



DCPS Annual Wellness Plan

2015-2016

HEATHER CROWLEY | DIRECTOR OF WELLNESS

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MESSAGE FROM THE BOARD

Dear DCPS Stakeholder,

One of the most important lessons we can teach our children is how to make healthy choices. These are lessons that pay immediate dividends in the classroom and long-term benefits throughout life. Establishing healthy behaviors early in life is much easier than trying to break unhealthy habits in adulthood. Our district understands that health and education are closely linked and that wellness is a necessary component in closing the achievement gap.



Every day, we ask teachers and staff to model healthy decision-making for our students, so it is equally important to support our employees with wellness services and programs. Workplace wellness benefits are now viewed as a critical component for attracting and retaining high quality employees. Comprehensive wellness strategies make healthy choices easier for our employees and create a culture of good health.

Our district takes a holistic approach to wellness that includes the components of coordinated school health established by the Centers for Disease Control and Prevention. These components include health education, physical activity/education, health services, nutrition services, counseling and social services, healthy school environment, employee wellness, and family/community involvement. Through the implementation of this plan, we are striving to transform the culture of the district to a proactive model of prevention and sustained healthy lifestyles. The benefits of a comprehensive wellness program are well documented, and include decreased overall health costs, improved performance, reduced absenteeism, greater morale, and reduced turnover. This board is committed to helping both our students and employees lead productive and satisfying lives, whether they are at school, work, or at home.

As a board, we are committed to supporting wellness initiatives for the students and employees we serve. We believe that quality health initiatives play an important role in the success of our district, and that this plan lays the foundation for a healthier school environment. Please join us in supporting this important work.

Sincerely,

Ashley Smith Juarez,
Board Chairman

"The part can never be well unless the whole is well." Plato

EXECUTIVE SUMMARY

Duval County Public Schools (DCPS) recognizes the value of educating the whole child and great strides are being made to provide high quality wellness, health, and physical education programs. This is evidenced by the reorganization of components of Wellness into one coordinated department that includes employee wellness, student wellness, school health services, health education, and physical education. The Wellness department works collaboratively and cross-functionally with other departments affiliated with the eight components of coordinated school health including: Employee Benefits, Communications, Risk Management, Human Resources, Student Discipline and Support Services, Family and Community Engagement, School Counseling, and School Behavioral Health/Full Service Schools.

DCPS emphasizes the benefits of good physical, psychological, and financial health to its employees and creates a workplace culture that recognizes and rewards wellness. The Wellness department is committed to educate, engage and empower employees to adopt and maintain a healthy lifestyle to achieve their highest potential and optimal wellness by providing information, activities and services designed to support positive attitudes and lifestyle choices.

Student well-being is an obvious and legitimate concern for educators and parents, as well as the students themselves. It is also an issue for federal, state, and local governmental bodies. In 2004, the federal government required every school district that participates in the federal meals programs to enact a wellness policy by the beginning of the 2006-2007 school year. Accordingly, the State of Florida has mandated compliance by passing section 381.0056, Florida Statutes, which states that school districts have the responsibility to “develop, implement, monitor, review, and, as necessary, revise school nutrition and physical activity policies.”

Quality health and physical education programs that are supported by policy and implementation in schools is integral to the success of our students. School health services is an ever-changing integral part of school systems across the nation. Through the support and collaboration of the Department of Health-Duval, DCPS is dedicated to providing a quality safe and healthy schools program to our students and employees.

WELLNESS

The mission of District Wellness is to provide high quality comprehensive programs, initiatives and educational opportunities that positively impact individual health and foster a culture of wellness throughout DCPS and the community.

BACKGROUND INFORMATION

The District Wellness Program provides targeted opportunities to support the health of our employees and students. It is the goal of the wellness team to continue to increase the programs and services available to our school and worksites. It is our belief that if both students and employees are healthier, we will contribute to a healthier school environments and Jacksonville community.

In January 2014, employees were introduced to a district-wide intramural program featuring two sports, basketball and kickball. This past year, the wellness department increased the offerings over a span of three seasons, to include volleyball, basketball, and softball, plus bowling discounts for employees to enjoy with families and friends. With over 500 employee participants each year, over a 9.5% increase was shown from year one to year two. General feedback from participants is overwhelmingly positive.



In partnership with Florida Blue during 2014-15, the Diabetes Management Program served 21 participants in the initial 8 hour class and 129 in annual refresher classes during 2014-15. During 2014-15, a new Diabetes Management program was also offered to employees through Northeast Florida Endocrine and Diabetes Associates (NEFEDA). A total of 26 employees participated in the 15 week NEFEDA program, which provided employees a different approach in managing their disease. Between both diabetes management programs the total was 176 participants, which is comparable to the 178 employees that participated in 2013-14.



