THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL No. 2095 Session of 2018

INTRODUCED BY D. MILLER, WARD, KINSEY, MURT, V. BROWN, CALTAGIRONE, BULLOCK, D. COSTA, SIMS, SCHLOSSBERG, MCNEILL, MATZIE, ROZZI, ORTITAY, M. QUINN AND DELUCA, FEBRUARY 16, 2018

REFERRED TO COMMITTEE ON EDUCATION, FEBRUARY 16, 2018

AN ACT

1 2 3 4 5 6	Amending the act of March 10, 1949 (P.L.30, No.14), entitled "An act relating to the public school system, including certain provisions applicable as well to private and parochial schools; amending, revising, consolidating and changing the laws relating thereto," in school health services, providing for early intervention depression screening.
7	The General Assembly of the Commonwealth of Pennsylvania
8	hereby enacts as follows:
9	Section 1. The act of March 10, 1949 (P.L.30, No.14), known
10	as the Public School Code of 1949, is amended by adding a
11	section to read:
12	Section 1425. Early Intervention Depression Screening(a)
13	Each child of school age shall receive a depression screening no
14	later than the child's entrance into sixth grade and thereafter
15	in accordance with the schedule for mandated medical
16	examinations under section 1402(e). The comprehensive health
17	record for the child shall include written confirmation from the
18	child's physician or other qualified health care professional
19	that the screening was completed.

1	(b) Each school entity shall provide notice to the parent or
2	guardian of each child of school age of the requirement under
3	subsection (a) on a form developed by the Department of Health.
4	The notice shall do all of the following:
5	(1) Explain that a physician or other qualified health care
6	professional shall conduct the depression screening as required
7	under subsection (a) and provide written confirmation that the
8	screening was completed to the school entity in which the child
9	is enrolled or, for a child of school age enrolled in a home
10	education program, in which the child would be enrolled as a
11	result of the child's residence.
12	(2) Detail how a parent or guardian may opt out of the
13	requirement by providing a written statement to the school
14	entity.
15	(3) Specify that the decision to act on screening results
16	rests entirely with the parent or guardian.
17	(4) State that the school entity will not receive the
18	results of the screening unless the parent or guardian chooses
19	to share the results of the screening with the school entity.
20	(5) State that, if the parent or guardian chooses to share
21	the results of the screening with the school entity and the
22	screening indicates the presence of thoughts or behaviors often
23	associated with a diagnosis of depression, the school entity
24	shall refer the child for an evaluation under the Individuals
25	with Disabilities Education Act (Public Law 91-230, 20 U.S.C. §
26	1400 et seq.) or under section 504 of the Rehabilitation Act of
27	1973 (Public Law 93-112, 29 U.S.C. § 794) and notify the parent
28	or guardian at the point of referral, but the evaluation may not
29	be performed unless the parent or guardian consents to the
30	evaluation.
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1	(c) The Department of Health, in conjunction with the
2	Department of Education, shall produce materials that:
3	(1) At a minimum explain the following:
4	(i) The importance of early diagnosis for mental health and
5	common challenges for students with undiagnosed or untreated
6	depression.
7	(ii) Related Federal and State privacy protections and
8	parental rights in relation to the health requirements of
9	children of school age.
10	(2) Are made available to school entities in print format
11	and posted on the publicly accessible Internet websites of the
12	Department of Health and the Department of Education.
13	(d) The academic records of a child of school age shall not
14	include the child's screening results or information indicating
15	whether a screening was completed under this section.
16	(e) The Department of Health shall amend the standard
17	private or school physical examination form regarding a child of
18	school age to include confirmation by the child's physician or
19	other qualified health care professional that a depression
20	screening was completed consistent with the requirements of this
21	section and to state that the school entity will not receive the
22	results of the screening unless the parent or guardian chooses
23	to share the results of the screening with the school entity.
24	The physician or other qualified health care professional who
25	completes the screening may use this form or a form that
26	provides substantially similar information to provide
27	confirmation of the screening to the school entity of the child.
28	(f) Nothing in this section shall be construed to create,
29	establish or expand civil or criminal liability on the part of a
30	<u>school entity or school employe.</u>

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1	(g) Within ninety (90) days of the effective date of this
2	section, each school entity shall adopt a policy concerning the
3	school entity's response if it is provided with a depression
4	screening indicating that a child of school age has thoughts or
5	engages in behaviors that are often associated with a diagnosis
6	<u>of depression.</u>
7	(h) The Department of Health shall promulgate regulations
8	necessary to implement this section.
9	(i) As used in this section, "school entity" shall mean a
10	school district, charter school, cyber charter school, regional
11	charter school, area vocational-technical school, intermediate
12	unit or nonpublic school in this Commonwealth.
13	Section 2. This act shall take effect August 1, 2018.