



**COUNCIL OF THE DISTRICT OF COLUMBIA
THE JOHN A. WILSON BUILDING
1350 PENNSYLVANIA AVENUE, NW
WASHINGTON, DC 20004**

November 13, 2023

Nyasha Smith, Secretary
Council of the District of Columbia
1350 Pennsylvania Avenue, NW
Washington, D.C. 20004

Dear Secretary Smith:

Today, along with Chairman Phil Mendelson and Councilmembers Brianne K. Nadeau, Brooke Pinto, Matthew Frumin, Janeese Lewis George, Trayon White, Sr., and Anita Bonds, we are introducing the ***“Seizure-Safe Schools Amendment Act of 2023”***. Please find enclosed a signed copy of the legislation.

Epilepsy is a disease or disorder of the brain which causes reoccurring seizures. There are many different types of seizures and varying levels of seizure control. Some seizures can look like staring spells while other seizures can cause a person to collapse, stiffen or shake, and become unaware of what’s going on around them. According to the Centers for Disease Control and Prevention (“CDC”), approximately 1 in 26 people will develop epilepsy at some point in their lifetime.

While epilepsy can affect people of all ages, children and older adults are more likely to have it. In the District, there are approximately 800 children and teens living with epilepsies. Compared with students with other health concerns, a CDC study shows that students aged 6-17 years with epilepsy were more likely to miss 11 or more days of school in the past year. Furthermore, students with epilepsy were more likely to experience difficulties in school, use special education services, and have activity limitations such as less participation in sports or clubs compared with students with other medical conditions.

For those students with epilepsy, managing epilepsy at school is important to ensure that these students are guaranteed safe and supportive learning environments and have access to necessary care and medication in school settings. The Epilepsy Foundation has launched a nationwide push to pass legislation with that goal in mind. Additionally, the State Board of Education passed a resolution on June 21, 2023 urging the Council to develop and pass legislation that will incorporate tools, training, and resources recommended by the Epilepsy Foundation to

prepare educators for seizures that may occur in their classrooms. This legislation, which 23 other jurisdictions across the country have enacted, would:

- Require at least two teachers or administrators at DCPS, public charter, and private schools be trained in seizure recognition and administering emergency seizure medication;
- Ensure students with epilepsy and other seizure disorders have individualized Seizure Action Plans included in their school files, and that the plans are available to personnel responsible for the students;
- Require schools to provide training every two years to staff on the recognition of the signs and symptoms of seizures and the appropriate steps for seizure first aid;
- Require schools to provide age-appropriate epilepsy and seizure awareness education for all students; and
- Ensure protection from liability for school employees who are tasked with providing emergency seizure first aid to students under the legislation.

Sincerely,

A handwritten signature in blue ink, appearing to read "Charles Allen".


Councilmember Charles Allen, Ward 6


A handwritten signature in blue ink, appearing to read "R.C. White, Jr.".

Councilmember Robert C. White, Jr.


1 
2 Chairman Phil Mendelson


Councilmember Charles Allen


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6 Councilmember Robert C. White, Jr.


Councilmember Brianne K. Nadeau

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10 Councilmember Brooke Pinto


Councilmember Matthew Frumin

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14 Councilmember Janeese Lewis George


Councilmember Trayon White, Sr.

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18 Councilmember Anita Bonds

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20 A BILL
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25 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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30 To amend the Student Access to Treatment Act of 2007 to require the creation of a seizure action
31 plan that is to be made part of the student’s file and made available for school personnel
32 and volunteers responsible for the student, to require that schools have designated
33 personnel who have completed a seizure recognition and first-aid response training, and
34 to educate and train students, school personnel, and volunteers about epilepsy and first-
35 aid response.

36
37 BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this
38 act may be cited as the “Seizure Safe Schools Amendment Act of 2023”.

39 Sec. 2. The Student Access to Treatment Act of 2007, effective February 2, 2008 (D.C.
40 Law 17-107; D.C. Official Code § 38-651.01 *et seq.*), is amended as follows:

41 (a) Section 2 (D.C. Official Code § 38-651.01) is amended by adding a new paragraph
42 (4A) to read as follows:

43 “(4A) “Seizure action plan” means a written, individualized health plan designed
44 to acknowledge and prepare for the health care needs of a student diagnosed with a seizure
45 disorder”.

