

2005-2006 Annual School Health Services Report Due by September 30, 2006

Email Report and Programmatic Monitoring Forms as Attachments to:

To: HSF_SH_Feedback@doh.state.fl.us

Cc: Your County's Quality Improvement Liaison



2005-06 Annual School Health Services Report for	2005-06	Annual	School	Health	Services	Report	t for:
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	County Name	_						
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	Y HEALTH DEPARTMENT (CHD)			omprehensive Sch nator (if applicable		h Service	es.
Aummis	Strator / Director	License/		Coordi	nator (ii applicable	7)	License/	
Name:	Noney Mills		MPA	Nama:	Iulia Lana		Degree:	DN DCN
Job Title:	Nancy Mills Administrator	Degree:	IVIFA	Name: Job Title:	Julie Lane School Health Coord	inator	Degree.	RN, BSN
	-			Address:				
Address:	1305 Idlewild Avenue	. 22042			1305 Idlewild Avenue		. 22042	
City: Phone/Ext:	Green Cove Zip 904-284-6340 x170	32043 SC Bhons	e: 891-1042	City: Phone/Ext	Green Cove 904-284-6340 x161	<u> </u>	32043 SC Phone	e: 891-1042
Fax:		_3C Friorie n/a	5. 091-1042	Fax:	904-284-6373	SC Fax:	n/a	5. 031-1042
		II/a			julie lane@doh.state		n/a	
Email:	nancy_mills@doh.state			Email:	julie_lane@don.state	ı.II		
				Full Se	rvice Schools Coo	rdinator (if applica	ıble)
COUNT	Y HEALTH DEPARTMENT (CHD)		CHD	X LEA	•	OTHER	•
	Health Services Coordinate	-				")	_	
ocilooi i	rieann der vices coordinate			(такате ар	propriate agency with an "X"	.)	1:/	
		License/					License/	
Name:	Julie Lane	Degree:	RN, BSN	Name:	Julie Lane		Degree:	RN, BSN
Job Title:	School Health Coordinator			Job Title:	School Health Coord	inator		
Address:	1305 Idlewild Avenue			Address:	1305 Idlewild Avenue)		
City:	Green Cove Zip	: 32043		City:	Green Cove	Zip	32043	
Phone/Ext:	904-284-6340 x161	SC Phone	e: 891-1042	Phone/Ext	904-284-6340 x161		SC Phone	e: 891-1042
Fax:	904-284-6373 SC Fax:	n/a		Fax:	904-284-6373	SC Fax:	n/a	
Email:	julie_lane@doh.state.fl			Email:	julie_lane@doh.state	.fl		
LOCAL	L DISTRICT / EDUCATIONAL AGENCY (L Health Services Coordinato	•		Scho	ool Health Advisor	y Commit	t ee Chair License/	rperson
Name:	Donna Wethington	Degree:		Name:	Julie Lane		Degree:	RN, BSN
Job Title:	Supervisor of Student Services			Job Title:	School Health Coord	inator		
Address:	23 South Green Street			Address:	1305 Idlewild Avenue)		
City:	Green Cove Zip	: 32043	_	City:	Green Cove	Zip	: 32043	
Phone/Ext:		SC Phone	9:		904-284-6340 x161			e: 891-1042
Fax:	904-529-2170 SC Fax:	_		Fax:	904-284-6373	SC Fax:	n/a	
Email:	dlwethington@mail.clay.k12.fl.us			Email:	julie lane@doh.state		11/04	
Liliali.	diwetilington@mail.clay.k12.ii.us			Liliali.	Julie_larie@doi1.state	5.11		
	Indicate with an "x" the	school		•				7
	Basic School Health		Х	Pre-Kir	dergarten		Х	
	Comprehensive School Ho	ealth	Х	Teenag	e Parent Program		Χ]
	Full Service Schools		Х	Volunte Project	eer School Nurse]
	Exceptional Student Educ	ation	Χ					

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ANNUAL SCHOOL HEALTH SERVICES REPORT

Part I: Basic School Health Services (in Basic, Comprehensive and Full Service Schools)
Reporting Period July 1, 2005 through June 30, 2006

OVERVIEW OF SCHOOLS

<u>DIRECTIONS</u>: Provide the numbers of public (INCLUDING CHARTER AND ALTERNATIVE) schools and students in your county. <u>Schools with Combined School Levels</u> are those that have two or more school levels on one campus (e.g., K - 8th, 6th - 12th grade). <u>DO NOT INCLUDE</u> Department of Juvenile Justice, Adult, Adult Vocational schools or private schools. <u>Free-Standing Pre-K</u> schools are those that do not reside on the campus of an elementary or combined level school.

BASIC ONLY schools are those that only receive basic school health services and are not designated CSHSP or FSS.

CSHSP schools are those that are designated part of a Comprehensive School Health Services Project, with staff paid for by SHIP funds (GR, Title XXI, TANF), and provide services that meet CSHSP criteria.

CSHSP / FSS schools are those that are designated both CSHSP and FSS, have staff that are funded by SHIP and Full Service funds, and provide services that meet the CSHSP and FSS criteria.

FSS schools are those are designated as Full Service with staff paid for by Full Service funds (Tobacco, TANF), and provide services that meet FSS criteria.

