Content

Title：	The School Health Act Ch
Date：	2021.01.13
Legislative：	1.All 29 articles amended and promulgated by the (2002) Presidential Order Hua-Zong-Yi-Yi-Zi No. 09100025070 on February 6, 2002 are effective from the date of promulgation. 2.Amended Article 12,15,16,22,23 and added Articles 23-1 to 23-3 and promulgated by the (2013) Presidential Order Hua-Zong-Yi-Yi-Zi No. 10200229241 on December 18, 2013. 3.Amendments of Articles 5, 16, and 20 to 23-2 of the School Health Act promulgated December 30, 2015 4.Presidential Order Hua-Zong-Yi-Yi-Zi No. 11000001491 promulgated (2021) on January 13, 2021 - Amendment of Article 13.
Content：	Article 1 This Act has been formulated to promote the health of students and all staff members, and establish a foundation for national health, and improve people’ s quality of life. Matters that are not addressed in this Act shall be governed by the provisions of other relevant laws. Article 2 In this Act the term ‘competent authority’ refers to: the Ministry of Education at the central government level; the municipality government at the municipality level; and the county(city) government at the county(city) level. When any matter undertaken in accordance with the provisions of this Act requires the involvement of people working in the health, environmental protection, or social affairs jurisdictions, the competent authority shall handle the matter in conjunction with all relevant bodies in the respective jurisdiction. Article 3 The competent authority at each level and schools at all levels throughout Taiwan (hereafter referred to by “ school ” or "schools") shall conduct school health-related work in accordance with this Act. Article 4 The competent authority at each level shall designate dedicated units and appoint professionals to handle school health-related matters. Article 5 The competent authority at each level shall select and appoint scholars, experts, and representatives of organizations, and relevant bodies to form a School Health Committee with the responsibility to: 1.Provide consultation, guidance, and advice regarding school health policies and regulations; 2.Provide consultation, guidance, and advice regarding school health planning, programs, measures, and evaluation; 3.Provide consultation, guidance, and advice regarding planning, and research and development matters related to school health education and activities; 4.Provide consultation, guidance, and advice regarding planning, and research and development matters related to school health and healthcare services; 5.Provide consultation, guidance and advice regarding the planning, and research and development of the health related management of school environments;

6.Coordinate relevant bodies and organizations to promote and implement school health matters; and
7.Provide consultation regarding other matters related to school health promotion and implementation.

Article 6
Schools shall designate units and/or dedicated personnel to be responsible for the planning, design, promotion, and implementation of school health-related work.
Schools shall have a health center to serve as a venue for health examinations, health management, first aid and emergency care, health consulting, and health education support.

Article 7
Schools at the senior high school or lower level with less than 40 classes shall have one nurse on staff; schools with more than 40 classes shall have at least two nurses on staff.
Schools at the junior college level and above may put nurses on staff using the ratios stipulated in the preceding paragraph.
School medical personnel shall be legally qualified and registered.

Article 8
Schools shall establish a student health management system and organize student health examinations on a regular basis. When necessary, schools may organize other health examinations of students and all staff members for specific purposes, or disease-specific checkups.
The implementation regulations governing whom to be examined, and scope, methods, and other matters related to the student health examinations referred to in the preceding paragraph shall be determined by the central competent authority in conjunction with the central competent health authority.

Article 9
Schools shall include students' health examinations and disease check-up results in each student ’ s records, and if a student transfers to another school, these health related records shall be forwarded to their new school.
The student records referred to in the preceding paragraph shall be kept confidential and may not be disclosed without due cause. This restriction does not apply when a student ’ s medical records are required for teaching, counseling, or medical reasons and parents consent of the student has been obtained, or when any other law or regulation requires such records to be provided.

Article 10
Schools shall provide health guidance, and/or organize responsive treatment for physical defects, or arrange treatment referrals, based on students' health examination results.

Article 11
Schools should strengthen prevention and correction efforts for common physical deficiencies or illnesses among students, such as poor eyesight, dental caries, parasitic infections, hepatitis, scoliosis, sports injuries, obesity, and malnutrition.

