

**PUBLIC HEALTH DEPARTMENT[641]**

**Notice of Intended Action**

**Proposing rule making related to school dental screenings  
and providing an opportunity for public comment**

The Public Health Department hereby proposes to amend Chapter 51, “Dental Screening,” Iowa Administrative Code.

*Legal Authority for Rule Making*

This rule making is proposed under the authority provided in Iowa Code chapter 135.

*State or Federal Law Implemented*

This rule making implements, in whole or in part, Iowa Code section 135.17.

*Purpose and Summary*

Chapter 51 provides the rules for the school dental screening requirement, which aims to improve the oral health of Iowa’s children. Based on feedback from a recent quality improvement exercise (as a result of recommendations provided by the legislatively mandated Student Health Working Group), the Bureau of Oral and Health Delivery Systems (OHDS) has developed a template for the new certificate of dental screening. The new certificate eliminates some of the currently collected demographic information, which will reduce the administrative burden on parents, providers, and school staff. The proposed amendments implement this change.

*Fiscal Impact*

This rule making has no fiscal impact to the State of Iowa.

*Jobs Impact*

After analysis and review of this rule making, no impact on jobs has been found.

*Waivers*

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to the Department’s waiver and variance procedures contained in 641—Chapter 178.

*Public Comment*

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on December 8, 2020. Comments should be directed to:

Stephanie Chickering  
Department of Public Health  
Lucas State Office Building  
321 East 12th Street  
Des Moines, Iowa 50319  
Email: [stephanie.chickering@idph.iowa.gov](mailto:stephanie.chickering@idph.iowa.gov)

*Public Hearing*

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

*Review by Administrative Rules Review Committee*

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making action is proposed:

Amend rule 641—51.9(135) as follows:

**641—51.9(135) Dental screening documentation.**

**51.9(1) Student information.** A person authorized to perform a dental screening required by this chapter shall record the following student information or ensure that such information is recorded on the certificate of dental screening provided or approved in writing by the department of public health in cooperation with the department of education:

1. a. Name (first and last); and
2. b. Birth date;
3. ~~Parent or guardian name;~~
4. ~~Telephone numbers (home or mobile);~~
5. ~~Address (street, city, and county);~~
6. ~~School;~~
7. ~~Grade level; and~~
8. ~~Gender.~~

**51.9(2) Screening information.** A person authorized to perform a dental screening required by this chapter shall record the following screening information on the certificate of dental screening provided or approved in writing by the department of public health in cooperation with the department of education:

1. a. Date of dental screening;
2. b. Treatment needs (no obvious problems, requires dental care, requires urgent dental care);
3. c. Provider type;
4. d. Provider name, ~~business address,~~ and telephone number; and
5. e. Provider or recorder signature and credentials.