



***Mission:** To protect, promote & improve the health of all people in Florida through integrated state, county, and community efforts.*

2022 – 2024 School Health Services Plan

for

BREVARD County

Due by September 15, 2022

E-mail Plan as an Attachment to:

HSF.SH_Feedback@flhealth.gov and County School Health Liaison

2022 - 2024 School Health Services Plan Signature Page

My signature below indicates that I have reviewed and approved the 2022 - 2024 School Health Services Plan and its local implementation strategies, activities, and designations of local agency responsibility as herein described:

Position	Name and Signature	Date
Local Department of Health Administrator / Director		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>
Local Department of Health Nursing Director		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>
Local Department of Health School Health Coordinator		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>
School Board Chairperson		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>
School District Superintendent		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>
School District School Health Coordinator		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>
School Health Advisory Committee Chairperson		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>
School Health Services Public / Private Partner		
	<i>Printed Name</i>	
	<i>Signature</i>	<i>Date</i>

SUMMARY – SCHOOL HEALTH SERVICES PLAN 2022-2024

Statutory Authority: Section (s.) 381.0056, Florida Statutes (F.S.) requires each county health department (CHD) to develop, jointly with the school district and school health advisory committee, a School Health Services Plan (referred herein as the “Plan”) that outlines the provisions and responsibilities to provide mandated health services in all public schools. Rule 64F-6.002, Florida Administrative Code (F.A.C.) requires the plan to be completed biennially. Please note that items that are colorized blue are internet links that enable you to directly view the relevant reference material.

The Plan format is arranged in 3 parts relating to the services provided and funding streams, as follows:

- Part I: Basic School Health Services - General school health services which are available to all students in Florida’s public and participating non-public schools in all 67 school districts.
- Part II: Comprehensive School Health Services - Includes increased services in section 381.0057, Florida Statutes, for student health management, interventions, and classes. These services promote student health; reduce high-risk behaviors and their consequences (substance abuse, unintentional/intentional injuries, and sexually transmitted diseases); provide pregnancy prevention classes and interventions; and provide support services to promote return to school after giving birth.
- Part III: Health Services for Full Service Schools (FSS) – Includes basic school health services and additional specialized services that integrate education, medical, social and/or human services such as nutrition services, basic medical services, Temporary Assistance for Needy Families (TANF), parenting skills, counseling for abused children, counseling for children at high risk for delinquent behavior and their parent/guardian and adult education to meet the needs of the high-risk student population and their families. These services are required of schools as defined in section 402.3026, Florida Statutes.

The Plan contains 4 columns, as follows:

- Column 1 – Statute and/or Rule References. This column includes Florida Statutes, administrative rules and references demonstrating best practices related to school health.
- Column 2 – Program Standard/Requirement. This column provides specific requirements related to the statutes, administrative rules and references listed in column 1.
- Column 3 – Local Agency(s) Responsible. The local agencies (CHD, Local Educational Agency (LEA) and School Health Advisory Committee (SHAC)) determine the responsibilities for providing the services described columns 1 and 2.
- Column 4 – Local Implementation Strategy & Activities. This column describes the implementation strategies and activities to fulfill requirements in columns 1 and 2.

Plan submission:

- If the Plan signature page has not been signed by all parties on or before September 15, 2022, you may submit the plan at that time and submit the scanned signature page as a PDF file when it is fully signed.

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategies and Activities
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PART I: BASIC SCHOOL HEALTH SERVICES

<p>1. School Health Services Plan; Basic School Health Services; Comprehensive School Health Services and Full-Service Schools; Rule 64F-6.002, F.A.C.; ; ss. 381.0057; 402.3026, F.S.</p>	<p>1a. Each local school health services plan shall be completed biennially and approved and signed by, at a minimum, the superintendent of schools, the school board chairperson, and the county health department (CHD) administrator/director/health officer.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA) Local School Health Advisory Committee (LSHAC)</p>	<p>The Plan is completed, approved, and signed off biennially by the LEA superintendent of schools, school board chairperson, and LCHD director.</p>
	<p>1b. The local school health services plan shall be reviewed each year for the purpose of updating the plan. Amendments shall be signed by the school district superintendent and the CHD administrator/director/health officer and forwarded to the School Health Services Program office.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA) Local School Health Advisory Committee (LSHAC)</p>	<p>The plan is reviewed annually, and any significant updates will be signed off and approved by the school district superintendent and the CHD administrator/director/health officer and forwarded to the School Health Services Program office.</p>
	<p>1c. The local school health services plan shall describe employing or contracting for all health-related staff and the supervision of all school health services personnel regardless of the funding source.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>The LEA contracts with the LCHD for staffing and supervision of health-related services provided in the county public schools. The nursing supervisors directly supervise the staff who provide health services to the students. The school principal provides direct onsite administrative supervision of the staff assigned as outlined in LCHD/LEA Contract.</p>
	<p>1d. Each CHD uses annual Schedule C funding allocation to provide school health services pursuant to the School Health Services Act and the requirements of the Schedule C Scope of Work.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>Schedule C funds SCHGR, SCHHL (LEA), and SCHSP are used to provide school health services pursuant to the School Health Services Act and the requirements of the Scope of Work. Recruitment of staff is conducted year-round to guarantee all positions are filled to ensure all allocations of Schedule C funding are utilized.</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
	<p>1e. The CHD and LEA shall each designate one person, RN recommended, to be responsible for the coordination of planning, development, implementation, and evaluation of the program. These individuals should collaborate throughout the school year to assure program compliance and to plan and assess the delivery of program services.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>The LCHD and LEA each has designated one person, to be responsible for the coordination of planning, development, application, and evaluation of the program. Both individuals collaborate throughout the school year, to ensure program compliance and quality services are being provided. Monthly meetings are scheduled throughout the school year to discuss opportunities for improvements, make proposals and evaluate issues that may affect school health services. The following persons collaborate throughout the school year and have an excellent professional working relationship: Maureen Kelly, MSN, LCHD and Christopher Reed, M. Ed, LEA</p>
	<p>1f. Protocols for supervision of school health services personnel shall be described in the local school health services plan to assure that such services are provided in accordance with statutory and regulatory requirements and professional standards and are consistent with the Nurse Practice Act.</p>	<p>Local County Health Department (LCHD)</p>	<p>Protocols for supervision of school health services personnel are in place to assure that such services are provided in accordance with statutory and regulatory requirements and professional standards and are consistent with the Nurse Practice Act. Nursing supervisors hire, train and orient all new staff to School Health Services policies and procedures. All staff are assigned a Professional Nursing Supervisor.</p>
	<p>1g. Decisions regarding medical protocols or standing orders in the delivery of school health services are the responsibility of the CHD medical director in conjunction with district school boards, local school health advisory committees, the school district medical consultant if employed or the student's private physician.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA) Local School Health Advisory Committee (LSHAC)</p>	<p>All LCHD medical protocols or standing orders in the delivery of school health services are approved by the LCHD medical director in conjunction with the LEA, LSHAC, and the student's private physician when applicable.</p> <p>The LCHD and LEA refers to orders written by student's private physician</p>

