

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 279 Student and Parent Rights
SPONSOR(S): Grimsley and others
TIED BILLS: **IDEN./SIM. BILLS:** SB 890

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) <u>PreK-12 Committee</u>	_____	<u>Howlette</u>	<u>Mizereck</u>
2) <u>Health Care General Committee</u>	_____	_____	_____
3) <u>Civil Justice Committee</u>	_____	_____	_____
4) <u>Education Council</u>	_____	_____	_____
5) _____	_____	_____	_____

SUMMARY ANALYSIS

House bill 279 authorizes severely allergic K-12 students to self-administer epinephrine by auto-injector with parental and physician authorization. The bill requires State Board of Education rules, and provides for indemnification of school districts.

This bill sets an effective date of July 1, 2005.

Substantive Impact

There is presently no statutory authority for students in grades K-12 to self-administer epinephrine. This bill would allow students to self-administer epinephrine with an auto-injector while attending class or participating in a school sponsored activity with parent and physician approval. The State Board of Education in cooperation with the Department of Health would adopt rules for this provision and school districts would be indemnified for any and all liability with respect to the use of epinephrine by auto-injectors.

Fiscal Impact

The bill does not appear to have an impact on state or local revenues.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Provide limited government - The bill provides the State Board of Education, in cooperation with the Department of Health, with rule-making authority.

Safeguard individual liberty - The bill increases the options of students regarding self-administration of epinephrine.

Promote personal responsibility - The bill allows students to assume responsibility for administering epinephrine, and indemnifies school districts from any liability.

Empower families – The bill supports families' efforts to help their students take responsibility for self-administration of medication when a life threatening allergic reaction has occurred.

B. EFFECT OF PROPOSED CHANGES:

Current law does not provide for K-12 students to self-administer epinephrine by auto-injectors in classrooms or while engaged in school activities. This bill would allow certain K-12 students to administer epinephrine with an auto-injector and indemnifies the school district of any and all liability with regard to that administration.

C. SECTION DIRECTORY:

Section 1: Amends s.1002.20, F.S., to add the administration of epinephrine by auto-injector by certain K-12 students.

Section2: Sets an effective date of July 1, 2005.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues: This bill does not appear to have a fiscal impact on state government revenues.
2. Expenditures: This bill does not appear to have a fiscal impact on state government expenditures.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues: This bill does not appear to have a fiscal impact on local government revenues.
2. Expenditures: This bill does not appear to have a fiscal impact on local government expenditures.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

This bill does not appear to have a direct economic impact on the private sector.

D. FISCAL COMMENTS:

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not require a city or county to spend funds or to take any action requiring the expenditure of funds.

2. Other:

B. RULE-MAKING AUTHORITY:

C. DRAFTING ISSUES OR OTHER COMMENTS:

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES