



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

2018 – 2020 School Health Services Plan

for

Broward County

Due by September 15, 2018

E-mail Plan as an Attachment to:

HSF.SH_Feedback@flhealth.gov

My signature below indicates that I have reviewed and approved the 2018 - 2020 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 Chair Person		
	<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>

Statutory Authority: Section 381.0056, Florida Statute (F.S.) requires each local Department of Health 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. Chapter 64F-6.002, Florida Administrative Code (F.A.C.) requires the plan to be completed biennially.

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 – include 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, aid to dependent children (temporary assistance for needy families (TANF)), parenting skills, counseling for abused children, counseling for children at high risk for delinquent behavior and their parents or 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 –Requirements and References. This column includes Florida Statutes, Administrative Codes and references demonstrating best practices related to school health.
- Column 2 – Program Standards. This column provides specific requirements related to the statutes, administrative code and references listed in Column 1.
- Column 3 – Local Agency(s) Responsible. The local agencies (Department of Health, 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.

The parties agree that records maintained by Broward County Public Schools regarding students are education records as defined in the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g and federal regulations issued pursuant thereto, 34 C.F.R. § 99; and Chapter 1002.221, F.S. (2018). Further, these education records are confidential and exempt from public inspection under Charter 119.07 (1), F.S. (2008). See also: *Rhea v. District Board of Trustees of Santa Fe College*, 109 So. 3d 851, 856 (Fla. 1st DCA 2013). Therefore, the school district expects all parties to the School Health Service Plan to take all necessary steps to

preserve the confidential and exempt nature of this information. It should not be inspected or copied by or provided to anyone other than the parties who have a legitimate need for such information. In addition, where applicable, these records may sometimes be covered by the Health Insurance Portability and Accountability Act (HIPAA), 45 CFR Part 164, and must be protected pursuant to HIPAA guidelines.

PART I: BASIC SCHOOL HEALTH SERVICES			
Requirements/References	Program Standards	Local Agency(s) Responsible	Local Implementation Strategy & Activities
1. School Health Services Plan; District Wellness Policy; Comprehensive School Health Services; Full Service Schools: School Health Services Act: s. 381.0056, F.S.; Chapter 64F-6.002, F.A.C.; Florida Nurse Practice Act: Chapter 464 Nursing Technical Assistance Guidelines - The Role of the Professional School Nurse in the Delegation of Care in Florida Schools (Rev. 2010); ss. 1003.453, F.S., 381.0057, F.S., 402.3026, F.S.	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 local CHD medical director/administrator.	LEA DOH	The local school health services plan will be completed biennially and approved and signed by, at a minimum, the superintendent of schools, the school board chairperson, and the local CHD medical director/administrator.
	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 local Department of Health medical director/administrator.	LEA DOH	The local school health services plan will be reviewed each year for the purpose of updating the plan. Amendments will be signed by the school district superintendent and the local Department of Health medical director/administrator.
	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.	LEA DOH	The local school health services plan will describe employing or contracting for all health-related staff and the supervision of all school health services personnel regardless of the funding source.

	<p>1d. Each local CHD uses annual funding allocation to provide school health services pursuant to the School Health Services Act and the requirements of the Scope of Work.</p>	<p>DOH</p>	<p>DOH Broward uses annual funding allocation to provide school health services pursuant to the School Health Services Act and the requirements of the Scope of Work</p>
	<p>1e. The local CHD and local 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>LEA DOH</p>	<p>The LEA and DOH Broward have a designated ARNP and RN, respectfully, responsible for the coordination of planning, development, implementation and evaluation of the program. These two positions shall collaborate to assure program compliance and to plan and assess the delivery of program services.</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>LEA DOH</p>	<p>DOH-Broward and LEA shall adhere to protocols for supervision of school health services personnel consistent with statutory and regulatory requirements and professional standards. They shall be consistent with the Nurse Practice Act and the Technical Assistance Guidelines - The Role of the Professional School Nurse in the Delegation of Care in Florida Schools.</p>
	<p>1g. Decisions regarding medical protocols or standing orders in the delivery of school health services are the responsibility of the local CHD medical director in conjunction with district school boards, local school health advisory committees, the school district medical consultant if employed, and the student's private physician when applicable.</p>	<p>LEA DOH</p>	<p>Protocols and standing order shall be developed by DOH-Broward in collaboration with the LEA, local school health advisory committee, and the student's private physician. Child specific standing orders shall be written by the student's private physician.</p>