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			in the delivery of School Health Services.
	1h. Establish procedures for health services reporting in Health Management System (HMS) and the annual report, to include services provided by all partners.	Local County Health Department (LCHD) Local Education Agency (LEA) Local School Health Advisory Committee (LSHAC)	There are established processes for health services reporting in the Health Management System (HMS) and in the annual report. Data is submitted by all staff (LCHD/LEA/LSHAC) to include services provided by all partners providing school health services. The data is collected and entered in our HMS by LCHD staff.
	1i. Each SHAC should include members representing the eight components of the Centers for Disease Control and Prevention's Coordinated School Health (CSH) model. The SHAC is encouraged to address the eight CSH components in the school district's wellness policy.	Local County Health Department (LCHD) Local Education Agency (LEA) Local School Health Advisory Committee (LSHAC)	The LEA takes the lead position in organizing the SHAC which is represented by members from the local school district, the health department, and the community. Our county LSHAC is modeled after the eight components of the Coordinated School Health Model and addresses the eight components in the school districts wellness policy. Our LSHAC conducts quarterly district level meetings that embraces the whole school, whole community, whole child model. Florida Healthy School District assessments are reviewed and conducted in collaboration by LCHD and LEA representatives who are active members of the LSHAC.
2. Health Appraisal s. 381.0056(4)(a)(1), F.S.	2a. Determine the health status of students.	Local County Health Department (LCHD) Local Education Agency (LEA)	The school will request parents/guardians to provide new or updated medical information to be listed in each student's file. This information is to be shared with need-

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
			to-know personnel, as necessary to provide medical care for the student. School records are reviewed for student health needs. Daily health needs of students are assessed during clinic visits. Parents will consent for this service (in writing) annually.
<p>3. Records Review s. 381.0056(4)(a)(2), F.S.; s.1003.22(1)(4) F.S.; Rules 64F-6.005(1), F.A.C.; 64F-6.004(1)(a), F.A.C.</p>	<p>3a. Perform initial school entry review of student health records, to include school entry physical, immunization status, cumulative health record, emergency information, school health screenings and student-specific health related documents.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>Student health records are reviewed by LCHD personnel and LEA registrars and administrators for initial school entry requirements. LCHD immunization technicians review student's immunization status (680) and school entry physicals.</p>
	<p>3b. Emergency information card/form for each student shall be updated each year.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>Annual reviews of each student's emergency information and medical status is conducted every year by LCHD personnel as well as LEA registrars and administrators at the beginning of the school year and throughout the year as needed.</p>
<p>4. Nurse Assessment s. 381.0056(4)(a)(3), F.S.; Rules: 64F-6.001(6), F.A.C.; 6A-6.0253, F.A.C.; 6A-6.0252, F.A.C.; 6A-6.0251, F.A.C. s. 1006.0626, F.S.</p>	<p>4a. Perform nursing (RN) assessment of student health needs.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>Designated health care staff conduct reviews of student medical status and develop a health condition list at the beginning of the school year. Designated RN will assess students with actual, potential, or suspected health problems and develop appropriate Nursing Care Plans for identified students. The school principal reviews and signs in collaboration with the nursing supervisor any chronic health forms being considered for approval</p>
	<p>4b. For day-to-day and emergency care of students with chronic and/or complex health conditions at school, the RN develops an individualized health care plan (IHP) and Emergency Care Plan (ECP).</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LCHD RN develop, as needed, an IHP and ECP for students with chronic or acute health conditions at the school in collaboration with the student, parent/guardian, school community as appropriate. The plans</p>

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	<p>4c. For day-to-day and emergency care of students with seizure disorders, the RN, with input from parent and MD orders, develops an individualized health care plan (IHP) and Emergency Care Plan (ECP).</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  Seizure EAP.docx </div> <div style="text-align: center;">  Seizure Care Plan-HD 249E (6-22). </div> </div>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>provide directives to the school team and complies with current applicable laws and standards of practice. The nurse trains unlicensed assistive personnel and school staff regarding plans.</p> <p>Establish that individualized seizure action plans (ISAP) for students with epilepsy or seizure disorders will be developed by the CHD RN in consultation with MD orders and the parent.</p> <p>Require the school clinic staff and all employees whose duties include regular contact with a student with an ISAP to have completed training by CHD RN, in the care of students with epilepsy and seizure disorders.</p> <p>LEA will require a school to provide epilepsy or seizure disorder care to a student based upon the student's ISAP or Section 504 Accommodation Plan.</p>
<p>5. Nutrition Assessment s. 381.0056(4)(a)(4), F.S.; Florida School Health Administrative Resource Manual, 2017</p>	<p>5a. Identify students with nutrition related problems and refer to an appropriate health care provider.</p>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>LCHD and LEA BMI screening technicians and/or school staff identify students with nutrition-related problems through height/weight/BMI screenings of the mandated grades, and students who appear or are reported to be at-risk are referred to medical provider, nutritionist and/or appropriate healthcare provider. Parents will consent for this service (in writing) annually.</p> <p>LCHD personnel will observe students visiting the health room who may also be identified as students with nutritional related needs, by the</p>