PUBLIC SCHOOLS & STUDENTS BY SCHOOL HEALTH PROGRAM	Free- standing Pre-K Schools	Elementary Schools	Middle Schools	High Schools	Schools with Combined School Levels (e.g., K-8, 6- 12)	TOTALS
BASIC ONLY Schools		12	4	5	0	21
BASIC ONLY Students		10,993	4,278	8,958	0	24,229
Comprehensive School Health						
Services Projects (CSHSP) Schools		2	0	0	1	3
CSHSP Students		1,813	0	0	1,563	3,376
Full Service Schools (FSS)		4	0	0	1	5
Full Service Students (FSS)		2,565	0	0	0	2,565
CSHSP/FSS Schools		4	1	0	0	5
CSHSP/FSS Students		2,911	842	0	0	3,753
TOTAL Public Schools	0	22	5	5	2	34
TOTAL Public Students	0	18,282	5,120	8,958	1,563	33,923

Free-Standing Pre-K

I-B.1 Instructions: To calculate the countywide total number of school health room visits during FTE WEEK -

(1) For each elementary school add the number of school health room visits during each of the five days of February FTE week. (2) Add together the five-day totals from all elementary schools for the countywide total.

(3) Repeat the procedure for free-standing pre-K, middle, high and combined level schools.

I-B.1 FIVE-DAY TOTAL of school health room visits during

February FTE week (e.g. first aid, medication administration,	Elementary Schools	3,816
counseling, etc.)	Middle Schools	923
	High Schools	1,372
	Combined Levels	327
	Total	6,438
I-E.1 Total number of intentional injuries treated		31
I-E.2 Total number of calls to 911		1
I-F.1 Number of students who were excluded from school health request (previously I-J.1)	services at parental	9

I-G.1 Number of chronic health conditions that are identified through review of emergency information records, physical assessments, or physicians diagnosis on medication administration form

TYPES OF CHRONIC HEALTH CONDITIONS BY SCHOOL TYPE

Type of Chronic Health Condition	Free- Stand- ing Pre-K Schools	Elementary Schools	Middle Schools	High Schools	Com- bined School Levels	TOTALS
ADD/ADHD		498	382	516		1,396
Allergies		1,547	872	1,519		3,938
Asthma		1,063	513	819		2,395
Bleeding Disorder		102	96	169		367
Cancer		12	8	4		24
Cardiac Conditions		78	45	63		186
Cystic Fibrosis		4	1	6		11
Diabetes		25	20	34		79
Epilepsy / Seizures		55	32	42		129
Kidney Disorders		13	9	12		34
Psychiatric Conditions		0	0	0		0
Sickle Cell Disease		11	1	10		22
Other Ear Problems		139	74	110		323
TOTAL	0	3,547	2,053	3,304	0	8,904

I-H.1 Number of special-needs students, and number of procedures per week during **FTE Week** beyond Basic School Health Services. **Only use numbers, DO NOT use text characters, such as PRN.**

		Number of
	Number of	Procedures Per
Procedure	Students	Week
Carbohydrate Counting	38	
Clean Catheterization	6	35
Colostomy, Jejunostomy, Ileostomy Care	4	12
Electronic Monitoring	0	0
Tube/PEG Feeding	14	75
Glucose Monitoring	81	627
Insulin Administration	49	228
Intravenous Treatments	0	0
Medications (Inhalator)	198	305
Medications (Injection)	21	135
Medications (Oral)	483	1,303
Medications (Other Routes)	24	40
Medications (Parenteral)	2	15
Oxygen Continuous or Intermittent	0	0
Specimen Collection or Testing	6	4
Sterile Catheterization	0	0
Tracheostomy Care	2	10
Ventilator Dependent Care	1	5
Other: Nebulizer	2	2
Other: Hearing Aid Monitoring	1	5
Other: G/T Site Care	1	2
TOTALS	933	3,025

I-K.1 Number of schools that have adequate health room facilities as described in HRSM 150-25 (pp. 2 - 3, Standard 6); Chapter 6-2.001, Educational Facilities; State Requirements for Educational Facilities, December 1999.

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Instructions: To calculate the countywide total number of medication doses administered during FTE week: (1) For each elementary school add the number of medication doses administered during each of the five days in February FTE week. (2) Add together the five-day totals from all elementary schools for the countywide total. (3) Repeat the procedure for free-standing, middle, high, and combined level schools.

I-L.2 Countywide FIVE-DAY TOTAL number of medication doses	Free-Standing Pre-K	0
(routine & PRN) administered during February FTE week.	Elementary Schools	1,002
	Middle Schools	262
	High Schools	282
	Combined Levels	90
	Total	1,636

ANNUAL SCHOOL HEALTH SERVICES REPORT

Part II: Comprehensive School Health Services Projects (CSHSP) Reporting Period: July 1, 2005 through June 30, 2006

NOTE: Do not fill out this section if your county does not receive Comprehensive School Health Project (CSHSP) funding from the Department of Health.

DAILY HEALTH SERVICES LOG SUMMARY - Part II-A.1

Instructions: (Tables 1 through 7) Enter the total numbers for each type of service data by school level in for all of your county's CSHSP schools. The column and row totals will calculate automatically. Data from all the individual Comprehensive project schools must be totaled and submitted together in the tables below for the county. The Daily Health Services Log Summary charts will total to -0- if the grade level data are not provided. Data cannot be entered in the Total columns. If you do not have grade level data, put your totals in the Other column so it will add into the Total column.

Table 1: Total Visits - Enter the number of non-medication visits, medication visits and total number of visits by grade	Table 1:	: Total Visits - Enter the number of	f non-medication visits, n	nedication visits and total number	er of visits by grade level.
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Table 2: Health Problems - Enter the total number of visits for each of the listed health problems by grade level. This table should not include medication visits.

Table 3: Outcome Dispositions - Enter the total number of health room visit dispositions by grade level.

This table should include medication visits.

Table 4: Injury Classification - Enter the number of injuries that were intentional, unintentional, or unknown, by grade level.

