82nd OREGON LEGISLATIVE ASSEMBLY--2023 Regular Session

House Bill 2644

Sponsored by Representative LEVY B, Senator HANSELL (Presession filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Directs school districts to have policy to respond to mental health needs of students who may have been subjected to abuse.

Requires school districts to provide physical examinations, vision screening, dental screening and mental health screening within 120 days of first day of school.

Prohibits public and private education providers in kindergarten through grade 12 from requiring disclosure of student’s medical history as condition of student attending school.

A BILL FOR AN ACT


Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 329.603 is amended to read:

ORS 329.603. (1) Each school district must provide a coordinated comprehensive school counseling program to support the academic, career, personal and social and social-emotional development of each student and to develop the sense of community involvement for each student.

(2) A coordinated comprehensive program may be designed, delivered or otherwise implemented by:

(a) A person who is licensed by the Teacher Standards and Practices Commission as a school counselor;

(b) A person who is licensed by the commission as a school social worker; or

(c) Any combination of persons qualified to implement the program, as determined under rules adopted by the State Board of Education.

(3) As part of the coordinated comprehensive school counseling program, each school district must have a policy that provides for the school district to respond to the mental health needs of a student who may have been subjected to abuse. The policy must provide that the school district:

(a) Designate at least one person, and an alternate person, who is licensed as a school counselor or a school social worker to receive and respond to reports of suspected abuse of students in the school district.

(b) Require employees of the school district to report to a person designated under paragraph (a) of this subsection any suspected abuse of a student. Any reports made under this paragraph are in addition to, and not in lieu of, reports required under ORS 419B.010.

(c) Require a person designated under paragraph (a) of this subsection to coordinate with any school counselors or school social workers serving the school the student attends to provide any necessary ongoing mental health services to the student.

(d) Identify school employees, including the persons designated under paragraph (a) of

NOTE: Matter in boldfaced type in an amended section is new; matter in italic and bracketed is existing law to be omitted. New sections are in boldfaced type.

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this subsection, who will receive specialized training in responding to the mental health
needs of a student who may have been subjected to abuse.

[(3)] (4) Nothing in this section may be construed to allow a person, including but not limited
to a licensed school social worker:

(a) Who is licensed by the commission to practice outside of the scope of the person’s license;
or

(b) To practice within the scope of a license not held by that person.

SECTION 2. ORS 332.111 is amended to read:

332.111. A district school board in a school district may enter into agreements to provide aux-
iliary services and facilities to students, including but not limited to forms of residential care and
medical and dental services not required to be provided under section 3 of this 2023 Act. Any
facility used for residential purposes under this section must meet the applicable standards of the
Oregon Health Authority and the State Fire Marshal.

SECTION 3. (1) Within 120 days of the beginning of each school year, each school district
shall coordinate with local health care providers and the education service district that
serves the school district to ensure that every student receives:

(a) A physical examination.

(b) If applicable, the physical examination required prior to participation in extracurric-
ular sports, as provided by ORS 336.479.

(c) A vision screening, as provided by ORS 336.211.

(d) A dental screening, as provided by ORS 336.213.

(e) A mental health screening, as provided by ORS 336.216.

(f) Any other procedures required to check the mental and physical health of a student,
as determined by the school district.

(2) At least two weeks before a school district causes an examination or a screening to
be conducted as provided by this section, the school district must provide written notice of
the examination or screening to the parent or guardian of each student for whom the ex-
amination or screening will be conducted.

(3) The notice required by subsection (2) of this section must:

(a) Explain that either a student or a parent or guardian of a student has the right to
request in writing that the student not participate in the examination or screening;

(b) Explain that, on the day of the examination or screening, a student or a parent or
guardian of a student may request, orally or in writing, that the student not participate in
the examination or screening;

(c) Explain who will administer the examination or screening and who will have access
to the results of examination or screening; and

(d) Meet any other requirements established by the State Board of Education by rule.

SECTION 4. ORS 336.479 is amended to read:

336.479. (1) As used in this section, “participation” means participation in sports practices and
actual interscholastic sports competition.

