

BILL ANALYSIS

Senate Research Center
87R27045 CAE-F

C.S.H.B. 3819
By: Klick (Powell)
Education
5/21/2021
Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Concerns have been raised regarding public school district policies for the administration of asthma medicine and injectors, which currently apply only to students with a diagnosis of asthma. It has been suggested that these policies are too restrictive in their guidance given that not all students have this registered diagnosis despite having the signs and symptoms of asthma requiring prescription medication. There have been calls to ensure that these policies allow for the administration of potentially lifesaving medicine in an emergency situation, rather than having to wait for EMS to administer it at great cost. H.B. 3819 seeks to address this issue by clarifying the conditions under which this medicine may be administered to a student.

(Original Author's/Sponsor's Statement of Intent)

C.S.H.B. 3819 amends current law relating to a public school district policy providing that a school nurse may administer prescription asthma medicine to a student.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 38.208, Education Code, by amending Subsection (b-1) and adding Subsections (b-2) and (b-3), as follows:

(b-1) Requires that the policy, if a policy is adopted under Subsection (a-1) (relating to authorizing each school district, open-enrollment charter school, and private school to adopt and implement a policy authorizing a school nurse to maintain and administer asthma medicine at each campus in the district or school), provide that the school nurse is authorized to administer prescription asthma medicine to a student only if the student has a clinical presentation of asthma with signs and symptoms which may include respiratory distress, dyspnea, labored breathing, audible wheezing, tightness of chest, or a persistent cough and the school has notification from a parent or guardian of the student that the school nurse is authorized to administer prescription asthma medicine if the student experiences respiratory distress, rather than only if the school nurse has written notification from a parent or guardian of the student that the student has been diagnosed as having asthma and stating that the school nurse is authorized to administer prescription asthma medicine to the student.

(b-2) Requires the school nurse, if prescription asthma medication is administered to a student whose parent or guardian has not provided notification to the school that the student has been diagnosed with asthma, to refer the student to the student's primary care provider on the day medication is administered to the student. Requires the school nurse to provide notification to the student's parent or guardian regarding the referral. Requires that the referral include:

- (1) notification of the student's physical assessment;

(2) the name of the medication administered to the student; and

(3) patient care instructions given to the student.

(b-3) Requires the student's parent or guardian, if a student who has received asthma medication does not have a primary care provider or the parent or guardian of the student has not engaged a primary care provider for the student, to receive information to assist the parent or guardian in selecting a primary care provider for the student.

SECTION 2. Effective date: upon passage or September 1, 2021.