Table 5: Injury Location - Enter the number of injuries that occurred in Project schools at each location, by grade level.

Table 6: Services by Provider - Enter the total number of visits to each type of health services provider by grade level.

This table should include medication visits.

Table 7: Referrals to - Enter the number of referrals to each of the listed services by grade level.

This table should include medication visits.

	Free-Standing Pre-	Elemen- tary	Middle	High	Schools with Com- bined	
Table 1: Total Visits	K Schools	Schools	Schools	Schools	Levels	TOTALS
1. Total Non-Medication Visits	0	35,338	4,018	0	4,805	44,161
2. Total Medication Visits	0	11,579	1,470	0	2,145	15,194
3. TOTAL # VISITS (1 & 2)	0	46,917	5,488	6,950	6,950	59,355

Table 2: Visits by Health Problem	Free-Standing Pre- K Schools	Elemen- tary Schools	Middle Schools	High Schools	Schools with Com- bined Levels	TOTALS
Communicable/Reportable Disease	0	15		0	1	30
2. Cardiovascular	0	452	104	0	491	1,047
3. Dental	0	1,447	118	0	114	1,679
4. Dermatological	0	8,085	672	0	795	9,552
5. Eye/Nose/Throat	0	4,848	653	0	394	5,895
6. Endocrine	0	2,114	563	0	1,119	3,796
7. Gastrointestinal	0	6,481	1,134	0	1,187	8,802
8. Genitourinary	0	398	13	0	29	440
Gynecological/Obstetrical	0	202	171	0	641	1,014
10. Immune System	0	398	83	0	2	483
11. Musculo-Skeletal	0	1,876	595	0	826	3,297
12. Nutritional/Metabolic	0	357	84	0	39	480
13. Neurological	0	4,165	1,051	0	1,294	6,510
14. Parasites/Infections	0	5,116	48	0	2	5,166
15. Disorders from Physical Agents	0	362	0	0	0	362
16. Psychosocial	0	3,697	873	0	695	5,265
17. Respiratory	0	1,780	329	0	334	2,443
18. Other:	0	4,775		0	114	4,918
TOTALS	0	46,568	6,534	0	8,077	61,179
Table 3: Outcome Dispositions	Free-Standing Pre-	Elemen- tary	Middle	High Schools	Schools with Com- bined	TOTALS

Table 3: Outcome Dispositions	Free-Standing Pre- K Schools	Elemen- tary Schools	Middle	High Schools	Schools with Com- bined Levels	TOTALS
1. 911 Services	0	7	2	0	1	10
2. Emergency Room	0	8	1	0	0	9
3. Returned to Class	0	36,134	4,583	0	4,965	45,682
4. Sent Home	0	4,833	865	0	1,127	6,825
5. Other:	0	0	0	0	0	0
TOTALS	0	40,982	5,451	0	6,093	52,526

	Free-Standing Pre-	Elemen- tary	Middle	High	Schools with Com- bined	
Table 4: Injury Classification	K Schools	Schools	Schools	Schools	Levels	TOTALS
1. Intentional	0	368	67	0	37	472
2. Unintentional	0	5,523	564	0	236	6,323
3. Unknown	0	0	0	0	0	0
TOTALS	0	5,891	631	0	273	6,795

5. Physician

8. Other:

TOTALS

6. Psychologist

7. Social Worker

Table 5: Injury Location	Free-Standing Pre- K Schools	Elemen- tary Schools	Middle Schools	High Schools	Schools with Com- bined Levels	TOTALS
1. Athletic Field	0	806	215	0	16	1,037
2. Auditorium	0	8	0	0	0	8
3. Bus	0	82	20	0	0	102
4. Cafeteria	0	210	18	0	8	236
5. Classroom	0	989	105	0	102	1,196
6. Corridor/Stairs	0	706	117	0	1	824
7. Dressing Room/Shower	0	1	0	0	0	1
8. Gymnasium	0	65	102	0	75	242
9. Home Economics/Shop	0	26	6	0	0	32
10. Laboratory	0	0	0	0	0	0
11. Lockers	0	16	6	0	8	30
12. Off Campus	0	1,030	3	0	0	1,033
13. Pool	0	0	0	0	0	0
14. School Grounds	0	1,415	38	0	27	1,480
15. Restroom	0	52	0	0	0	52
16. Other:	0	668	0	0	0	668
TOTALS	0	6,074	630	0	237	6,941
	Free-Standing Pre-	Elemen-	Middle	ما من الل	Schools with Com- bined	
Table 6: Services by Provider	K Schools	tary Schools		High Schools	Levels	TOTALS
1. R.N. / A.R.N.P.	0			0	4,084	25,827
2. L.P.N.	0	. 0,00		0	0	23,141
3. Health Tech/Aide	0	997	145	0	2,965	4,107
4. Clerical Support Staff	0	1,743			2,303	1,956
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Table 7: Referral To	Free-Standing Pre- K Schools	-	Middle Schools	High Schools	Schools with Com- bined Levels	TOTALS
Abuse Registry	0	2	0	0	0	2
2. Dental Care	0	64	0	0	0	64
3. Guidance Counseling	0	23	1	0	69	93
4. Healthy Start	0	0	0	0	0	0
5. Kidcare	0	0	0	0	0	0
6. Medical Care / Nursing Care	0	334	1	0	0	335
7. Mental Health Counseling	0	3	0	0	0	3
8. No Referral	0	23,398	5,086	0	2,152	30,636
Nursing Assessment	0	2,075	409	0	4,084	6,568
10. Social Work Services	0	17	0	0	35	52
11. Substance Abuse Counseling	0	0	0	0	0	0
12. Other:	0	51	0	0	4	55
13. TOTALS	0	25,967	5,497	0	6,344	37,808

42,599

5,497

7,057

55,153

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GROUP HEALTH SERVICES LOG SUMMARY FOR JULY 1, 2005 THROUGH JUNE 30, 2006 - Part II-A.2

INSTRUCTIONS: For each of the service codes shown below:

Code 6030: Enter the number of social interventions provided in each subject area, and enter the number of student and parent participants.