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			school clinic staff, and they will be referred to their medical provider. A three-attempt follow up is always conducted by the school health staff to complete the referral process.
6. Preventive Dental Program s. 381.0056(4)(a)(5), F.S.	6a. Provide services such as oral health education, screenings and referrals, dental sealants, fluoride varnish and/or fluoride rinse as appropriate.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD staff will provide oral health education, screenings and referrals as needed. With written consent from parents/guardians, LCHD licensed dental hygienists will provide dental sealants, fluoride varnish and a recommendation for follow up dental services to age-appropriate students in participating Title 1 schools for second and sixth grade.
7. Health Counseling s. 381.0056(4)(a)(10), F.S.	7a. Provide health teaching/health advice as appropriate.	Local County Health Department (LCHD) Local Education Agency (LEA)	The LCHD school health staff will provide health teaching/health advice as required. Referrals will be made to the RN supervisor as needed for additional assessments (as needed) of both students and/or parents/guardians. Also, if deemed necessary, the LEA will refer student to appropriate counselor / social worker school staff. Parents will consent for this service (in writing) annually.
8. Referral and Follow-up of Suspected and Confirmed Health Problems s. 381.0056(4)(a)(11), F.S.	8a. Provide referral and follow-up for abnormal health screenings, emergency health issues and acute or chronic health problems. Coordinate and link to community health resources.	Local County Health Department (LCHD) Local Education Agency (LEA)	Parents are notified by letter or given a direct call by the LCHD School Health Program staff for any student identified with abnormal screening results, emergency health issues and/or acute or chronic health problems. Nursing staff maintains a tracking system for the referrals and follow-ups. A three attempt follow up is always conducted by the school health staff to complete the referral process. The results are documented in the BPS current student information system electronic records. Medical referrals are made to the LCHD

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			and/or other local health providers, community health centers as necessary.
<p>9. Provisions for Screenings s. 381.0056(4)(a)(6-9), F.S.; Rule 64F-6.003(1-4), F.A.C.</p>	<p>9a. Provide mandated screenings: (1) Vision screening shall be provided, at a minimum, to students in grades kindergarten, 1, 3 and 6 and students entering Florida schools for the first time in grades kindergarten – 5. (2) Hearing screening shall be provided, at a minimum, to students in grades kindergarten, 1 and 6; to students entering Florida schools for the first time in grades kindergarten – 5; and optionally to students in grade 3. (3) Growth and development screening shall be provided, at a minimum, to students in grades 1, 3 and 6 and optionally to students in grade 9. (4) Scoliosis screening shall be provided, at a minimum, to students in grade 6.</p>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>Parent/Guardian may opt out of all statute mandated screening:</p> <ol style="list-style-type: none"> 1) Perform Vision Screenings for a minimum of 45 percent of non-exempted students in kindergarten, first, third, and sixth grade by December 31 and a minimum of 95 percent by March 31 of each contract year. 2) Perform Hearing Screenings for a minimum of 45 percent of non-exempted students in kindergarten, first, and sixth grade by December 31 and a minimum of 95 percent by March 31 of each contract year. 3) Perform Growth and Development Screenings for a minimum of 45 percent of non-exempted students in first, third, and sixth grade by March 31 and a minimum of 95 percent by June 30 of each contract year. 4) Perform Scoliosis Screenings for a minimum of 45 percent of non-exempted students in sixth grade by March 31 and a minimum of 95 percent by June 30 of each contract year.

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
	9b. Obtain parent/guardian permission in writing prior to any invasive screening, (e.g., comprehensive eye exam).	Local County Health Department (LCHD) Local Education Agency (LEA)	Parent/Guardian will consent for these services in writing annually.
	9c. Refer students with abnormal screening results to service providers for additional evaluation and/or treatment (e.g., state contracted vision service providers).	Local County Health Department (LCHD) Local Education Agency (LEA)	Referrals are made, as needed, to student's private physicians. All students with abnormal screening results will be referred to the appropriate health care providers for further evaluation and treatment within 45 days of receiving the screening results. Document all referrals made in the student cumulative health record. Provide at least one follow-up with the parents or guardians of students referred within 45 days of referring the student for further evaluation or treatment to ensure the students receive the necessary care. Document the attempt(s) to follow-up with the parents or guardians.
10. Meeting Emergency Health Needs ss. 381.0056(4)(a)(10), F.S.; s. 1006.165, F.S.; Rule 64F-6.004(1), F.A.C.; Emergency Guidelines for Schools, 2019 Florida Edition	10a. Ensure written health emergency policies and protocols are maintained and include minimum provisions. Ensure that student emergency information forms/cards are updated annually and completed for each student listing contact person, family physician, allergies, significant health history and permission for emergency care.	Local County Health Department (LCHD) Local Education Agency (LEA)	All schools in Brevard County have been issued an <u>Emergency Guidelines for Schools 2019</u> , Florida edition manual. The guide is used to handle a large variety of medical emergencies involving children. The guidelines are in the staff health room. LCDH and LEA staff have access to and have been trained on the guidelines.
	10b. Ensure health room staff and two additional staff in each school are currently certified in cardiopulmonary resuscitation (CPR) and first aid and a list is posted in key locations.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD staff and LEA designated additional health room staff in each school that are CPR certified. Postings of their names and numbers are in key strategic areas throughout the school for identification. Areas such as health clinic room, cafeteria, gymnasium etc. areas that pose an increase potential for injures. Copies

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
			of staff certifications are maintained and kept up to date by LCHD and LEA administrator/ supervisors.
	10c. Assist in the planning and training of staff responsible for emergency situations.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD and LEA will plan for supervisors to train all school health room personnel who will be designated the responsibility of responding to emergency situations. All LCDH and LEA staff assigned to health rooms receive training by LDOH nursing supervisors and nursing liaison throughout the year. LCHD staff are trained on an ongoing basis to update their CPR status and use of AED.
	10d. The school health clinic personnel will monitor adequacy and expiration of first aid supplies, emergency equipment and facilities.	Local County Health Department (LCHD) Local Education Agency (LEA)	All LCHD school health personnel are trained and expected to review and monitor the adequacy and expiration dates of all first aid supplies and equipment in each school. The nursing supervisors conduct audit clinic checks throughout the school year to assess for compliance.
	10e. The school principal (or designee) shall assure first aid supplies, emergency equipment and facilities are maintained.	Local County Health Department (LCHD) Local Education Agency (LEA)	The school principals and health room staff work collaboratively to maintain health room supplies ordered and updated for emergency use. LEA will order supplies as needed.
	10f. All injuries and episodes of sudden illness referred for emergency health treatment shall be documented and reported immediately to the principal, or the person designated by the principal or the acting principal.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD and LEA are jointly responsible to document as per agency protocols all injuries and/or episodes of sudden illness referred for emergency treatment. LCHD and LEA staff will notify immediately the principal and agency administrators of emergency event; as well as the parent/guardian provided on the individual student contact list.