Annually, employees are offered free, on-site flu shots provided through an agreement between Florida Blue and Maxim Health. On-site flu shot clinics are offered in the late Fall of each year. The Fall, 2013 on-site flu shot total was 3064 and the Fall 2014 total was 3090, which constitutes a slight increase. DCPS students are also offered the opportunity to receive protection from the flu in the form of the flu mist through a partnership with the Department of Health and Healthy Schools LLC. The program



was piloted in 22 schools with 768 students participating. In 2014-15, the flu mist program was expanded to all district schools, except Exceptional Student and Alternative Education Centers, with 12,834 students participating.

DCPS employees are also offered limited opportunities each year to participate in an on-site Health Screening from Health Designs then complete an online Personal Health Assessment. Each year, the onsite health screenings could only be offered to a maximum of 60 schools and worksites, so a new program was offered to all employees through Quest Diagnostics. Over a two month period between



March and April 2015, employees were invited to schedule a health screening at an offsite Quest lab that was convenient for them in terms of day, time and location. A total of 788 employees participated in the on-site health screening and 68 employees participated in the offsite Quest screening. A total 856 employees participated in health screenings, which is a decrease from 1072 in 2013-14. It is important to note, however, that schools with a lower number of faculty members

and those that had never participated in an on-site health screening did so, which means that the breadth of the impact of the program increased across schools although the depth within individual schools did not increase. Student health screenings are also conducted in designated grades for vision, hearing, scoliosis and growth and development (based on Body Mass Index) which will be discussed in depth below in the School Health Services portion of the Wellness Plan.

Additional programs and resources related to weight loss/management and smoking cessation are also promoted. In order to protect the privacy of employees participating in free smoking cessation programs, the (AHEC) does not share participant names, so there is no data available.

In conjunction with other weight loss/management programs, Thin Centers MD was approved as a Florida Blue add on resource that provides a variety of discounted, medically supervised programs to assist employees in meeting their weight goals.



During the 2014-15 school year, Thin Centers MD offered a new online program to all employees to encourage them to jump start their health for the new (calendar) year. The Health Trails program was built for individuals or teams to participate. While over 700 employees signed up and 169 employees finished all twelve weeks of the program.

Corporate Care Works provides a variety of work/life balance programs and services, including the Employee Assistance Program (EAP). The report indicating participation in these programs and services is based on a calendar year due to insurance benefits operating in the same fashion. Based on the calendar year 2014, 1,912 employees (14.94%) participated in one of the three following programs or services: EAP/Work Life Clients (492 or 3.84% of employees), Training/Onsite Support Participants (517 or 4.04% of employees), Web Visitors (903 or 7.06% of employees). Work/Life Balance programs will continue to be promoted as a benefit available to all employees to access, and appropriate referrals will be made for Critical Incident Stress Management services as needed.



In addition to school health related programs and services, the Hands Only CPR (HOCPR) program was introduced as a new, enrichment program in 2013-14 to all High Schools over the winter months. Middle Schools were encouraged to participate in the late Spring with 3,092 students and faculty members participating. This past school year, 2014-15, the HOCPR program was offered to all High Schools and Middle Schools over the Winter months, and the Elementary

Schools were engaged in late Spring 2015, with 3,904 students and faculty participating. From 2013-2014 SY to 2014-2015 SY, the HOCPR program increased in participation by over 26%.

In an effort to provide a safe environment for our students, the Wellness team collaborates with each school to ensure the training of first responders. Per Florida State Statute 381.0056, a minimum of two individuals who provide coverage for the health clinic must be First Aid and CPR trained each year. The district supports this initiative by funding the training provided in partnership with Jacksonville Sports Medicine Program, as well as training in the proper use of Automated External Defibrillators (AEDs). In addition to this, health and physical education teachers are given the opportunity to participate in voluntary FA/CPR/AED training each year during pre-planning. Athletic coaches are also required to maintain certification annually. DOH-Duval posts all individuals who are trained in strategic points throughout the school facility (cafeteria, gymnasium, front office, and clinic) for informational purposes.

The training, maintenance, and battery upkeep for our current AEDs is administered by Risk Management. The district current has approximately 150 AEDs. All high schools have at least 3 units and all middle schools have at least one supplied through the district. Elementary schools that have students identified as high risk through their Individual Health Plans also have district supplied units. The Risk Management Department maintains a supply of replacement pads and batteries for use as needed. The units are checked regularly by school based staff (Athletic Director, SRO, physical education teacher) and annually by the district Safety Specialist during their safety inspection process. The district provides training at all facilities with AED units on a biannual basis as recommended by the American Heart Association. A plan for placing an AED in all schools can be found on page 66.

