AN ACT CONCERNING CHILDHOOD VACCINATIONS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Section 10-204a of the general statutes is repealed and the following is substituted in lieu thereof (Effective July 1, 2015):

(a) Each local or regional board of education, or similar body governing a nonpublic school or schools, shall require each child to be protected by adequate immunization against diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, hemophilus influenzae type B and any other vaccine required by the schedule for active immunization adopted pursuant to section 19a-7f before being permitted to enroll in any program operated by a public or nonpublic school under its jurisdiction. Before being permitted to enter seventh grade, a child shall receive a second immunization against measles. Any such child who (1) presents a certificate from a physician, physician assistant, advanced practice registered nurse or local health agency stating that initial immunizations have been given to such child and additional immunizations are in process under guidelines and schedules specified by the Commissioner of Public Health; or (2)
presents a certificate from a physician, physician assistant or advanced
practice registered nurse stating that in the opinion of such physician,
physician assistant or advanced practice registered nurse such
immunization is medically contraindicated because of the physical
condition of such child; or (3) presents a notarized statement from the
parents or guardian of such child that (A) such immunization would
be contrary to the religious beliefs of such child, and (B) such parents
or guardian have reviewed and understand evidence-based
instructional material provided by the Department of Public Health
regarding the risks to such child and to others of such child failing to
receive adequate immunizations, except such statement need not be
notarized if the commissioner waives the notarization requirement at
the request of such parents or guardian; or (4) in the case of measles,
mumps or rubella, presents a certificate from a physician, physician
assistant or advanced practice registered nurse or from the director of
health in such child's present or previous town of residence, stating
that the child has had a confirmed case of such disease; or (5) in the
case of hemophilus influenzae type B has passed his fifth birthday; or
(6) in the case of pertussis, has passed his sixth birthday, shall be
exempt from the appropriate provisions of this section. If the parents
or guardians of any children are unable to pay for such
immunizations, the expense of such immunizations shall, on the
recommendations of such board of education, be paid by the town.

(b) The definitions of adequate immunization shall reflect the
schedule for active immunization adopted pursuant to section 19a-7f
and be established by regulation adopted in accordance with the
provisions of chapter 54 by the Commissioner of Public Health, who
shall also be responsible for providing procedures under which said
boards and said similar governing bodies shall collect and report
immunization data on each child to the Department of Public Health
for compilation and analysis by said department.

(c) The Commissioner of Public Health may issue a temporary
waiver to the schedule for active immunization for any vaccine if the
National Centers for Disease Control and Prevention recognizes a
nation-wide shortage of supply for such vaccine.

Sec. 2. Subsection (a) of section 19a-79 of the general statutes is
repealed and the following is substituted in lieu thereof (Effective July
1, 2015):

(a) The Commissioner of Early Childhood shall adopt regulations,
in accordance with the provisions of chapter 54, to carry out the
purposes of sections 19a-77 to 19a-80, inclusive, and 19a-82 to 19a-87,
inclusive, and to assure that child day care centers and group day care
homes shall meet the health, educational and social needs of children
utilizing such child day care centers and group day care homes. Such
regulations shall (1) specify that before being permitted to attend any
child day care center or group day care home, each child shall be
protected as age-appropriate by adequate immunization against
diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella,
hemophilus influenzae type B and any other vaccine required by the
schedule of active immunization adopted pursuant to section 19a-7f,
including appropriate exemptions for children for whom such
immunization is medically contraindicated and for children whose
parents [object] or guardian objects to such immunization on religious
grounds, and that any objection by parents or a guardian to
immunization of a child on religious grounds shall be accompanied by
a notarized statement from such parents or guardian that (A) such
immunization would be contrary to the religious beliefs of such child,
and (B) such parents or guardian have reviewed and understand
evidence-based instructional material provided by the Department of
Public Health regarding the risks to such child and to others of such
child failing to receive adequate immunizations, except such statement
need not be notarized if the Commissioner of Public Health waives the
notarization requirement at the request of such parents or guardian, (2)
specify conditions under which child day care center directors and
teachers and group day care home providers may administer tests to
monitor glucose levels in a child with diagnosed diabetes mellitus, and
administer medicinal preparations, including controlled drugs
specified in the regulations by the commissioner, to a child receiving
child day care services at such child day care center or group day care
home pursuant to the written order of a physician licensed to practice
medicine or a dentist licensed to practice dental medicine in this or
another state, or an advanced practice registered nurse licensed to
prescribe in accordance with section 20-94a, or a physician assistant
licensed to prescribe in accordance with section 20-12d, and the written
authorization of a parent or guardian of such child, (3) specify that an
operator of a child day care center or group day care home, licensed
before January 1, 1986, or an operator who receives a license after
January 1, 1986, for a facility licensed prior to January 1, 1986, shall
provide a minimum of thirty square feet per child of total indoor
usable space, free of furniture except that needed for the children's
purposes, exclusive of toilet rooms, bathrooms, coatrooms, kitchens,
halls, isolation room or other rooms used for purposes other than the
activities of the children, (4) specify that a child day care center or
group day care home licensed after January 1, 1986, shall provide
thirty-five square feet per child of total indoor usable space, (5)
establish appropriate child day care center staffing requirements for
employees certified in cardiopulmonary resuscitation by the American
Red Cross, the American Heart Association, the National Safety
Council, American Safety and Health Institute or Medic First Aid
International, Inc., (6) specify that on and after January 1, 2003, a child
day care center or group day care home (A) shall not deny services to a
child on the basis of a child's known or suspected allergy or because a
child has a prescription for an automatic prefilled cartridge injector or
similar automatic injectable equipment used to treat an allergic
reaction, or for injectable equipment used to administer glucagon, (B)
shall, not later than three weeks after such child's enrollment in such a
center or home, have staff trained in the use of such equipment on-site
during all hours when such a child is on-site, (C) shall require such
child's parent or guardian to provide the injector or injectable
equipment and a copy of the prescription for such medication and
injector or injectable equipment upon enrollment of such child, and (D) shall require a parent or guardian enrolling such a child to replace such medication and equipment prior to its expiration date, (7) specify that on and after January 1, 2005, a child day care center or group day care home (A) shall not deny services to a child on the basis of a child's diagnosis of asthma or because a child has a prescription for an inhalant medication to treat asthma, and (B) shall, not later than three weeks after such child's enrollment in such a center or home, have staff trained in the administration of such medication on-site during all hours when such a child is on-site, and (8) establish physical plant requirements for licensed child day care centers and licensed group day care homes that exclusively serve school-age children. When establishing such requirements, the Office of Early Childhood shall give consideration to child day care centers and group day care homes that are located in private or public school buildings. With respect to this subdivision only, the commissioner shall implement policies and procedures necessary to implement the physical plant requirements established pursuant to this subdivision while in the process of adopting such policies and procedures in regulation form. Until replaced by policies and procedures implemented pursuant to this subdivision, any physical plant requirement specified in the office's regulations that is generally applicable to child day care centers and group day care homes shall continue to be applicable to such centers and group day care homes that exclusively serve school-age children.

The commissioner shall print notice of the intent to adopt regulations pursuant to this subdivision in the Connecticut Law Journal not later than twenty days after the date of implementation of such policies and procedures. Policies and procedures implemented pursuant to this subdivision shall be valid until the time final regulations are adopted.

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Statement of Purpose:
To require that statements from the parents or guardian of a child seeking a religious exemption from a required immunization be notarized and include language attesting that such parents or guardian have reviewed and understand information regarding the risks of both immunization and failure to immunize.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]