Code 8020: Enter the number of health education classes taught for each subject area, and the number of student and parent participants.

NOTE: Number of participants will reflect students who participate in each type of social intervention or health education activity. Since some students will participate in more than one group activity, this may be a duplicate count and exceed the total student population.

6030 SOCIAL INTERVENTIONS

	# Social	# Student	# Parent	# Staff
Subject Code	Interventions	Participants	Participants	Participants
100 Dental Health				
200 General Health / Other	630			
300 Injury Prevention / Safety				
400 Mental Health / Self-Esteem				
500 Nutrition				
600 Physical Activity				
700 Violence Prevention/Conflict Resolution				
702 Date Rape				
703 Child Abuse				
801 Alcohol, Tobacco & Other Drug Abuse				
804 Suicide Prevention				
805 HIV / STD				
806 Pregnancy Prevention				
808 Human Sexuality				
900 Staff Wellness				
901 Staff Inservice				
902 Parenting Skills				
TOTALS	630	0	0	0

8020 HEALTH EDUCATION CLASSES

	# Health Educa-	# Student	# Parent	# Staff
Subject Code	cation Classes	Participants	Participants	Participants
100 Dental Health				
200 General Health / Other	32	2,800	54	28
300 Injury Prevention / Safety				
400 Mental Health / Self-Esteem				
500 Nutrition				
600 Physical Activity				
700 Violence Prevention/Conflict Resolution				
702 Date Rape				
703 Child Abuse				
801 Alcohol, Tobacco & Other Drug Abuse				
804 Suicide Prevention				
805 HIV / STD				
806 Pregnancy Prevention				
808 Human Sexuality				
900 Staff Wellness	0			
901 Staff Inservice				
902 Parenting Skills				
TOTALS	32	2,800	54	28

NOTE: Counties with more than one Comprehensive project should complete <u>one</u> combined Group Health Services Log for all schools receiving CSHSP services.

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II-A STUDENT HEALTH:

NOTE: The following questions refer to students and health events that occurred during the reporting period July 1, 2005 through June 30, 2006. 1,371 II-A.1 Number of students in grades 6 through 12 in Comprehensive School Health Services Project schools II-A.2 Number of parents who refused permission for their children to participate in sexuality education 13 classes **II-B RISK TAKING BEHAVIORS:** II-B.1 Number of CSHSP schools providing smoking cessation classes II-B.2 Number of suicides by CSHSP students in grades 6 through 12 **II-C TEEN PREGNANCY:** 888 II-C.1 Number of female CSHSP students in grades 6 through 12 II-C.2 Number of births to CSHSP students in grades 6 through 12 II-C.3 Rate per 1,000 for births to CSHSP students in grades 6 through 12 1.13 II-C.4 Number of babies born to CSHSP students in grades 6 through 12 II-C.5 Number of low birth weight (<2,500 grams) babies born to CSHSP students in grades 6 through 12 II-C.6 Percent (%) of low birth weight (<2,500 grams) babies born to CSHSP students in grades 6 0% through 12 1 II-C.7 Number of CSHSP students in grades 6 through 12 that return to school after giving birth this year II-C.8 Percent (%) of CSHSP students in grades 6 through 12 who returned to school this year after 100.0% giving birth

PART III: FULL SERVICE SCHOOLS

III-A: IN-KIND SERVICES PROVIDED IN FULL SERVICE SCHOOLS BY COMMUNITY AGENCIES

For in-kind hours and value of in-kind services, put annual totals (not weekly totals) and use only numbers (no text characters (i.e., per week).

	ANNUAL Total Number of	ANNUAL Estimated Value
Type of Service	Donated In-Kind Hours	of In-Kind Services
Adult Education		
Basic Medical Services		
Case Management		
Child Protective Services		
Community Education		
Counseling Abused Children		
Counseling High-Risk Children		
Counseling High-Risk Parents		
Delinquency Counseling		
Dental Services		
Economic Services		
Healthy Start/Healthy Families		
Job Placement Services		
Mental Health Services		
Nutritional Services		
Parenting Skills Training		
Resource Officer		
School Health Nursing Services		
Social Work Services		
Substance Abuse Counseling		
TANF programs (job training,		
All Other		
TOTALS	0	0

III-B: HEALTHY SCHOOL INITIATIVE ACTIVITIES

Please account for activity in the three or more activities listed in your Healthy School

Action Plan. Indicate the approximate numbers of activities and numbers of participating schools.		One-Time On-g Events Activ		_
Activities	Number of Events	Number of Schools	Number of Events	Number of Schools
School-wide programs to promote nutrition and physical activity	2	10	260	10
2. Alternative and after-school physical activity programs	3	3	260	8
3. Integrate nutrition and physical activity into health education curricula	0	0	260	10
4. Collaborate with food service and other personnel to provide healthy	10	10	0	0
5. Promote staff wellness programs as models for students	10	10	1	1
6. Innovative strategies for physical activity in school	4	8	1	1
7. "Get Healthy" clubs and organizations	0	0	1	1
8. Other				
9. Other				
TOTALS	29	41	783	31

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PART IV: STAFFING

IV-A.1: Information on Registered Nurses Employed in School Health During FY 2005-2006

Instructions: Provide the numbers of registered nurses (RNS) working in your county's school health program (the RNs reported in Staffing Pages 13 and 14) according to their <u>highest</u> educational degree obtained. Make one (1) degree entry per registered nurse.