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
	<p>10g. It is the responsibility of each school that is a member of the Florida High School Athletic Association to:</p> <ul style="list-style-type: none"> (1) Have an operational automatic external defibrillator (AED); (2) Ensure employees expected to use the AED obtain appropriate training. (3) Register the AEDs with the county emergency medical services director. 	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>Brevard School District policies are followed regarding the use of AEDs. All schools in Brevard County have an operational automatic external defibrillator (AED). Appropriate training has been offered to LCHD and LEA staff designated to maintain and use the equipment. The AEDs are checked and maintained by school district administrative appointed staff. Documentation of battery-operated equipment operational status is conducted as per protocols.</p>
<p>11. Assist in Health Education Curriculum s. 381.0056(4)(a)(13), F.S.</p>	<p>11a. Collaborate with schools, health staff and others in health education curriculum development.</p>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>LCHD and LEA staff collaborate to develop health education curricula to students as needed throughout the school year, e.g., Student/Parent newborn/child growth and development, Opioid Use Prevention Program.</p> <p>LEA prepares and uses educational plans for numerous topics from hygiene to human sexuality in consultation with the School Health Supervising RN or their designee. Community guest speakers along with the LCHD nurses are used for staff educational in-services to raise awareness in high-risk areas such as smoking, illicit drug use, etc., and as determined by the LEA.</p>
<p>12. Refer Student to Appropriate Health Treatment s. 381.0056(4)(a)(14), F.S.</p>	<p>12a. Use community or other available referral resources. Assist in locating referral sources for Medicaid eligible, uninsured, and underinsured students.</p>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>LCHD and LEA collaborate when the need arises to refer students requiring health treatment by medical health care providers. LCHD utilizes various resource lists and or informative flyers of community health providers such as Florida Department of Children and Families, ACCESS Florida, Agency for Health Care, Florida Kid</p>

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			care, Non-Profit organizations, Brevard Health Alliance, Brevard Family Partnership resources, Florida Heiken Vision program and others. Students are referred to their private physician, community health center programs, county health department clinics, and/or other resources in the community as needed. Assistance in locating the referral sources is provided utilizing Brevard 211 telephone number
13. Consult with Parent/Guardian Regarding Student's Health Issues s. 381.0056(4)(a)(15), F.S. ; Rule 64F-6.001(1), F.A.C.	13a. Provide consultation with parent/guardian, students, staff, and physicians regarding student health issues.	Local County Health Department (LCHD) Local Education Agency (LEA)	LEA and LCHD Brevard School Health Program personnel often meet with parents to determine the best options for care of the student. LCHD Nursing staff communicate with physicians and other health professionals as required.
14. Maintain Health-Related Student Records s. 381.0056(4)(a)(16), F.S. ; s. 1002.22, F.S. ; Rule 64F-6.005(1)(2), F.A.C.	14a. Maintain a cumulative health record for each student that includes required information.	Local County Health Department (LCHD) Local Education Agency (LEA)	All mandatory health information is placed and maintained in each student's cumulative health folder and/or maintained in the school district's student information system by LCHD data entry staff or clinic health staff or LEA administrative staff.
15. Nonpublic School Participation s. 381.0056(5)(a)(18), F.S. s. 381.0056(5)(a)-(g), F.S.	15a. Notification to the local nonpublic schools of the school health services program, allowing the nonpublic school to request participation in the school health services program provided they meet requirements.	Local County Health Department (LCHD) Local Education Agency (LEA)	Every school year area private schools are contacted by LCHD/LEA with an approved letter and in person by School Health Program RN staff concerning contact information and services that are available at their request. They are also informed that FDOH-Brevard staff will be visiting several times a year to check student physical and immunization status. Private schools are notified by letter concerning specified requirements that they must meet if they wish to participate in any offered services.

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
<p>16. Provision of Health Information for Exceptional Student Education (ESE) Program Placement s. 381.0056(4)(a)(17), F.S.; Rules 6A-6.0331, F.A.C.; 64F-6.006, F.A.C.</p>	<p>16a. The District School Board will ensure that relevant health information for ESE staffing and planning is provided.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LCHD School Health nursing staff is involved in student IEPs as requested by LEA school district staff in the schools to assist in determining student levels of appropriate care.</p>
<p>17. Provide In-service Health Training for School Personnel s. 381.0056(6)(b), F.S.; Rule 64F-6.002, F.A.C.</p>	<p>17a. The District School Board will ensure that district staff are provided with training to assist with the day-to-day and emergency health needs of students.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>In-service trainings related to school staff back-up policy for school health clinic services: Basic First Aid, medication administration and emergency actions are provided as needed, throughout the school year for LEA staff by the LCHD Nursing Supervisors or Nursing Program Specialists. Also, an in-service agenda is created for quarterly trainings for LCHD clinic staff, to occur. Training providers at the quarterly training in-service can include DOH Brevard school nursing supervisors and liaisons, Physicians and health care providers from local pediatric medical centers other health information centers, LEA district subject matter experts and other community partners.</p>
<p>18. Health Services and Health Education as Part of the Comprehensive Plan for the School District. s. 381.0056(6)(a), F.S.; Rule 64F-6.002, F.A.C.</p>	<p>18a. The District School Board will ensure that school-based health services and health education are provided to public school children in grades pre-kindergarten - 12.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LCHD and LEA provide Health Education as mandated, e.g., Healthy Bodies. And as needed, e.g., hand washing.</p>
<p>19. Physical Facilities for Health Services s. 381.0056(6)(c), F.S.; State Requirements for Educational facilities, 2014 and/or State Requirements for Existing Educational Facilities 2014</p>	<p>19a. The District School Board will ensure that adequate health room facilities are made available in each school and meet the Florida Department of Education requirements.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>The LEA ensures that each school has a designated clinic room with adequate physical facilities available to provide health services in compliance with the minimum requirements as identified in the DOE guidelines and DOH Environment Guidelines. The school principal or designated person assures first aid</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
			supplies, emergency equipment and facilities are maintained. Clinic audits are conducted by LCHD supervisors to assess for compliance and correct deficiencies
20. Helping Children be Physically Active and Eating Healthy s. 381.0056(6)(d), F.S.	20a. The District School Board will ensure that at the beginning of each school year, a list programs and/or resources is made available to the parent/guardian so they can help their children be physically active and eat healthy foods.	Local Education Agency (LEA)	LEA maintains school wellness and physical education policies that include nutrition guidelines to encourage physical activity and healthy lifestyles. The LEA annually reviews the school Wellness Policy and provides a procedure for public input and revisions. Nutritionist and Dietitians, Nutritional Services for the local school district attend the School Health Advisory Committee (SHAC) meetings and collaborate with the LEA reviews. The SHAC address the eight components of the Coordinated School Health model in the school district's Wellness Policy.
21. Inform Parent/Guardian of the Health Services Provided s. 381.0056(6)(e), F.S.	21a. The District School Board will ensure that at the beginning of each school year, the parent/guardian will be informed in writing that their children will receive specified health services as provided for in the district health services plan and the opportunity to request an exemption of any service(s) in writing.	Local County Health Department (LCHD) Local Education Agency (LEA)	All students enrolled in BPS have the opportunity to receive the following health services. Parents will have the opportunity to consent to services, in writing, annually. Health screenings at state required grade levels to include vision, hearing, scoliosis and growth and development <ul style="list-style-type: none"> • Dental screenings and preventive services • Health appraisals and record reviews • Nutritional assessments • Referrals for appropriate health treatment when need identified • Routine basic first aid

