

## Content

Title :	School Health Act <b>Ch</b>
Date :	2013.12.18
Legislative :	<p>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.</p> <p>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.</p>
Content :	<p><b>Article 1</b> 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.</p> <p>Matters that are not addressed in this Act shall be governed by the provisions of other relevant laws.</p> <p><b>Article 2</b> In this Act the term 'competent authority' refers to: the Ministry of Education at the central government level; the municipal government at the municipality level; and the county or city government at the county or city level respectively.</p> <p>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.</p> <p><b>Article 3</b> 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.</p> <p><b>Article 4</b> The competent authority at each level shall designate dedicated units and appoint professionals to handle school health-related matters.</p> <p><b>Article 5</b> The competent authority at each level shall select and appoint scholars, experts, organizations, and representatives of relevant bodies to form a School Health Committee with the responsibility to:</p> <ol style="list-style-type: none"><li>1. Propose initiatives and changes and provide advice regarding school health policies and regulations.</li><li>2. Provide advice on school health planning, programs, measures, and evaluation.</li><li>3. Provide advice on school health education and activities related planning, and research and development matters.</li><li>4. Provide advice on planning, and research and development matters related to school health and healthcare services.</li><li>5. Provide advice on the planning, and research and development of the</li></ol>

health related management of school environments.

6. Coordinate relevant bodies and organizations to promote and implement school health matters.

7. Provide consultation on other school health promotion and implementation related matters.

**Article 6** Schools shall designate units and/or dedicated personnel to be responsible for the planning, design, promotion, and implementation of school health related matters.

Schools shall have a health center to serve as a venue for health checks, health management, first aid and emergency care, health counseling, 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 who is to be examined, and the specific 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 check-ups and disease examination 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 parental 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 corrective treatment for physical defects, or arrange treatment referrals, based on students' health examination results.

**Article 11** Schools shall increase the work they do to prevent and treat the poor vision, dental cavities, parasitic diseases, hepatitis, curvature of the spine, sports injuries, obesity, and poor nutrition or malnutrition that are physical defects and conditions commonly seen in students.

**Article 12** Schools shall increase the counseling and care they provide for students with heart disease, asthma, epilepsy, diabetes, and hemophilia, cancer, mental illness, rare diseases, and any other major illness, and

students with disabilities. When necessary, their schoolwork and activities may be adjusted to accommodate their needs.

**Article 13** When a school becomes aware that any student or any staff member has contracted an infectious disease, it shall undertake appropriate epidemic prevention and monitoring measures in conjunction with the health and environmental protection authorities. When necessary, access to the school may be prohibited.

The competent authority at each level may order the suspension of classes, to prevent the school from spreading a communicable disease.

**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 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 or county (city) to handle the matter.

**Article 16** Schools at the senior high school or lower level shall establish health related courses, and schools at junior college level or above may establish such courses if deemed necessary.

Health related courses, teaching materials, and teaching methodology shall be appropriate to students' stage of growth and development, and their needs, and shall take into proper consideration cognition, affirmative attitudes, and skill related aspects.

The health-related courses referred to in Paragraph 1 shall include nutrition education which has the aim of establishing proper dietary habits, and fostering respect for life and nature, and in addition enhancing awareness of environmental protection, and deepening students' understanding of food sources, and national and regional food cultures.

Schools may arrange for students to participate in the preparation of school meals.

**Article 17** Teachers of health-related courses shall participate in professional on-the-job further training to improve their teaching methodology, and make health-related teaching and learning more effective.

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 fully adequate their 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 senior high or lower level shall jointly undertake community health education and environmental protection activities, integrating the human and other resources that students' families and the community can contribute. Schools at junior college level or above may also do so.

**Article 21** The planning for the construction of a school shall take into consideration the geology, soil and water conservation, traffic and transportation, air and water pollution, noise, and other aspects of the proposed school site that affect the environment.

The school's buildings and construction, drinking water, toilets, washbasins, garbage management, wastewater treatment, noise, ventilation, lighting, illumination, chalkboards, desks and chairs, fire control, and facilities making the campus accessible to disabled persons shall be in compliance with the standards prescribed by the related laws and regulations.

**Article 22** Schools shall strengthen the health management of cafeterias, kitchens, and student and staff cooperative stores.

The competent authority at each level or schools shall organize health-related training, further education, and workshops for the personnel working in the facilities referred to in the previous paragraph.

Schools' food and beverage hygiene management shall comply with the regulations on good hygiene practice for foods referred to in Article 8, Paragraph 1 of the Regulations of Governing Food Sanitation.

The competent authority at each level shall oversee schools' establishing of food hygiene self-management mechanisms, and schools' practical implementation of related checks. Schools 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 random school food hygiene inspections, and the competent agriculture authority or competent health authority shall perform random checks of the hygiene, safety and quality of school foods.

The regulations governing the scope, methods, and inspections pertaining to the management and oversight referred to in Paragraph 1 and Paragraph 4, and any other mandated matters associated therewith, shall be prescribed by the central competent authority in conjunction with the central competent health authority.

**Article 23** Schools that provide meals shall provide healthy, safe, and nutritionally balanced foods in compliance with the School Lunch Content and Nutrition Criteria determined by the central competent authority and

with the Dietary Reference Intakes established by the central health competent authority, and shall provide nutrition education that is supervised and undertaken by dietitians.

Schools that provide meals shall offer a vegetable meal choice.

The schools mentioned in Paragraph 1 that provide meals shall give priority to using quality local agricultural products certified by the central competent agricultural authority.

**Article 23-1** Schools at the senior high school or lower level, with 40 classes or more shall have at least one dietitian on staff. Each county and city competent authority shall determine the number of dietitians for each school.

The duties of the school dietitian referred to in the preceding paragraph are to:

1. Oversee food hygiene and safety.
2. Implement management of meals.
3. Implement nutrition education.
4. Provide nutrition guidance for the entire school.
5. Look after individual nutritional care cases.

**Article 23-2** Municipal and county (city) governments shall form a School Lunch Advisory Council to be responsible for setting standards, advising, and assessing schools' school-lunch related operations, and giving associated awards and incentives, or penalties.

Schools at the senior high school or lower level that serve lunch shall establish a School Lunch Provision Council or an organization of the same nature; the composition, selection of members, and the principles governing supplies and what should be avoided shall be determined by each relevant competent authority.

The competent authority may subsidize junior high schools and elementary schools to establish kitchens, and if required, may provide subsidies for schools at senior high school or lower level that are located in mountainous, remote, or outlying island areas to serve lunches. The regulations governing such subsidies shall be determined by the competent authority.

**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 formulate 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 each level and schools shall itemize annual school health-related and healthcare funding, and the designated funding shall be specifically used for related expenses.

**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 shall be effective from the date of promulgation.