In partnership with THE PLAYERS Center for Child Health, Wolfson's Children's Hospital and the American Lung Association, Wellness is taking a collaborative approach to the education and training of students and staff for asthma. Chronic disease data collected by schools and DOH-Duval shows over 6,800 DCPS students suffer from asthma and related respiratory issues. Annually, education, awareness, support and resources are provided to health and physical education teachers by way of professional development throughout the year. A2 Asthma Action (student and faculty programs) and Open Airways, are two of the programs on the SHAC Approved Speaker List and offers teachers/schools a series of educational sessions that focus on asthma management and control. The

Wellness department is working to create a map of schools showing where the highest concentration of asthmatic students can be found. This map will allow the department to strategically plan trainings and education for students, staff, and the community.

In addition to asthma, Individual Health Care Plans are developed for other medical needs, including seizure disorders, to ensure the safety of our students. Once the students' individualized care plans are created for these students, they are shared with appropriate personnel. For students identified as having a seizure disorder, the child's teacher, front office staff (UAP), and any other staff that the child may come into contact with on a regular basis is provided training by the DOH nurse. The DOH keeps a record of the individuals trained at each school. The training usually lasts an hour and includes documents that school personnel can reference and review as needed.

Through a partnership with Feeding Northeast Florida (FNEF, formerly the Nourishment Network and Second Harvest Food Bank), the Wellness department was able to continue our efforts to develop the whole child and tend to all needs of our students, DCPS provides SnackPacks to students identified as in need of food. SnackPacks, as it is currently known, is a simple school year concept of putting healthy, kid friendly and kid safe foods into the hands of students who are hungry- as identified by those that know them best- their teachers and counselors. This healthy snack outreach evolved from the Backpack Brainiacs! Program developed at Second Harvest North Florida in 2012. In the evolution of the program, within the past school year FNEF was able to provide over 18,900 SnackPacks to 10 schools throughout five zip codes. Those SnackPacks contained over 86,080 lbs. of food totaling 70,901 meals for over 2,000 DCPS students. For the 2015-2016 SY, service to our schools will double. Over 20 schools are being served by FNEF and the SnackPack Program (Appendix B). In addition to SnackPacks, select schools will also benefit from the inaugural Pantry Program. Deliveries to schools are made every Friday, with select schools opting to pick up items themselves.



NOTE: Each of the programs reference above can be located on the Wellness Calendar of Events as Appendix A.

Other noteworthy accomplishments for 2014-15, were as follows:

- 156 DCPS schools and six non-school based worksites identified Wellness Ambassadors (Appendix C)
- 156 DCPS schools submitted Healthy School Team rosters, which is now required per USDA Competitive Food Regulations (Smart Snacks) and associated Florida Administrative Rule (FDACS 5p-1.003)

- 48 DCPS schools participating in the Alliance for Healthier Generation – Healthy School Program entered Phase II of the program and New Berlin Elementary received Bronze Level national recognition (Appendix D)
- 16 DCPS schools participated in the Wellness Awareness Program (WAP), which was a 43.75% increase in participation
- School Health Advisory Council worked to revise the committee structure, so that all eight areas of Coordinated School Health are being addressed throughout the work of five committees (Complete list of SHAC members and organizations can be found in Appendix E)



STRENGTHS

District Wellness is committed to offering high quality programs and services to staff, students and all members of our school communities. Wellness efforts are primarily facilitated through school and worksite Wellness Ambassadors. The ambassadors are responsible for communicating and coordinating health and wellness programs and services at their respective schools/worksites. School based Wellness Ambassadors have the added responsibility of overseeing the work of the Healthy School Teams, which became a requirement for all schools as of July 2014. Many ambassadors are selected to serve based on their personal or professional passion for health and wellness, however, it is an additional responsibility for them.



WEAKNESSES

The primary weakness is communication. Currently, information must be passed through multiple channels to reach all staff, students, and other members of the school communities. Too often these audiences do not receive the information regarding program and service opportunities in time to participate because we do not have a direct method of communication. This weakness will eventually be costly as staff members are not being made aware of valuable benefits available and students and other members of the school communities are missing out on opportunities that can have a positive impact on their health and overall well-being. Technology is currently working on improving the Weekly Briefing System to allow messages to be sent to "All Employees." With the addition of the Parent and Student Portal, we will have the ability to efficiently and directly provide information concerning Wellness to students and their caregivers.



