



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

2024 – 2026 School Health Services Plan

for






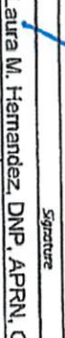
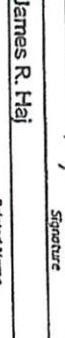

Miami- Dade County

Due by September 16, 2024

E-mail Plan as an Attachment to: HSF.SH_Feedback@flhealth.gov

2024 - 2026 School Health Services Plan Signature Page

My signature below indicates that I have reviewed and approved the 2024 - 2026 School Health Services Plan and its local implementation strategies, activities, and designations of local agency responsibility as herein described:

Position	Name and Signature	Date
County Health Department Health Officer	Yesenia D. Vialla, DNP, MSN, APRN  Printed Name: Yesenia D. Vialla Signature	11/21/2024 Date
County Health Department Nursing Director	Mrs. Jackson DNP, APRN, FNP-BC  Printed Name: Mrs. Jackson Signature	12/03/2024 Date
County Health Department School Health Coordinator	Ingrid Suazo MSN, APRN, FNP-C  Printed Name: Ingrid Suazo Signature	11/21/2024 Date
School District School Board Chairperson	Mari Tere Rojas  Printed Name: Mari Tere Rojas Signature	1/8/2025 Date
School District Superintendent	Dr. Jose L. Dorcas  Printed Name: Dr. Jose L. Dorcas Signature	12/19/2024 Date
School District School Health Coordinator	Brenda L. Wilder MSN, RN  Printed Name: Brenda L. Wilder Signature	12/13/2024 Date
School Health Advisory Committee Chairperson	Laura M. Hernandez, DNP, APRN, CPN, FNP-C  Printed Name: Laura M. Hernandez Signature	12/4/2024 Date
School Health Services Public / Private Partner	James R. Hai  Printed Name: James R. Hai Signature	12/12/24 Date

SUMMARY – SCHOOL HEALTH SERVICES PLAN 2024-2026

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 4 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: Full Service School (FSS) Health Services– 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.
- Part IV: Detailed Description of Local Agency(s) Roles and Responsibilities: The local agencies determine their roles and responsibilities for providing the services as described. Local agencies include CHD, Local Educational Agency (LEA), School Health Advisory Committee (SHAC), and other public and private partners providing school health services described within parts 1-3.

The Plan contains 3 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 Implementation Strategy & Activities. This column describes the implementation strategies and activities to fulfill requirements in columns 1 and 2.

Plan submission:

- (1) If the Plan signature page has not been signed by all parties on or before September 15, 2024, you may submit the plan at that time and submit the scanned signature page as a PDF file when it is fully signed.

PART I: BASIC SCHOOL HEALTH SERVICES

Statute and/or Rule References	Program Standard/Requirement	Local Implementation Strategies and Activities
<p>s. School Health Services Plan; Basic School Health Services; Comprehensive School Health Services and Full-Service Schools: Rule 64F-6.002, F.A.C.; ss. 381.0056, 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 (CHD) administrator/director/health officer.</p>	<ul style="list-style-type: none"> Florida Department of Health in Miami-Dade County, in conjunction with Miami-Dade County Public School (MDCPS) and the School Health Advisory Committee, will schedule meetings to complete the school health service plan. Route the plan with signature page and designated approvers to review/revise/recommend changes to the school health services plan before final approver. Maintain attendance rosters and agenda of meetings.
	<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>	<ul style="list-style-type: none"> Conduct annual reviews of the school health services plan by August 15. Make amendments, as needed, by May 30th. Maintain attendance rosters and agenda of all meetings.
	<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>	<ul style="list-style-type: none"> Florida Department of Health in Miami-Dade, MDCPS, the Children’s Trust, and Community partners will be responsible for recruiting and securing employment for staff and supervision regardless of funding. The school principal will be responsible for supervision of school health, as outlined in Florida Statutes.
	<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>	<ul style="list-style-type: none"> Florida Department of Health in Miami-Dade County will conduct monthly meetings with the budget liaison to review and discuss spending allocations and rejections. Recruit and hire staff in a timely manner to guarantee all positions are filled to help ensure all allocated scheduled C funding is spent.
	<p>1e. The CHD and LEA shall each designate one person, RN recommended, to be</p>	<ul style="list-style-type: none"> Conduct school health planning meetings before the beginning of each school year.