	<p>1h. Establish procedures for health services reporting in Health Management System (HMS) and the annual report, to include services provided by all partners.</p>	<p>LEA DOH School Health Partners and Providers</p>	<p>All partners providing school health services will follow procedures developed by DOH Broward for the collection of Health Services data. All partners will submit data monthly within specified time frames to be input into HMS. Additional information needed for the Annual Report will be collected annually.</p>
	<p>1i. Each School Health Advisory Committee (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.</p>	<p>LEA DOH SHAC</p>	<p>The SHAC includes members representing the eight components of the CDC CSH model. A representative from SHAC sits on the LEA Wellness and Learning Supports Committee. In addition the SHAC annually reviews the LEA Wellness Policy.</p>
<p>2. Health Appraisal s. 381.0056(4)(a)(1), F.S.</p>	<p>2a. Determine the health status of students.</p>	<p>DOH-Broward LEA School Health Providers</p>	<p>The health status of students will be determined by any or all of the following:</p> <ul style="list-style-type: none"> ▪Health History and/or Nursing Assessment ▪Record Review ▪Parent Conference ▪Coordination/collaboration with school personnel/health care providers and implementation of medical orders for students with actual potential or suspected health problems.
<p>3. Records Review s. 381.0056(4)(a)(2), F.S. s.1003.22(1)(4) F.S.; Chapters:</p>	<p>3a. Perform initial school entry review of student health records, to include school entry physical, immunization status (DH 680), cumulative health record, emergency information, etc.</p>	<p>LEA DOH</p>	<p>Initial school entry review will be completed by either DOH-Broward or LEA and/or the principal's designee. Review will include information regarding:</p>

<p>64F-6.005(1), F.A.C., 64F-6.004(1)(a),F.A.C.</p>			<p>(a) Immunization status and certification; (b) Health history, including any chronic conditions and treatment plan; (c) Screening tests, results, follow-up and corrective action; (d) Health examination report (e) Documentation of injuries and documentation of episodes of sudden illness referred for emergency health care; (f) Documentation of any nursing assessments done, written plans of care, counseling in regards to health care matters and results; (g) Documentation of any consultations with school personnel, students, parents, guardians or service providers about a student's health problem, recommendations made and results; and (h) Documentation of physician's orders and parental permission to administer medication or medical treatments given in school.</p>
	<p>3b. Emergency information card for each student should be updated each year.</p>	<p>LEA</p>	<p>At the beginning of each school year, or upon new student entry, students will submit emergency information cards. School health personnel or principal's designee will review emergency cards annually to identify current medical status. An emergency information card, shall contain a contact person, family physician, allergies, significant health</p>

			history and permission for emergency care.
4. Nurse Assessment s. 381.0056(4)(a)(3), F.S.; Chapters: 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.	4a. Perform school entry and periodic assessment of student's health needs.	LEA DOH Broward School Health Providers	DOH-Broward, LEA and School Health Providers will perform school entry and on-going assessments of student's health needs according to Chapter 64F-6.001(6), Florida Administrative Code.
	4b. For day-to-day and emergency care of students with chronic or acute health conditions at school, the RN develops an individualized healthcare plan (IHP) and Emergency Care Plan (ECP).	LEA DOH Broward School Health Providers	DOH Broward RN's at assigned schools, LEA RN's at assigned schools and School Health Providers RN's at assigned schools will develop an individualized healthcare plan for day-to-day and emergency care of students with chronic or acute conditions at schools.
5. Nutrition Assessment s. 381.0056(4)(a)(4), F.S.; Florida School Health Administrative Resource Manual, 2017	5a. Identify students with nutrition related problems and refer to an appropriate healthcare provider.	LEA DOH Broward School Health Providers	BMI screening will be performed in required grades to identify students with nutrition related problems and will make the appropriate referrals as necessary.
6. Preventive Dental Program s. 381.0056(4)(a)(5), F.S.	6a. Recommended services include: Minimally - age appropriate oral health education to all grades and referral system.	DOH Broward	DOH Broward makes available preventative dental services to all Elementary and Middle School students in school and for all students in the DOH Dental Clinics.
7. Health Counseling s. 381.0056(4)(a)(10), F.S.	7a. Provide health counseling as appropriate.	LEA DOH Broward School Health Providers	All partners providing school health services will provide health counseling, including instruction for health maintenance, disease prevention, and health promotion as appropriate.