	Diploma	Diploma	Bachelor	Bachelor	Master	Master	Doctorate	Doctorate
Hiring Entity	In	Degree in	Degree in	Degree	Degree in	Degree	Degree in	Degree
	Nursing	Nursing	Nursing	Other	Nursing	Other	Nursing	Other
County Health Department	1	2	2	1	0	2	0	0
County School Board	5	8	6		1	1	0	0
Public/Private Partners	0	0	0	0	0	0	0	0
TOTALS	6	10	8	1	1	3	0	0

IV-A.2: Information on Nationally Certified School Nurses Employed in School Health During FY 2005-2006

Instructions: Indicate below the number of Nationally Certified School Nurses that were employed during 2005-06 as school health nurses in your county's school health program.

HIRING ENTITY	Number of Registered School Nurses with National (NCSN) Certification
County Health Department	1
County School District	0
Public-Private Partners	0
TOTALS	1

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Instructions for Completing Staffing Section

Distribution of FTEs between programs and positions: (Do not duplicate staff in more than one program)

- Staff that spend time providing services between Basic school health and Full Service Schools must divide their FTEs between the programs. For example, a registered nurse working half-time for Basic school health and half-time for Full Service would be represented by .50 of an FTE in Basic and .50 of an FTE in Full Service. To satisfy federal funding requirements, positions funded by Comprehensive Title XXI and/or TANF must work 100% in the Comprehensive program, and their time and services must be coded to Comprehensive DAU number/s.
- When a staff person works part-time for Basic school health and/or Full Services Schools, and part-time for another county health department (CHD) program, only the time spent in school health can be reflected in the staffing tables. For example if an RN works 3/4 of their time in school health and 1/4 time in CHD clinic, only .75 of an FTE should be reflected in the staffing tables.
- If an RN is a school health coordinator or supervisor and spends time providing direct services for students in school health rooms, the position's FTE should be divided between coordinator/supervisor and registered nurse (RN). For example, if an RN is a coordinator/supervisor, but spends 6 hours a day for the 180 days of school year providing health room services, the RN could put a portion of an FTE in coordinator/supervisor and the remaining portion of an FTE in the RN position.

School Health Staffing Budget (\$) from All Sources:

• For staff reported on all of the following staffing pages, the School Health Staffing Budget () from All Sources should include all of the funding (regardless of funder -- CHD, school district or other) that help pay for the salary and fringe for the program's positions listed on that page.

School Health Services 2005-06 Program Management

Which agency (county health department, school district, health care district, hospital, other) has functional responsibility for the oversight and delivery of school-based health services?

Name:	Julie E. Lane				
	(Name of School Health Coordinator for the primary school-based health services provider)				
Credentials:	RN, BSN				
	(Academic and/or Professional)				
Position:	School Health Coordinator				
	(Agency Job Title)				
Agency:	Clay County Health Department				
	(School District, County Health Department, Other)				
Mailing Address:	1305 Idlewild Avenue				
	(Street address or Post Office Box)				
	Green Cove Springs, FL 32043				
	(City, State Zip)				
Phone:	904-284-6340 Suncom Phone: 891-1042 Fax: 904-284-6373				
Email	Julie_lane@doh.state.fl.us_				

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PART IV: STAFFING IV-A. BASIC SCHOOL HEALTH SERVICES STAFFING

Directions:	Complete the tables below with information about the health services positions in schools receiving only basic
	school health services. Do not duplicate FTEs. Units or positions reported in other School Health programs.

Basic School Health Staffing (Salary/Fringe) Budget () from All Sources: \$225,813.00

Positions that are	Public Schools		Partners		
providing BASIC school health services only	FTEs Hired by CHD	Units Hired by LSD	FTEs Hired by CHD	Units Hired by LSD	Positions Hired by Funder
Supervisor/Coordinator	0.25	0.50			
Adv. Reg. Nurse Practitioner (ARNP)					
Registered Nurse (RN)	3.50	16.00			
Licensed Practical Nurse (LPN)		12.00			
Paraprofessional School Health Aide		1.00			
Clerical	0.40				
Physician					
Health Educator		3.00			
Nutritionist					
Dental Positions					
Licensed Clinical Social Worker (LCSW)		1.00			
Social Worker		3.00			
Human Services Worker					
Psychologist		5.00			
Physical Therapist					
Occupational Therapist					
Audiologist					
Other:					

Who provides supervision of the	partner staffing program? (title, agency)	
Who provides administrative sup	ervision of the partner staff? (title, agency)	
Who provides professional super	vision of the partner staff? (title, agency)	
Summarize the health services pr	ovided by these partners:	
Please list the names of the Publi	c-Private Partners providing staff or funds for staff listed above:	:
1	7	
2	8	
3	9	
4	10	
5	11	
6	12	•

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PART IV - CENSUS AND DISTRICT AREA UNIT (DAU) NUMBERS FOR COMPREHENSIVE SCHOOL HEALTH SERVICES PROJECT (CSHSP) SCHOOLS AND FULL SERVICE SCHOOLS (FSS)

IV-B. COMPREHENSIVE SCHOOL HEALTH SERVICES PROJECTS STAFFING

Directions:

Complete the tables below with information about the health services positions in schools in Comprehensive School Health Projects. Do not duplicate FTEs, Units or positions reported in other School Health programs.