	<p>responsible for the coordination of planning, development, implementation and evaluation of the program. These individuals should collaborate throughout the school year to ensure program compliance and to plan and assess the delivery of program services.</p>	<ul style="list-style-type: none">• Conduct at least two site visits during the school year, December and May, to monitor and assess program compliance and school health services delivery.• Meet at least monthly to discuss concerns, recommendations, and evaluate issues affecting school health services delivery.• Evaluate program compliance and school health services delivery at the end of each school year and make recommendations for the next year.• Florida department of Health in Miami-Dade County and MDCPS will be responsible for the Quality Improvement Plan to monitor the delivery of school health services.
	<p>1f. Protocols for supervision of school health services personnel shall be described in the local school health services plan to ensure that such services are provided in accordance with statutory and regulatory requirements and professional standards and are consistent with the Nurse Practice Act.</p>	<ul style="list-style-type: none">• Each agency will ensure they have developed protocols outlining the supervision of school health services personnel, in accordance with statutory requirements and professional standards. These protocols should be shared with MDCPS and Florida Department of Health in Miami-Dade County school health program.• MDCPS and Florida Department of Health in Miami-Dade County will maintain and keep all submitted protocols from each agency on file.
	<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>	<ul style="list-style-type: none">• No standing orders.
	<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>	<ul style="list-style-type: none">• Florida department of Health in Miami-Dade County/ School Health Program will be responsible to update the data collection protocols and other data collection system when required.• Conduct monthly data meetings.• Ensure data related to school health services for annual report is received by July 15th.

	<p>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.</p>	<ul style="list-style-type: none">• Florida Department of Health in Miami-Dade County, MDCPS and the School Health Advisory Committee's chairperson and co-chairperson will review existing membership and ensure memberships reflect representation from the ten components of the coordinated School Health Model by September 15th.
<p>2. Health Appraisal s. 381.0056(4)(a)(1), F.S.</p>	<p>2a. Determine the health status of students.</p>	<ul style="list-style-type: none">• School Health programs will review annually emergency contact/student data cards and School Health Entry Examination records for documentation of existing and/or chronic health conditions, or other health related issues.• Review cumulative health records for abnormal screening results.• Conduct nursing assessments as needed.• Develop chronic condition list and report data findings.• Monitor and case manage student's, as indicated.
<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>	<ul style="list-style-type: none">• Review newly enrolled student health records, including the DH680 immunization record, DH 3040 school health entry examination, DH3041 cumulative health record, emergency contact/student data card information, and screenings follow-up/referral (complete and incomplete outcomes).• Conduct at least annual record reviews on all kindergarten students and students new to the school in grade KG-5th.
	<p>3b. Emergency information card/form for each student shall be updated each year.</p>	<ul style="list-style-type: none">• School district will ensure that all students submit an emergency contact/student data card with current information upon school entrance.• Health Team/Registered Nurse will review emergency contact/student data card for health conditions and concerns.

<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.</p>	<p>4a. Perform nursing by a Registered Nurse (RN) assessment of student health needs.</p>	<ul style="list-style-type: none">• Registered Nurse/Health Team will review emergency contact cards to obtain student medical status to develop a chronic conditions list. The chronic conditions list should be completed as follows: minimum of 5% of students by September 30th, a minimum of 45% of students by December 31st, and a minimum of 90% of students by March 31st.• Registered Nurse/Health Team will review records of all kindergarten students and students new to the school in grades KG-5.
	<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 (IHCP) and Emergency Care Plan (ECP).</p>	<ul style="list-style-type: none">• Registered Nurse will develop, when required and authorized by parent/legal guardian, an individual health Care Plan (IHCP).• Develop the IHCP in collaboration with the student, school community, and others, as appropriate, ensuring that the IHCP provides directives to the school team, complies with current applicable laws and standards of practice, considers economic impact, and uses standardized nursing language.
<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>	<ul style="list-style-type: none">• Conduct record reviews to identify abnormal Body Mass Index (BMI) and perform BMI assessments to all students visiting the health rooms to identify students who need follow-up for further evaluation.• Refer students with nutritional related problems to a health care provider or to other related resources.• Provide nutritional education.• Follow-up and document action taken.
<p>6. Preventive Dental Program s. 381.0056(4)(a)(5), F.S.</p>	<p>6a. Provide services such as oral health education, screenings and referrals, dental sealants, fluoride varnish and/or fluoride rinse as appropriate.</p>	<ul style="list-style-type: none">• Conduct dental health classes.• Florida Department of Health in Miami-Dade County/ Seals on Wheels Dental Program provides dental services in select elementary schools.• The Children’s Trust/Community Partners provide preventative dental health services and education in their schools.