<p>8. Referral and Follow-up of Suspected and Confirmed Health Problems s. 381.0056(4)(a)(11), F.S.</p>	<p>8a. Provide referral and a minimum of 3 documented attempts of follow-up for abnormal health screenings, emergency health issues, and acute or chronic health problems. Coordinate and link to community health resources.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>All school health providers will provide referral and follow-up of abnormal health screenings, emergency health issues, and acute or chronic health problems. All school health providers will coordinate and link students to community health resources</p>
<p>9. Provisions for Screenings s. 381.0056(4)(a)(6-9), F.S.; Chapter 64F-6.003(1-4), F.A.C.</p>	<p>9a. Provide screenings and a list of all providers. Screenings: (i) 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. (ii) 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. (iii) 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. (iv) Scoliosis screening shall be provided, at a minimum, to students in grade 6.</p>	<p>LEA</p>	<p>LEA provides screeners to conduct (1) Vision screenings to students in grades kindergarten, 1, 3 and 6 and students entering Florida schools for the first time in grades kindergarten through 5. (2) Hearing screening to students in grades kindergarten, 1 and 6; to students entering Florida schools for the first time in grades kindergarten through 5; and optionally to students in grade 3. (3) Growth and development screening to students in grades 1, 3 and 6 and optionally to students in grade 9. (4) Scoliosis screening to students in grade 6.</p>
	<p>9b. Obtain parent permission in writing prior to invasive screening, (e.g. comprehensive eye exam).</p>	<p>LEA</p>	<p>LEA shall obtain parental/guardian permission in writing prior to invasive screening.</p>

	<p>9c. Assist in locating referral sources for additional evaluation and/or treatment for students with abnormal screening results. Referral sources may include, but are not limited to, state contracted vision service providers (provided the student meets eligibility requirements), other service providers and local resources.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>All school health providers will provide referral and follow up for abnormal health screenings.</p>
<p>10. Meeting Emergency Health Needs ss. 381.0056(4)(a)(10), F.S., 1006.165, F.S.; Chapter 64F-6.004(1), F.A.C.; Emergency Guidelines for Schools, 2016 Florida Edition</p>	<p>10a. Ensure written health emergency policies and protocols are maintained and include minimum provisions.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Policies, procedures and protocols for the management of health emergencies will be in writing and kept on file at the LEA, CHD and at each school. Minimum provisions include: student emergency information cards updated annually for each student, the locations of emergency supplies and equipment, and a list of persons currently certified to provide first aid and cardiopulmonary resuscitation is posted in several areas throughout the school. Protocols used are the Emergency Guidelines for Schools, 2016 Florida Edition.</p>
	<p>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.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Health Room staff and two additional non-medical staff in each school will be certified in a CPR/First Aid by a nationally recognized certifying agency. A copy of this certification shall be kept on file in the health room. Names, locations and phone numbers for certified staff is posted in key locations. The principal/designee will post the names of certified staff</p>

