

# Medications for Respiratory Distress on School Campuses

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**Texas Department of State Health Services**

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# Presentation Overview



Overview/introduction to the Asthma Control and School Health Programs



Overview of SB 294 and the impact to medication policy/administration



Asthma resources



Questions?

# Asthma in Texas

- More than 2.3 million adults and children in Texas are living with asthma in 2021.<sup>1</sup>
  - Approximately 451,000 children in Texas have asthma.
- Leading chronic condition among children and one of the leading cause of absenteeism in schools.<sup>2</sup>
- Responsible for over 103,000 emergency department visits and almost 8,100 hospitalizations across Texas in 2022.<sup>3</sup>
  - More than \$1.17 billion was charged to public and private payers for these encounters.<sup>3</sup>
- Unassigned asthma medication was reported to be used 818 times in a school setting for the 2022-2023 school year.<sup>4</sup>

# Texas Asthma Control Program Background

- Statewide activities
  - Created *Strategic Plan for Asthma Control in Texas, 2021-2024*.
  - Texas Asthma Control Collaborative (TACC).
  - Collect and analyze asthma data across the state.
  - Provide educational trainings and resources.
- Implementing CDC's EXHALE framework in target areas:
  - San Antonio Metropolitan Health District.
  - Dallas County Health & Human Services.
  - Harris County Public Health.

# EXHALE Framework

The EXHALE framework<sup>6</sup> is a group of evidence-based strategies to improve asthma control and reduce healthcare costs:

- **E**ducation on asthma self-management (AS-ME).
- **X**-tinguishing smoking and secondhand smoke.
- **H**ome visits for trigger reduction and AS-ME.
- **A**chievement of guidelines-based medical management.
- **L**inkages and coordination of care across settings.
- **E**nvironmental policies or best practices to reduce asthma triggers from indoor, outdoor, and occupational sources.

# EXHALE in Action

- Texas Asthma Control Program contractors have:
  - Provided AS-ME to over 1,100 individuals (mainly children).
  - Provided asthma home visits and AS-ME to over 500 additional children and their families to date.
  - Trained:
    - Over 550 Community Health Workers (CHWs) on asthma home visits.
    - Almost 300 CHWs on tobacco prevention and cessation.
    - Over 330 clinicians on asthma management guidelines.
    - School staff to be AS-ME and vaping prevention curricula facilitators.
  - Worked with multiunit housing complexes to improve smokefree policies.
  - Connected with managed care organizations on improving coverage of asthma services.

# School Health Program (SHP) Background

- The SHP applies the Whole School, Whole Community, Whole Child (WSCC) Model to **promote health and prevent chronic diseases** in schools and beyond.
- We do this by:
  - Providing school health leadership and support; and
  - Developing school health rules and guidance.



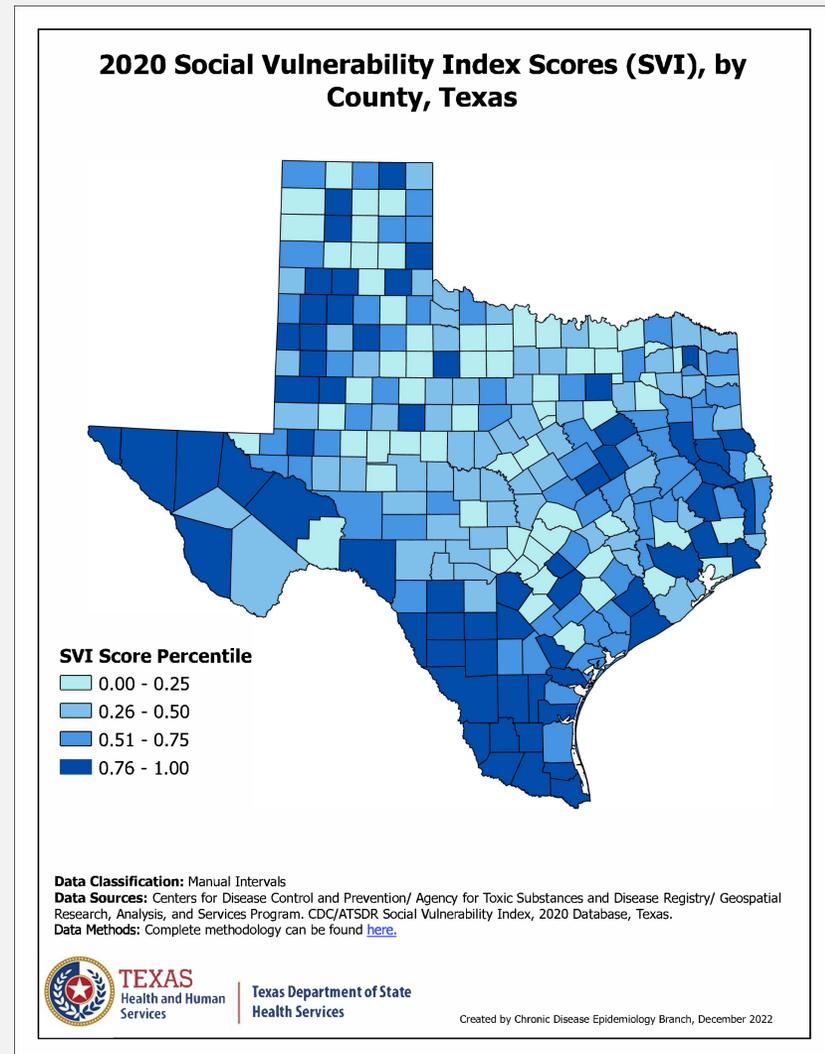
# School Health Program (SHP) Background, cont.