<p>7. Health Counseling s. 381.0056(4)(a)(10), F.S.</p>	<p>7a. Provide health counseling as appropriate.</p>	<ul style="list-style-type: none">• Medical providers and social workers will provide health counseling.• School Health Team will provide school health services utilizing the Administrative Resource Manual, Emergency Guidelines for Schools (2019 edition), and Communicable Disease Manual, www.comprehensivehealthservicesdadeschools.net and www.miamidade.flhealth.gov.• Link students with suspected or confirmed health problems with community health providers.
<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 follow-up for abnormal health screenings, emergency health issues and acute or chronic health problems. Coordinate and link to community health resources.</p>	<ul style="list-style-type: none">• Utilize a tracking system for the referral and follow-up of abnormal health findings, emergency health issues, and acute and chronic health problems.• Consult with parents/legal guardians, as needed.• Link students with abnormal health screenings and suspected or confirmed health problems with Community Health Providers.• Refer Students to medical health care providers.• All referrals must receive a follow-up and the follow-up must be documented. Three attempts must be documented before documenting a “loss to follow-up”.
<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 unless the parent requests an exemption in writing:</p> <ol style="list-style-type: none">(1) Vision screening shall be provided, at a minimum, to non-exempted 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 non-exempted students, in grades kindergarten, 1 and 6, and 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	<ul style="list-style-type: none">• MDCPS will assist health care providers in creating a master schedule for all screenings.• Obtain a class list of students to be screened from school principal.• Check for opt-out letters, alert Health Team of students with opt-out letters, document and file in student’s Cumulative Health Record indicating an opt-out letter was received and the screening was not conducted.• Plan to screen students who were absent.• Document screening results in each student’s Cumulative Health Record.• Send screening results data to Florida Department of Health in Miami-Dade for data input in HMS.• Report and document students unable to be screened due to illness and/or profound disability.

	<p>non-exempted students, in grades 1, 3 and 6, and optionally to students in grade 9.</p> <p>(4) Scoliosis screening shall be provided, at a minimum, to non-exempted students, in grade 6.</p>	<ul style="list-style-type: none">• Do not screen students who are currently under the care of a medical provider and undergoing treatment, and report data to Florida Department of Health in Miami-Dade County.• Conduct vision screenings on students in grades KG, 1, 3, 6 and to new students entering Florida schools in KG-5.• Conduct hearing screenings on students in grades KG, 1, 6 and to new students entering Florida schools in KG-5.• Conduct Growth & Development screening with Body Mass Index (BMI) in grades 1, 3 and 6.• Conduct Scoliosis screenings for students in grade 6.• Assess if screening conduction rates for vision, hearing, BMI and scoliosis have reached mandated grade levels: 45% by December 31st and 95% by March 31st.• Send screening results to the Florida Department of Health in Miami-Dade County for data input.
	<p>9b. Provide screening services to all specified students pursuant to s. 381.0056(4)(a) unless a parent/guardian requests exemption from the screening services in writing.</p>	<ul style="list-style-type: none">• Florida Department of Health in Miami-Dade County, MDCPS, The Children’s Trust, and Community Providers will send home consent forms with students explaining screenings to be performed and process of requesting an exemption for their child.
	<p>9c. The school shall obtain parent/guardian permission in writing prior to any invasive screening (e.g. comprehensive eye exam, covid testing).</p>	<ul style="list-style-type: none">• Florida Department of Health in Miami-Dade County, MDCPS, The Children’s Trust, and Community Providers will send home consent forms with students explaining screenings to be performed and process of requesting an exemption for their child.
	<p>9d. Refer students with abnormal screening results to service providers for additional evaluation and/or treatment (e.g. state contracted vision service providers).</p>	<ul style="list-style-type: none">• The vision resource list is located on the MDCPS website. This list will also be shared with the Community Partners.