			on 911 posters located in health rooms, school offices, gyms, and cafeterias and throughout other locations in the school.
	10c. Assist in the planning and training of staff responsible for emergency situations.	LEA DOH Broward School Health Providers	DOH-Broward, LEA and School Health Providers will assist in the planning and training of staff responsible for the care on a day to day basis to students who are ill or injured while on school grounds during school hours.
	10d. The school nurse shall monitor adequacy and expiration of first aid supplies, emergency equipment and facilities.	LEA DOH Broward School Health Providers	All school health providers and/or principal designee will use the LEA First Aid supply list to monitor adequacy and expiration of first aid supplies, emergency equipment and facilities.
	10e. The school principal (or designee) shall assure first aid supplies, emergency equipment, and facilities are maintained.	LEA	The school principal or designee shall follow the LEA procedure to ensure adequate health, first aid supplies and emergency equipment are available and maintained. AED units shall be checked bi-weekly and documented.
	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.	LEA DOH Broward School Health Providers	All injuries and episodes of sudden illness referred for emergency health treatment will be documented and reported to the principal or designee. All school health providers or principal designee will follow LEA procedure to document and monitor all accident/injury reports, and 911 calls.
	10g. It is the responsibility of each school that is a member of the Florida High School Athletic Association to:	LEA	Each school that is a member of the Florida High School Athletic Association will have an operational

	1) have an operational automatic external defibrillator (AED), 2) ensure employees expected to use the AED obtain appropriate training, and 3) register the AEDs with the county emergency medical services director.		automatic external defibrillator and will ensure a minimum of two non-medical persons will be trained in AED usage. AED's will be registered with the county Emergency Medical Services Director. AED units shall be checked bi-weekly and documented
11. Assist in Health Education Curriculum s. 381.0056(4)(a)(13), F.S.	11a. Collaborate with schools, health staff and others in health education curriculum development.	LEA DOH Broward School Health Providers	LEA is responsible for the development of health education curriculum in all public schools. DOH-Broward and school health providers assist as requested.
12. Refer Student to Appropriate Health Treatment s. 381.0056(4)(a)(14), F.S.	12a. Use community or other available referral resources. Assist in locating referral sources for Medicaid eligible, uninsured and underinsured students.	LEA DOH Broward School Health Providers	All school health providers will use community or other available referral resources. Florida KidCare has a contract with Broward County Public Schools to provide information to all students on insurance options.
13. Consult with parents or guardian regarding student's health issues s. 381.0056(4)(a)(15), F.S.; Chapter 64F-6.001(1), F.A.C.	13a. Provide consultation with parents, students, staff and physicians regarding student health issues.	LEA DOH Broward School Health Providers	All school health providers will provide consultation with parents, students, staff, and physicians regarding students health issues.
14. Maintain Health-Related Student Records ss. 381.0056(4)(a)(16), F.S., 1002.22, F.S.; Chapter 64F-6.005(1)(2), F.A.C.	14a. Maintain a cumulative health record for each student that includes required information.	LEA DOH Broward	Cumulative health records, and required information, on each student shall be maintained in the schools by authorized personal. All schools will follow LEA procedure and guidelines to maintain a cumulative health record. LEA and DOH will establish a monitoring schedule and review for compliance

<p>15. Nonpublic School Participation ss. 381.0056(5)(a)(18), F.S., 381.0056(5)(a)-(g), F.S.</p>	<p>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.</p>	<p>LEA DOH Broward</p>	<p>Any nonpublic school may voluntarily participate in the school health services program. Any nonpublic school participating in the school health services program will meet requirements of Florida Statute.</p>
<p>16. Provision of Health Information for Exceptional Student Education (ESE) Program Placement s. 381.0056(4)(a)(17), F.S.; Chapters 6A-6.0331, F.A.C., 64F-6.006, F.A.C.</p>	<p>16a. Provide relevant health information for ESE staffing and planning.</p>	<p>LEA</p>	<p>Collaboration will occur between Exceptional Student Education (ESE) staff and School Health Services staff to provide for staffing and educational planning. Students suspected of being exceptional, shall be referred for professional evaluation in accordance with LEA procedures for providing special programs. Services shall include provision for a current screening for vision and hearing and a review of the student health records to ensure that physical health problems are considered in such placements. The partners shall adhere to FERPA, Florida Statute 1002.22, the Individuals with Disabilities Education Act (IDEA), and where applicable, HIPAA.</p>
<p>17. The district school board shall provide in-service health training for school personnel s. 381.0056(6)(b), F.S.; Chapter 64F-6.002, F.A.C.</p>	<p>17a. Please list providers of in service health training for school personnel.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>The district school board, DOH, and community partners provide in-service health training for school personnel. All school staff are invited to participate in health training events. On-line courses are also available.</p>