OPPORTUNITIES

Opportunities exist in all aspects of district wellness. The RFP for the insurance plan is being prepared, which will open up discussions about new program and services. Relationships with current vendors are strengthening as the wellness staff has stabilized. Participation in professional development, conferences, and coalitions continues to provide additional information, resources, and networking that is critical for future growth and achievement. For example, the Action for Healthy Kids Urban School Coalition will provide us with the opportunity to share best practices and strategies with colleagues serving in health and wellness related roles throughout the country. The Action for Healthy Kids (AFHK) will be completing an analysis of the District Wellness Policy using the WellSAT (Wellness School Assessment Tool), then providing us with a report from which we can develop an action plan to revise the policy and continuously improve. AFHK also offers a variety of resources that will be beneficial to the school district, especially schools. With new and changing health and wellness policy and procedure requirements, we will have to continue to be flexible and seek support from multiple entities internally and externally to be successful.



THREATS

The two main threats are related to funding: Wellness Ambassador stipends and an Incentivized Wellness Plan. Today, many schools districts offer stipends to their Wellness Ambassadors because of their role and responsibilities. With increasing health and wellness related responsibilities being placed on schools and school districts, there must be people assigned to care for facilitating this work. Just as an academic or athletic coach receives a stipend, so should Wellness Ambassadors.

Positive impact of wellness initiatives relies on participation in the programs and services offered. Successful wellness programs in business and government agencies offer structured incentivized plans to encourage employees to engage. Wellness program and service participation is only changing slightly. Low participation will have a negative impact employee health and eventually health care costs.

The Wellness team will continue to submit proposals for both of these items to the District insurance Committee with requests for funding. District Wellness is gathering additional information from other school districts to provide evidence of best practices and support the need for this funding request. Lack of participation will lead to poor health and/or lack of identification of health concerns, which will increase health insurance claims, decrease employee and student productivity, and result in higher health care costs in the long run.

ACTION PLAN

<u>PROGRAM</u>	<u>ACTION</u>
Intramural Program	Expand employee Intramural program to include both multi-week and weekend tournament style opportunities
Diabetes Management Program	Continue to promote both diabetes prevention and diabetes management programs covered through the Florida Blue insurance plan
On-site Flu Shots	Continue to offer onsite flu shot clinics for employees covered through the Florida Blue insurance plan, in partnership with Maxim Health Services, at schools and non-school based worksites
Teach Flu a Lesson – Flu Mist Vaccination Program	Continue to offer the flu mist program to all district students at schools
Health Screenings	Continue to offer the maximum number of onsite health screenings covered through the Florida Blue insurance plan, in partnership with Health Designs, at schools and non-school based worksites.
Tobacco Cessation	Continue to share information and resources, and promote available cessation programs to staff
Weight Loss/Management	Continue to share information and resources, and promote weight loss/management programs to staff.
Employee Assistance Program (EAP) +Work/Life Balance	Continue to offer EAP and Work/Life Balance programs and services to staff
Hands Only CPR	Continue to offer Hands Only CPR program as an enrichment opportunity to all schools
Feeding Northeast Florida (FNEFL)	Continue to support FNEFL in efforts to secure funding for provisions for SnackPacks and the expansion to the Pantry Program. Assist with communication to schools regarding the offering of these programs
Wellness Ambassadors	Continue to support the current school and non-school based worksite ambassadors and identify additional ambassadors to communicate and coordinate wellness information and resources. Develop a proposal for Wellness Ambassadors to receive a yearly stipend based upon a task-based checklist
Healthy School Teams	Continue to encourage faculty, staff, students, families, and community partners to participate on Healthy School Teams to plan and implement wellness activities at schools
Alliance for a Healthier Generation – Healthy School Program	Continue to support the efforts of the 48 schools that are part of the Alliance for a Healthier Generation – Healthy School Program, in collaboration with the AHG-HSP Manager, as they work to create healthier school environments

Wellness Awareness Program	Continue to offer Wellness Awareness Program (WAP) workshops and encourage Wellness Ambassadors to work with the members of the Healthy School Team to submit WAP award applications
School Health Advisory Council (SHAC)	Continue to support the efforts of the SHAC to involve and inform community health related agencies and organizations
SHAC Wellness Committee	Continue to facilitate the SHAC Wellness Committee so that the representatives can both advise and assist with district and community wellness initiatives
SHAC Family and Community Involvement Committee	Continue to build out the Family and Community Involvement Committee concept through committee work and offer family and community involvement events to share information about the purpose of the SHAC and related school health issues
SHAC Counseling, Psychological and Social Services Committee	Coordinate the development of the SHAC Counseling, Psychological and Social Services Committee concept
Communication	Continue to work to gain access to additional methods of communicating with all DCPS employees, including additional requests for access to Post Office/Post Master Develop creative, new brand for wellness to include in newsletters
Incentivized Wellness Plan	Continue to gather evidence from school districts and other organizations that are successfully offering an incentivized wellness plan to encourage higher levels of employee engagement

HEALTH EDUCATION

Duval County Public Schools values providing students with information that will enable them to make healthy, informed choices regarding their health and well-being. Our mission is to provide quality instruction in health education revolving around the core concepts (community health, consumer health, environmental health, family life, mental and emotional health, injury prevention and safety, nutrition, personal health, prevention and control of disease, and substance use and abuse). These concepts are linked to health skills necessary in developing functional health literacy in Duval County Public Schools.

