure the student has experienced;
6. The student's seizure triggers or warning signs;
7. The student's ability to manage seizures and the student's level of understanding of the seizures;
8. The student's response after a seizure;
9. The basic first aid to be provided to the student during a seizure, including whether the student needs to leave the classroom after a seizure and the process for the student's return to the classroom, if applicable;
10. A description of what constitutes a seizure emergency for the student;
11. A description of seizure emergency protocol for school personnel to follow in the event of a seizure emergency for the student;
12. A treatment protocol for any medications or other procedures to be administered by school personnel to the student during school hours, including:
    a. Each daily or emergency medication, including (i) the name and dosage of the medication and the time at which the medication is to be given; (ii) common side effects for the medication; and (iii) any special instructions regarding the medication; and
    b. Whether the student has a vagus nerve stimulator and, if so, appropriate magnet use for the stimulator;
13. Any special considerations or precautions applicable to the students; and
14. The signature of the student's parent and the physician responsible for the student's seizure treatment.

Education Code 38.032(b).

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b) *Immunity Protections*

The care of a student with a seizure disorder by a RYSS employee under a seizure management plan is incident to or within the scope of the duties of the employee's position of employment and involves the exercise of judgment or discretion on the part of the employee for purposes of Education Code 22.0511. *Education Code 38.032(c)*.

The immunity from liability provided by Education Code 22.0511 applies to an action or failure to act by a RYSS employee in administering a medication, assisting with self-administration, or otherwise providing for the care of a student under a seizure management plan submitted for the student. *Education Code 38.032(d)*.

Sec. 4. DIABETES MANAGEMENT AND TREATMENT PLAN

The parent or guardian of a student who will seek care for diabetes while at school or while participating in a school activity, and the physician responsible for the student's diabetes treatment, shall develop a diabetes management and treatment plan (DMTP).

a) Required Elements

The DMTP must:

1. Identify the health-care services the student may receive at school;
2. Evaluate the student's ability to manage and level of understanding of the student's diabetes; and
3. Be signed by the parent or guardian and the physician.

b) Submission to School

The parent or guardian must submit the DMTP to the school, and the school must review the plan:

1. Before or at the beginning of the school year;
2. On enrollment of the student, if the student enrolls after the beginning of the school year; or
3. As soon as practicable following a diagnosis of diabetes for the student.

Health and Safety Code 168.002.

c) Individualized Health Plan

Upon receiving the student's DMTP, the school principal, or designee, and the school nurse, if a school nurse is assigned to the school, shall develop an individualized health plan (IHP) for the student. The IHP shall be developed in collaboration with the student's parent or guardian and, to

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the extent practicable, the physician responsible for the student's diabetes treatment and one or more of the student's teachers.

A student's IHP must incorporate components of the student's DMTP, including the information required under Health and Safety Code 168.002(b) [see Required Elements, above].

Health and Safety Code 168.001(3), .003.

d) Independent Monitoring and Treatment

In accordance with the student's IHP, a school shall permit the student to attend to the management and care of the student's diabetes, which may include:

1. Performing blood glucose level checks;
2. Administering insulin through the insulin delivery system the student uses;
3. Treating hypoglycemia and hyperglycemia;
4. Possessing on the student's person at any time any supplies or equipment necessary to monitor and care for the student's diabetes; and
5. Otherwise attending to the management and care of the student's diabetes in the classroom, in any area of the school or school grounds, or at any school-related activity.

Health and Safety Code 168.008.

e) Required Care

Each school shall adopt a procedure to ensure that a school nurse or at least one unlicensed diabetes care assistant (UDCA) is present and available to provide the required care to a student with diabetes during the regular school day. A district may not restrict the assignment of a student with diabetes to a particular campus on the basis that the campus does not have the required UDCAs. *Health and Safety Code 168.007(c)-(d).*

If a school nurse is assigned to a campus and the nurse is available, the nurse shall perform the tasks necessary to assist a student with diabetes in accordance with the student's IHP.

f) School Nurse Not Available

If a school nurse is not assigned to the campus or a school nurse is not available, a UDCA shall perform the tasks necessary to assist the student in accordance with the student's IHP and in compliance with any guidelines provided during UDCA training. A UDCA may perform these tasks only if the parent or guardian of the student signs an agreement that:

1. Authorizes a UDCA to assist the student; and

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2. States that the parent or guardian understands that a UDCA is not liable for civil damages [see Immunity from Liability, below].