<p>18. The district school board shall include health services and health education as part of the comprehensive plan for the school district s. 381.0056(6)(a), F.S.; Chapter 64F-6.002, F.A.C.</p>	<p>18a. School-based health services are provided to public school children in grades pre-kindergarten through 12.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>School based health services are provided to all public school children in grades pre-k - 12.</p>
<p>19. The district school board shall make available adequate 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. Health room facilities in each school will meet DOE requirements.</p>	<p>LEA</p>	<p>Every effort is made to meet DOE requirements for Educational and Existing Educational Health room facilities in accordance with guidelines.</p>
<p>20. The district school board shall, at the beginning of each school year, provide parents with information concerning ways that they can help their children to be physically active and eat healthy foods s. 381.0056(6)(d), F.S.</p>	<p>20a. List programs and/or resources to be used.</p>	<p>LEA</p>	<p>Schools participate in various healthy physical and healthy food activities. School cafeterias meet the new Federal Guidelines for Healthy Foods.</p>
<p>21. The district school board shall inform parents or guardians in writing at the beginning of each school year of the health services provided s. 381.0056(6)(e), F.S.</p>	<p>21a. Provide the opportunity for parents or guardians to request an exemption in writing.</p>	<p>LEA</p>	<p>A parent/guardian can notify the school should they choose to opt out of school health services for their children.</p>

<p>22. The presence of any of the communicable diseases for which immunization is required by the Department of Health in a Florida public or private school shall permit the county health department director or administrator or the State Health Officer to declare a communicable disease emergency s. 1003.22(9), F.S.; Chapter 64F-6.002(2)(d), F.A.C.</p>	<p>22a. The school health plan shall include communicable disease policies. Note: Policies need to provide for interagency coordination during suspected or confirmed disease outbreaks in schools.</p>	<p>LEA DOH Broward</p>	<p>DOH and LEA will develop policies which coordinate responses to suspected or confirmed communicable disease or other health occurrences. This includes; Prevention strategies, a process to identify and report communicable disease to CHD, initial response & notification, outbreak investigation, and medical intervention. The LEA has developed procedures to coordinate responses regarding communicable diseases.</p>
<p>23. Each district school board shall include in its approved school health services plan a procedure to provide training, by a registered nurse, a licensed practical nurse, a physician or a physician assistant (pursuant to chapter 458 or 459), to the school personnel designated by the school principal to assist students in the administration of prescribed medication s. 1006.062(1)(a), F.S.</p>	<p>23a. Include provisions in the procedure for general and student-specific administration of medication training.</p>	<p>LEA</p>	<p>LEA has developed a procedure for the administration of medication during school hours and for licensed professionals to train school personnel in administering medication. Two staff are trained at each school to administer prescribed medication. Certificates of trained staff are maintained in the health room. School Board Policy number 6305 (Administration of Medication/ Treatments) addresses Medication Administration at school. School Board Policy number 6305.1 (Medical Marijuana/Low THC Cannabis Use to Qualified Students in Schools).</p>