(2) Each school district shall require students who participate in extracurricular sports in
grades 7 through 12 in the schools of the district to have a physical examination prior to partic-
ipation.

(3) Each school district shall make a physical examination available as provided by sec-
tion 3 of this 2023 Act. If a student, or the parent or guardian of a student, elects to not have
a physical examination as provided by section 3 of this 2023 Act, the student, parent or 
guardian shall ensure that the student receives a physical examination from a health care 
provider identified in subsection (7) of this section for the purpose of complying with the 
requirements of this section.

(4) A person conducting the physical examination shall use a form and protocol prescribed by 
rule of the State Board of Education pursuant to subsection [(6)] (8) of this section.

[(3)] (5) A school district shall require students who continue to participate in extracurricular 
sports in grades 7 through 12 to have a physical examination once every two years.

[(4)] (6) Notwithstanding subsection [(3)] (5) of this section, a school district shall require a 
student who is diagnosed with a significant illness or has had a major surgery to have a physical 
examination prior to further participation in extracurricular sports.

[(5)] (7) Any physical examination required by this section shall be conducted by a:
(a) Physician possessing an unrestricted license to practice medicine;
(b) Licensed naturopathic physician;
(c) Licensed physician assistant;
(d) Licensed nurse practitioner; or
(e) Licensed chiropractic physician who has clinical training and experience in detecting 
cardiopulmonary diseases and defects.

[(6)] (8) The State Board of Education shall by rule prescribe the form and protocol to be used 
for physical examinations required by this section.

SECTION 5. ORS 336.211 is amended to read:

336.211. (1) As used in this section:
(a) “Education provider” means:
(A) An entity that offers a program that is recognized as an Oregon prekindergarten program 
under ORS 329.170 to 329.200.
(B) A school district board.
(b) “Eye examination” means an eye examination that:
(A) Is conducted by a person licensed by the Oregon Board of Optometry under ORS 683.010 to 
683.340 or a person licensed by the Oregon Medical Board under ORS chapter 677 and trained in 
eye surgery and eye disease; and
(B) Involves any diagnosis of the eye and any measurement or assistance of the powers or range 
of vision of the eye.
(c) “Vision screening” means an eye screening test to identify potential vision health problems 
that is conducted by a person who is:
(A) Licensed by the Oregon Board of Optometry under ORS 683.010 to 683.340;
(B) Licensed by the Oregon Medical Board under ORS chapter 677 and trained in eye surgery 
and eye disease;
(C) A health care practitioner acting in accordance with rules adopted by the State Board of 
Education; or
(D) A school nurse, an employee of an education provider or a person or nonprofit entity des-
ignated by the Department of Education to provide vision screening to students who is acting in 
accordance with rules adopted by the State Board of Education.

(2) Each school district shall make a vision screening available as provided by section 3 
of this 2023 Act. If a student, or the parent or guardian of a student, elects to not have a 
vision screening as provided by section 3 of this 2023 Act, the student, parent or guardian
shall ensure that the student receives any necessary vision screenings to comply with the provisions of this section.

[(2)(a)] (3)(a) Except as provided in subsection [(3)] (4) of this section, each education provider shall require a student who is seven years of age or younger and who is beginning an educational program with the education provider for the first time to submit certification that the student received:

(A) A vision screening or an eye examination; and
(B) Any further examinations or necessary treatments of the eye or assistance of the powers or range of vision of the eye.

(b) The certification required by this subsection must be provided no later than 120 days after the student begins the educational program.

[(3)] (4) A student is not required to submit certification as required under subsection [(2)] (3) of this section if the student provides a statement from the parent or guardian of the student that:

(a) The student submitted certification to a prior education provider; or
(b) The vision screening or eye examination is contrary to the religious beliefs of the student or the parent or guardian of the student.

[(4)] (5) Each education provider shall:

(a) Ensure that the requirements of this section are met. Failure by a student to meet the requirements of this section may not result in a program's or school's prohibiting the student from attending the program or school, but may result in withholding report cards or similar actions.
(b) File in the student's vision health record any certifications and any results of a vision screening or an eye examination known by the education provider.
(c) Provide the parent or guardian of each student with information about the vision screenings and eye examinations, and information about further examinations or necessary treatments.