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
<p>22. Declaring a Communicable Disease Emergency s. 1003.22(9), F.S.; Rule 64F-6.002(2)(d), F.A.C.</p>	<p>22a. The county health department director, administrator or the state health officer may declare a communicable disease emergency in the event of any communicable disease for which immunization is required by the Florida Department of Health in a Florida public or private school. A communicable disease policy must be developed and needs to provide for interagency coordination during suspected or confirmed disease outbreaks in schools.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>There is a process in place for which the LCHD, and the LEA collaborate with the Department/Disease control section, and the immunization section, to communicate suspected communicable diseases and work to track potential cases. Updated reportable disease listings are posted in each school clinic. Outbreak logs for monitoring and surveillance activities are available in the School Health Manual. CHD Epidemiology teams are available for all suspected outbreaks. School nurses provide educational information to staff/students and parents, stressing hand washing, covering coughs, implementing good health habits and other disease prevention strategies.</p>
<p>23. Administration of Medication and Provision of Medical Services by District School Board Personnel s. 1006.062(1)(a), F.S.;</p>	<p>23a. The District School Board will include provisions to provide training, by a registered nurse, (pursuant to Chapter 458 or 459, F.S.), to the school personnel designated by the school principal to assist students in the administration of prescribed medication.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>All LEA staff designated by the school principal to assist students with their medications, are trained and observed with a demonstration of competency signed off by the LCHD RN in the administration of medication. Records of trainings are maintained.</p> <p>The School Health Program Manual is the standardized training manual to train designated school personnel on medication administration and to minimize medication risks.</p> <p>Medication administration rules, guidelines and procedures are included in the School Health Manual located in every school health room. Parents are also invited to attend and participate along with the school's registered nurse in child specific</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
			medication and procedure trainings for the student.
<p>24. Policy and Procedure Governing the Administration of Prescription Medication s. 1006.062(1)(b), F.S.; Rule 64B9-14, F.A.C.</p>	<p>24a. The District School Board will adopt policies and procedures governing the administration of prescription medication by district school board personnel and be consistent with delegation practices.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LEA has in place a "Use of Medication" policy/procedure. This policy is reviewed prior to the start of each school year for possible changes or additions. Each school has principal designated staff to carry out medication administration in the absence of the clinic staff. These individuals have been trained and signed off by LCHD School Health RN staff. Signed training verification is located in each clinic</p>
<p>25. Policy and Procedure for Allowing Qualified Patients to use Marijuana. s. 1006.062(8), F.S.; s. 381.986, F.S.</p>	<p>25a. Each district school board shall adopt a policy and a procedure for allowing a student who is a qualified patient, as defined in s. 381.986, to use marijuana obtained pursuant to that section.</p> <p>25b. Pursuant to the district policy, develop procedures to follow when parents of students, that are qualified patients, request that medical marijuana be administered to their child at school.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>A parent/guardian of a Qualified Patient must submit a completed form:5330-F1. This form must be completed by a qualified physician for any and all medical marijuana that a Qualified Patient will require during the school day. The registered caregiver shall be responsible for safely administering and transporting the medication to and from school each day.</p> <p>The principal of designee shall prepare an Individual Health Care Plan (IHCP), with input from the Qualified Patient, registered care giver and appropriate school personnel. The IHCP will identify the prescribed form of marijuana, designated location for use and any protocol regarding administration by</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
	25c. Ensure that all school health room/clinic staff and school staff designated by principals have read and have on file the school district policy on medical marijuana.		<p>the registered care giver to the Qualified Patient (if needed). The school administrator, the LCHD Nursing supervisor/program specialist, the Qualified Patient (if capable), the Qualified Patient's parent/guardian and the registered caregiver (if applicable) shall sign the written IHCP.</p> <p>No staff from the LCHD nor LEA are permitted to handle, administer, or store medical marijuana in any form.</p>
26. Students with Asthma Carrying a Metered Dose Inhaler s. 1002.20(3)(h), F.S.; National Association of School Nurses (NASN) Position Statement, The Use of Asthma Rescue Inhalers in the School Setting	26a. Students with asthma whose parent/guardian and physician provide approval, may carry a metered dose inhaler on their person while in school. Ensure written authorization for use of metered dose inhaler at school is completed and signed by health care provider and parent/guardian.	Local County Health Department (LCHD) Local Education Agency (LEA)	<p>The LEA shall permit a student to carry in his/her possession medically necessary emergency devices such as a metered dose inhaler prescribed to the individual by a physician. The LEA shall require proper documentation from the licensed physician and written authorization from the student's parent.</p> <p>LCHD RN will develop and implement health care planning documentation, which includes an IHP and asthma emergency action plan with input from the medical provider, parent, student, and school staff. The LCHD RN will ensure the Emergency Action Plan clearly states that the child was trained and can carry the medication. This authorization will be signed by the physician and the parent. Child specific training will be provided as needed</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
<p>27. Students with Life Threatening Allergies s. 1002.20(3)(i), F.S.; Rules 6A-6.0251, F.A.C.; 64F-6.004(4), F.A.C.; NASN Position Statement on Rescue Medications in School; Students with Life-Threatening Allergies, 2017 Updated Guidance</p>	<p>27a. Ensure that written parent/guardian and physician authorization has been obtained from students who may carry an epinephrine auto-injector and self-administer while enroute to and from school, in school, or at school-sponsored activities.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>The LEA shall permit a student to carry in his/her possession medically necessary emergency devices such as an Epi-Pen prescribed to treat life threatening conditions by the student's physician. The LEA shall ensure District policy and procedures for students with life- threatening allergies practicing self-medication and self-care will be followed. LCHD RN will ensure there is proper documentation for the student to self-carry medication from the licensed physician and written authorization from the student's parent.</p>
	<p>27b. For students with life threatening allergies, the RN shall develop and update annually IHP that includes an ECP, in cooperation with the student, parent/guardian, physician and school staff. The IHP shall include child-specific training to protect the safety of all students from the misuse or abuse of auto-injectors. The ECP shall direct that 911 will be called immediately for an anaphylaxis event and have a plan of action for when the student is unable to perform self-administration of the epinephrine auto-injector.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>The LCHD RN will develop and implement health care planning documentation, which includes an IHP and allergy emergency action plan, ECP, with input from the medical provider, parent, student, and school staff. The LCHD RN ensures the Emergency Action Plan clearly states that the child was trained and can carry the medication. Student specific training will be provided to staff as needed.</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
28. Epinephrine Auto-injectors Use and Supply s. 1002.20(3)(i)(2), F.S.	28a. If the school district has chosen to maintain supplies of epinephrine auto-injectors from a wholesale distributor or manufacturer as defined in s. 499.003, F.S., the School District Board will insure that a standing order and written protocol be developed by a licensed physician and is available at all schools where the epinephrine auto-injectors are stocked. The participating school district shall adopt a protocol developed by a licensed physician for the administration by school personnel who are trained to recognize an anaphylactic reaction and to administer an epinephrine auto-injection.	Local County Health Department (LCHD) Local Education Agency (LEA)	The LEA in conjunction with the LCHD has chosen at this time not to maintain a supply of Epi -Pen auto injectors. Each parent/guardian is requested to be responsible for providing all medications their child may need during school hours.
29. Emergency Allergy Treatment s. 381.88, F.S.	29a. The School District Board will ensure that school staff, who are designated by the principal, (in addition to school health staff in the school clinic), to administer stock epinephrine auto-injectors (not prescribed to an individual student) are trained by a nationally recognized organization experienced in training laypersons in emergency health treatment or an entity approved by the Florida Department of Health.	Local County Health Department (LCHD) Local Education Agency (LEA)	Each parent/guardian is requested to be responsible for providing all medications their child may need during school hours. All students that required epinephrine autoinjectors will have their private medical doctor prescribe them with an epinephrine autoinjector for their individual use. All LEA school health room assigned staff and health room assigned LCHD staff assigned to the school health room receives medication administration training by LCHD nursing supervisory staff, which includes the management of symptoms of anaphylactic reactions and how to administer epinephrine auto injectors, as well as notifying 911, parents and the documentation of the event.
	29b. The curriculum must include at a minimum: (a) Recognition of the symptoms of systemic reactions to food, insect stings, and other allergens; and (b) The proper	Local County Health Department (LCHD)	Training materials will cover: <ul style="list-style-type: none"> • Onset of symptoms • Allergic triggers (food, insect bites, other allergens)