<p>24. Each district school board shall adopt policies and procedures governing the administration of prescription medication by district school board personnel s. 1006.062(1)(b), F.S.; Chapter 64B9-14, F.A.C.</p>	<p>24a. The school district medication policy will address the use of designated school staff for medication administration and be consistent with delegation practices.</p>	<p>LEA</p>	<p>LEA Policy number 6305 (Medication Administration) addresses Medication Administration at school. Designated school personnel are trained by licensed professionals in administration of prescribed and over the counter medication consistent with delegation practices per Ch. 64B9-14, F.A.C.</p>
<p>25. Students with asthma whose parent and physician provide approval may carry a metered dose inhaler on their person while in school s. 1002.20(3)(h), F.S.; National Association of School Nurses (NASN) Position Statement, The Use of Asthma Recue Inhalers in the School Setting</p>	<p>25a. Develop and implement an Individualized Healthcare Plan (IHP) and Emergency Action Plan (EAP) to ensure safe use of inhaler by student.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>LEA has protocols which addresses that any asthmatic student whose parents & physicians provide approval may carry a MDI on their person while in school and/or school related activities. All school health providers will develop students IHP and/or EAP in accordance with DOH/LEA guidelines. QI Documentation has been developed to record IHP and/or EAP development.</p>
<p>26. A student who is at risk for life-threatening allergic reactions may carry an epinephrine auto-injector and self-administer while in school, school-sponsored activities, or in transit if written parental and physician authorization has been provided s. 1002.20(3)(i), F.S.; Chapters 6A-6.0251, F.A.C., 64F-6.004(4), F.A.C.; Saving Lives at School Anaphylaxis and Epinephrine</p>	<p>26a. For students with life threatening allergies, the RN shall develop an annual IHP that includes an EAP, in cooperation with the student, parent/guardians, 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 EAP 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>LEA DOH Broward School Health Providers</p>	<p>The RN shall develop an annual IHP that includes an EAP, in cooperation with the student, parent/guardians, 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 EAP 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>School Nurse and Handbook for Connection Cards, NASN; NASN Position Statement on Rescue Medications in School; Students with Life-Threatening Allergies, 2017 Updated Guidance</p>			
<p>27. A public school may purchase a supply of epinephrine auto-injectors from a wholesale distributor or manufacturer as defined in s. 499.003, F.S. for the epinephrine auto-injectors at fair-market, free, or reduced prices for use in the event a student has an anaphylactic reaction. The epinephrine auto-injectors must be maintained in a secure location on the public school’s premises. 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 s. 1002.20(3)(i)(2), F.S.</p>	<p>27a. If the school district has chosen to maintain supplies of epinephrine auto-injectors, a standing order and written protocol has been developed by a licensed physician and is available at all schools where the epinephrine auto-injectors are stocked.</p>	<p>N/A</p>	<p>N/A</p>
<p>28. Educational training programs required by this section must be conducted by a nationally recognized organization experienced in</p>	<p>28a. Ensure that school staff that 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</p>	<p>N/A</p>	<p>N/A</p>

<p>training laypersons in emergency health treatment or an entity or individual approved by the department. 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 administration of an epinephrine auto-injector s. 381.88, F.S.</p>	<p>student) are trained by a nationally recognized organization experienced in training laypersons in emergency health treatment or an entity approved by the Department of Health.</p>		
<p>29. Students with diabetes that have physician and parental approval may carry their diabetic supplies and equipment and self-manage their diabetes while en-route to and from school (bus), in school or at school sponsored activities. The written authorization shall identify the diabetic supplies, equipment and activities the student is capable of performing without assistance for diabetic self-management, including hypoglycemia and hyperglycemia s. 1002.20(3)(j), F.S.; Chapter 6A-6.0253, F.A.C.; NASN position statement, Diabetes Management in the School Setting</p>	<p>29a. 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.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>In accordance with LEA protocols, students with diabetes that have physician and parental approval may carry their diabetic supplies and equipment and self-manage their diabetes while en-route to and from school (bus), in school or at school sponsored activities. The written authorization shall identify the diabetic supplies, equipment and activities the student is capable of performing without assistance for diabetic self-management, including hypoglycemia and hyperglycemia. All school health providers will develop students IHP and EAP in accordance with DOH-Broward/LEA guidelines.</p>

