
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 656 Session of
2025

INTRODUCED BY BARTON, VENKAT, BRENNAN, FREEMAN, HOWARD,
KENYATTA, KHAN, ROWE, WARREN, ZIMMERMAN, BOROWSKI, YOUNG,
WATRO, PROBST, SANCHEZ, KUZMA, MADDEN AND INGLIS,
FEBRUARY 20, 2025

REFERRED TO COMMITTEE ON EDUCATION, FEBRUARY 20, 2025

AN ACT

1 Amending the act of March 10, 1949 (P.L.30, No.14), entitled "An
2 act relating to the public school system, including certain
3 provisions applicable as well to private and parochial
4 schools; amending, revising, consolidating and changing the
5 laws relating thereto," providing for administration of
6 emergency anti-seizure medication.

7 The General Assembly of the Commonwealth of Pennsylvania
8 hereby enacts as follows:

9 Section 1. The act of March 10, 1949 (P.L.30, No.14), known
10 as the Public School Code of 1949, is amended by adding an
11 article to read:

12 ARTICLE XIV-C

13 ADMINISTRATION OF EMERGENCY

14 ANTI-SEIZURE MEDICATION

15 Section 1401-C. Scope of article.

16 This article relates to the administration of emergency anti-
17 seizure medication.

18 Section 1402-C. Legislative findings and intent.

19 The General Assembly finds and declares that:

1 (1) It is the policy of this Commonwealth to promote the
2 health, safety and general welfare of the people by
3 establishing voluntary medical training to treat students
4 with diabetes who are suffering from severe hypoglycemia.

5 (2) It is the policy of this Commonwealth to promote the
6 health, safety and general welfare of the people by
7 permitting a school district or charter school participation
8 in a program to provide, in the absence of a school nurse or
9 other licensed nurse onsite at the school or charter school,
10 emergency medical assistance to students with epilepsy
11 suffering from seizures.

12 (3) In order to meet that goal, it is the intent of the
13 General Assembly that licensed health care professionals
14 train and supervise employees of school districts and charter
15 schools to administer an emergency anti-seizure medication to
16 children with epilepsy in public schools. The American
17 Academy of Pediatrics and the Epilepsy Foundation of America
18 support training of school employees to administer an
19 emergency anti-seizure medication and believe that an
20 emergency anti-seizure medication may be safely and
21 effectively administered by trained school employees.

22 (4) It is the intent of the General Assembly that
23 individuals with exceptional needs and children with
24 disabilities under the Americans with Disabilities Act of
25 1990 (Public Law 101-336, 104 Stat. 327), the Individuals
26 with Disabilities Education Act and section 504 of the
27 Rehabilitation Act of 1973 shall have a right to an
28 appropriate educational opportunity to meet these
29 individuals' unique needs, and that children suffering from
30 seizures due to epilepsy have the right to appropriate

1 programs and services that are designed to meet the
2 children's unique needs.

3 Section 1403-C. Definitions.

4 The following words and phrases when used in this article
5 shall have the meanings given to them in this section unless the
6 context clearly indicates otherwise:

7 "504 plan." A plan created under section 504 of the
8 Rehabilitation Act of 1973.

9 "Department." The Department of Education of the
10 Commonwealth.

11 "Emergency anti-seizure medication." Nasal spray or a
12 similar remedy, vagus nerve stimulator magnets and other
13 nonrectal emergency medications and treatments approved by the
14 United States Food and Drug Administration for patients with
15 epilepsy for the management of seizures by persons without
16 medical credentials as required by the Commonwealth.

17 "Emergency medical assistance." Administration of an
18 emergency anti-seizure medication to a student suffering from an
19 epileptic seizure.

20 "Individuals with Disabilities Education Act." The
21 Individuals with Disabilities Education Act (Public Law 91-230,
22 20 U.S.C. § 1400 et seq.).

23 "Rehabilitation Act of 1973." Rehabilitation Act of 1973
24 (Public Law 93-112, 29 U.S.C. § 701 et seq.).

25 Section 1404-C. Administration of emergency anti-seizure
26 medication.

27 (a) Nurse administration.--Emergency anti-seizure medication
28 may be administered by a school nurse who has been trained in
29 anti-seizure medication administration.

30 (b) Nonmedical employees administration.--

1 (1) In the absence of a school nurse or other licensed
2 nurse onsite at the school or charter school, a school
3 district or charter school may elect to participate in a
4 program to allow nonmedical employees to volunteer to provide
5 emergency medical assistance upon request by a parent or
6 guardian.

7 (2) A school employee with voluntary emergency medical
8 training shall provide emergency medical assistance in
9 accordance with guidelines approved and provided on the
10 department's publicly accessible Internet website and the
11 performance instructions as specified by the licensed health
12 care provider of the student.

13 (c) Exception.--A school employee who does not volunteer or
14 who has not been trained in emergency medical assistance may not
15 be required to provide emergency medical assistance.