- SHP core functions:
  - Rule implementation and other legislatively required activities
  - Friday Beat
  - School Health Program Advisory Committees
    - Texas School Health Advisory Committee (TSHAC)
    - Stock Epinephrine Advisory Committee (SEAC)
  - Reaching for Excellence Grant
  - School Health guidance
  - Professional development and technical assistance

# CDC Healthy Schools Initiative

The CDC awarded Texas DSHS a 5-year cooperative agreement.

- **Purpose:** to protect and improve the health of children in underserved communities
- **Goals:** increase overall school health by focusing on increasing:
  - the number of schools with an action plan based on completion of School Health Index and
  - school-based health services that support students' chronic health conditions.



# Changes to Medication Policy and Administration

- [Senate Bill 294](#) passed during the 88<sup>th</sup> Regular Legislative Session.
  - Relating to the use of epinephrine auto-injectors and medication designated for treatment of respiratory distress on public and private school campuses.
- Implementation:
  - The SEAC will provide recommendations on training, storage and maintenance.
    - To attend a meeting or provide a public comment, visit the [SEAC webpage](#);
  - DSHS is updating the [unassigned asthma medication rules](#); and
  - Schools that chose to adopt a policy will need to update their maintenance and administration policy requirements of medications for respiratory distress.

# Policy for Schools

- A school district, open-enrollment charter school, and private school **may** adopt and implement a policy regarding the maintenance, administration, and disposal of medication for respiratory distress.
- If a policy is adopted, it must comply with standards in [Texas Education Code, Section 38.208](#).
  - DSHS is in the process of updating [25 Texas Administrative Code, Chapter 40, Subchapter D](#), but it is not necessary to wait to implement the changes required by statute.
    - For updates on the rule process and when they are available for public comment, sign up for the [Friday Beat](#).

# Adopting a Policy on Medications for Respiratory Distress

- Adopting a policy on medications for respiratory distress:
  - Offers protection for vulnerable students and staff;
  - Shortens time before rescue medication is administered; and
  - Reduces absenteeism.
- The American Lung Association's [model policy for school districts](#)
- Asthma 411 [model standing orders](#)

# Policy on Medication for Respiratory Distress

- When creating or revising a policy, schools should seek input from parent/guardians, school personnel, and community members. Schools can also utilize their district's School Health Advisory Council (SHAC).

*The subsequent slides will discuss and identify SB 294 requirements. The slides will be an overview of the changes and are not an all-inclusive list. If your district is revising your policy, the **changes will be red**.*

# Policy on Medication for Respiratory Distress, Cont.

- The policy must cover how your district will the maintain, administer, and dispose of **medications for respiratory distress**.
- The policy must include:
  - General policy requirements;
  - Training and personnel that may administer the medication;
  - Parent/Guardian education and notification;
  - Security and storage of medication; and
  - Reporting requirements.

