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Keeping Students Healthy

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KEEPING STUDENTS HEALTHY

By Stacy C. Ferguson

I. Physical Health of Students in Public School

A. Students with Life-Threatening Medical Conditions

1. Students with Food Allergies—House Bill 742 [Texas Education Code 25.0022]

Disclosure by Parent: Upon a student's enrollment, a school district must request that a parent or legal guardian disclose whether the child has a food allergy that should be disclosed to the district. The disclosure should specify the food to which the child is allergic and the nature of the allergic reaction in order to enable the district to take any necessary precautions regarding the child's safety.

Effective Date: June 17, 2011. Applies beginning with the 2011-12 school year.

2. Policies for the Care of Students at Risk for Anaphylaxis—Senate Bill 27 [Texas Education Code 38.0151]

Policy Requirement: School districts and open-enrollment charter schools must now adopt and implement a policy for the care of students with food allergies if those students are at risk for anaphylaxis based on guidelines developed by the Commissioner of State Health Services in consultation with an ad hoc committee.

Ad Hoc Committee Members	
Dr. Drew Bird of the Food Allergy Initiative	
Dr. Angela Hilger, Pediatric Society and Texas Medical Association	
Dr. Carla Davis of Texas Allergy & Asthma Immuno. Soc.	
Laurie Comb of the Texas School Nurses Organization	
Anita Wheeler of the Texas Department of Health Services	
Mike Lade of Food Allergy and Anaphylaxis Network	
Susan Fambrough, Principal of Steiner Ranch Elementary, Leander ISD	
Christy Johnson, Parent, Houston, Texas	
Beth Martinez, Parent, Austin, Texas	
Regina Mathus, Parent, Waco, Texas	
Elva Gladney, Board Member of Pflugerville ISD	
Karalei Nunn, Board Member of Meridian Charter School, Round Rock, Texas	
Mary Ann Whiteker, Hudson ISD Superintendent	
Wendy McAshlan, Friendswood ISD Classroom Teacher	

Review Existing Policies (if Any): School districts that already had a policy for this student population prior to the passing of the new law are required to review the policy and revise it as necessary to ensure consistency with the new guidelines.

New Guidelines to be Issued May 1, 2012: Not later than May 1, 2012, the Commissioner of State Health Services, in conjunction with the ad hoc committee, shall issue guidelines for the care of students with food allergies who are at risk for anaphylaxis.

Practice Tip: Be sure the student's care plan is clear. The care plan should address issues such as how to prevent an allergic reaction, how to proceed in the event there is an allergic reaction, the potential severity of an allergic reaction, whether there is medicine that should be kept on hand in case of an emergency, and how quickly staff should respond in the event of an allergic reaction. Frequently overlooked issues include addressing the student's care on bus transportation and field trips, whether there is any need to restrict animals/pets in the classroom, care during after-school programming, campus signage, and ensuring the plan is followed when substitute teachers are present.

Effective Date: June 12, 2011. The required policy must be implemented by August 1, 2012.

B. Health and Wellness of Student Athletes

1. Concussions Involving Student Athletes—HB 2038 [Texas Education Code 38.151-38.160]

Pre-Season Form: A student may not participate in any interscholastic athletic activity for a school year until the student and the student's parent or guardian have signed a form that acknowledges receiving and reading written information that explains concussion prevention, symptoms, treatment, and oversight, and that includes guidelines for safely resuming participation in an athletic activity following a concussion. The form must be approved by the UIL. [See Attachment A].

Appointment of Concussion Oversight Team (COT): The Board of Trustees of any public school district with students who participate in an interscholastic athletic activity shall appoint a Concussion Oversight Team. Each Concussion Oversight Team shall include at least one physician and must also include one or more of the following:

- An athletic trainer;
- An advanced practice nurse;
- A neuropsychologist; or
- A physician assistant.

Note: If the District employs an athletic trainer, the trainer must be a member of the Concussion Oversight Team.

Training Required by Members of Concussion Oversight Team: Each member of the Concussion Oversight Team must have had training in the evaluation, treatment and oversight of

concussions at the time of appointment or approval as a member of the team. Members of the Concussion Oversight Team (except the physician) must also take a training course at least once every two years and submit timely proof of completion to the Superintendent or designee in accordance with Texas Education Code § 38.158.

Duties of Concussion Oversight Team: Return-to-Play Protocols: Each Concussion Oversight Team must establish a Return-to-Play Protocol, based on peer-reviewed scientific evidence, for a student's return to an interscholastic athletic practice or competition following the force or impact believed to have caused a concussion.

Removal from Play During Competition or Practice: A student must be removed from an interscholastic athletic practice or competition immediately if one of the following individuals believes the student may have sustained a concussion:

- A coach;
- A physician;
- A licensed health care professional; or
- Student's parent/guardian or other person with legal authority to make medical decisions for the student.

Coaches CANNOT Authorize Return to Play: A coach of an interscholastic athletic team may not authorize a student to return to play.

Appointment and Supervision of Individual Responsible for Overseeing Return to Play: The Superintendent or designee shall supervise an athletic trainer or other person responsible for compliance with the Return-to-Play Protocol. The person with supervisory responsibilities may not be a coach of an interscholastic athletic team.

Four Required Steps in Return to Play: A student removed under this section may not be returned to practice or competition until:

- 1. <u>Physician Examination</u>: The student has been evaluated, using established medical protocols based on peer-reviewed scientific evidence, by a treating physician chosen by the student or student's parent/guardian;
- 2. <u>Completion of District's Return-to-Play Protocol</u>: The student has successfully completed each requirement of the Return-to-Play Protocol established under Texas Education Code § 38.153;
- 3. <u>Written Statement from Student's Physician</u>: The treating physician has provided a written statement indicating that, in the physician's professional judgment, it is safe for the student to return to play; and
- 4. <u>Written Acknowledgment Form from Student and Parent</u>: The student and parent/ guardian have acknowledged that the student has completed the requirements of the Return-to-Play Protocol, have provided the treating physician's written statement to the

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