<p>10. Meeting Emergency Health Needs s. 381.0056(4)(a)12., F.S.; s. 1006.165, F.S.; Rule 64F-6.004(1), F.A.C.; Emergency Guidelines for Schools, 2019 Florida Edition</p>	<p>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.</p>	<ul style="list-style-type: none">• MDCPS will ensure students data cards/emergency contact cards are updated at least annually.• MDCPS will ensure a process is in place to provide emergency management on site and during school activities.• MDCPS and Florida Department of Health in Miami-Dade County will create Emergency Guidelines for all principals in public school sites available.
	<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>	<ul style="list-style-type: none">• All health care providers will ensure their staff are trained in First Aid and CPR and have current certifications.• MDCPS will ensure that at least 2 of their staff are current with CPR and First Aid certifications.• Health care providers and MDCPS will post the names of trained CPR and First Aid staff at the following locations within each school: the health room, school office, cafeteria, gymnasium, Family and Consumer Science classrooms, Industrial Arts classrooms, and other areas that pose an increased potential for injuries.• Copy of First Aid & CPR certifications will be kept in the health room or office.
	<p>10c. Assist in the planning and training of staff responsible for emergency situations.</p>	<ul style="list-style-type: none">• School Nurse on site, in cooperation with the school principal/designee, will assist in planning for the training of those persons who provide daily care to students who become ill during school hours.• MDCPS will arrange First Aid and CPR training sessions at school sites for staff to be currently trained and certified in First Aid and CPR.• Registered Nurse will provide Child Specific trainings to staff responsible for potential student emergencies.
	<p>10d. The school nurse shall monitor adequacy and expiration of first aid supplies, emergency equipment, and facilities.</p>	<ul style="list-style-type: none">• School Nurse on site will monitor the quantity and expiration dates of first aid supplies and emergency equipment in the Health Room.• School Nurse will discuss the importance of monitoring first aid supplies and emergency equipment that are to be maintained in each school with the principal.

	<p>10e. The school principal (or designee) shall ensure first aid supplies, emergency equipment, and facilities are maintained.</p>	<ul style="list-style-type: none">• School principal will be responsible for ensuring that first aid supplies, emergency equipment, and facilities are well maintained.• School principal will be made aware through briefings of the check list of recommended first aid supplies and emergency equipment that are to be maintained in each school.
	<p>10f. All injuries and episodes of sudden illness referred for emergency health treatment shall be documented and reported immediately to the principal, the person designated by the principal, or the acting principal.</p>	<ul style="list-style-type: none">• Providers of school health services will document and report all injuries and illnesses that require emergency treatment to the principal.
	<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; and(3) Register the AEDs with the county emergency medical services director.	<ul style="list-style-type: none">• MDCPS will offer AED training sessions at school sites for staff to be currently trained and certified.• MDCPS is responsible for posting the names of trained CPR/AED and First Aid staff at the following locations within each school: the health room, school office, cafeteria, gymnasium, Family and Consumer Science classroom, Industrial Arts classroom, and other areas that pose an increased potential for injuries.• MDCPS is responsible for an operational AED in all schools.• Follow the MDCPS protocol.
<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>	<ul style="list-style-type: none">• School Health providers will collaborate with MDCPS personnel in health education curriculum development.
<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>	<ul style="list-style-type: none">• Generate a list of health/mental care providers in the community that can be used as referral sources.• Refer, document, and follow-up with parents regarding available community resources to assist student's health care needs.

