



Ohio Legislative Service Commission

Bill Analysis

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S.B. 118

129th General Assembly
(As Reported by S. Education)

Sens. Cates, Schaffer, Gillmor, Brown

BILL SUMMARY

- Makes optional the screening of students for body mass index (BMI) and weight status category in school districts, community schools, STEM schools, and chartered nonpublic schools, eliminating the requirement that districts and schools obtain a state waiver to opt out of conducting the screening.

CONTENT AND OPERATION

Optional status of screenings

The bill eliminates the requirement that a school district, community school, STEM school, or chartered nonpublic school obtain a waiver from the state in order to opt out of screening students for body mass index (BMI) and weight status category. Under current law, this screening is mandatory, but a district or school that determines it is unable to conduct the screening may submit an affidavit to the Superintendent of Public Instruction attesting to that fact. The state Superintendent must grant the waiver upon receiving the affidavit, and has no discretion to deny a waiver. Essentially, then, the bill eliminates the need for districts and schools that do not wish to conduct the screening to process a waiver request. The screening becomes a local option instead of a state requirement with a formal opt-out procedure.¹

Parameters of optional screenings; parental opt-out

The general parameters for conducting the optional BMI and weight status screening remain the same as specified in current law for the mandatory screening. The screenings are still limited to students in grades K, 3, 5, and 9. And parents still may

¹ R.C. 3313.674(A) and (H), 3314.03(A)(11)(h), 3314.15, 3326.11, and 3326.26.

opt their children out of the screening by submitting a signed statement indicating that the parent does not wish to have the child undergo it.²

The bill also retains the current options for districts and schools. They may choose to conduct the screening themselves, to engage a contractor to do it, or to request parents to obtain the screening from a provider selected by the parent and then submit the results. If the district or school chooses the last option, it must provide parents with a list of providers and information about screening services available in the community to those who cannot afford a private provider. If the district or school chooses to conduct the screening itself or to engage a contractor, it must ensure that each student is screened alone and not in the presence of other students or staff.³

As with mandatory screening, a district or school that elects to have its students screened must keep each student's individual screening result confidential, and may not report the result to any person other than the student's parent. The district or school must notify parents of any health risks associated with their child's screening result and provide parents with information about appropriately addressing the risks. This information may include documents, pamphlets, or other resources suggested on a list developed by the Department of Health.⁴

The bill strikes two annual deadlines from current law, leaving timing to the discretion of districts and schools: February 1, for providing parents with information about the screening; and May 1, for completing the screening.⁵

Reporting data to the Department of Health

Districts and schools that elect to have the screening must continue to report data to the Department of Health, as required by current law. Because each student's screening result is confidential, the districts and schools must report to the Department of Health *aggregated* student BMI and weight status category data, along with any demographic data required by the Director of Health. As under current law, the Department may annually publish the data, aggregated by county. For counties where districts and schools are not conducting the screenings, the Department must note that the data is incomplete. The Department remains authorized to share data with other

² R.C. 3313.674(A) and (D).

³ R.C. 3313.674(B) and (C).

⁴ R.C. 3313.674(E) and (F).

⁵ R.C. 3313.674(A) and (C).

governmental entities for the purpose of monitoring population health, making reports, or public health promotional activities.⁶

Report card measure; annual report

Under the bill, whether or not a school district, community school, or STEM school is implementing the BMI and weight status screenings remains part of a newly required report card measurement of student health-related matters. This measurement, which continuing law requires the State Board of Education to develop by December 31, 2011, and include on report cards beginning with the 2012-2013 school year, must encompass not only whether the district or school is conducting the screenings, but also (1) student success in meeting benchmarks in state physical education standards, (2) compliance with local wellness policies required by federal law, and (3) whether the district or school is participating in the state physical activity pilot program.⁷

The bill also retains the current requirement that the Department of Education issue an annual report on districts' and schools' implementation of the screening. But where current law directs the Department to report on schools' compliance with the state requirement, the bill directs the Department to report on schools' participation in the option to screen. As under current law, the report also must include any data regarding student health and wellness collected in conjunction with the screenings.⁸

Background

The requirement to conduct BMI and weight status category screenings was enacted in 2010, in S.B. 210 of the 128th General Assembly. S.B. 210 enacted several provisions addressing student health, including nutritional standards for food and beverages in schools, a physical activity pilot program, licensure requirements for physical education teachers, and creation of the state Healthy Choices for Healthy Children Council.

HISTORY

ACTION	DATE
Introduced	03-15-11
Reported, S. Education	04-12-11

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⁶ R.C. 3313.674(G).

⁷ R.C. 3302.032.

⁸ R.C. 3301.922.

