

- SUBJECT:** Developing guidelines for the care of students at risk for anaphylaxis
- COMMITTEE:** Public Education — favorable, without amendment
- VOTE:** 12 ayes — Huberty, Bernal, Allen, Allison, Ashby, K. Bell, Dutton, M. González, K. King, Meyer, Talarico, VanDeaver
- 0 nays
- 1 absent — Sanford
- SENATE VOTE:** On final passage, May 10 — 31-0
- WITNESSES:** *On House companion bill, HB 2555:*
- For — Beth Martinez; (*Registered, but did not testify:* Chris Masey, Coalition of Texans with Disabilities; Mark Vane, HB Strategies; Kyle Ward, Texas PTA; Calvin Tillman; Al Zito)
- Against — Louise Bethea, Texas Allergy, Asthma, and Immunology Society
- On — (*Registered, but did not testify:* Nimisha Bhakta, Department of State Health Services; Eric Marin and Monica Martinez, Texas Education Agency)
- BACKGROUND:** Interested parties have called on the state to update the health guidelines used by public schools to ensure the safety of students with food allergies who are at risk for anaphylaxis, an acute, life-threatening allergic reaction that can develop rapidly.
- DIGEST:** CSHB 2555 would require the commissioner of the Department of State Health Services (DSHS) to create an ad hoc committee to consult with the commissioner on updating current guidelines for the care of students with food allergies who were at risk of anaphylaxis. The guidelines and any recommendation to update the guidelines regarding medical treatment or therapy would have to be scientifically valid. School districts and open-

enrollment charter schools would be required to adopt and administer policies for the care of students based on the guidelines.

Committee membership. Members of the ad hoc committee required under the bill would be appointed by the DSHS commissioner to assist in updating "Guidelines for the Care of Students with Food Allergies At-Risk for Anaphylaxis" to incorporate and specifically reference any new food-allergy management best practices and treatments.

The commissioner would be required to appoint certain individuals as members of the committee, including representatives of the medical profession, patients, members of the education community, and parents. Committee members would serve for a period determined by the commissioner.

Committee requirements. Any recommendations on updating the current guidelines regarding medical treatment or therapies would have to be submitted by the physicians directly to the commissioner, provided that the recommendations could only be submitted if approved by a majority of the physicians serving on the committee.

At least once every three years, the commissioner would be required to order a meeting of the committee to discuss updating the guidelines. The commissioner also could order a meeting at any time to discuss the protection of students at risk for anaphylaxis and to update the guidelines.

The bill would exempt DSHS from certain provisions that would require the agency to state the purpose and tasks of the committee and to describe the manner in which the committee reported to the agency.

The commissioner would be required to appoint the committee by October 1, 2019, and to update the guidelines by March 1, 2020.

Guidelines. The bill would require the policy that currently must be adopted and administered by the board of trustees of each school district and the governing body of each open-enrollment charter school for the

care of students with a diagnosed food allergy at risk for anaphylaxis to be based on "Guidelines for the Care of Students with Food Allergies At-Risk for Anaphylaxis."

The Texas Education Agency (TEA) would be required to post the guidelines on the agency's website along with any other information relating to students with special health needs. The information posted would have to include a summary of the guidelines. TEA would be required to annually review and revise the guidelines as necessary to reflect the most current version.

Each school year, the board of trustees of each school district and the governing body of each open-enrollment charter school would have to post a summary of the guidelines on the district's or school's website, including instructions on how to obtain access to the complete guidelines. The district's or school's website would have to be accessible by each enrolled student and a parent or guardian of each student. Any form used by a district or school requesting information from a parent or guardian enrolling a child with a food allergy would have to include information on how to access the guidelines.

Each year, a school district or an open-enrollment charter school would be required to review and, as necessary, revise its policy for the care of students at risk for anaphylaxis to ensure it was consistent with the most current version of the guidelines established by DSHS in consultation with the ad hoc committee.

Limitations. The guidelines described in the bill could not require a school district or open-enrollment charter school to purchase federally approved treatments or make any other expenditures that would result in a negative fiscal impact on the district or school. The guidelines also could not require the personnel of a district or school to administer federally approved treatments to a student unless the medication was prescribed for that student by the student's physician.

These limitations would not waive any liability or immunity of a school

district, open-enrollment charter school, or district or school officers or employees, nor would it create any liability for or a cause of action against these entities. The bill would not create a civil, criminal, or administrative cause of action or liability or create a standard of care, obligation, or duty that provided the basis for a cause of action.

Effective date. This bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2019.