Article 12
Schools should enhance counseling and care for students with serious health conditions, such as heart disease, asthma, epilepsy, diabetes, hemophilia, cancer, mental illnesses, rare diseases, and other significant physical or mental disabilities. If necessary, adjustments to their coursework and activities may be made.

Article 13
When a school discovers that a student or staff member is suffering from an infectious disease or poses a risk of transmission within the school, it should collaborate with health and environmental protection authorities to

implement effective prevention and monitoring measures. If necessary, attendance may be prohibited.
To curb the spread of infectious diseases in schools, relevant authorities may order the suspension of classes. They should also assist schools in providing appropriate epidemic prevention supplies.

Article 14
Schools shall collaborate with the competent health authority to organize post-enrollment student vaccinations.
First year elementary school students shall have had all scheduled vaccinations completed before their enrollment. Schools shall notify the health authority about supplementary vaccinations of students who have not been fully vaccinated before enrollment.

Article 15
In order to provide appropriate first aid care for students and all staff members who have an injury or illness requiring urgent care, schools shall, as stipulated in Paragraph 2, formulate emergency injury treatment protocols, and enhance on-campus knowledge and practice of first aid.
The competent authority at each level shall prescribe the regulations governing the specific scope, procedures, and other matters arising in connection with handling an injury or illness requiring urgent care, as referred to in the preceding paragraph.
If a school discovers any case of suspected food poisoning, the school shall take emergency first-aid measures and shall at the same time notify the competent health authority of the municipality and county(city) to handle the incident matter.

Article 16
Schools at the senior secondary and lower levels shall establish health related courses, and educational institutions at junior college level and higher may establish such courses if deemed necessary.
Health-related courses, materials, and teaching methods should be suitable for the growth and developmental char-acteristics and needs of students, while also balancing cognitive, emotional, and skill-based aspects.
The health-related courses referred to in Paragraph 1 shall include healthy diet education, which has the aim of establishing proper dietary habits, fostering respect for life and nature, enhancing awareness of environmental protection, and deepening students' understanding of sources of food , and of national and regional food cultures.
Schools shall encourage students to participate in the preparation of school meals.

Article 17
Teachers of health-related courses shall participate in professional on-the-job training to improve teaching methodology, and enhance the effectiveness of health-related education.
The competent authority or the school may recommend and send teachers to participate in further health curriculum training, based on actual needs.

Article 18
Schools offering health-related courses shall maintain adequate health-related course teaching facilities. When necessary, specialized health-related classrooms may be set up.

Article 19
Schools shall conduct more health promotion and activities that establish healthy lifestyle behaviors.

Article 20
Schools at the senior secondary and lower levels shall work together with students' families and the community, integrating the human and other resources that they can contribute, and jointly undertake community-based healthy eating education and environmental protection activities.
Educational institutions at junior college level and above may do the same.

Article 21
When planning the establishment of a school, factors such as the geological conditions of the site, soil and water conservation, transportation, air and water pollution, noise, and other environmental impact factors should be taken into consideration.
The buildings, drinking water, toilets, washbasins, garbage management, wastewater treatment, noise, ventilation, lighting, adequate natural light, chalkboards, classroom desks and chairs, fire safety equipment, disability access provisions, and breastfeeding facilities on campus shall be in compliance with the standards prescribed in the related laws and regulations.

Article 22
Educational institutions shall strengthen the health management of their cafeterias, kitchens, and student and staff cooperative stores.
The competent authority at each level or individual educational institutions shall organize health-related training, further education, and workshops for the personnel working in the facilities referred to in the previous paragraph.
Food and beverage hygiene management in educational institutions shall be undertaken in accordance with the Regulations on Food Good Hygiene Practice (GHP) referred to in Article 8, Paragraph 1 of the Act Governing Food Safety and Sanitation.
The competent authority at each level shall supervise and assist educational institutions as they establish food hygiene self-management mechanisms and put in place their own practical implementation and management of related checks. Educational institutions shall inspect their dining facilities at least once a week and record the results. The records shall be kept for three years.
The competent education authority at each level shall collaborate with the competent agriculture and health authorities to conduct regular food hygiene inspections of educational institutions randomly selected at least once each year, and the competent agriculture authority or competent health authority shall perform checks of the hygiene, safety, and quality of their randomly sampled foods.
The regulations governing the scope, methods, inspections, and any other matters that are to be undertaken pertaining to the management, supervision, and assistance referred to in Paragraph 1 and Paragraph 4 respectively, shall be prescribed by the central competent authority in conjunction with the central competent health authority.

