SENATE

STATE OF MINNESOTA
EIGHTY-SEVENTH LEGISLATURE

S.F. No. 1160

1.1 A bill for an act

1.2 relating to education; recommending comprehensive eye exams; amending

1.3 Minnesota Statutes 2010, section 121A.17, subdivisions 1, 3.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2010, section 121A.17, subdivision 1, is amended to

1.6 read:

1.7 Subdivision 1. **Early childhood developmental screening.** Every school board

1.8 must provide for a mandatory program of early childhood developmental screening for

1.9 children at least once before school entrance, targeting children who are between three

1.10 and four years old. This screening program must be established either by one board, by

1.11 two or more boards acting in cooperation, by service cooperatives, by early childhood

1.12 family education programs, or by other existing programs. This screening examination is

1.13 a mandatory requirement for a student to continue attending kindergarten or first grade in

1.14 a public school. A child need not submit to developmental screening provided by a board

1.15 if the child's health records indicate to the board that the child has received comparable

1.16 developmental screening from a public or private health care organization or individual

1.17 health care provider. A student identification number, as defined by the commissioner of

1.18 education, shall be assigned at the time of early childhood developmental screening or at

1.19 the time of the provision of health records indicating a comparable screening. Each school

1.20 district must provide the essential data in accordance with section 125B.07, subdivision 6,

1.21 to the Department of Education. Districts are encouraged to reduce the costs of preschool

1.22 developmental screening programs by utilizing volunteers and public or private health care

1.23 organizations or individual health care providers in implementing the program. Districts

2.1 <u>shall recommend to all parents and guardians that children undergo a comprehensive eye</u>

2.2 <u>examination by an optometrist or ophthalmologist at least once before school entrance.</u>

2.3   Sec. 2. Minnesota Statutes 2010, section 121A.17, subdivision 3, is amended to read:

2.4   Subd. 3. **Screening program.** (a) A screening program must include at least the

2.5 following components: developmental assessments, hearing and vision screening or

2.6 referral, immunization review and referral, the child's height and weight, identification

2.7 of risk factors that may influence learning, an interview with the parent about the child,

2.8 and referral for assessment, diagnosis, and treatment when potential needs are identified.

2.9 The district and the person performing or supervising the screening must provide a

2.10 parent or guardian with clear written notice that the parent or guardian may decline to

2.11 answer questions or provide information about family circumstances that might affect

2.12 development and identification of risk factors that may influence learning. <u>This notice</u>

2.13 <u>must also include the following statement for parents and guardians: "Vision screening is</u>

2.14 <u>not a substitute for a comprehensive eye exam by an optometrist or ophthalmologist. Your</u>

2.15 <u>child is not required to undergo a vision screening if an optometrist or ophthalmologist</u>

2.16 <u>has completed and signed a report form indicating a comprehensive eye examination has</u>

2.17 <u>been administered within the previous 12 months."</u> The notice must clearly state that

2.18 declining to answer questions or provide information does not prevent the child from

2.19 being enrolled in kindergarten or first grade if all other screening components are met. If

2.20 a parent or guardian is not able to read and comprehend the written notice, the district

2.21 and the person performing or supervising the screening must convey the information in

2.22 another manner. The notice must also inform the parent or guardian that a child need not

2.23 submit to the district screening program if the child's health records indicate to the school

2.24 that the child has received comparable developmental screening performed within the

2.25 preceding 365 days by a public or private health care organization or individual health

2.26 care provider. The notice must be given to a parent or guardian at the time the district

2.27 initially provides information to the parent or guardian about screening and must be given

2.28 again at the screening location.

2.29   (b) All screening components shall be consistent with the standards of the state

2.30 commissioner of health for early developmental screening programs. A developmental

2.31 screening program must not provide laboratory tests or a physical examination to any

2.32 child. The district must request from the public or private health care organization or the

2.33 individual health care provider the results of any laboratory test or physical examination

2.34 within the 12 months preceding a child's scheduled screening.

3.1   (c) If a child is without health coverage, the school district must refer the child to an

3.2   appropriate health care provider.

3.3   (d) A board may offer additional components such as nutritional, physical and

3.4   dental assessments, review of family circumstances that might affect development, blood

3.5   pressure, laboratory tests, and health history.

3.6   (e) If a statement signed by the child's parent or guardian is submitted to the

3.7   administrator or other person having general control and supervision of the school that

3.8   the child has not been screened because of conscientiously held beliefs of the parent

3.9   or guardian, the screening is not required.