46 (b) A new section 4a is added to read as follows:

47 “Sec. 4a. Seizure action plan and training requirements.

48 “(a) The responsible person shall submit a seizure action plan to the school for each
49 student diagnosed with a seizure disorder.

50 “(b) A valid seizure action plan shall include:

51 “(1) A written statement or authorization, signed by the student’s health care
52 provider, that states:

53 “(A) The name of the student;

54 “(B) Emergency contact information for the responsible person, or, if the
55 student is 18 years of age or older, another adult suitable to serve as an emergency contact;

56 “(C) Contact information for the health care provider;

57 “(D) The name, purpose, and prescribed dosage of the seizure medications
58 prescribed to the student;

59 “(E) The route of administration for the seizure medication;

60 “(F) The frequency that the seizure medication is to be administered;

61 “(G) The symptoms necessitating administration of the seizure
62 medication; and

63 “(H) In the case of self-administered seizure medication, confirmation that
64 the student has been instructed in the proper technique of self-administration of the seizure
65 medication and has demonstrated the ability to self-administer the seizure medication effectively;

66 “(2) Written authorization, signed by the responsible person, that states:

67 “(A) A trained employee or agent of the school may administer seizure
68 medication to the student in accordance with the student’s seizure action plan;

69 “(B) In the case of self-administration, the student may possess and self-
70 administer the seizure medication in accordance with the student’s seizure action plan; and

71 “(C) The name of the student and their seizure action plan may be
72 distributed to school staff or volunteers who may encounter the student during their time at
73 school; and

74 “(3) Written acknowledgment that the District, a school, or an employee or agent
75 of a school, who has received training in the administration of seizure medication, shall be
76 immune from civil liability for the good-faith performance of responsibilities under this
77 subchapter; except, that no immunity shall extend to criminal acts, intentional wrongdoing, gross
78 negligence, or wanton or willful misconduct.

79 “(c)(1) Beginning on January 1, 2025, each school in the District shall have at least 2
80 employees who have met the training requirements described in subsection (d) of this section.

81 “(2) The presence of a registered nurse employed full-time by a school and who
82 assumes responsibility for the administration of seizure medications, and the administration
83 oversight of vagus nerve stimulation, shall fulfill the requirement in paragraph (1) of this
84 subsection.

85 “(d) For those assigned the duties under subsection (c) of this section, the training shall
86 include:

87 “(1) Instructions on administering or assisting with the self-administration of:

88 “(A) A seizure rescue medication or medication prescribed to treat seizure
89 disorder symptoms as approved by the Food and Drug Administration or any successor agency;
90 and

91 “(B) A manual dose of prescribed electrical stimulation issuing a Vagus
92 Nerve Stimulator magnet as approved by the Food and Drug Administration or any successor
93 agency;

94 “(2) Recognition of the signs and symptoms of seizures and the appropriate steps
95 to be taken to respond to those symptoms.

96 “(e)(1) Each school shall provide training every two years to school personnel and
97 volunteers with direct contact and supervision of children on the recognition of the signs and
98 symptoms of seizures and the appropriate steps for seizure first aid.

99 “(2) The training required in paragraph (1) of this subsection shall be fully
100 consistent with training programs and guidelines by the Epilepsy Foundation of America or any
101 successor organization.

102 “(f)(1) Each school shall provide an age-appropriate seizure education program to
103 students on seizures and seizure disorders.

104 “(2) The training required in paragraph (1) of this subsection shall be fully
105 consistent with the training programs and guidelines published by the Epilepsy Foundation of
106 America or any successor organization.”.

107 Sec. 3. Fiscal impact statement.

108 The Council adopts the fiscal impact statement in the committee report as the fiscal
109 impact statement required by section 4a of the General Legislative Procedures Act of 1975,
110 approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

111 Sec. 4. Effective date.

112 This act shall take effect following approval by the Mayor (or in the event of veto by the
113 Mayor, action by the Council to override the veto), a 30-day period of congressional review as
114 provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December

115 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of
116 Columbia Register.