<p>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.</p>	<p>13a. Provide consultations with parents/guardians, students, staff and physicians regarding student health issues.</p>	<ul style="list-style-type: none">• The School Health staff, upon identification of a student's health issues, will consult with the parent/legal guardian, staff, and/or health care provider, and provide appropriate intervention for students with health needs.• Communicate with parents/legal guardians by telephone, in writing, or through personal contact concerning a student's health problem or suspected health problem.• Maintain documentation of consultations.
<p>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.</p>	<p>14a. Maintain a cumulative health record for each student that includes required information.</p>	<ul style="list-style-type: none">• School principal will designate a staff member to maintain Cumulative Health records for each student.• Health teams will document relevant information on the Cumulative Health record according to Chapter 64F-6.005 (1) (2), F.A.C.• Immunization status and certification.• Health history, including any chronic conditions and treatment plan.• Screenings, referrals, follow-ups and corrective actions.• Health examination report.• Documentation of injuries and documentation of episodes of sudden illness referred for emergency health care.• Documentation of student's Emergency Action Plan.• Documentation of student's consultations with school personnel regarding a student's health problem and recommendations made, as well as results.• Documentation of medical provider's orders and parental permission to administer medication or medical treatment given in school.• If applicable, it should be noted in the student's Cumulative Health record that a separate record of health information exists.
<p>15. Nonpublic School Participation s. 381.0056(4)(a)(18), F.S.; s. 381.0056(5)(a)-(g), F.S.</p>	<p>15a. Notification to the local nonpublic schools of the school health services program, allowing for nonpublic schools to request participation in the school health services program, provided that they meet requirements.</p>	<ul style="list-style-type: none">• Develop a current listing of all Non-Public Schools in Miami-Dade County.• Contact all known non-public schools in the county through an information letter describing the School Health Services Program, pertinent Florida Statutes, and roles and responsibilities, should they choose to participate in the local School Health Services Program.

<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>	<ul style="list-style-type: none"> • Ensure health information is provided, as needed, by the school health nurses regarding the consideration and placement of students in exceptional student programs and the re-evaluation at periodic intervals of students placed in related programs. • Exceptional Students Education Program will consult with the Florida Department of Health in Miami-Dade County, Comprehensive Student Health Services, and/or other school health service providers as needed. Provide current vision and hearing screening results and review of the student records to ensure that physical health issues are considered in student placements.
<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>	<ul style="list-style-type: none"> • Comprehensive Student Health Services will ensure that school staff are provided with training to assist with the day-to-day and emergency health needs of students.
<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>	<ul style="list-style-type: none"> • School Health service providers and Health Teams will provide services in grades pre-K through 12. • Florida Department of Health in Miami-Dade County will provide consultation and technical support to private schools upon request and available resources.
<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>	<ul style="list-style-type: none"> • Make principals aware through briefings of the mandates regarding adequate health room space and minimum health room specifications for the provision of health services. • Encourage new and renovated school facilities to meet minimum health room specifications.
<p>20. Helping Children be Physically Active and Eating Healthy s. 381.0056(6)(d), F.S.</p>	<p>20a. The District School Board will ensure that at the beginning of each school year, a list of programs and/or resources is made available to the parent/guardian so they can help their children be physically active and</p>	<ul style="list-style-type: none"> • Each provider will develop educational material concerning ways that can help students be physically active and eat healthy foods.

	eat healthy foods.	
21. Inform Parent/Guardian of the Health Services Provided s. 381.0056(6)(e), F.S. s. 1001.43(7), F.S. s.1004.06, F.S.	21a. The District School Board will ensure that at the beginning of each school year, parents/guardians 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.	<ul style="list-style-type: none">• Follow MDCPS written plan which includes procedures for notifying parents of School Health services provided and the opportunity for the parent/legal guardian to request an exemption in writing.
22. Declaring a Communicable Disease Emergency s. 1003.22(9), F.S.; Rule 64F-6.002(2)(d), F.A.C.	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 schools. A communicable disease policy must be developed and needs to provide for interagency coordination during suspected or confirmed disease outbreaks in schools.	<ul style="list-style-type: none">• All providers will adhere to s. 1003.22(9), F.S. 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, administrator, or the State Health Officer to declare a communicable disease emergency. The declaration of such emergency shall mandate that all students in attendance in the school who are not in compliance with the provisions of this section be identified by the district school board or by the governing authority of the private school; and the school health and immunization records of such children shall be made available to the county health department director or administrator. Those children identified as not being immunized against the disease for which the emergency has been declared shall be temporarily excluded from school by the district school board, or the governing authority of the private school, until such time as is specified by the county health department director or administrator.

