

Excerpts from the California Education Code and the California Health and Safety Code

Required level of school health services to students

Law Section #: EC49427

School boards and county superintendents of schools are to maintain fundamental school health services at a level that preserves students' ability to learn, fulfills existing state student health requirements and policies, and contains health care costs through preventive programs and education. The legislature also recognizes that the current caseloads in public schools may be jeopardizing the provision of these services and that failure to maintain them at an adequate level may result in students' poorer health and ability to learn.

Specialized Physical Health Care Services

Law Section #: EC49423.5

Assembly Bill 1667 (AB 1667) amended Section 49423.5 of the California Education Code, which permits individuals with exceptional needs requiring specialized physical health care services, including catheterization, gastric tube feeding, suctioning or other services, to be assisted by certain specified individuals. AB 1667 amends this provision to provide that specialized physical health care services may be provided by qualified designated school personnel under the supervision, as defined by Section 3051.12 of Title 5 of the California Code of Regulations, of a credentialed school nurse or licensed physician or surgeon upon determination, in consultation with the treating physician, that the services meet all of the following specified requirements:

(A) Routine for the student.

(B) Pose little potential harm for the student.

(C) Performed with predictable outcomes, as defined in the individualized education program of the student

(D) Does not require a nursing assessment, interpretation, or decision making by the designated school personnel.

These qualified designated personnel must be trained in CPR and be knowledgeable of the emergency medical resources in the community. AB 1667 also provides that nothing in the amendment will cause the placement of individuals with exceptional needs at school sites other than those they would have attended but for their needs for specialized physical health care services.

Administration of prescribed medication for students

Law Section #: EC49423 - EC49423.1

Any student that is required to take prescribed medication during the regular school day may be assisted by a school nurse or designated school personnel. In order for the student to be assisted, the school district shall receive a written statement from the student's doctor with the medication name, amount used, method and schedule of administration, together with a written statement from the parent, foster parent, or guardian requesting that the school assist the student according to the doctor's instructions.

A student may also carry and self-administer prescribed auto-injectable epinephrine or inhaled asthma medication if the school district obtains a written statement from the student's doctor with

(a) the medication name, amount used, method and schedule of administration; (b) a written confirmation that the student is able to self-administer the medication; (c) a statement from the parent, foster parent, or guardian providing a release to designated school personnel to consult with the student's health care provider regarding taking the medication; and (d) a release of the school district and personnel from civil liability related to any adverse reaction to the self-administered medication. A student may be subject to disciplinary action if the medication is used in any manner other than prescribed.

The above statements shall be provided annually or when the medication or administration of a medication changes.

Physical examinations

Law Section #: EC49451 - EC49457

The parent/guardian of any student in the public schools may file annually with the principal, a written, signed statement denying consent for the child to undergo a physical examination, and the child will thereupon be exempt from such examinations. However, if there is reason to believe that the child has an infectious or contagious disease, the child will be sent home and not permitted to return to school until school authorities are satisfied that the child does not have a contagious or infectious disease.

School boards may provide for sight and hearing testing of students in their districts. School boards may provide for the scoliosis screening of every female student in grade 7 and every male student in grade 8. Specifications regarding reexamination, notification of results, and liability immunity are described.

Every child in a California elementary school is to have his or her vision appraised by the school nurse at least every third year until the completion of the eighth grade. Color vision, however, shall go in the child's health record. The evaluation may be waived if the child's parents desire and if they document that a physician or optometrist has already done the appraisal and provides the appropriate results. Also, the testing is not to be done if the parent/guardian has indicated in writing that such testing violates the parent's religious beliefs. If a problem has been noted, a report will be made to the parent/guardian, along with a request that corrective action be taken. Reporting and referral specifications are described.

Mandatory oral health assessment

Law Section #: EC49452.8

Assembly Bill 1433 (AB 1433) added Section 49542.8 to the California Education Code, requiring that all students enrolled in kindergarten or first grade (if not previously enrolled in kindergarten) must provide proof of having received an oral health assessment (dental exam) by a licensed dentist or dental health professional, that was performed no earlier than 12 months prior to the date of initial enrollment of the student. The proof must be presented no later than May 31 of the school year. Districts must inform parents and guardians of this requirement, give contact information for government-subsidized health insurance and county public health departments, and highlight the importance of oral health. Parents or guardians may request a waiver from this requirement for the following reasons: 1) completion of an assessment poses an undue financial burden on the parent or legal guardian, 2) lack of access by the parent or legal guardian to a licensed dentist or other

licensed or registered dental health professional, or 3) the parent or legal guardian does not consent to an assessment.

Immunization requirements for school admission

Law Section #: HSC120325- HSC120380

School districts will require full immunization for admission to any private or public elementary or secondary school, child care center, day nursery, nursery school, family day care home, or development center. Districts will conditionally admit a student unless prior to his or her first admission s/he has been fully immunized. The following are the diseases for which full immunization shall be required for unconditional school admission:

- Diphtheria.
- Haemophilus influenzae type b, except for children aged four years and six months or older.
- Measles.
- Mumps, except for children who have reached the age of seven years.
- Pertussis (whooping cough), except for children aged seven years or older.
- Poliomyelitis.
- Rubella.
- Tetanus.
- Hepatitis B for all children entering at the kindergarten level or below on or after August 1, 1997, or for all children entering 7th grade on or after July 1, 1999.
- Varicella (chickenpox) for all children entering at the kindergarten level or below on or after July 1, 2001.
- Any other disease that is consistent with the most current recommendations of the Centers for Disease Control Immunization Practices Advisory Committee and the American Academy of Pediatrics Committee of Infectious Diseases, and deemed appropriate by the California Department of Health Services (CDHS).

School districts may admit a student on condition that within time periods designated by regulation of CDHS, s/he presents evidence that s/he has been fully immunized against these diseases. If a conditionally admitted student fails to meet immunization requirements within the indicated time period, s/he may be excluded from school. Exemptions from immunization are allowed for medical reasons, as documented by a licensed physician, or because of personal beliefs, with a signed affidavit from the parent or guardian. Districts must notify parents and guardians of immunization requirements, maintain immunization records on all students, and report district immunization data to CDHS and the local health department(s).

Liability for treatment of students

Law Section #: EC49407

No school district, officer of any school district, school principal, physician, or hospital treating any student will be held liable for the reasonable treatment of the child without the consent of the child's parent/guardian when the child is ill or injured during regular school hours, requires reasonable medical treatment, and the parent/guardian cannot be reached, unless the parent/guardian has filed a written objection to medical treatment other than first aid.

To review more related school health laws, see the California Healthy Kids Resource Center's website: <http://www.californiahealthykids.org/c/@uGnvJUTaOs7jg/Pages/laws.html>