[(5)(a)] (6)(a) Upon application of a person that provides students with vision screenings, the Department of Education shall reimburse the person for any necessary expenses incurred by the person in the provision of the vision screenings.

(b) A person may receive reimbursement under this subsection for the provision of a vision screening to any student of an education provider, regardless of whether the student has complied with subsection [(2) or (3)] (3) or (4) of this section. Nothing in this paragraph removes the requirement that a student must comply with subsection [(2) or (3)] (3) or (4) of this section.

(c) Reimbursements made under this subsection:

(A) May not exceed $3.20 per vision screening per student per school year.
(B) Must be paid from the Vision Health Account established under ORS 336.212.
(C) May not exceed amounts available in the Vision Health Account.

[(6)(a)] (7)(a) The State Board of Education, in consultation with the Oregon Health Policy Board, shall adopt by rule any standards for the implementation of this section.
(b) The State Board of Education shall adopt rules that:

(A) Prescribe the process by which a person or nonprofit entity is designated by the Department of Education to provide vision screenings; and
(B) Establish the process for providing reimbursements under subsection [(5)] (6) of this section, including the prioritization of persons to receive a reimbursement if the total amount available for reimbursements exceeds the total amount requested for reimbursements.

SECTION 6. ORS 336.212 is amended to read:

336.212. (1) The Vision Health Account is established in the State Treasury, separate and dis-
tinct from the General Fund. Interest earned by the account shall be credited to the account.

(2) Moneys in the account are continuously appropriated to the Department of Education to make reimbursements for expenses incurred for the provision of vision screenings, as described in ORS 336.211 (5) (6).

(3) The department, on behalf of the State of Oregon, may solicit and accept gifts, grants and donations from public and private sources for the provision of vision screenings. Moneys received under this subsection shall be deposited into the account.

(4) From the moneys appropriated by the Legislative Assembly to the account each biennium, the department may retain no more than a total of 10 percent of the moneys for administrative expenses incurred by the department in making reimbursements.

SECTION 7, ORS 336.214 is amended to read:

336.214. (1) As used in this section:

(a) “Dental screening” has the meaning given that term in ORS 336.213.

(b) “Prekindergarten program” means a program that is recognized as an Oregon prekindergarten program under ORS 329.170 to 329.200.

(2) A school district or prekindergarten program shall cause a dental screening to be conducted of all of the students in one or more classrooms or in one or more grades where the students are 14 years of age or younger. The school district or prekindergarten program must provide the students or the parents or guardians of the students an opportunity to request not to participate in the dental screening as described in this section, for students in prekindergarten programs, and section 3 of this 2023 Act, for students in school districts.

(3) At least two weeks before a school district or prekindergarten program causes a dental screening of all of the students in one or more classrooms or in one or more grades where the students are 14 years of age or younger, the school district or prekindergarten program must provide written notice of the dental screening to each student for whom the dental screening will be conducted.

(4) The notice required by subsection (3) of this section must:

(a) Explain that either a student or a parent or guardian of a student has the right to request in writing that the student not participate in the dental screening;

(b) Explain that, on the day of the dental screening, a student or a parent or guardian of a student may request, orally or in writing, that the student not participate in the screening;

(c) Explain who will administer the dental screening and who will have access to the results of screening; and

(d) Meet any other requirements established by the State Board of Education by rule.

(5) This section does not authorize a school district or a prekindergarten program to cause a dental screening to be conducted on an individual student who is 14 years of age or younger without first receiving the written consent of a parent or guardian of the student if the dental screening is not conducted as part of a dental screening of all students in one or more classrooms or one or more grades.