Curriculum is designed to be educational, informative and to increase positive health behavior decisions in children, including the reduction of early sexual involvement, substance abuse, suicide, activities which result in sexually transmitted diseases, and early teenage pregnancy. The curriculum in Health Education is aligned with Florida Next Generation Sunshine State Standards and the National Standards for Health Education.

BACKGROUND INFORMATION

Duval County Public Schools has recognized the importance of a Comprehensive Health Education Program and fully supports its implementation in the regular curriculum of schools as required per SB Policy 4.0(VIII-XIV) and as reflected in Florida State Statutes 1003.42 (2)(n) and 1003.46;

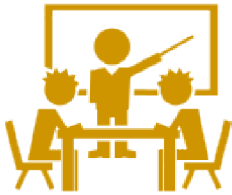
FSS 1003.42 (2)(n)- Comprehensive health education that addresses concepts of community health; consumer health; environmental health; family life, including an awareness of the benefits of sexual abstinence as the expected standard and the consequences of teenage pregnancy; mental and emotional health; injury prevention and safety; Internet safety; nutrition; personal health; prevention and control of disease; and substance use and abuse. The health education curriculum for students in grades 7 through 12 shall include a teen dating violence and abuse component that includes, but is not limited to, the definition of dating violence and abuse, the warning signs of dating violence and abusive behavior, the characteristics of healthy relationships, measures to prevent and stop dating violence and abuse, and community resources available to victims of dating violence and abuse.



FSS 1003.46-Health education; instruction in acquired immune deficiency syndrome. (1) Each district school board may provide instruction in acquired immune deficiency syndrome education as a specific area of health education. Such instruction may include, but is not limited to, the known modes of transmission, signs and symptoms, risk factors associated with acquired immune deficiency syndrome, and means used to control the spread of acquired immune deficiency syndrome. The instruction shall be appropriate for the grade and age of the student and shall reflect current theory, knowledge, and practice regarding acquired immune deficiency syndrome and its prevention. (2) Throughout instruction in acquired immune deficiency syndrome, sexually transmitted diseases, or health education, when such instruction and course material contains instruction in human sexuality, a school shall: (a) Teach abstinence from sexual activity outside of marriage as the expected standard for all school-age students while teaching the benefits of monogamous heterosexual marriage. (b) Emphasize that abstinence from sexual activity is a certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, including acquired immune deficiency syndrome, and other associated health problems. (c) Teach that each student has the power to control personal behavior and encourage students to base

actions on reasoning, self-esteem, and respect for others. (d) Provide instruction and material that is appropriate for the grade and age of the student.

Comprehensive Health Education is delivered in grades K-12 in Duval County Public Schools by certified instructors. Instruction at the elementary level is delivered by the classroom teacher through integration into the ELA and Science curriculum guides. At the secondary level, DCPS maintains stand-alone health education courses taught by certified health education teachers. In middle school, students are required to take one semester of Comprehensive Health Education in grades 6, 7, and 8. This is an increase from the previously required quarter of instruction. DCPS high school graduation requirement for health education is met by students enrolling in Health Opportunities through Physical Education (HOPE) which is an all-inclusive, yearlong Health and Physical Education course. Through partnerships with multiple local and national organizations, health teachers are provided with multiple programs and curricular materials to address the topics of required instruction.



One program of note new to the 15-16 school year is provided in partnership with the One Love Foundation. HOPE teachers have received professional development and training on the Escalation workshop designed to address the sensitive topic of relationship and dating violence. DCPS is one of the first public school organizations to offer this program to students. Follow-up services are provided to students from Hubbard House and the Women's Center of Jacksonville.

At the conclusion of the 2013 school year, a Curriculum Writing & Assessment Team was assembled to develop curriculum guides, as well as accompanying curriculum guide assessments. The team was split into three levels, elementary (tasked with working with Science and ELA specialists to embed curriculum within current CG's), middle school for the three MS courses, and high school for the development of high school course materials. These curriculum guides and assessments are reviewed and updated annually.