16 (d) Parental or guardian request.--

17 (1) If a student with epilepsy has been prescribed an
18 emergency anti-seizure medication by the student's licensed
19 health care provider, the student's parent or guardian may
20 request the student's school to have one or more of the
21 school's employees receive emergency medical assistance
22 training as specified under subsection (e) in the event that
23 the student suffers a seizure when a nurse is not available.

24 (2) Under section 504 of the Rehabilitation Act of 1973,
25 and the Individuals with Disabilities Education Act, upon
26 receipt of the parent's or guardian's request as specified
27 under this subsection, the school or charter school shall
28 notify the parent or guardian that the child may qualify for
29 services or accommodations under a 504 plan or an
30 individualized education program, assist the parent or

1 guardian with the exploration of that option and encourage
2 the parent or guardian to adopt that option if it is
3 determined that the child is eligible for a 504 plan or an
4 individualized education program.

5 (3) The school or charter school may ask the parent or
6 guardian to sign a notice verifying that the parent or
7 guardian was given information about section 504 of the
8 Rehabilitation Act of 1973 and the Individuals with
9 Disabilities Education Act and that the parent or guardian
10 understands the right to request a 504 plan or an
11 individualized education program at any time.

12 (4) If the parent or guardian does not choose to have
13 the student assessed for a 504 plan or an individualized
14 education program, the school or charter school may create an
15 individualized health plan, seizure action plan or other
16 appropriate health plan designed to acknowledge and prepare
17 for the child's health care needs in school. The plan may
18 include the involvement of a trained volunteer school
19 employee or a licensed vocational nurse.

20 (e) Training.--In training employees under this article, the
21 school district or charter school shall ensure that:

22 (1) A volunteer employee receives training from a
23 licensed health care professional regarding emergency medical
24 assistance. If the volunteer employee has not provided
25 emergency medical assistance within the prior two years and
26 there is a student enrolled in the school who may need the
27 administration of an anti-seizure medication, the volunteer
28 employee shall attend a new training program to retain the
29 ability to provide emergency medical assistance.

30 (2) An agreement by an employee to provide emergency

1 medical assistance is voluntary and an employee of the school
2 or charter school, an employee of the school district or the
3 charter school administrator, may not directly or indirectly
4 use or attempt to use the employee's authority or influence
5 for the purpose of intimidating, threatening, coercing or
6 attempting to intimidate, threaten or coerce an employee who
7 does not choose to volunteer, including direct contact with
8 the employee.

9 (3) An employee who volunteers under this section may
10 rescind the employee's offer to provide emergency medical
11 assistance up to three days after the completion of the
12 training. After that time, a volunteer may rescind the
13 volunteer's offer to provide emergency medical assistance
14 with a two-week notice, or until a new individualized health
15 plan or 504 plan has been developed for an affected student,
16 whichever is sooner.

17 (4) The school or charter school shall distribute an
18 electronic notice no more than twice per school year per
19 child to all staff, that states the following information in
20 bold print:

21 (i) A description of the volunteer request, stating
22 that the request is for volunteers to provide emergency
23 medical assistance in the absence of a school nurse, and
24 that the emergency anti-seizure medication is a Food and
25 Drug Administration-approved, predosed, nasal remedy or
26 magnet therapy for those with a vagus nerve stimulator
27 that reduces the severity of epileptic seizures.

28 (ii) A description of the training that the
29 volunteer will receive under paragraph (1).

30 (iii) A description of the voluntary nature of the

1 volunteer program, which includes the information
2 described in paragraph (2).

3 (iv) The volunteer rescission time lines described
4 in paragraph (3).

5 (5) The electronic notice described in paragraph (4)
6 shall be the only means by which a school or charter school
7 solicits volunteers.

8 (f) Timing.--An employee who volunteers as specified under
9 this section may not be required to provide emergency medical
10 assistance until completion of the training program adopted by
11 the school district or charter school, and documentation of
12 completion is recorded in the employee's personnel file.

13 (g) Liability.--If a school district or charter school
14 elects to participate as specified under subsection (b), the
15 school district or charter school shall be immune from liability
16 for the good faith conduct of an employee acting under this
17 section and shall ensure that each employee who volunteers shall
18 be provided defense and indemnification by the school district
19 or charter school for any and all civil liability. This
20 information shall be reduced to writing, provided to the
21 volunteer and retained in the volunteer's personnel file.

22 (h) Accommodations notice.--If there are no volunteers, the
23 school district or charter school shall notify the student's
24 parent or guardian of the option to be assessed for services and
25 accommodations guaranteed under section 504 of the
26 Rehabilitation Act of 1973 and the Individuals with Disabilities
27 Education Act.

28 (i) Creation of program.--A school district or charter
29 school that elects to participate as specified under subsection
30 (b) shall have in place a school district or charter school plan

1 that includes all of the following:

2 (1) Identification of existing licensed staff within the
3 district or region who may be trained in the administration
4 of emergency medical assistance.

5 (2) Identification of students who may require the
6 administration of emergency medical assistance.

7 (3) Written authorization from the parent or guardian
8 for a nonmedical school employee to administer emergency
9 medical assistance.