Comprehensive School Health Staffing (Salary/Fringe) Budget () from All Sources:

\$ 117,965.00

Positions that are providing	Public	Public Schools		
COMPREHENSIVE school health services	FTEs Hired by CHD	Positions Hired by Other		
Supervisor/Coordinator	0.50	0.50		
Adv. Reg. Nurse Practitioner (ARNP)				
Registered Nurse (RN)	2.20	4.00		
Licensed Practical Nurse (LPN)		4.00		
Paraprofessional School Health Aide		0.50		
Clerical	0.30	0.50		
Physician				
Health Educator		0.50		
Nutritionist				
Dental Positions				
Licensed Clinical Social Worker (LCSW)		4.00		
Social Worker		2.00		
Human Services Worker				
Psychologist		3.00		
Physical Therapist				
Occupational Therapist				
Audiologist		1.00		
Other:				

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IV-C. FULL SERVICE SCHOOLS STAFFING

Directions:

Complete the tables below with information about the health services positions in Full Service Schools. Do not duplicate FTEs, Units or positions reported in partnerships, Pre-K or other programs.

Full Service School Health Staffing (Salary/Fringe) Budget () from All Sources:

\$ 46,902.00

		Public Schools	
Positions that are providing FULL SERVICE (FSS) school health services	FTEs Hired by CHD	Units Hired by LSD	Positions Hired through FSS subcontracts
Supervisor/Coordinator	0.25		
Adv. Reg. Nurse Practitioner (ARNP)			
Registered Nurse (RN)	0.80	1.00	
Licensed Practical Nurse (LPN)		3.00	
Paraprofessional School Health Aide		2.00	
Clerical	0.30	0.25	
Physician			
Health Educator		0.50	
Nutritionist			
Dental Positions			
Licensed Clinical Social Worker (LCSW)		1.00	
Social Worker		1.00	
Human Services Worker			
Psychologist		2.00	
Physical Therapist			
Occupational Therapist			
Audiologist		0.50	
Other:			

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IV-D. EXCEPTIONAL STUDENT EDUCATION (ESE) HEALTH SERVICES STAFFING

Directions:

Complete the charts below with information about the Units, FTEs, or positions providing health services to ESE students under IDEA Part B or Part H. Do not duplicate positions reported in other programs.

ESE School Health Staffing (Salary/Fringe) Budget () from All Sources:

\$ 722,300.0

Number of ESE students requiring in-school health services:

5,200

Number of schools in which ESE students needing special-school health services are mainstreamed:

33

Who trains and monitors paraprofessionals and clerical staff (health designees) in your schools? (title, agency)

Student Services, Clay County Health Department and consultant services as needed

	Public Schools		
Positions that are providing school health services for Exceptional Student Education (ESE) students under IDEA Part B or H	FTEs Hired by CHD	Units Hired by LSD	Positions Hired by Other
Supervisor/Coordinator		1.00	
Adv. Reg. Nurse Practitioner (ARNP)			
Registered Nurse (RN)		4.00	
Licensed Practical Nurse (LPN)		1.00	
Paraprofessional School Health Aide		2.00	

IV-E Pre-Kindergarten Staffing

D:	red	-4:	- n	٥.

Complete the charts below with information about the health services positions in all the Pre-Kindergarten programs in your county. Do not duplicate positions/FTEs reported in other programs.

Pre-K School Health Staffing (Salary/Fringe) Budget () from All Sources:	N/A
Who provides supervision of the program? (title, agency)	_

Who provides professional supervision of the staff? (title, agency)

Who provides administrative supervision of the staff? (title, agency)

Who trains and monitors paraprofessionals and clerical staff (health designees) in your schools? (title, agency)

Positions that are providing school health services funded for Pre-kindergarten students	Public Schools		
	FTEs Hired by CHD	Units Hired by LSD	Positions Hired by Other
Supervisor/Coordinator			
Adv. Reg. Nurse Practitioner (ARNP)			
Registered Nurse (RN)			
Licensed Practical Nurse (LPN)			
Paraprofessional School Health Aide			

2005-06 Annual School Health	Services Report	for:
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PART IV - CENSUS AND DISTRICT AREA UNIT (DAU) NUMBERS FOR COMPREHENSIVE SCHOOL HEALTH SERVICES PROJECT (CSHSP) SCHOOLS AND FULL SERVICE SCHOOLS (FSS)

NOTE: List schools with their DAU numbers according to the following groupings. Pages 17-18: CSHSP schools only; Page 19: schools that are both CSHSP and FSS; Pages 20-21: FSS schools. Please do not document a school in more than one of the above three groups.

COMPREHENSIVE SCHOOL HEALTH SERVICES PROJECT (CSHSP) SCHOOLS

	1
School Name	6 Digit CSHSP DAU Number
CSHSP SCHOOLS:	
Doctors Inlet Elementary	04-0-382
Keystone Heights Elementary	04-0-374
Keystone Heights Jr/Sr High	04-0-375

COMPREHENSIVE SCHOOL HEALTH SERVICES PROJECT (CSHSP) SCHOOLS continued...

	6 Digit CSHSP
School Name	6 Digit CSHSP DAU Number
	PVO IAMILINGI
CSHSP SCHOOLS:	

PART IV - SCHOOLS THAT ARE BOTH COMPREHENSIVE (CSHSP) AND FULL SERVICE (FSS)

School Name SCHOOLS THAT ARE BOTH CSHSP & FSS:	6 Digit CSHSP DAU Number	6 Digit FSS DAU Number
	04.0.070	
Clay Hill Elementary	04-0-373 04-0-376	04-0-377
Tynes Elementary		04-0-362
Wilkinson Elementary	04-0-380 04-0-381	04-0-368
Wilkinson Jr High		04-0-363
McRae Elementary	04-0-371	04-7-372
	<u> </u>	

FULL SERVICE SCHOOLS (FSS)

	C Digit FCC
Cabaal Nama	6 Digit FSS DAU Number
School Name FSS SCHOOLS:	DAU Number
	04.0.070
S. Bryan Jennings Elementary	04-0-379 04-0-385
W.E. Cherry Elementary	
Bannerman Learning Center Charles E. Bennett Elementary	04-0-370 04-0-369
Grove Park Elementary	04-0-378
Glove Falk Elementary	04-0-370

FULL SERVICE SCHOOLS (FSS) continued...

