By the Committee on Fiscal Policy; and Senator Garcia

594-03786A-15 2015954c1

A bill to be entitled

An act relating to involuntary examinations of minors; amending s. 381.0056, F.S.; revising the definition of the term "emergency health needs"; requiring school health services plans to include notification requirements when a student is removed from school, school transportation, or a school-sponsored activity for involuntary examination; amending s. 394.4599, F.S.; requiring a receiving facility to provide notice of the whereabouts of an adult or emancipated minor patient held for involuntary examination; providing conditions for delay in notification; requiring documentation of contact attempts; amending ss. 1002.20 and 1002.33, F.S.; requiring public school or charter school principals or their designees to provide notice of the whereabouts of a student removed from school, school transportation, or a schoolsponsored activity for involuntary examination; providing conditions for delay in notification; requiring district school boards and charter school governing boards to develop notification policies and procedures; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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- Section 1. Subsection (2) and paragraph (a) of subsection (4) of section 381.0056, Florida Statutes, are amended to read: 381.0056 School health services program.—
  - (2) As used in this section, the term:

594-03786A-15 2015954c1

(a) "Emergency health needs" means onsite <u>evaluation</u>, management, and aid for illness or injury pending the student's return to the classroom or release to a parent, guardian, designated friend, <u>law enforcement officer</u>, or designated health care provider.

- (b) "Entity" or "health care entity" means a unit of local government or a political subdivision of the state; a hospital licensed under chapter 395; a health maintenance organization certified under chapter 641; a health insurer authorized under the Florida Insurance Code; a community health center; a migrant health center; a federally qualified health center; an organization that meets the requirements for nonprofit status under s. 501(c)(3) of the Internal Revenue Code; a private industry or business; or a philanthropic foundation that agrees to participate in a public-private partnership with a county health department, local school district, or school in the delivery of school health services, and agrees to the terms and conditions for the delivery of such services as required by this section and as documented in the local school health services plan.
- (c) "Invasive screening" means any screening procedure in which the skin or any body orifice is penetrated.
- (d) "Physical examination" means a thorough evaluation of the health status of an individual.
- (e) "School health services plan" means the document that describes the services to be provided, the responsibility for provision of the services, the anticipated expenditures to provide the services, and evidence of cooperative planning by local school districts and county health departments.

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594-03786A-15 2015954c1

(f) "Screening" means presumptive identification of unknown or unrecognized diseases or defects by the application of tests that can be given with ease and rapidity to apparently healthy persons.

- (4) (a) Each county health department shall develop, jointly with the district school board and the local school health advisory committee, a school health services plan.; and The plan must include, at a minimum, provisions for:
  - 1. Health appraisal.÷
  - 2. Records review.÷
  - 3. Nurse assessment. +
  - 4. Nutrition assessment. +
  - 5. A preventive dental program. +
  - 6. Vision screening. +
  - 7. Hearing screening. +
  - 8. Scoliosis screening. ÷
  - 9. Growth and development screening. +
  - 10. Health counseling. +
- 11. Referral and followup of suspected or confirmed health problems by the local county health department.  $\div$ 
  - 12. Meeting emergency health needs in each school.
- 13. County health department personnel to assist school personnel in health education curriculum development.
- 14. Referral of students to appropriate health treatment, in cooperation with the private health community whenever possible.
- 15. Consultation with a student's parent or guardian regarding the need for health attention by the family physician, dentist, or other specialist when definitive diagnosis or

594-03786A-15 2015954c1

treatment is indicated. +

16. Maintenance of records on incidents of health problems, corrective measures taken, and such other information as may be needed to plan and evaluate health programs; except, however, that provisions in the plan for maintenance of health records of individual students must be in accordance with s. 1002.22.7

- 17. Health information which will be provided by the school health nurses, when necessary, regarding the placement of students in exceptional student programs and the reevaluation at periodic intervals of students placed in such programs.; and
- 18. Notification to the local nonpublic schools of the school health services program and the opportunity for representatives of the local nonpublic schools to participate in the development of the cooperative health services plan.
- 19. Immediate notification to a student's parent or guardian 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, including the requirements established under ss. 1002.20(3) and 1002.33(9).

Section 2. Present paragraphs (c) through (e) of subsection (2) of section 394.4599, Florida Statutes, are redesignated as paragraphs (d) through (f), respectively, paragraph (b) of that subsection is amended, and a new paragraph (c) is added to that subsection, to read:

394.4599 Notice.-

- (2) INVOLUNTARY PATIENTS.-
- (b) A receiving facility shall give prompt notice of the whereabouts of an adult or emancipated minor  $\frac{1}{2}$  patient who is

594-03786A-15 2015954c1

being <u>held</u> involuntarily <u>held</u> for examination, <u>in person or by telephonic or other form of electronic communication, by telephone or in person within 24 hours after the patient's arrival at the facility, unless the patient requests that no notification be made. Contact attempts shall be documented in the patient's clinical record and shall begin as soon as reasonably possible after the patient's arrival. Notice that a patient is being admitted as an involuntary patient shall be given to the Florida local advocacy council no later than the next working day after the patient is admitted.</u>

- (c)1. A receiving facility shall give notice of the whereabouts of a minor patient who is being held involuntarily for examination pursuant to s. 394.463 to the patient's parent, guardian, or guardian advocate, in person or by telephonic or other form of electronic communication, immediately after the patient's arrival at the facility. The facility may delay notification for no more than 24 hours after the patient's arrival if the facility has submitted a report to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect, and deems delay in notification to be in the minor's best interest.
- 2. The receiving facility shall attempt to notify the minor patient's parent, guardian, or guardian advocate until the receiving facility receives confirmation from the parent, guardian, or guardian advocate, either verbally, by telephonic or other form of electronic communication, or by recorded message, that notification has been received. Attempts to notify the parent, guardian, or guardian advocate must be repeated at least once every hour during the first 12 hours after the

594-03786A-15 2015954c1

patient's arrival and once every 24 hours thereafter and must continue until such confirmation is received, until the patient is released at the end of the 72-hour examination period, or until a petition for involuntary placement is filed with the court pursuant to s. 394.463(2)(i). A receiving facility may seek assistance from law enforcement if notification is not made within the first 24 hours after the patient's arrival. The receiving facility must document notification attempts in the patient's clinical record.

Section 3. Paragraph (1) is added to subsection (3) of section 1002.20, Florida Statutes, to read:

1002.20 K-12 student and parent rights.—Parents of public school students must receive accurate and timely information regarding their child's academic progress and must be informed of ways they can help their child to succeed in school. K-12 students and their parents are afforded numerous statutory rights including, but not limited to, the following:

- (3) HEALTH ISSUES.—
- (1) Notification of involuntary examinations.—The public school principal or the principal's designee shall immediately notify the parent of a student who 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. The principal or the principal's designee may delay notification for no more than 24 hours after the student is removed from school if the principal or designee deems the delay to be in the student's best interest and if a report has been submitted to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment,

594-03786A-15 2015954c1

or neglect. Each district school board shall develop a policy and procedures for notification under this paragraph.

Section 4. Paragraph (q) is added to subsection (9) of section 1002.33, Florida Statutes, to read:

1002.33 Charter schools.-

- (9) CHARTER SCHOOL REQUIREMENTS.-
- (q) The charter school principal or the principal's designee shall immediately notify the parent of a student who 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. The principal or the principal's designee may delay notification for no more than 24 hours after the student is removed from school if the principal or designee deems the delay to be in the student's best interest and if a report has been submitted to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect. Each charter school governing board shall develop a policy and procedures for notification under this paragraph.

Section 5. This act shall take effect July 1, 2015.