In August of 2013, Duval County Public Schools was granted a CDC DASH award to reduce the unsafe, risky behaviors of our secondary students; administer the Youth Risk Behavior Survey and provide safe spaces for youth of disproportionate risk at the secondary school level. The targeted population of students are those who have the highest risk of dropping out of school, being bullied, assaulted and/or are at risk for infection with STD's to include HIV. The grant also provides pre-health care services, such as prevention counseling, training and education about the risk for HIV and STD's. Within the past two years, through partnership with the Jacksonville Partnership for Promoting Health for Emerging Adults (JPPHEA), Full Service Schools Jacksonville (FSSJ), the Florida Department of Health in Duval County (DOH-Duval), the Jacksonville



Area Sexual Minority Youth Network (JASMYN), and the University of North Florida (UNF), five Teen Health Centers have opened near, or on site for all DCPS students to access vital health education, information, and other health resources. Current locations include: Andrew Jackson High, Ribault High, Englewood High, Sandalwood High, and the Springfield location within JASMYN (times and dates noted in Appendix F). Through supplemental funding, the Department of Health-Duval will provide testing results, return education, screenings for HIV and STD's, medicines for treatment and testing supplies. The Safe Space program is designed to provide students the atmosphere needed to feel safe and supported at school, and curtail bullying, which will lead to an environment conducive to academic success. Statistics show that when students have at least five supportive adults in the school building, truancy and other high risk factors decrease.

In an effort to promote quality instruction in comprehensive health education, Wellness has successfully implemented a series of Professional Learning Communities (PLCs) throughout the county (Appendix G). Monthly attendance at PLC meetings provides teachers with strategies to improve their health education programs, as well as an opportunity to collaborate with colleagues. Currently, 20 schools host content-specific Health Education PLC meetings on the last early release of each month. The Wellness team also provides professional development opportunities to Health Education teachers a minimum of 6 times a year. These training sessions focus on implementation of best practices and technology assistance. They are scheduled during teacher planning days, special training days, and throughout the summer.

The Health Education Specialist, in cooperation with the Wellness team, plays an integral role in the School Health Advisory Council (SHAC). The Health Education Sub-Committee has a primary goal of reviewing applications for programmatic proposals and organizational speakers. The SHAC-Approved Speakers List has undergone an extensive review within the past year and an updated SHAC-ASL can be found on the Wellness website.



STRENGTHS

Duval County Public Schools is one of the only school districts in the State of Florida to maintain stand-alone Health Education courses for secondary students. These course offerings provide our students with concentrated instruction on topics vital to their overall social, mental, emotional, and physical development. This is evidenced by YRBS data that has shown that tobacco, alcohol, and inhalant use has continually decreased since 2007 among middle school students (29.6% in 2007 decreased to 18.9% in 2013) and high school students (15.4% in 2007 decreased to 9.6% in 2013). Consistent prevention and awareness lessons have been taught to Health Education students.

The SHAC-HESC (School Health Advisory Council Health Education Sub-Committee) is very involved with selecting age appropriate curriculum and supplemental speakers and programs. Teachers and staff are able to access an extensive list of community organizations to enhance the educational experience of our students.

Health Education curriculum was strengthened across the district with the development of Curriculum Guides and Curriculum Guide Assessments for all 6-12 grade Health Education Courses. This has ensured that all students are receiving comparable lessons across the district.



WEAKNESSES

Curriculum materials/textbooks are outdated and in need of replacement. Several schools do not have enough textbooks for each student due to class enrollment and the inability to purchase outdated materials. District staff has started the review process for adopting new textbooks.



OPPORTUNITIES

As mentioned above, through the adoption of new curricular materials, teachers and students will benefit.

Duval County STD rate is 37%, which is higher than Florida's rate of 23.8% for teens 15 to 19 years old. While abstinence is our first goal, moving from an abstinence only curriculum to abstinence plus curriculum has provided students with much needed information to make better decisions about their sexual behaviors.

We have an opportunity to align and strengthen the K-5 health education curriculum in cooperation with the ELA and Science teams to integrate content. Additionally, supplemental materials may be purchased for instruction.



THREATS

The student-teacher ratio in some of our individual health classes are larger than the ideal class size. District staff is working with the Regional Superintendents and principals to find ways to reduce class sizes, where feasible. In addition, professional development is being offered to teachers to assist with classroom management.

It is becoming increasingly difficult to find high quality health education teachers due to a shortage in appropriate candidates. Wellness staff will continue to work with principals, Human Resources, and local colleges and universities to identify qualified candidates for vacant positions.