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
	administration of an epinephrine auto-injector.	Local Education Agency (LEA)	<ul style="list-style-type: none"> Treatment – use of epinephrine auto-injector.
30. Diabetes Management s. 1002.20(3)(j), F.S.; Rule 6A-6.0253, F.A.C.-Diabetes management	30a. Students with diabetes must have a Diabetes Medical Management Plan (DMMP) from the student’s health care provider that includes medication orders and orders for routine and emergency care.	Local County Health Department (LCHD) Local Education Agency (LEA)	Diabetes medical management plan treatment/authorization is to be completed by the medical provider and provided by the parent/guardian to the school. LCHD and LEA ensure BPS policy and procedures for Diabetes management is followed.
	30b. An IHP will be developed from the DMMP by the RN in collaboration with the parent/guardian, student, health care providers and school personnel for the management of diabetes while enroute to and from school, in school, or at school-sponsored activities.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD RN staff, using the DMMP and input from parent/guardian, will develop an individualized Health Care Plan/Emergency Care Plan Provide child specific training as needed for school personnel for the management of diabetes.
	30c. An ECP will be developed as a child-specific action plan to facilitate quick and appropriate responses to an individual emergency in the school setting.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD RN staff shall complete and Emergency Action Plan to facilitate quick and appropriate responses to an individual emergency within the school setting. Provide child specific training as needed for school personnel for the management of diabetes.
	30d. Maintain a copy of the current physician's diabetes medical management plan and develop and implement an IHP and ECP to ensure safe management of diabetes.	Local County Health Department (LCHD) Local Education Agency (LEA)	Along with the DMMP the LCHD/School health staff shall complete and Emergency Action Plan to facilitate quick and appropriate responses to an individual emergency within the school setting.
31. Diabetes Self-Management s. 1002.20(3)(j), F.S.; Rule 6A-6.0253, F.A.C.-Diabetes management	31a. Students with diabetes that have physician and parent/guardian approval may carry their diabetic supplies and equipment and self-manage their diabetes while enroute to and from school, in school, or at school- sponsored activities. The	Local County Health Department (LCHD) Local Education Agency (LEA)	LEA shall permit a student to carry their own diabetes supplies and equipment and self-manage their diabetes while enroute to and from school, in school or at school-sponsored activities with written authorization from physician and

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
	written authorization shall identify the diabetic supplies, equipment, and activities the student can perform without assistance for diabetic self-management, including hypoglycemia and hyperglycemia.		parent/guardian. The LCHD/School Health staff ensures the Authorization for Medication/Emergency Action Plan clearly states that the student was trained and can carry the medication and has been signed by the physician and parent. School health staff will provide and implement health care planning documentation, LCHD RN staff, in collaboration with LEA, will develop an IHP, DMMP with a diabetic emergency action plan. All training will be student specific as needed
	31b. Maintain a copy of the current physician's diabetes medical management plan and develop and implement an IHP and ECP to ensure safe self-management of diabetes.	Local County Health Department (LCHD) Local Education Agency (LEA)	Along with the DMMP the LCHD/School health staff shall complete and Emergency Action Plan to facilitate quick and appropriate responses to an individual emergency within the school setting.
32. Use of Prescribed Pancreatic Enzyme Supplements s. 1002.20(3)(k), F.S.; Rule 6A-6.0252, F.A.C.	32a. Develop and implement an IHP and ECP for management of the conditions requiring pancreatic enzyme supplements and to ensure that the student carries and self-administers such supplements as prescribed by the physician.	Local County Health Department (LCHD) Local Education Agency (LEA)	LEA with LCHD will ensure policy and procedures for students with pancreatic enzyme supplements are followed. Treatment/authorization is to be completed by the medical provider and provided by the parent/guardian to the school.
	32b. Maintain documentation of health care provider and parental/guardian authorization for a student to self-carry and self-administer a prescribed pancreatic enzyme supplement while enroute to and from school, in school, or at school sponsored activities.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD RN will develop and implement an individualized Health Care Plan/Emergency Care Plan and provide student-specific training as needed. The LCHD RN will ensure school staff is aware of plans and treatment is provided as plan indicates. LCHD RN will provide training to school personnel, if student is unable to self-care and manage health condition refer for 504 consideration or accommodation.