SECTION 8, ORS 336.216 is amended to read:

336.216. (1) Each school district shall make a mental health screening available as provided by section 3 of this 2023 Act. If a student, or the parent or guardian of a student, elects not to have a mental health screening as provided by section 3 of this 2023 Act, the student, parent or guardian shall ensure that the student receives any necessary mental health screenings to comply with the provisions of this section.
(1) When a school district causes to be conducted a mental health screening of all of the students in one or more classrooms or all of the students in one or more grades, the school district must allow the student or the parents or legal guardians of the student to request that the student not participate in the mental health screening.

(2) At least two weeks prior to a school district causing a mental health screening to be conducted of all of the students in one or more classrooms or all of the students in one or more grades, the school district shall mail written notice of the mental health screening to the last-known address of the family of the student.

(3) The notice provided under subsection (2) of this section must:

(a) Explain that either a student or a parent or a legal guardian of a student has the right to request in writing that the student not participate in the mental health screening;

(b) Explain that, on the day of the mental health screening, a student or a parent or a legal guardian of a student may request, orally or in writing, that the student not participate in the screening;

(c) Explain who will administer the mental health screening and who will have access to the results of the screening; and

(d) Meet any other requirements established by the State Board of Education by rule.

(4) The results of a mental health screening that is described in subsection (1) of this section may not be included in the education records of the student.

(5) Nothing in this section allows a school district to cause a mental health screening to be conducted for an individual student without first receiving the written consent of a parent or legal guardian of the student if the screening is not conducted as part of a screening of all students in one or more classrooms or all students in one or more grades.

(6) Nothing in this section alters the rights of a child with a disability who is eligible for special education or the rights of a child who may have a disability, as those rights are provided in ORS chapter 343. Any evaluations conducted for the purpose of evaluation, reevaluation or placement for special education must meet the consent requirements of ORS 343.164.

SECTION 9. (1) Section 3 of this 2023 Act and the amendments to ORS 332.111, 336.211, 336.212, 336.214, 336.216 and 336.479 by sections 2 and 4 to 8 of this 2023 Act become operative on July 1, 2024.

(2) Section 3 of this 2023 Act and the amendments to ORS 332.111, 336.211, 336.212, 336.214, 336.216 and 336.479 by sections 2 and 4 to 8 of this 2023 Act first apply to the 2024-2025 school year.

SECTION 10. (1) As used in this section, “education provider” means a school, as defined in ORS 433.235.

(2) An education provider may not condition a student’s attendance at a school on the disclosure of the student’s medical history to the education provider.

(3) An education provider shall ensure that whenever a student’s medical history is requested, including as provided by ORS 336.211, 336.213 or 433.267, the education provider provides written notice that explains that failure to provide the medical history cannot make the student ineligible to attend the school.

(4) When a student’s medical history is requested for the purpose of providing educational services to a student, an education provider shall provide written notice that the disclosure:

(a) Is voluntary and that failure to disclose does not make a student ineligible to attend
the school;
(b) May be limited to only information required for educational purposes; and
(c) Does not need to include the student’s complete medical history.
(5) Nothing in this section prevents an education provider from requiring a student to:
(a) Provide information related to, or needed for, the administration of medication under
ORS 339.866 or 339.869;
(b) Have a physical examination as a condition for participating in extracurricular sports,
as provided by ORS 336.479; or
(c) Provide a medical release after exhibiting signs, symptoms or behaviors consistent
with a concussion or being diagnosed with a concussion, as provided by ORS 336.485.

SECTION 11. ORS 433.240 is amended to read:
433.240. [(1)] In adopting ORS 433.235 to 433.284, the Legislative Assembly recognizes the obli-
gation of parents to have their children properly immunized and to provide to [schools and] facilities
accurate records of immunization.
[(2) Notwithstanding ORS 339.030, nothing in ORS 433.235 to 433.284 operates to remove parental
liability under compulsory attendance laws.]

SECTION 12. ORS 433.255 is amended to read:
433.255. Except in strict conformity with the rules of the Oregon Health Authority, no child or
employee shall be permitted to be in any school or children’s facility when:
(1) That child or employee has any restrictable disease;
(2) That child or employee comes from any house in which exists any restrictable disease; or
(3) For a children’s facility, that child has been excluded as provided in ORS 433.267 (5) or (7).