<p>30. A student who has experienced or is at risk for pancreatic insufficiency or who has been diagnosed as having cystic fibrosis may carry and self-administer a prescribed pancreatic enzyme supplement while en-route to and from school (bus), in school or at school sponsored activities if the school has been provided with authorization from the student’s parent and prescribing practitioner s. 1002.20(3)(j), F.S.; Chapter 6A-6.0252, F.A.C.</p>	<p>30a. 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.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>According to LEA policy, a student who has experienced or is at risk for pancreatic insufficiency or who has been diagnosed as having cystic fibrosis may carry and self-administer a prescribed pancreatic enzyme supplement while en-route to and from school (bus), in school or at school sponsored activities if the school has been provided with authorization from the student’s parent and prescribing practitioner. All school health providers will develop students IHP and an EAP, if indicated, in accordance with DOH-Broward/LEA guidelines.</p>
<p>31. Nonmedical assistive personnel shall 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 s. 1006.062(4), F.S.; Chapters: 64B9-14.002(3), F.A.C., 64B9-14, F.A.C.; Technical Assistance Guidelines - The Role of the Professional School Nurse in the Delegation of Care in Florida Schools (Rev. 2010).</p>	<p>31a. Document health related child-specific training by an RN for delegated staff. The delegation process shall include communication to the 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>LEA DOH Broward School Health Providers</p>	<p>All health related child specific training will be documented. Documentation will include a competency check list signed by the RN and the non-medical assistive personnel assuring child specific training.</p>
	<p>31b. Use of nonmedical assistive personnel shall be consistent with delegation practices per requirements.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Use of nonmedical assistive personnel is consistent with delegation practices and the Technical Assistance Guidelines (TAGS).</p>

<p>32. Pursuant to the provisions of Chapter 435, any person who provides services under a school health services plan pursuant to s. 381.0056, F.S. must meet level 2 screening requirements as described in s. 435.04, F.S. A person may satisfy the requirements of this subsection by submitting proof of compliance with the requirements of level 2 screening conducted within 11 months before the date that person initially provides services under a school health services plan. ss. 381.0059, F.S., 1011.465, F.S.</p>	<p>32a. Collaborate with school district to ensure district background screening policies do not result in duplicate or conflicting background screening requirements for staff providing school health services.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Non-instructional school district employees or contractual personnel who are permitted access on school grounds when students are present, who have direct contact with students must meet level 2 screening requirements.</p>
<p>33. Immediate notification to a student’s parent, guardian, or caregiver if the student is removed from school, school transportation, or a school-sponsored activity and taken to a receiving facility for an involuntary examination pursuant to s. 394.463, F.S. including the requirements established under ss. 1002.20(3)(j), F.S., 1002.33(9), F.S., 381.0056(4)(a)(19), F.S.</p>	<p>33a. The school health services plan shall include policies and procedures for implementation.</p>	<p>LEA</p>	<p>Broward County Public Schools will immediately notify a student’s parent, guardian or caregiver if a student is involuntarily removed from school, school transportation, or a school sponsored activity and taken to a receiving facility for an involuntary examination as specified in Florida Statute.</p>

PART II: COMPREHENSIVE SCHOOL HEALTH SERVICES (CSHSP)

References/Resources	Program Standards	Local Agency(s) Responsible	Local Implementation Strategy & Activities
34. The services provided by a comprehensive school health program must focus attention on promoting the health of students, reducing risk-taking behavior, and reducing teen pregnancy. Services provided under this section are additional and are intended to supplement, rather than supplant, basic school health services ss. 381.0057(6), F.S., 743.065, F.S.	34a. Provide in-depth health management, interventions and follow-up through the increased use of professional school nurse staff.	DOH Broward	The professional nurse will provide oversight of health services identified with actual or potential health problems through developing a plan of care: a) nursing assessment b) facilitating and planning appropriate interventions c) referral d) follow-up e) case management f) education g) evaluations
	34b. Provide health activities that promote healthy living in each school.	DOH Broward	Participate/support LEA Food and Nutrition Services & Wellness Policy. Encourage schools to participate in school sponsored wellness programs.
	34c. Provide health education classes.	DOH Broward	Collaborate with classroom teachers & resource staff to provide presentations which will promote healthy living & standard topics according to LEA guidelines/policies/curriculum.
	34d. Provide or coordinate counseling and referrals to decrease substance abuse.	LEA DOH Broward	Collaborate with school counselors and school resource officers regarding individual or group activities to decrease substance abuse (alcohol, tobacco, other drugs). Encourage SWAT (Students Working Against