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
<p>33. Administration of Medication and Provision of Medical Services by Nonmedical Assistive Personnel s. 1006.062(4), F.S.; Rules: 64B9-14.002(3), F.A.C., 64B9-14, F.A.C.;</p>	<p>33a. The School District Board will ensure that nonmedical assistive personnel be allowed to perform health-related services upon successful completion of child specific training by a registered nurse or advanced registered nurse practitioner, physician, or physician assistant.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LCHD nursing supervisors will provide nonmedical assistive health room personal, LEA staff, parents and students with education and child specific training as needed and prior to delegation of health-related task and activities. The documentation of training and competencies are signed off and dated by the RN and the trainee. Nursing supervisors will monitor and assure that all health care professionals providing health services have their licenses, training and education documented</p>
	<p>33b. An RN must document health related child-specific training for delegated staff. The delegation process shall include communication to the unlicensed assistant personnel (UAP) which identifies the task or activity, the expected or desired outcome, the limits of authority, the time frame for the delegation, the nature of the supervision required, verification of delegate's understanding of assignment, verification of monitoring and supervision. The documentation of training and competencies should be signed and dated by the RN and the trainee.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LCHD Nursing supervisors will monitor and assure that all trainings for non-medical assistant personnel are documented and that procedures for delegation functions are followed as delineated in these standards. Child specific training delegation checklist is signed and filed in student's health treatment record.</p>
	<p>33c. The School District board will ensure that the use of nonmedical assistive personnel shall be consistent with delegation practices per requirements.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LCHD use of nonmedical assistive personnel is consistent with delegation practices per Nurse Practice Act. LCHD RN supervisors/RN clinic staff will use their nursing judgment in considering the suitability of the task or activity to be delegated with training.</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
<p>34. Background Screening Requirements for School Health Services Personnel Chapter 435, F.S., s. 381.0059, F.S.; s. 1012.465, F.S.</p>	<p>34a. The District School Board and CHD will ensure that any person who provides services under this school health services plan must meet the requirements of a level 2 background screening.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>LCHD and LEA will ensure a Level 2 background screenings have been conducted on all staff hired to provide school health services, in the school system, and have been cleared before staff provide school health services in schools. LCHD and LEA has established policies and procedures to ensure that only individuals who have undergone a background screening and have been approved to come on campus are allowed access on school grounds when students are present, or to have direct contact with students.</p>
<p>35. Involuntary Examination s. 394.463, F.S. including: s. 1002.20(3)(l), F.S.; s. 1002.33(9), F.S.; s. 381.0056(4)(a)(19), F.S.</p>	<p>35a. The School District Board will ensure that it develops policies and procedures for the implementation of this statutory requirement. A reasonable attempt must be made to notify a student's parent/guardian, or caregiver before the student is removed from school, school transportation, or a school-sponsored activity and taken to a receiving facility for an involuntary examination.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<ol style="list-style-type: none"> 1. Before a principal/designee contacts a law enforcement officer for possible removal of a student from school for involuntary examination, the principal must verify that the school has used de-escalation strategies and initiated outreach to a Mobile Response Team (MRT), unless the principal reasonably believes that any delay in removing the student will increase the likelihood of harm to the student or others. 2. A reasonable attempt must be made to notify a student's parent, guardian, or caregiver if the student is removed from school, school transportation, or a school-sponsored activity to be taken to a receiving facility for an involuntary examination pursuant to F.S. 394.463, including and subject to the requirements and

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
			<p>exceptions established under F.S. 1002.20 (3) and F.S. 1002.33 (9), as applicable.</p> <p>3. Reasonable attempts to notify means the exercise of reasonable diligence and care by the principal to contact the student's parent, guardian, or other known emergency contact whom the student's parent or guardian has authorized to receive notification of an involuntary examination. At a minimum, the principal must take the following actions:</p> <p>a. Use available methods of communication to contact the student's parent, guardian, or other known emergency contact including, but not limited to, telephone calls, text messages, e-mails, and voicemail messages following the decision to initiate an involuntary examination of the student.</p> <p>b. Document the method and number of attempts made to contact the student's parent, guardian, or other known emergency contact, and the outcome of each attempt.</p> <p>4. The principal who successfully notifies any other known emergency contact may share only the information necessary to alert such contact that the parent or caregiver must be contacted. All such information must be in compliance federal and state law.</p> <p>5. The principal may delay notification for no more than</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
			<p>twenty-four (24) hours after a student is removed if the principal deems the delay to be in the student's best interest and if</p> <p>a. a report has been submitted to the central abuse hotline, pursuant to F.S. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect; or</p> <p>b. the principal reasonably believes that such delay is necessary to avoid jeopardizing the health and safety of the student.</p>
<p>36. Parental Consent for Health Care Services Section 1014.06, F.S.</p>	<p>36. The School District Board must ensure that it develops policies and procedures for the implementation of the Parent's Bill of Rights. Address the following statutory requirements:</p> <p>(1) Obtain written parental consent prior to providing, soliciting, or arranging to provide health care services or provide prescription drugs to a minor child.</p> <p>(2) Obtain written parental consent prior to a medical procedure to be performed on a minor child in its facility.</p>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>Written consent by the parent/guardian for health care services outlined in the Health Service Plan will be obtained annually.</p>
<p>PART II: COMPREHENSIVE SCHOOL HEALTH SERVICES (CSHSP)</p>			
<p>37. The Provision of Comprehensive School Health Services. The Services Provided Under This Section are Additional and are Intended to Supplement,</p>	<p>37a. Provide in-depth health management, interventions, and follow-up through the increased use of professional school nurse staff.</p>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>LCHD nursing staff provide in-depth health management through the nursing process, mandated health screenings, observation, consultation with outside health practitioners and LEA school staff.</p>