10 (4) The requirement that the parent or guardian be
11 notified by the school or charter school if the student has
12 had an emergency anti-seizure medication administered within
13 the past four hours on a school day.

14 (5) Notification of the parent or guardian, by the
15 school or charter school administrator or, if the
16 administrator is not available, by another school staff
17 member, that an emergency anti-seizure medication has been
18 administered.

19 (6) A written statement from the student's health care
20 practitioner that includes:

21 (i) The student's name.

22 (ii) The name and purpose of the medication.

23 (iii) The prescribed dosage.

24 (iv) Detailed seizure symptoms, including frequency,
25 type or length of seizures that identify when the
26 administration of emergency medical assistance becomes
27 necessary.

28 (v) The method of administration of anti-seizure
29 medication.

30 (vi) The frequency with which the medication may be

1 administered.

2 (vii) The circumstances under which the medication
3 may be administered.

4 (viii) Any potential adverse responses by the
5 student and recommended mitigation actions, including
6 when to call emergency services.

7 (ix) A protocol for observing the student after a
8 seizure, including whether the student should rest in the
9 school office, whether the student may return to class
10 and the length of time the student should be under direct
11 supervision.

12 (x) Following a seizure, the student's parent or
13 guardian and the school nurse shall be contacted by the
14 school or charter school administrator or, if the
15 administrator is not available, by another school staff
16 member to continue the observation plan as established in
17 subparagraph (ix).

18 (j) Compensation.--A school district or charter school that
19 elects to allow volunteers to provide emergency medical
20 assistance shall compensate a volunteer, in accordance with that
21 employee volunteer's pay scale, when the administration of
22 emergency medical assistance requires a volunteer to work beyond
23 the volunteer's normally scheduled hours.

24 (k) Guidelines.--

25 (1) The department, in consultation with the United
26 States Department of Health and Human Services, shall develop
27 guidelines for the training and supervision of school and
28 charter school employees in providing emergency medical
29 assistance and shall post this information on the
30 department's publicly accessible Internet website by December

1 31, 2025.

2 (2) The guidelines may be developed in consultation with
3 interested organizations.

4 (3) Upon development of the guidelines, the department
5 shall approve the guidelines for distribution and shall make
6 the guidelines available upon request.

7 (1) Best practices.--The department shall include, on the
8 department's publicly accessible Internet website, a
9 clearinghouse for best practices in training nonmedical
10 personnel to provide emergency medical assistance. The following
11 shall apply:

12 (1) Training under this article shall include all of the
13 following:

14 (i) Recognition and treatment of different types of
15 seizures.

16 (ii) Administration of an emergency anti-seizure
17 medication.

18 (iii) Basic emergency follow-up procedures,
19 including a requirement for the school or charter school
20 administrator or, if the administrator is not available,
21 another school staff member to call the emergency 911
22 telephone number and to contact the student's parent or
23 guardian. The requirement for the school or charter
24 school administrator or other school staff member to call
25 the emergency 911 telephone number may not require a
26 student to be transported to an emergency room.

27 (2) Techniques and procedures shall ensure student
28 privacy.

29 (3) Any written materials used in the training shall be
30 retained by the school or charter school.

1 (4) Training under this article shall be conducted by
2 one or more of the following:

3 (i) A physician who holds a license to practice
4 under the act of December 20, 1985 (P.L.457, No.112),
5 known as the Medical Practice Act of 1985, or the act of
6 October 5, 1978 (P.L.1109, No.261), known as the
7 Osteopathic Medical Practice Act.

8 (ii) A physician assistant who holds a license to
9 practice under the Medical Practice Act or the
10 Osteopathic Medical Practice Act.

11 (iii) A school nurse as defined in section 1401.

12 (iv) A registered nurse who holds a license to
13 practice professional nursing under the act of May 22,
14 1951 (P.L.317, No.69), known as The Professional Nursing
15 Law.

16 (5) Training provided in accordance with the
17 manufacturer's instructions, the student's health care
18 provider's instructions and guidelines established as
19 specified under this section shall be deemed adequate
20 training for purposes of this section.

21 (m) Reporting and records.--

22 (1) The school or charter school administrator or, if
23 the administrator is not available, another school staff
24 member shall notify the credentialed school nurse assigned to
25 the school district or charter school if an employee at the
26 school site provides emergency medical assistance.

27 (2) If a credentialed school nurse is not assigned to
28 the school district or charter school, the school or charter
29 school administrator or, if the administrator is not
30 available, another school staff member shall notify the

1 superintendent of the school district or the superintendent's
2 designee and the charter school administrator or the charter
3 school administrator's designee, as appropriate, if an
4 employee at the school site provides emergency medical
5 assistance.

6 (3) A school or charter school shall retain all records
7 relating to the administration of an emergency anti-seizure
8 medication while a student is under the supervision of school
9 staff.

10 (n) Required materials.--The student's parent or guardian
11 shall provide all materials necessary to provide emergency
12 medical assistance. A school or charter school may not be
13 responsible for providing the necessary materials.

14 Section 2. This act shall take effect immediately.