			Tobacco). Collaborate with community, counselors and other personnel to identify students at risk/engaged in substance abuse. Consult with school counselors/health providers, as indicated.
34e. Provide or coordinate counseling and referrals to decrease the incidence of suicide attempts.	LEA DOH Broward		LEA guidelines outline steps for students at risk. Signs and symptoms are available to staff. Coordinate with Suicide prevention designee to assess students at risk and provide interventions and classes. Collaborate with agencies to provide counseling resources.
34f. Provide or coordinate health education classes to reduce the incidence of substance abuse, suicide attempts and other high-risk behaviors.	LEA DOH Broward		Collaborate with classroom teachers and educational resource staff to provide presentations focused on reducing high risk behaviors.
34g. Identify and provide interventions for students at risk for early parenthood.	LEA DOH Broward		Identify at risk students from absentee and academic reports. Identify students through self-referral, peers, nursing assessments and parent teacher conferences. Interventions include: collaboration with social workers, parents, guidance counselors and other health professionals.
34h. Provide counseling and education of teens to prevent and reduce involvement in sexual activity.	LEA DOH Broward		Presentations will be given to promote healthy lifestyle with educational programs related to human sexuality according to LEA

			guidelines/policies/curriculum. Individual and group counseling is available.
	34i. Collaborate with interagency initiatives to prevent and reduce teen pregnancy.	LEA DOH Broward	Link to teen pregnancy prevention programs. Collaborate with classroom teachers and educational resource staff to provide information regarding pregnancy prevention and parenting programs focusing on preventing and reducing teen pregnancy. In accordance with LEA guidelines/ policies/ curriculum.
	34j. Facilitate the return to school after delivery and provide interventions to decrease repeat pregnancy.	LEA DOH Broward	Collaborate and refer to community providers and partners. All pregnant teens will be referred for case management.
	34k. Refer all pregnant students who become known to staff for prenatal care and Healthy Start services.	LEA DOH Broward	All pregnant teens will be referred to Healthy Start for care coordination and enhanced services.

PART III: HEALTH SERVICES FOR FULL SERVICE SCHOOLS (FSS)

References/Resources	Program Standards	Local Agency(s) Responsible	Local Implementation Strategy & Activities
35. The State Board of Education and the Department of Health shall jointly establish full-service schools (FSS) to serve students from schools that have a student population at	35a. Designate full-service schools based on demographic evaluations.	LEA DOH Broward	Full Service Schools have been identified based on demographic evaluations.
	35b. Provide nutritional services.	LEA DOH Broward School Health Providers	Full Service Schools provide specialized services as needed and requested by staff and students

<p>high risk of needing medical and social services s. 402.3026(1), F.S.</p>	<p>35c. Provide basic medical services.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Full Service Schools provide basic medical services.</p>
	<p>35d. Provide referral to dependent children (Temporary Assistance to Needy Families (TANF)).</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Full Service Schools provide referrals to TANF as needed.</p>
	<p>35e. Provide referrals for abused children.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Full Service Schools reports suspected abuse or neglect to the Abuse Hotline.</p>
	<p>35f. Provide referrals for children risk of delinquent behavior parents, and adult education.</p>	<p>LEA DOH Broward School Health Providers</p>	<p>Referrals are made as appropriate.</p>
	<p>35g. Develop local agreements with providers and/or partners for in-kind health and social services on school grounds.</p>	<p>LEA</p>	<p>Schools develop agreements for in-kind health, social services and community partners.</p>