ACTION PLAN

<u>PROGRAM</u>	<u>ACTION</u>
Health Education Curriculum Materials	2015-2016 Textbook adoption committees will be developed to review and recommend a new, up to date health education curriculum for grades K-12
Curriculum Guides and Assessments	Annual review and revisions to CGs. Plans to update CGs and CGAs following textbook adoption in 15-16 Create a more comprehensive elementary approach for CGs across the district
Teacher per Student Ratio	Provide on-going professional development for teachers to model how to manage larger class sizes effectively while teaching curriculum with fidelity
Stagnant Condom Use Rate Among Sexually Active Teens	Continued Health Educator training for all teachers responsible for teaching middle school health (Draw the Line/Respect the Line) and high school HOPE (Reducing the Risk)
Professional Development	Continue to provide year-round PD opportunities for health education teachers revolving around core concepts Create webinars for implementation at PLC locations across the district Offer PD for classroom teachers specific to health instruction in the elementary setting
Needs Assessment	Conduct surveys for health educators to express areas of support needed, request materials, or general checks of progress
Teen Health Centers	Continue to support the implantation of the THC's at current locations and look to expand to additional locations through partnerships via grant
Content Area Recognition	Develop a district-wide program for recognition of excellence in education in health education. Duval HE-TOY
Professional Organizations	Encourage participation, engagement, and activity with local and state professional organizations, SHAPE America, SHAPE- FL, SHAPE- Duval, etc.
School Health Advisory Council	Continue to actively participate in both the large SHAC meetings and co-facilitate the SHAC-HESC meetings, monthly

PHYSICAL EDUCATION

Duval County Public Schools and the National Association for Sport and Physical Education (NASPE) agree that every student in our schools, from kindergarten through grade 12, should have the opportunity to participate in quality physical education. It is the unique role of quality physical education programs to develop the health-related fitness, physical competence, and cognitive understanding about physical activity in all students so they can adopt healthy and physically active lifestyles. Quality physical education programs are essential in helping improve students' mental alertness, academic performance, readiness to learn, and enthusiasm for learning.

BACKGROUND INFORMATION

Physical Education in DCPS aims to follow the requirements established by FL Statute, in Sections 1003.455 (elementary and middle) and 1003.4282 (high). The Statute requires 150 minutes of Physical Education per week for students in grades K-5, one semester of Physical Education each year for students in grades 6-8, and one credit of Physical Education with integration of Health for high school students. The Duval County School Board Policy and Student Progression Plan addresses these requirements.

In the past 20 years there has been a change to the way in which Physical Education is offered in Duval County Schools. At the beginning of the last decade, physical education was not being taught in all DCPS schools. Beginning in 2013-2014, the district took steps to ensure that there is a physical education teacher allocated to every elementary school, with multiple teachers serving in schools with larger student populations. At this time, there are 303 Health and Physical Education teachers serving



the needs of students in 152 schools. Of these, 15 teachers are serving in multiple schools (Itinerant teachers noted in Appendix H). In the past year, Physical Education has fallen under the jurisdiction of DCPS Wellness, with a full-time specialist dedicated to support and maintain curriculum, instruction, community involvement, professional development, and initiatives. Partnerships have been fostered with organizations such as The First Tee of North Florida, Jaguars Foundation, Dairy

Council of Florida, Let's Move! Active Schools, the Society of Health and Physical Educators (SHAPE) Florida, and the Jacksonville Armada. Every one of these partnerships has yielded benefits to student learning throughout the entire district. The Wellness team is committed to expanding and cultivating these partnerships to continue to enrich the lives of our students through physical education.

At the conclusion of the 2013-2014 school year, a Curriculum & Assessment Writing Team was assembled and created a series of curriculum guides for Physical Education K-12. The guides were developed with a variety of settings and student populations in mind and are specific to each course being taught. The Curriculum Guide, and Lesson Guides within, are accessible online to all Duval teachers. They are standards-based and have



been aligned with the Curriculum Guide Assessments that were developed jointly. The curriculum guides are housed in their own website and are expected to migrate to the Focus system in the near future.

In order to improve the quality of physical education and teacher participation, the district has successfully implemented a series of Professional Learning Communities (PLCs) throughout the county



(Appendix G). Monthly attendance at PLC meetings provide teachers with teaching ideas to improve their physical education programs as well as a direct line of communication with colleagues. Currently, 20 schools host content-specific Physical Education PLC meetings on the last early release of each month, with some sites meeting each Early Release day. The Wellness team also provides professional development opportunities to all Physical Education teachers a minimum of 6 times a year. These training sessions focus on implementation of best practices and technology assistance. They are scheduled during teacher planning days, special training days, and throughout the summer.

The District has an abundance of experienced Physical Education teachers that are well established within their schools and communities. Their subject knowledge and ability to manage the classroom are an asset to the organization. It also has strong buy-in from several stakeholders in the community.

Community organizations have played an integral role in the advancement of Physical Education and student health. From the Jaguars to St. Vincent's, Jacksonville organizations continue to bring valuable resources that enhance Physical Education programs.



STRENGTHS

The Director of Wellness and Health/PE Specialists are very involved with district, state, and national organizations that promote the advancement of Physical Education and Health. They are up-to-date with new initiatives and legislative news, allowing them to lead the District in the right direction. Currently, all three team members hold positions of leadership within SHAPE FL, the state's professional organization for Health and Physical Educators.

