

# HOUSE BILL 616

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By: **Delegates Kullen, Branch, Hecht, Love, Murphy, Pena-Melnyk, Proctor, Ramirez, F. Turner, Vallario, and Weldon**  
Introduced and read first time: January 31, 2008  
Assigned to: Ways and Means

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## A BILL ENTITLED

1 AN ACT concerning

2 **Public Schools – Children With Anaphylactic Allergies – Reduction of Risk**

3 FOR the purpose of requiring principals of public schools that have children attending  
4 the schools who have been identified as having certain allergies to take certain  
5 actions to reduce certain risks; making registration of children with certain  
6 allergies at public schools contingent on the receipt of certain information;  
7 requiring school principals to maintain certain files; requiring the development  
8 of certain individual health plans; authorizing public schools to revoke the  
9 authority of certain children to self-administer certain medications; granting  
10 certain immunity to certain individuals under certain circumstances;  
11 authorizing local county boards of education to require parents or guardians to  
12 sign certain hold harmless statements; defining certain terms; and generally  
13 relating to the reduction of risk to the health of children with anaphylactic  
14 allergies in public schools .

15 BY adding to

16 Article – Education

17 Section 7–426.1

18 Annotated Code of Maryland

19 (2006 Replacement Volume and 2007 Supplement)

20 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
21 MARYLAND, That the Laws of Maryland read as follows:

22 **Article – Education**

23 **7–426.1.**

24 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE  
25 MEANINGS INDICATED.

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1           (2) “ANAPHYLAXIS” MEANS A SEVERE, SYSTEMATIC ALLERGIC  
2 REACTION RESULTING IN CIRCULATORY COLLAPSE OR SHOCK THAT MAY BE  
3 FATAL.

4           (3) “EMPLOYEE” MEANS AN INDIVIDUAL WHO IS EMPLOYED BY A  
5 LOCAL BOARD OF EDUCATION, INCLUDING PART-TIME EMPLOYEES,  
6 CERTIFICATED AND NONCERTIFICATED SUBSTITUTE TEACHERS EMPLOYED BY  
7 THE LOCAL BOARD OF EDUCATION FOR AT LEAST 7 DAYS EACH SCHOOL YEAR,  
8 MAINTENANCE WORKERS, AND ADMINISTRATIVE STAFF.

9           (B) THE PRINCIPAL OF A PUBLIC SCHOOL THAT HAS A CHILD  
10 ATTENDING THE SCHOOL WHO HAS BEEN IDENTIFIED TO THE SCHOOL AS  
11 HAVING AN ANAPHYLACTIC ALLERGY SHALL:

12           (1) DEVELOP STRATEGIES TO REDUCE THE RISK OF EXPOSURE  
13 TO ANAPHYLACTIC CAUSATIVE AGENTS IN CLASSROOMS AND COMMON AREAS;

14           (2) DISSEMINATE INFORMATION ON LIFE-THREATENING  
15 ALLERGIES TO PARENTS, GUARDIANS, PUPILS, AND EMPLOYEES OF THE  
16 SCHOOL, INCLUDING NOTICE WITHIN THE SCHOOL IN A CONSPICUOUS PLACE AT  
17 EACH POINT OF ENTRY AND IN THE CAFETERIA STATING THAT A STUDENT IN  
18 THE SCHOOL HAS AN ALLERGY TO PEANUTS OR TREE NUTS;

19           (3) DESIGNATE A PEANUT AND TREE NUT FREE TABLE IN THE  
20 CAFETERIA; AND

21           (4) IN CONSULTATION WITH APPROPRIATE PROFESSIONAL  
22 MEDICAL ORGANIZATIONS, REQUIRE PERIODIC STATE-CERTIFIED TRAINING  
23 REGARDING LIFE-THREATENING ALLERGIES FOR EMPLOYEES AND OTHER  
24 INDIVIDUALS WHO ARE IN DIRECT CONTACT WITH STUDENTS ON A REGULAR  
25 BASIS.

26           (C) (1) REGISTRATION OF A CHILD WITH AN ANAPHYLACTIC ALLERGY  
27 AT A PUBLIC SCHOOL IS CONTINGENT ON THE RECEIPT BY THE SCHOOL OF  
28 RELEVANT MEDICAL INFORMATION REGARDING THE ALLERGY OF THE CHILD.

29           (2) A SCHOOL PRINCIPAL SHALL MAINTAIN FOR EACH CHILD  
30 WITH AN ANAPHYLACTIC ALLERGY A ROUTINELY UPDATED FILE THAT  
31 CONTAINS:

32           (I) CURRENT TREATMENT GUIDELINES;

1                   (II) COPIES OF ANY PRESCRIPTIONS AND PHYSICIAN OR  
2 NURSE INSTRUCTIONS; AND

3                   (III) A CURRENT EMERGENCY CONTACT LIST.

4                   (3) IT IS THE RESPONSIBILITY OF THE PARENT OR GUARDIAN OF  
5 THE CHILD TO ENSURE THAT THE INFORMATION IN THE FILE IS CURRENT.

