

1 **SCHOOL PERSONNEL COMMUNICATIONS WITH PARENTS**

2 **AMENDMENTS**

3 2020 GENERAL SESSION

4 STATE OF UTAH

5 **Chief Sponsor: Adam Robertson**

6 Senate Sponsor: _____

8 **LONG TITLE**

9 **General Description:**

10 This bill amends provisions related to school personnel communications with parents.

11 **Highlighted Provisions:**

12 This bill:

- 13 ▶ amends provisions related to school personnel communications with parents
- 14 regarding school personnel's observations and concerns about a student.

15 **Money Appropriated in this Bill:**

16 None

17 **Other Special Clauses:**

18 None

19 **Utah Code Sections Affected:**

20 AMENDS:

21 **53G-9-203**, as last amended by Laws of Utah 2019, Chapters 293 and 349

23 *Be it enacted by the Legislature of the state of Utah:*

24 Section 1. Section **53G-9-203** is amended to read:

25 **53G-9-203. Definitions -- School personnel -- Medical recommendations --**

26 **Exceptions -- Penalties.**

27 (1) As used in this section:



28 (a) "Health care professional" means a physician, physician assistant, nurse, dentist, or
29 mental health therapist.

30 (b) "School personnel" means a school district or charter school employee, including a
31 licensed, part-time, contract, or nonlicensed employee.

32 (2) School personnel may:

33 (a) provide information and observations to a student's parent about that student,
34 including observations and concerns [~~in the following areas~~] related to:

35 (i) progress;

36 (ii) health and wellness, including mental health and wellness;

37 (iii) social interactions;

38 (iv) behavior; [~~or~~]

39 (v) learning needs; and

40 [~~(v)~~] (vi) topics consistent with Subsection 53E-9-203(6);

41 (b) communicate information and observations between school personnel regarding a
42 child;

43 (c) refer students to other appropriate school personnel and agents, consistent with
44 local school board or charter school policy, including referrals and communication with a
45 school counselor or other mental health professionals working within the school system;

46 (d) consult or use appropriate health care professionals in the event of an emergency
47 while the student is at school, consistent with the student emergency information provided at
48 student enrollment;

49 (e) exercise their authority relating to the placement within the school or readmission
50 of a child who may be or has been suspended or expelled for a violation of Section 53G-8-205;
51 and

52 (f) complete a behavioral health evaluation form if requested by a student's parent to
53 provide information to a licensed physician or physician assistant.

54 (3) School personnel shall:

55 (a) report suspected child abuse consistent with Section 62A-4a-403;

56 (b) comply with applicable state and local health department laws, rules, and policies;
57 and

58 (c) conduct evaluations and assessments consistent with the Individuals with

59 Disabilities Education Act, 20 U.S.C. Sec. 1400 et seq., and its subsequent amendments.

60 (4) Except as provided in Subsection (2), Subsection (6), and Section 53G-9-604,
61 school personnel may not:

62 (a) recommend to a parent that a child take or continue to take a psychotropic
63 medication;

64 (b) require that a student take or continue to take a psychotropic medication as a
65 condition for attending school;

66 (c) recommend that a parent seek or use a specific type of psychiatric or psychological
67 treatment for a child;

68 (d) conduct a psychiatric or behavioral health evaluation or mental health screening,
69 test, evaluation, or assessment of a child, except where this Subsection (4)(d) conflicts with the
70 Individuals with Disabilities Education Act, 20 U.S.C. Sec. 1400 et seq., and its subsequent
71 amendments; or

72 (e) make a child abuse or neglect report to authorities, including the Division of Child
73 and Family Services, solely or primarily on the basis that a parent refuses to consent to:

74 (i) a psychiatric, psychological, or behavioral treatment for a child, including the
75 administration of a psychotropic medication to a child; or

76 (ii) a psychiatric or behavioral health evaluation of a child.

77 (5) Notwithstanding Subsection (4)(e), school personnel may make a report that would
78 otherwise be prohibited under Subsection (4)(e) if failure to take the action described under
79 Subsection (4)(e) would present a serious, imminent risk to the child's safety or the safety of
80 others.

81 (6) Notwithstanding Subsection (4), a school counselor or other mental health
82 professional acting in accordance with Title 58, Chapter 60, Mental Health Professional
83 Practice Act, or licensed through the state board, working within the school system may:

84 (a) recommend, but not require, a psychiatric or behavioral health evaluation of a child;

85 (b) recommend, but not require, psychiatric, psychological, or behavioral treatment for
86 a child;

87 (c) conduct a psychiatric or behavioral health evaluation or mental health screening,
88 test, evaluation, or assessment of a child in accordance with Section 53E-9-203; and

89 (d) provide to a parent, upon the specific request of the parent, a list of three or more

90 health care professionals or providers, including licensed physicians, physician assistants,
91 psychologists, or other health specialists.

92 (7) Local school boards or charter schools shall adopt a policy:

93 (a) providing for training of appropriate school personnel on the provisions of this
94 section; and

95 (b) indicating that an intentional violation of this section is cause for disciplinary action
96 consistent with local school board or charter school policy and under Section [53G-11-513](#).

97 (8) Nothing in this section shall be interpreted as discouraging general communication
98 not prohibited by this section between school personnel and a student's parent.