Health and Safety Code 168.007(a).

If a school nurse is not assigned to a campus:

1. A UDCA must have access to an individual with expertise in the care of persons with diabetes, such as a physician, a registered nurse, a certified diabetes educator, or a licensed dietitian; or
2. The principal must have access to the physician responsible for the student's diabetes treatment.

Health and Safety Code 168.007(b).

g) Unlicensed Diabetes Care Assistants

At each school in which a student with diabetes is enrolled, the principal, or designee, shall:

1. Seek school employees who are not health-care professionals to serve as UDCAs and to care for students with diabetes; and
2. Make efforts to ensure the school has:
    a. At least one UDCA if a full-time nurse is assigned to the school; and
    b. At least three UDCAs if a full-time nurse is not assigned to the school.

"School employee" means a person employed by a school, a local health department that assists the school under Health and Safety Code Chapter 168 (Care of Students with Diabetes), or another entity with whom the school has contracted to perform its duties under that chapter.

"Unlicensed diabetes care assistant" means a school employee who has successfully completed the required training [see UDCA Training, below].

A school employee may not be subject to any penalty or disciplinary action for refusing to serve as a UDCA.

A UDCA shall serve under the supervision of the principal.

Health and Safety Code 168.001(5)-(6), .003-.004.

h) UDCA Training

If a school nurse is assigned to a campus, the nurse shall coordinate the training of school employees acting as UDCAs. Training for UDCAs must be provided by a health-care professional

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with expertise in the care of persons with diabetes or by a school nurse. The training must include instruction in the elements set forth at Health and Safety Code 168.005(d).

Training must be provided before the beginning of the school year or as soon as practicable following:

1. The enrollment of a student with diabetes at a campus that previously had no students with diabetes; or
2. A diagnosis of diabetes for a student at a campus that previously had no students with diabetes.

The school nurse or principal shall maintain a copy of the training guidelines and any records associated with the training.

Health and Safety Code 168.005.

Note: Guidance for the care of students with diabetes is available on the Texas Department of State Health Services (TDSHS) website.

i) Information to Employees

A district shall provide to each district employee who is responsible for providing transportation for a student with diabetes or supervising a student with diabetes during an off-campus activity a one-page information sheet that:

1. Identifies the student who has diabetes;
2. Identifies potential emergencies that may occur as a result of the student's diabetes and the appropriate responses to such emergencies; and
3. Provide the telephone number of a contact person in case of an emergency involving the student with diabetes.

Health and Safety Code 168.006.

j) Immunity from Liability

A school employee may not be subject to any disciplinary proceeding, as defined by Education Code 22.0512(b), resulting from any action taken in compliance with Health and Safety Code Chapter 168. The requirements of Chapter 168 are considered to involve the employee's judgment and discretion and are not considered ministerial acts for purposes of immunity under Education Code 22.0511. *Health and Safety Code 168.009(a)*.

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A school nurse is not responsible for and may not be subject to disciplinary action under Occupations Code Chapter 301 for actions performed by a UDCA. *Health and Safety Code 168.009(b).*

A UDCA who assists a student as provided above [see Required Care, above] in compliance with the student's IHP:

1. Is not considered to be engaging in the practice of professional or vocational nursing under Occupations Code Chapter 301 or other state law; and
2. Is exempt from any applicable state law or rule that restricts the activities that may be performed by a person who is not a health-care provider.

A UDCA may exercise reasonable judgment in deciding whether to contact a health-care provider in the event of a medical emergency involving a student with diabetes.

Health and Safety Code 168.007(e)-(f).

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