# General Policy Requirements

- The school district, charter school, or private school, can adopt a policy at each campus or school.
- The policy can't require purchase of medication if it would result in negative fiscal impact on district or school.
- Each campus must have at least one trained school personnel to administer the medication during regular school hours.
- A school personnel member or school volunteer may not be subject to any penalty or disciplinary action for refusing to administer or receive training to administer.
- Medication must be stored in a secure location easily accessible to authorized and trained school personnel.

# Training and Personnel that May Administer the Medication

- The statute allows authorized and trained school personnel and volunteers to administer the medication.
- Each school district, open-enrollment charter school, and private school must train the authorized school personnel and volunteers to administer the medication.
  - Specific training requirements for school personnel and school volunteers in the administration of the medication.
- Each school district, open-enrollment charter school, and private school must maintain records of the training.

# Parent/Guardian Education and Notification

- If a medication is administered to a student with no prior notification of asthma diagnosis, refer student to his/her primary care provider (PCP).
  - If the student does not have PCP, the school must provide the parent/guardian with information on selecting a PCP.
- Requires written notification of the policy to parents/guardians of each student enrolled.

# Required Reporting

- The statute also requires schools to report the use of medication for respiratory distress to:
  - the school district, charter holder, or governing body;
  - the prescribing physician; and
  - DSHS.
- The report to DSHS must be submitted using the electronic reporting form on the [DSHS School Health Program website](#).
- The report must be done within 10 business days after the medication was administered.

# Asthma Resources

## National Resources

- [Allergy & Asthma Network](#)
  - Page on Managing Allergies and Asthma at School.
  - Resources for school staff and parents.
- [Asthma and Allergy Foundation of America](#)
  - Guide on Managing Asthma and Allergies at School targeted towards parents.
- [American Lung Association](#)
  - [Asthma Friendly School](#) assessment.
  - Asthma Self-Management Education curricula.
  - Professional trainings and parent education.
- [Environmental Protection Agency \(EPA\)](#)
  - Guide on Managing Asthma in a School Environment.
  - Focus on improving indoor air quality in schools.

# Asthma Resources, Cont.

## Texas Resources

- [Texas Health Steps Training](#)
  - Free continuing education courses, including ones on asthma.
- [Asthma411 Program](#)
  - Continuing Nurse Education (CNE) training on managing asthma in school age children.
  - Community Health Worker (CHW) training on managing asthma in school age children.
  - [Model standing orders.](#)
- [DSHS Asthma Control Program](#)
  - Resources for schools, providers, parents, and others.
  - Sample asthma action plans.
  - Information on the Texas Asthma Control Collaborative and how to join.
- [DSHS School Health Program](#)
  - Resources for schools
  - Reporting forms for medications for respiratory distress.
  - Friday Beat newsletters.

# References

1. 2021 Texas Behavioral Risk Factor Surveillance System (BRFSS), Center for Health Statistics, Texas Department of State Health Services.
2. Centers for Disease Control and Prevention (2024, February 5). Asthma. *CDC Healthy Schools*. Retrieved from [www.cdc.gov/healthyschools/asthma/index.htm](http://www.cdc.gov/healthyschools/asthma/index.htm)
3. Crude and Age-Adjusted Chronic Obstructive Pulmonary Disease (COPD), Asthma, Child and Adolescent Asthma, and Adult Asthma Hospital Discharge Rates, by Demographic Characteristics, Public Health Region and County, Texas, 2022. Prepared by Chronic Disease Epidemiology Branch, Health Promotion and Chronic Disease Prevention Section, Texas Department of State Health Services
4. Crude and Age-Adjusted Asthma, Child and Adolescent Asthma, and Adult Asthma Emergency Department Visit Rates, by Demographic Characteristics, Public Health Region and County, Texas, 2022. Prepared by Chronic Disease Epidemiology Branch, Health Promotion and Chronic Disease Prevention Section, Texas Department of State Health Services.
5. 2022-2023 Administered Unassigned Asthma Medication in Schools Report. Prepared by Chronic Disease Epidemiology Branch, Health Promotion and Chronic Disease Prevention Section, Texas Department of State Health Services.
6. Hsu J, Sircar K, Herman E, Garbe P. (2018). EXHALE: A Technical Package to Control Asthma. Atlanta, GA: National Center for Environmental Health, Centers for Disease Control and Prevention. [https://www.cdc.gov/asthma/pdfs/EXHALE\\_technical\\_package-508.pdf](https://www.cdc.gov/asthma/pdfs/EXHALE_technical_package-508.pdf)

# Questions?



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# Thank you!

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