SECTION 13. ORS 433.267 is amended to read:
433.267. (1) As a condition of attendance in any [school or] children’s facility in this state, every
child through [grade 12] kindergarten shall submit to the administrator, unless the [school or] fa-
cility the child attends already has on file a record that indicates that the child has received im-
uminations against the restrictable diseases prescribed by rules of the Oregon Health Authority as
provided in ORS 433.273, one of the following:
(a) A document signed by the parent, a practitioner of the healing arts who has within the scope
of the practitioner’s license the authority to administer immunizations or a representative of the
local health department certifying the immunizations the child has received;
(b) A document signed by a physician or a representative of the local health department stating
that the child should be exempted from receiving specified immunization because of indicated med-
cal diagnosis; or
(c) A document, on a form prescribed by the authority by rule and signed by the parent of the
child, stating that the parent is declining one or more immunizations on behalf of the child. A doc-
ument submitted under this paragraph:
(A) May include the reason for declining the immunization, including whether the parent is de-
cling the immunization because of a religious or philosophical belief; and
(B) Must include either:
(i) A signature from a health care practitioner verifying that the health care practitioner has
reviewed with the parent information about the risks and benefits of immunization that is consistent
with information published by the Centers for Disease Control and Prevention and the contents of
the vaccine educational module approved by the authority pursuant to rules adopted under ORS
433.273; or
(ii) A certificate verifying that the parent has completed a vaccine educational module approved by the authority pursuant to rules adopted under ORS 433.273.

[(2)(a)] (2) A newly entering child or a transferring child shall be required to submit the document described in subsection (1) of this section prior to attending the [school or] facility.

[(b) Notwithstanding paragraph (a) of this subsection, a child transferring from a school in the United States must submit the document required by subsection (1) of this section not later than the exclusion date set by rule of the authority.]

(3) Persons who have been emancipated pursuant to ORS 419B.558 or who have reached the age of consent for medical care pursuant to ORS 109.640 may sign those documents on their own behalf otherwise requiring the signatures of parents under subsection (1) of this section.

(4) The administrator shall conduct a primary evaluation of the records submitted pursuant to subsection (1) of this section to determine whether the child is entitled to begin attendance by reason of having submitted a document that complies with the requirements of subsection (1) of this section.

(5) If the records do not meet the initial minimum requirements established by rule, the child may not be allowed to attend until the requirements are met. If the records meet the initial minimum requirements, the child shall be allowed to attend.

(6) At the time specified by the authority by rule, records for children meeting the initial minimum requirements and records previously on file shall be reviewed for completion of requirements by the administrator to determine whether the child is entitled to continue in attendance. If the records do not comply, the administrator shall notify the local health department and shall transmit any records concerning the child’s immunization status to the local health department.

(7) The local health department shall provide for a secondary evaluation of the records to determine whether the child should be excluded for noncompliance with the requirements stated in subsection (1) of this section. If the child is determined to be in noncompliance, the local health department shall issue an exclusion order and shall send copies of the order to the parent or the person who is emancipated or has reached the age of majority and the administrator. On the effective date of the order, the administrator shall exclude the child from the [school or] facility and not allow the child to attend the [school or] facility until the requirements of this section have been met.

(8) The administrator shall readmit the child to the [school or] facility when in the judgment of the local health department the child is in compliance with the requirements of this section.

(9) The administrator shall be responsible for updating the document described in subsection (1)(a) of this section as necessary to reflect the current status of the immunization of the child and the time at which the child comes into compliance with immunizations against the restrictable diseases prescribed by rules of the authority pursuant to ORS 433.273.

(10) Nothing in this section shall be construed as relieving agencies, in addition to school districts, which are involved in the maintenance and evaluation of immunization records on April 27, 1981, from continuing responsibility for these activities.

(11) All documents required by this section shall be on forms approved or provided by the authority.

(12) In lieu of signed documents from practitioners, the authority may accept immunization record updates using practitioner documented immunization records generated by electronic means or on unsigned practitioner letterhead if the authority determines such records are accurate.