	6 Digit FSS
School Name	DAU Number
FSS SCHOOLS:	27.0 110111001
1 00 00110010.	
	J.

	C	LA'	Y	County	,
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PART V. SCHOOL HEALTH SERVICES 2005-06 REVENUES AND EXPENDITURES

DIRECTIONS FOR COMPLETING PART V

Part V is composed of School Health Services revenues. Revenues and expenditures are submitted annually.

PAGE 24: 2005-06 REVENUE: For the Annual School Health Services Report, indicate on the appropriate line the revenues expended from all sources which are providing funding for the School Health Services program for state fiscal year 2005-06.

PAGE 25: SCHOOL HEALTH SERVICES 2005-2006 CONTRACTUAL AND OTHER ARRANGEMENTS In this section document the flow of school health funding between entities in your county.

PAGES 26-27: 2005-06 EXPENDITURES FOR CHD CATEGORICAL SCHOOL HEALTH FUNDS (SCHEDULE C)

Box A: CHD Revenue Source: Indicate the CHD Schedule C allocations for School Health Services.

Box B: CHD Expenditures of Schedule C funds (lines 1-11): In this section only the budget for CHD Schedule C monies should be itemized. Funds contracted to other agencies should be included as an budgeted item of the CHD on line 9.

Do not itemize expenditures from other funding sources, e.g., CHD trust funds, school district allocations, etc.

List the amount of expenditures by the expenditure categories listed below. Round to the nearest dollar amount.

- #1 Personnel Includes salary for direct service providers, supervisors, and coordinators.
- #2 Fringe Benefits Career service fringe benefits comprise up to 35% of salaries and wages. FICA for OPS is 7.65%.
- #3 Printing Includes printing, photocopying, and postage.
- #4 Travel Includes routine travel within the county.
- **#5 Staff Training/Education Expenses -** Includes travel, per diem, and registration expenses related to staff training, education and conferences.
- **#6 Supplies and Materials -** Includes supplies such as first aid supplies, office supplies, and educational materials that are not obtainable from other sources.
- **#7 Medical and Office Equipment -** Includes equipment such as blood pressure cuffs, scales, stethoscopes, and filing cabinets.
- #8 Operating Capital Outlay (OCO) OCO includes furniture and equipment that is 1,000 or more per item.
- **#9 Contracted Services -** Includes all services and personnel which are provided by another agency through a <u>Standard State Contract with a Performance Based Attachment I.</u>
- **#10 Indirect Costs -** Indirect costs are administrative costs and charges applied to a program or project as part of the total overhead. Indirect costs cannot exceed fifteen percent (15%) of the CHD School Health Categorical funding in Revenue Sources. Indirect costs for Full Service Schools are limited to no more than five percent (5%).

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#11 - The total expenditure listed in the totals column of Box B, line 11 should match the total revenues listed in Box A. The sum of expenditures listed in the totals column of Boxes D, F and H, line 11 should match the total contract revenues listed in Boxes C, E, & G.

Box C, E, & G: Revenue received from CHD Schedule C: Indicate the amount of CHD Schedule C funds for School Health Services which the CHD contracts to the school district or other entities. If the CHD does not provide any Schedule C funds to the school district or other entities, boxes C, D, E, F, G and H will not need to be completed.

Boxes D, F, & H: School District Expenditures from CHD Contract - lines 1 - 11: These boxes should reflect expenditures by category of CHD revenue contracted to the school district or other entities. CHD funds which the school district or other entities subcontracts to a third agency should be entered on line 9.

Part V. School Health Services Budget Plan Update

2005-2006 Revenue Sources for Health Services in Schools

Directions: List the total amount of <u>all funds</u> expended for School Health Services from each revenue source.

Revenue

COUNTY HEALTH DEPARTMENT	
Categorical Schedule C (TOB) \$84	4,513
	7,965
	5,999
cal Trust Fund	,
ement	
ealth Program	
	9,500
DEPARTMENT SUBTOTAL \$468	3,977
SCHOOL DISTRICT FUNDING	
h Services (district and schools) \$1,282	2.500
(in the contract and contract	-,
ogram	
dergarten, Head Start	
	300
	5,000
	5,000
ΨΣ	,,000
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ined Wateri	
T SUBTOTAL \$2.074	1.800
	,,,,,,
Council	
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TOTAL	\$0
\$2,543	
t Education \$722 Schools \$45 Schools \$45 Schools \$25 ming iffied Match T SUBTOTAL \$2,074 NITY and PUBLIC-PRIVATE PARTNERSHIPS mes Prevention Grant) Council pard in Strict trict TOTAL	44,8

2005-06 Annual School H	łealth Services F	Report for:
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School Health Services 2005-2006 Contractual and Other Arrangements

NOTE: Please utilize the following chart to document the <u>flow</u> of school health funding between entities in your county. Except for the Other categories, please utilize the available choices for funders and recipients.

