

## **HOUSE BILL 13:**

# This Bill Analysis reflects the contents of the bill as it was presented in committee.

# **Amend School Health Assessment Requirement**

2015-2016 General Assembly

**Committee:** Senate Re-ref to Health Care. If fav, re-ref to **Date:** July 20, 2015

Education/Higher Education

Introduced by: Rep. Torbett Prepared by: Theresa Matula

Analysis of: PCS to Third Edition Committee Staff

H13-CSSH-56

SUMMARY: The PCS for House Bill 13 does the following: requires each child entering the public schools for the first time to submit proof of a health assessment; provides that absences due to failure to submit the form are not suspensions and allows students to make up the missed work; specifies the information that can be included on the health assessment transmittal form; specifies who has access to the form; requires a report to the Joint Legislative Oversight Committee on Health and Human Services and Joint Legislative Oversight Committee on Education.

**CURRENT LAW:** G.S. 130A-440 currently requires every child entering kindergarten in the public schools to receive a health assessment. Pursuant to G.S. 130A-441, the health assessment results are submitted on the health assessment transmittal form developed by the Department of Health and Human Services and the Department of Public Instruction.

**BILL ANALYSIS:** <u>Section 1</u> amends the title of Article 18 of Chapter 130A to reflect that under the bill each child entering public school for the first time will be required to have a health assessment, not just those children entering kindergarten. As provided in G.S. 130A-440(d), this Article does not apply to children entering private church schools, schools of religious charter, or qualified nonpublic schools, regulated by Article 39 of Chapter 115C.

<u>Section 2</u> amends G.S. 130A-440 pertaining to the requirement for health assessments. The current law is amended as follows:

- A child entering public school for the first time at any grade will be required to have a health assessment. Currently only those entering kindergarten are required to have a health assessment.
- The statutes are amended in several places to clarify that there is only one health assessment transmittal form and it is the form developed pursuant to G.S. 130A-441.
- No child is eligible for initial entry into kindergarten or higher grade in the public schools unless a health assessment transmittal form is presented to the school principal. If the health assessment transmittal form is not presented on or before the child's first day of attendance, the principal will submit a notice of deficiency to the parent, guardian, or person standing in loco parentis, who will have 30 calendar days from the first day of attendance to present the form. Upon the termination of 30 calendar days, the principal shall not permit the child to attend school until the form has been presented. This is the current process for kindergarten children and the PCS keeps the timeframe at 30 calendar days.

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- The bill provides that a child shall not be suspended for absences accrued for failure to present the health assessment transmittal form and will be allowed to make up work missed in accordance with G.S. 115C-390.2(1) which is contained in Section 4.5 of the bill.
- Consistent with the current law, the health assessment must include a medical history and
  physical examination with screening for vision and hearing and, if appropriate, testing for
  anemia and tuberculosis. The permissive language allowing the health assessment to include
  dental screening and developmental screening has been removed. (The developmental screening
  and kindergarten entry assessment pursuant to G.S. 115C-83.5 remains in place.)
- Changes are made to ensure consistent references in this section to "parent, guardian, or person standing in loco parentis."

<u>Section 3</u> amends G.S. 130A-441 pertaining to reporting the health assessment results. The current law does not define what must be included on the health assessment transmittal form developed by the Department of Health and Human Services and the Department of Public Instruction. The PCS provides that the health assessment transmittal form shall include only the following items:

- 1) A statement that the form will be maintained on file in the school once it has been completed.
- 2) The **name of the school** the student is attending or will attend.
- 3) A **student information section** to be completed by the parent, guardian, or person standing in loco parentis for the student that requires the following about the student: first, middle, and last name; date of birth; sex; race; ethnicity; county of residence; and home address.
- 4) A **parent information section** that includes the following: name of the parent, guardian, or person standing in loco parentis for the student, a telephone number, and space allowing the parent to share any concerns about the student's health with those individuals authorized to have access to the form in subsection (b) of this section.
- 5) A section that includes the following information, if applicable, supplied by a health care provider specified in G.S. 130A-440(c):
  - a. A list of medications prescribed for the student.
  - b. A list of the student's allergies, the type of allergic reaction, and the response required.
  - c. Guidance regarding a special diet for the student.
  - d. Health-related recommendations to enhance the student's school performance.
  - e. Information on whether the student passed a vision screening and any concerns.
  - f. Information on whether the student passed a hearing screening and any concerns.
  - g. An opportunity to indicate whether there are recommendations, concerns, or needs related to the student's health and whether school follow-up is needed.
  - h. An opportunity to provide comments.
- 6) Instructions to the health care provider to attach the student's current immunization record and any of the following applicable school health forms:
  - a. School medication authorization form.
  - b. Diabetes care plan.
  - c. Asthma action plan.
  - d. Health care plans for any other condition for which the school needs to be aware.
- 7) A certification from the health care provider indicating that they conducted a health assessment in accordance with G.S. 130A-440(b) and that the information on the form is accurate and complete to the best of their knowledge.
- 8) The date the health assessment was conducted.

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9) The health care provider's name, signature, telephone and fax number, and the name and address for the health care provider's practice, and a section for the health care provider's stamp.

The PCS amends G.S. 130A-441(b) to provide that health assessment transmittal form will be maintained on file in the school once it has been submitted. A student's official school record shall only reflect whether or not a health assessment form has been received.

Under current law, the health assessment transmittal form is open to inspection by the DHHS, DPI, or their authorized representatives and persons. The PCS provides that the health assessment transmittal form is open to inspection only by "authorized North Carolina public school administrators, teachers, and other school personnel who require such access to perform their assigned duties, and by authorized employees of the Department of Health and Human Services who require such access to perform their assigned duties." The PCS further specifies that, "Information contained on the health assessment transmittal form is confidential and is not a public record within the meaning of G.S. 132-1."

<u>Section 4.5</u> amends G.S. 115C-390.2 pertaining to disciplinary policies in order to conform to changes in Section 2 of the bill pertaining to student absences as a result of not submitting the health assessment transmittal form within the required time period.

<u>Section 5</u> of the PCS requires the Department of Health and Human Services and the Department of Public Instruction to develop a health assessment transmittal form in accordance with the bill and report to the Joint Legislative Oversight Committee on Health and Human Services and the Joint Legislative Education Oversight Committee by December 1, 2015.

**EFFECTIVE DATE:** Sections 1-4.5 of the bill would become effective when they become law and apply to children enrolling in the public schools for the first time beginning with the 2016-17 school year. The remainder of the act is effective when it becomes law.