(13) As used in this section:

(a) “Newly entering child” means a child who is initially attending:
(A) A facility in this state; or

[(B) A school at the entry grade level;]

[(C) Either a school at any grade level or A facility from homeschooling; or]

[(D)] [B) A school at any grade level or] A facility after entering the United States from another
country.

(b) “Transferring child” means a child moving from[::]

[(A)] one facility to another facility,[::]

[(B) One school in this state to another school in this state when the move is not the result of a
normal progression of grade level; or]

[(C) A school in another state to a school in this state.]

SECTION 14. ORS 433.269 is amended to read:

433.269. (1) A local public health authority shall ensure that immunizations required under ORS
433.282 and 433.283 and the rules adopted pursuant to ORS 433.273 for attendance at a [school,]
children’s facility or post-secondary educational institution are available through local health care
providers or the local public health authority or its contractors:

(a) To the entire population of the area served by the local public health authority in convenient
areas and at convenient times.

(b) Regardless of whether a child or student is able to pay for the immunization.

(2)(a) Each local public health authority, school and children’s facility shall report annually to
the Oregon Health Authority on:

(A) The number of children in the area served by the local public health authority, school or
children’s facility; and

(B) The number of children in the area served by the local public health authority, school or
children’s facility who are susceptible to restrictable disease as prescribed by the Oregon Health
Authority’s rules pursuant to ORS 433.273.

(b) Each school and children’s facility shall report annually to the Oregon Health Authority
on the number of children in the area served by the school or children’s facility who are in at-
tendance at the school or children’s facility conditionally because of an incomplete immunization
schedule.

(c) Each local public health authority shall make available to each school and children’s facility in the area served by the local public health authority data on the immunization rate, by disease, of children in the area. Upon request, the Oregon Health Authority shall assist local public health
authorities in compiling data for purposes of this paragraph.

(d) A child exempted under ORS 433.267 is susceptible to restrictable disease for purposes of this
subsection.

(3)(a) For the purpose of providing parents with the information necessary to protect their
children’s health, each school and children’s facility shall make available the information reported
and received by the school and children’s facility pursuant to subsection (2) of this section:

(A) At the main office of the school or children’s facility;

(B) On the school’s or school district’s website or on

(C) To the parents of the children who attend the school or children’s facility, in the form of
a paper document or electronic communication that includes the information in a clear and easy to
understand manner.

(b) The information required to be made available under paragraph (a) of this subsection must
be made available \textit{at the beginning of each school year and} not later than one month after the date that children may be excluded as provided by ORS 433.267.

(4) The administrator of a \textit{school or} children's facility shall maintain immunization records of children, including children who are in attendance at the \textit{school or} children's facility conditionally because of an incomplete immunization schedule and children who are exempted as described in ORS 433.267 (1)(b) and (c).

\textbf{SECTION 15.} ORS 433.273 is amended to read:

433.273. The Oregon Health Authority shall adopt rules pertaining to the implementation of ORS 433.235 to 433.284, which shall include, but need not be limited to:

1. The definition of “restrictable” disease;
2. The required immunization against diseases;
3. The time schedule for immunization;
4. The approved means of immunization;
5. The procedures and time schedule whereby children may be excluded from attendance in \textit{schools or} children’s facilities under ORS 433.267 (1)(b) and (c), provided that the authority includes as part of those procedures service of notice to parents;
6. The manner in which immunization records for children are established, evaluated and maintained;
7. Exemptions for \textit{schools and} children’s facilities, including exemptions from the reporting requirements of ORS 433.269 (2) and exemptions from the requirement under ORS 433.269 (3) to make information available;
8. The implementation of ORS 433.282 and 433.283;
9. The process for approving a vaccine educational module;
10. Criteria for a vaccine educational module, including the requirement that a vaccine educational module present information that is consistent with information published by the Centers for Disease Control and Prevention concerning:
   a. Epidemiology;
   b. The prevention of disease through the use of vaccinations; and
   c. The safety and efficacy of vaccines; and
11. Documentation required to verify completion of a vaccine educational module, including the qualifications of persons who may certify the completion.