6                   (D) (1) A SCHOOL PRINCIPAL, IN CONSULTATION WITH THE PARENT  
7 OR GUARDIAN OF THE CHILD, THE CHILD, THE CHILD'S PHYSICIAN, AND ANY  
8 HEALTH CARE PROFESSIONAL EMPLOYED BY THE SCHOOL, SHALL DEVELOP AN  
9 INDIVIDUAL HEALTH PLAN FOR THE CHILD.

10                   (2) EMPLOYEES OF THE SCHOOL SHALL HAVE ACCESS TO THE  
11 PLAN AT ALL TIMES AS PROVIDED IN SUBSECTION (E)(4) OF THIS SECTION.

12                   (E) AN INDIVIDUAL HEALTH PLAN SHALL:

13                   (1) ESTABLISH PROCEDURES FOR NOTIFYING EMPLOYEES WHO  
14 ARE IN DIRECT CONTACT WITH THE CHILD ON A REGULAR BASIS ABOUT  
15 INFORMATION REGARDING THE TYPE OF ALLERGY, MONITORING AND  
16 AVOIDANCE STRATEGIES, AND APPROPRIATE TREATMENT;

17                   (2) ESTABLISH A READILY ACCESSIBLE EMERGENCY RESPONSE  
18 PLAN FOR THE CHILD, INCLUDING:

19                   (I) EMERGENCY CONTACT INFORMATION;

20                   (II) SIGNS AND SYMPTOMS OF ANAPHYLAXIS OR ASTHMA;

21 AND

22                   (III) HOW TO RESPOND TO THE SYMPTOMS, INCLUDING  
23 MEDICATIONS PRESCRIBED AND THEIR DOSAGES;

24                   (3) INCLUDE PRECISE INSTRUCTIONS REGARDING THE STORAGE  
25 OF EPINEPHRINE AUTO-INJECTORS;

26                   (4) ESTABLISH PROCEDURES FOR THE PLACEMENT OF A CHILD'S  
27 PRESCRIBED ANAPHYLAXIS OR ASTHMA MANAGEMENT DEVICE IN A SECURE BUT  
28 UNLOCKED LOCATION EASILY ACCESSED BY SCHOOL EMPLOYEES TO ENSURE  
29 PROMPT ACCESSIBILITY AT SCHOOL, ON A FIELD TRIP, ON A SCHOOL BUS OR  
30 OTHER SCHOOL COORDINATED TRANSPORTATION, OR AT A SCHOOL ACTIVITY  
31 OR EVENT; AND

1           **(5) MEET THE NEEDS OF THE CHILD, INCLUDING PROCEDURES**  
2 **FOR SELF-ADMINISTRATION OF MEDICATION BY THE CHILD, IF THE CHILD IS**  
3 **DETERMINED TO BE CAPABLE AND RESPONSIBLE OF SELF-ADMINISTRATION BY**  
4 **THE PRINCIPAL, PARENT OR GUARDIAN OF THE CHILD, AND PHYSICIAN OF THE**  
5 **CHILD.**

6           **(F) A SCHOOL MAY REVOKE THE AUTHORITY OF A CHILD TO**  
7 **SELF-ADMINISTER MEDICATION, IF THE CHILD ENDANGERS HIMSELF OR**  
8 **HERSELF OR ANOTHER CHILD THROUGH MISUSE OF THE MEDICATION.**

9           **(G) EXCEPT FOR ANY WILLFUL OR GROSSLY NEGLIGENT ACT, AN**  
10 **EMPLOYEE WHO RESPONDS IN GOOD FAITH TO THE ANAPHYLACTIC REACTION**  
11 **OF A CHILD IN ACCORDANCE WITH THIS SECTION IS IMMUNE FROM CIVIL**  
12 **LIABILITY FOR ANY ACT OR OMISSION IN THE COURSE OF RESPONDING TO THE**  
13 **REACTION.**

14           **(H) IF A CHILD HAS AUTHORITY TO SELF-ADMINISTER MEDICATION IN**  
15 **ACCORDANCE WITH SUBSECTION (E) OF THIS SECTION, A LOCAL COUNTY BOARD**  
16 **MAY REQUIRE THE PARENT OR GUARDIAN OF THE CHILD TO SIGN A STATEMENT**  
17 **ACKNOWLEDGING THAT :**

18                   **(1) THE SCHOOL INCURS NO LIABILITY AS A RESULT OF INJURY**  
19 **ARISING FROM ANY SELF-ADMINISTRATION OF MEDICATION BY THE CHILD; AND**

20                   **(2) THE PARENT OR GUARDIAN SHALL INDEMNIFY AND HOLD**  
21 **HARMLESS AN EMPLOYEE OF THE SCHOOL AGAINST ANY CLAIMS ARISING FROM**  
22 **SELF-ADMINISTRATION OF MEDICATION BY THE CHILD.**

23           SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
24 October 1, 2008.