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
PART II: COMPREHENSIVE SCHOOL HEALTH SERVICES (CSHSP)			
Rather Than Supplant, Basic School Health Services. s. 381.0057(6), F.S.; s. 743.065, F.S.	37b. Provide health activities that promote healthy living in each school.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD nursing staff and LEA school staff deliver opportunities to promote healthy living in school.
	37c. Provide health education classes.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD nursing staff and LEA school staff deliver opportunities to promote healthy living in school. through discussions on hand washing, healthy diets, avoidance of drugs and alcohol. LEA staff, students and parents/guardians will have the opportunity to receive information from the LCHD OD2A coordinator for opioid avoidance
	37d. Provide or coordinate counseling and referrals to decrease substance abuse/ misuse.	Local County Health Department (LCHD) Local Education Agency (LEA)	LEA staff, students and parents/guardians will have the opportunity to receive information from the LCHD OD2A coordinator for opioid avoidance
	37e. Provide or coordinate counseling and referrals to decrease the incidence of suicide attempts.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD school clinic staff have received training to identify possible suicidal behavior and will immediately notify LEA psychology/SW counselors for further evaluation and interventions as necessary.
	37f. Provide or coordinate health education classes to reduce the incidence of substance abuse or misuse, suicide attempts and other high-risk behaviors.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD school clinic staff have received training to identify possible risky behavior or substance abuse and will immediately notify LEA psychology/SW counselors for further evaluation and interventions as needed.
	37g. Identify and provide interventions for students at risk for early parenthood.	Local County Health Department (LCHD)	Student-Parent Program led by LCHD RN in partnership with LEA health science. To inform and reduce

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
PART II: COMPREHENSIVE SCHOOL HEALTH SERVICES (CSHSP)			
		Local Education Agency (LEA)	pregnancy of students before graduation.
	37h. Provide counseling and education of teens to prevent and reduce involvement in sexual activity.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD school clinic staff have received training to identify possible early sexual activity and will notify LEA psychology/SW counselors for further evaluation and interventions as necessary.
	37i. Collaborate with interagency initiatives to prevent and reduce teen pregnancy.	Local County Health Department (LCHD) Local Education Agency (LEA)	Student-Parent Program led by LCHD RN in partnership with LEA
	37j. Facilitate the return to school after delivery and provide interventions to decrease repeat pregnancy.	Local County Health Department (LCHD) Local Education Agency (LEA)	Student-Parent Program led by LCHD RN in partnership with LEA health science. To inform and reduce pregnancy of students before graduation.
	37k. Refer all pregnant students who become known to staff for prenatal care and Healthy Start services.	Local County Health Department (LCHD) Local Education Agency (LEA)	Student-Parent Program led by LCHD RN in partnership with LEA health science. To inform and reduce pregnancy of students before graduation.

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
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PART III: HEALTH SERVICES FOR FULL SERVICE SCHOOLS (FSS)

<p>38. Full Service Schools s. 402.3026(1), F.S.</p>	<p>38a. The State Board of Education and the Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p> <p>The Florida Department of Health shall jointly establish FSS to serve students from schools that have a student population at high risk of needing medical and social services.</p>	<p>Local County Health Department (LCHD)</p> <p>Local Education Agency (LEA)</p>	<p>FSS will provide health and social services that include Basic School Health Services and additional specialized services that integrate education medical, social, and human services such as nutrition services, basic medical services, aid to dependent children parenting skills counseling for abused children counseling for children at high risk for delinquent behavior and their parents/guardians and adult education to meet the needs of the high-risk population and their families.</p>
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Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
	38b. Designate FSS based on demographic evaluations.	Local County Health Department (LCHD) Local Education Agency (LEA)	All district schools have LCHD-Brevard School Health Program health staff working in the school clinic. The staff works under the MOA established by LEA. The staff provides health care to the student population. Health screenings are performed for mandated grade levels. Working in conjunction with the school LEA, individual student counseling takes place for students based on need and display of high-risk behavior. RN nursing supervisor is always available to assist in any way necessary.
	38c. Provide nutritional services.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD and LEA collaborate to ensure parents and guardians are aware of any student identified by the professional nursing staff to appear to be at risk for nutritional deficiency. BMI screeners conduct height and weight measurements and notify parents of any need to follow up with their medical doctor. Nutritional educational information is provided to students, parents/ guardians. Follow ups are conducted as per school health protocol.
	38d. Provide basic medical services.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD nursing staff will provide Basic First Aid, medication administration and emergency care, as required. LCHD staff will refer students for further medical services as needed.
	38e. Provide referral to dependent children Temporary Assistance to Needy Families (TANF).	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD with LEA staff will refer student to appropriate services as needed.
	38f. Provide referrals for abused children.	Local County Health Department (LCHD) Local Education Agency (LEA)	LCHD and LEA staff are trained in child abuse reporting. Mandatory reporting is conducted as needed to the 1-800-96 Abuse line. LCHD and LEA collaborate

Statute and/or Rule References	Program Standard/Requirement	Local Agency(s) Responsible	Local Implementation Strategy & Activities
			<p>to assess the needs of the students identified as possible abused children. Referrals are made for students who are abused, neglected, or require mental health assistance, DCF services, Law enforcement is called and notified as necessary</p>
	<p>38g. Provide specialized services as an extension of the educational environment that may include nutritional services, basic medical services, aid to dependent children, parenting skills, counseling for abused children, counseling for children at high risk for delinquent behavior and their parent/guardian, and adult education.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>The LCHD-Brevard offers a variety of assistance to those who are eligible for services. Specialized services and nutritional services are available. School clinic health staff and School Health RN staff provide basic and emergency health care support, counseling, and education on school grounds. Other community agencies and organizations may be contacted by health department staff and used as needed. Level of care for at risk of delinquent behavior is monitored in the schools. All referrals are documented and maintained by health service staff.</p>
	<p>38h. Develop local agreements with providers and/or partners for in-kind health and social services on school grounds.</p>	<p>Local County Health Department (LCHD) Local Education Agency (LEA)</p>	<p>All in-kind services that are provided by community professionals are at the request of the LCHD-Brevard and/or the LEA staff. Services are done based on student needs assessments and the availability of identified services. All in-kind services that are provided</p>