Funds for School-based Health Services from County Health Department to:	Amount:	Funds for School-based Health Services from School District to:	Amount:
School District	\$60,097	County Health Department	\$159,500
Health Staffing Agency		Health Staffing Agency	
Social Service Agency		Social Service Agency	\$5,000
Hospital		Hospital	
Social Work/Case Management Agency		Social Work/Case Management Agency	
Independent Social Worker/Psychologist		Independent Social Worker/Psychologist	
Independent Nurse Consultant or ARNP		Independent Nurse Consultant or ARNP	
Independent Physician		Independent Physician	
Health Care Taxing District		Health Care Taxing District	
Other:		Other:	
Other:		Other:	
Total:	\$60,097	Total:	\$164,500

	Amount of Funds to:	Amount of		
Funds for School-Based Health	County Health	Funds to:	Amount of	Tatal
Services From:	Department	School District	Funds to: Other	Total
School Readiness Coalition				\$0
Charter School Consortium				\$0
Private School				\$0
County Government				\$0
County Taxing District				\$0
Health Care Taxing District				\$0
Health Care Management District				\$0
Hospital Taxing District				\$0
Other:				\$0
Other:				\$0
Other:				\$0
Total:	\$0	\$0	\$0	\$0

2005-06 Expenditures for CHD Categorical School Health Services Funds

	A. COUNTY HEALTH DEPARTMENT REVENUE from Schedule C					
	Basic School Health Services	Comprehen- sive School Health Services	Full Service Schools	School Nurse Volunteer Program	TOTAL	
CHD Schedule C	\$84,513	\$117,965	\$106,999	\$0	\$309,477	
CHD Trust Fund	\$0	\$0	\$0	\$0	\$0	
TOTAL	\$84,513	\$117,965	\$106,999	\$0	\$309,477	

	B. COUNTY HEALTH DEPARTMENT EXPENDITURES (SCHEDULE C)						
	Basic School Health Services	Comprehen- sive School Health Services	Full Service Schools	School Nurse Volunteer Program	TOTAL		
1. Personnel	\$174,316	\$92,218	\$37,435	\$0	\$303,969		
2. Fringe Benefits	\$47,634	\$28,380	\$9,466	\$0	\$85,480		
3. Printing	\$163	\$0	\$0	\$0	\$163		
4. Travel	\$8,300	\$0	\$0	\$0	\$8,300		
5. Staff Training	\$150	\$0	\$0	\$0	\$150		
6. Supplies	\$502	\$0	\$0	\$0	\$502		
7. Equipment	\$150	\$0	\$0	\$0	\$150		
8. OCO	\$0	\$0	\$0	\$0	\$0		
9. Contract Services	\$0	\$0	\$60,097	\$0	\$60,097		
10. Indirect Costs	\$12,798	\$0	\$0	\$0	\$12,798		
11. TOTAL	\$244,013	\$120,598	\$106,998	\$0	\$471,609		

C.	C. SCHEDULE C REVENUES CONTRACTED TO SCHOOL DISTRICT							
	Basic School	Full Service	Volunteer School Nurse	TOTAL				
CHD Schedule C	\$0	\$0	\$0	\$0				
TOTAL	\$0	\$0	\$0	\$0				
	D. SCHOOL DIS	TRICT EXPENDIT	JRES from CHD contract					
	Basic School	Full Service	Volunteer School Nurse					
	Health Services	Schools	Program	TOTAL				
1. Personnel		\$43,697		\$43,697				
2. Fringe Benefits		\$6,800		\$6,800				
3. Printing				\$0				
4. Travel		\$300		\$300				
5. Staff Training				\$0				
6. Supplies		\$2,400		\$2,400				
7. Equipment		\$1,900		\$1,900				
8. OCO				\$0				
9. Sub-Contract		\$5,000		\$5,000				
Services		ψ0,000						
10 Indirect Costs				\$0				
11. TOTAL	\$0	\$60,097	\$0	\$60,097				

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2005-06 Expended Budget for CHD Categorical School Health Services Funds (Schedule C) - Continued...

	E. SCHEDULE C REVENUES CONTRACTED TO PUBLIC-PRIVATE AGENCY					
	Basic School Health Services	Comprehen- sive School Health Services	Full Service Schools	School Nurse Volunteer Program	TOTAL	
CHD Schedule C					\$	
TOTAL	\$0	\$0	\$0	\$0	\$	

	F. AGENCY EXPENDITURES from CHD contract					
	Basic School Health Services	Comprehen- sive School Health Services	Full Service Schools	School Nurse Volunteer Program	TOTAL	
1. Personnel					\$0	
2. Fringe Benefits					\$0	
3. Printing					\$0	
4. Travel					\$0	
5. Staff Training					\$0	
6. Supplies					\$0	
7. Equipment					\$0	
8. OCO					\$0	
Sub-Contract Services					\$0	
10 Indirect Costs					\$0	
11. TOTAL	\$0	\$0	\$0	\$0	\$0	

G. SCHEDULE C REVENUES CONTRACTED TO PUBLIC-PRIVATE AGENCY								
	Basic School Health Services	Comprehen- sive School Health Services	Full Service Schools	School Nurse Volunteer Program	TOTAL			
CHD Schedule C					\$0			
TOTAL	\$0	\$0	\$0	\$0	\$0			

H. AGENCY EXPENDITURES from CHD contract							
	Basic School Health Services	Comprehen- sive School Health Services	Full Service Schools	School Nurse Volunteer Program	TOTAL		
1. Personnel					\$0		
2. Fringe Benefits					\$0		
3. Printing					\$0		
4. Travel					\$0		
5. Staff Training					\$0		
6. Supplies					\$0		
7. Equipment					\$0		
8. OCO					\$0		
Sub-Contract Services					\$0		
10 Indirect Costs					\$0		
11. TOTAL	\$0	\$0	\$0	\$0	\$0		