<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, a licensed practical nurse, a physician, or a physician assistant (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>	<ul style="list-style-type: none">• Follow the MDCPS policies for medication administration• Utilize a standardized training manual to train designated school personnel on medication administration and to minimize medication risks.• Follow the MDCPS policies for medication administration• Research best practice curriculum to provide up-to-date trainings.• Increase outreach efforts to schools that have not participated in trainings for more than two years.• Florida Department of Health in Miami-Dade County, The Children’s Trust/Health Connect to provide child specific training to unlicensed assistive personnel (UAP).
<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>	<ul style="list-style-type: none">• Medication Administration Policy and Procedures shall be reviewed on a yearly basis.• Share a copy of the Medication Administration Policy and Procedures with school health providers and school principals.
<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>	<ul style="list-style-type: none">• Review the medical Marijuana Administration Policy and Procedures on a yearly basis.• Follow the MDCPS policies for medical marijuana administration during school hours.• Share a copy of the Medication Policy and Procedures with school health providers and school principals.
	<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>	<ul style="list-style-type: none">• Follow the MDCPS policies for medical marijuana administration during school hours.
	<p>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>	<ul style="list-style-type: none">• Follow the MDCPS policies for medical marijuana administration during school hours.

<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</p>	<p>26a. Students with asthma whose parent/guardian and physician provide written 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.</p>	<ul style="list-style-type: none">• Review the Medication Administration policy and Procedures on a yearly basis.• Share a copy of the medication policy and procedure with school health providers and school principals.
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	<p>26b. If the school district has chosen to maintain supplies of short-acting bronchodilators and components from a wholesale distributor or manufacturer as defined in s. 499.003, F.S., the participating school district shall adopt a protocol developed by a licensed physician for the administration by school personnel who are trained to recognize symptoms of respiratory distress and to administer short-acting bronchodilators or components. The protocol shall include:</p> <ol style="list-style-type: none">(1) Guidance for administering short-acting bronchodilators or components in instances of respiratory distress for a student with a known diagnosis of asthma.(2) If approved by the school district, guidance for administering short-acting bronchodilators or components in instances of respiratory distress for students with no known diagnosis of asthma.(3) A school nurse or trained school personnel shall only administer short-acting bronchodilators and components to students if they have successfully completed training and believe in good faith that the student is experiencing respiratory distress.	<ul style="list-style-type: none">• MDCPS will not maintain supplies of short-acting bronchodilators and components from a wholesale distributor or manufacturer.
	<p>26c. The school district or school shall provide written notice to the parent of each student enrolled in the school district or school of the school's adopted protocol. The public school must receive prior permission from the parent or guardian to administer a short-acting bronchodilator or components to a student.</p>	<ul style="list-style-type: none">• MDCPS will not maintain supplies of short-acting bronchodilators and components from a wholesale distributor or manufacturer.

<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>	<ul style="list-style-type: none">• Follow the district policy and procedures for students with life-threatening allergies practicing self-medication and self-care.• Ensure the authorization for medication clearly states that the child was trained and authorized to carry the medication. Furthermore, the authorization must be signed by the medical provider and parent.• Ensure Severe Allergy Emergency Action Plan is completed and signed by a medical provider and parent.• Registered Nurse and/or Advanced Practice Registered Nurse to develop an IHCP and Emergency Action Plan/Emergency Care Plan with input from the student's medical provider, parent, student, and school staff.• Child Specific training will be provided as needed.• Provide training to school personnel at levels I,II, III.• If student is unable to self-care and manage health condition, refer for 504 consideration or accommodation.
	<p>27b. For students with life threatening allergies, the RN shall develop and update annual IHCP that includes an ECP, in cooperation with the student, parent/guardian, physician, and school staff. The IHCP 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>	<ul style="list-style-type: none">• Continue to follow the district policy and procedures for students with life-threatening allergies practicing self-medication and self-care.• Registered Nurse and/or Advanced Practice Registered Nurse must develop and update IHCP annually which includes an ECP.• IHCP and ECP are both developed in cooperation with the student, parent/guardian, student's medical provider, and school staff.• ECP must outline, in detail, the student's allergens, symptoms that require emergency treatment with an epinephrine auto-injector based on the information obtained by the student's medical provider, instructions for calling 911 to transport the student to the hospital, and emergency contacts.