Article 23
Schools providing meals should adhere to the food content and nutritional standards set by the central competent authority for school lunches, as well as the reference intake levels for dietary nutrients established by the central health authority. They must provide meals that are hygienic, safe, and nutritionally balanced, implement health education on dietary practices, and be supervised and executed by a nutritionist.
Schools that provide meals shall offer vegetarian meal option.
The schools referred to in Paragraph 1 shall prioritize the use of locally certified high-quality agricultural products from the central agricultural authority, and the use of genetically modified fresh ingredients and their primary processed products is prohibited.

Article 23-1
Schools at the senior secondary and lower levels with 40 classes or more shall have at least one nutritionist on staff. Each county and city competent authority shall determine the number of nutritionists for each school within its jurisdiction.
The duties of the school nutritionist referred to in the preceding paragraph are to:
1.Oversee and assist with food hygiene and safety.
2.Implement management of meals.
3.Implement healthy eating education.
4.Provide nutrition guidance for the entire school.
5.Look after individual nutritional care cases.

Article 23-2
The municipality, and county (city) governments shall form a School Lunch Advisory Council that is responsible for setting standards, advising, assessing schools' school-lunch related operations, and giving associated awards and incentives, or penalties.
Schools at the senior secondary and lower levels that serve lunch shall establish a School Lunch Council or an organization of the same nature; its composition, the selection of its members, and the principles governing supplies and conflict of interest shall be determined by each relevant competent authority. Parents of current students shall account for at least one-fourth of the members.
The competent authority shall provide subsidies for junior high schools and elementary schools to establish kitchens, and shall provide subsidies for schools at the senior secondary and lower levels that are located in mountainous, remote, or outlying island areas to operate a lunch program that is needed because of their location, and shall collaborate with the competent agricultural authorities with regard to the supply of local ingredients. The regulations governing such subsidies shall be determined by the competent authority. The central competent authority shall regularly collaborate with the municipality, and county (city) government to review the operation of school lunch programs and send personnel to undertake on-site inspections. The way the review will be conducted, the specific items to be reviewed, and the number of schools to be reviewed shall be determined through joint consultation by the competent authority in consultation with the municipality, and county (city) governments..

Article 23-3
Schools that procure meals shall use a central kitchen or external lunch box procurement contract template as a reference model for the contracts they enter into with supply vendors, and submit such contracts to the competent authority for future reference.
The central kitchen or external lunch box procurement contract template referred to in the preceding paragraph shall be established by the central competent authority.
Schools at senior high or lower level that serve school lunches shall establish a dedicated account, and payments received and expenditure through the account shall be handled in compliance with the Accounting Act and related regulations. The income and expenditure details shall be made public within at least two months after the end of each semester.

Article 24
Schools at the senior high school or lower level shall impose a complete smoking ban; and may not sell tobacco, alcohol, betel nut, and other substances that are harmful to physical and mental health.

Article 25
Schools shall develop a plan to implement building, equipment, and facilities safety and environmental health inspections at scheduled times each semester, and shall maintain teaching and sports and play equipment, and facilities at all times, and prior to the start of each semester, shall undertake a thorough inspection and do any necessary repairs.

Article 26
The competent authority at all level and schools shall allocate budgets for school health care on annual basis, ensuring that the budgets, are used exclusively for this purpose.

Article 27
The competent authority at each level shall conduct evaluation of the health-related work of schools within their respective jurisdiction. Schools with an outstanding performance shall be given rewards and incentives. Schools that undertake school health-related work badly shall be ordered to make improvements within a specified time, and any such school that fails to do so within the specified time, or in which there are

significant shortcomings, shall be the subject of disciplinary action being taken by the competent authority.

Article 28
The enforcement rules of this Act shall be determined by the central competent authority.

Article 29
This Act is implemented on the date of promulgation.

Data Source： Laws and Regulations Retrieving System