

## Annual Health Services Notification

Your child has the opportunity to participate in health services through the School Health Services Plan provided by the Brevard County School District, its agents and the Florida Department of Health in Brevard County. As required in Section 381.0056, Florida Statutes, our District's School Health Services Plan helps to enhance learning by promoting health and wellness for children. The Brevard County School District has contracted with a vendor to assist in providing school health services for all of our schools. Your child's school will be staffed with a registered nurse, health technician or licensed practical nurse who is supervised by a registered nurse. The supervising nurse may be assigned to one or more schools; however, the clinic staff can assist you in contacting the registered nurse, if needed. All student health information is kept confidential and is only shared with those staff members who have a legitimate need to know health and safety concerns.

**Annual School Health Services Consent/Opt Out Form:** Health Services are offered to all students in the Brevard County School District with written parental consent. This consent will be valid until it is changed in writing.

Please indicate if you want your student to participate in the Health Services below. Circle yes or no.

Nursing assessments	Yes	No
Health appraisals	Yes	No
Provide Band-Aid(s)	Yes	No
Provided ice pack(s)	Yes	No
Check vitals	Yes	No
Check temperature	Yes	No
Check for lice	Yes	No
Health counseling/teaching	Yes	No
<u>Parents of Students in Grades Kindergarten-3</u>	Yes	No

- I give permission to use the state approved process and tool (SAFE-T w/C-SSRS) if my child expresses that they or school personal believes they are at risk of self-harm. Link: [BPS Review of SRI Process for Parents](#) or at <https://bit.ly/3A35u5k>

Student Name (print): \_\_\_\_\_

Parent/Guardian Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_