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# OHIO LEGISLATIVE SERVICE COMMISSION

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S.B. 99  
135<sup>th</sup> General Assembly

## Bill Analysis

**Version:** As Introduced

**Primary Sponsor:** Sen. Ingram

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### SUMMARY

- Requires public schools and chartered nonpublic schools, in collaboration with parents or guardians, appropriate licensed healthcare professionals, and school nurses to create an individualized seizure action plan for each enrolled student who is diagnosed with a seizure disorder.
- Requires a school nurse, or other district employee, to coordinate seizure care at the school and ensure that all staff receive training every two years in the care of students with epilepsy and seizure disorders.
- Applies the general law on the administration of drugs to community schools, STEM schools, and college-preparatory boarding schools.
- Entitles the act “Sarah’s Law.”

### DETAILED ANALYSIS

#### Student 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 for each student diagnosed with a seizure disorder. The plan must be created in collaboration with the student’s parent or guardian, appropriate licensed healthcare professionals (preferably neurologists or epileptologists), and school nurses. Each student’s plan must include:

1. A written request signed by a parent, guardian, or other person having care or charge of the student approving the seizure action plan and giving permission for seizure medication to be administered to the student;
2. A written statement detailing all of the following:
  - a. Name and purpose of medication;

- b. The prescribed dosage;
  - c. The route of administration;
  - d. The frequency the medication may be administered; and
  - e. The circumstances under which the medication may be administered.
3. A written notice to staff and volunteers responsible for the direct supervision of the student, including bus drivers, describing the plan and identifying the person or persons who have received training in epilepsy and other seizure disorders, as described below.<sup>1</sup>

### **Staff training requirements**

The bill requires a school nurse, or other district employee if a district does not have a school nurse, to coordinate epilepsy and seizure disorder care at that school and ensure that all staff are trained every two years in the care of students with epilepsy and seizure disorders. The bill specifically states that the term “staff” includes those working with school-sponsored programs outside of the regular school day.<sup>2</sup>

The bill requires that the training include an approved online or in-person course of instruction provided by a nonprofit organization that supports the welfare of individuals with epilepsy and seizure disorders, such as Epilepsy Alliance Ohio or another similar organization as determined by the Department of Education. It further states that any seizure training program on portable media approved by the Department will be provided by the nonprofit entity free of charge.<sup>3</sup>

### **Student attendance**

The bill prohibits preventing a student with a seizure disorder from attending the school the student is entitled to attend under continuing law. However, if a student has an individualized education plan (IEP) or 504 plan that specifies that the student’s health condition requires the student’s care to be provided by a licensed health care professional at a different school, the student must be placed in the school specified in that plan.<sup>4</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 executing duties

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<sup>1</sup> R.C. 3313.713(J)(1).

<sup>2</sup> R.C. 3313.713(J)(2)(a).

<sup>3</sup> R.C. 3313.713(J)(2)(b).

<sup>4</sup> R.C. 3313.713(J)(3); see also R.C. 3323.01, not in the bill, and Section 504 of the “Rehabilitation Act of 1973,” 29 United States Code 794.

under the bill. The immunity does not apply if the execution of duties or omission thereof constitutes willful or wanton misconduct.<sup>5</sup>

## Administration of drugs by schools generally

Besides the new seizure action plan requirement, the bill also makes the current law on the administration of drugs applicable to community schools, STEM schools, and college-preparatory boarding schools. Currently, that law applies only to school districts and chartered nonpublic schools.

That law requires a school to have a general policy on the administration of drugs that have been prescribed for its students. That policy must either (1) prohibit its employees from administering prescription drugs or (2) authorize designated employees to do so. A 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 or school governing authority. Conversely, if a district or school that does not permit the administration of prescription drugs, it must adopt a policy stating that no employee may do so, except as required by federal special education law.<sup>6</sup>

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## HISTORY

Action	Date
Introduced	03-29-23

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<sup>5</sup> R.C. 3313.713(J)(4).

<sup>6</sup> R.C. 3313.713(A) to (I).