Teacher resources and professional development opportunities are available year-round for Physical Education teachers. Physical Education curriculum materials are available online. District staff visit schools in order to provide one on one support for teachers that request it to help improve their pedagogical practices. Physical Education Professional Learning Communities (PLCs) have been created and meet on a monthly basis to further enhance teacher support and camaraderie.



WEAKNESSES

One of the weaknesses in the DCPS Physical Education programs is the large number of students in some PE classes. While the class sizes are lower than previous years and the district set a class size cap at 60 for secondary schools, class sizes present a challenge for some teachers. District staff continues to work with principals to find ways to reduce class sizes, where feasible, and to support teachers with professional development on classroom management strategies.

While statutory requirements for Physical Education are being followed in secondary schools, some of the elementary schools in the district have struggled with providing 150 minutes of physical education per week for students in grades K-5. Regional superintendents continue to work with their elementary schools to ensure that they are aware of the 150 minute physical education requirement and provide additional opportunities for physical activity for students as concerns are raised.



OPPORTUNITIES

The District can alleviate many of the issues with teacher competency by providing meaningful professional development that addresses the issues and/or topics that become challenging to physical educators. By making use of the wealth of knowledge from district staff and veteran teachers, DCPS can keep Physical Educators engaged, enthusiastic, and knowledgeable of best teaching practices. Emphasis should be placed on teachers new to Physical Education in order to improve their chances for success and a long career.

While DCPS has done well to foster relationships with key community organizations, developing new relationships with multiple organizations can further enhance the quality of education it is able to provide. Specifically, it is in the best interest of the district to seek relationships with organizations that are able to provide training, equipment, and/or funds to enhance physical education programs. The use of technology must permeate all aspects of the school environment in order to prepare students for a successful life. DCPS has the opportunity to embrace technologies developed to enhance the concept of physical health and engaged learning. Physical Education teachers can be agents of change as the District supports programs that advance the use of technology in and out of the classroom.



THREATS

DCPS Physical Education teachers have reported concerns about the teacher evaluation system for their unique environments. The district office is working collaboratively with multiple departments to address these areas of concern and provide solutions such as targeted professional development in the areas of assessment, and education and assistance for administration on how to effectively evaluate physical education programs.

An increasing rate of childhood obesity (now near 30%) has a direct effect on student performance in PE. The combination of decreasing contact time and increasing obesity among students is likely to affect the effectiveness of PE classes. Physical Education course waivers also add to the challenges. While these waivers are convenient for schedulers, they further erode the efficacy of physical education programs in Duval schools. Local organizations such as SHAPE-Duval, partner with state organizations to encourage and promote the limited use of these waivers to both schools and legislation.

ACTION PLAN

<u>PROGRAM</u>	<u>ACTION</u>
Active participation in District Leadership	Establishing effective communication with other district leaders will increase the organization's understanding of the importance for quality physical education programs in all DCPS schools. Continued collaboration in the development of the district's Master Schedule can also help meet statutory requirements for physical education, especially at the elementary level.
Curriculum Guides & Assessments	Annual review of curriculum guides, lesson guides, and assessments to ensure most current strategies and activities are present in content
Teacher per Student Ratio	Provide on-going professional development for teachers to model how to manage large class sizes effectively while teaching curriculum with fidelity
Active participation in Student Progression Plan committees	By participating in elementary and secondary SPP committees the Wellness Department will have an opportunity to promote the importance of physical education. This initiative will satisfy teachers' desire for equity in evaluation and, more importantly, increase safety and reduce the propensity for injury.
Professional Organizations-local, state, and national	Encourage participation, engagement, and activity with local and state professional organizations, SHAPE America, SHAPE- FL, SHAPE- Duval, etc. Physical Education professional organizations promote the enhancement of best teaching practices. They also provide a representation in legislative matters. Through these organizations, it is possible to seek legislative support for stronger Physical Education programs as well as support against Physical Education Waivers.
Professional Development	<p>Physical Education programs can only gain high levels of quality if the teachers seek and receive professional development that is meaningful to the courses that they are teaching. Teachers attending professional development is not enough. Leaders will be identified and encouraged to become providers of professional development.</p> <p>Provide mandatory professional development on appropriate and professional practices will continue to be offered to reduce the number of incidences leading to litigation. As teachers become more knowledgeable of best teaching and professional practices, the quality of service provided to students and their families will increase.</p>

	<p>Provide direct support for physical education programs that do not meet best practices to alleviate the issue of teacher complacency. This will be implemented by conducting direct classroom observations to determine areas of need.</p> <p>Provide professional development opportunities for classroom teachers on how to integrate physical activity into classroom routines, as well as support teacher needs in regards to recess and TDPE</p> <p>Provide school administrators the information to help them evaluate physical education instruction and programs through a series of professional development opportunities specific to the subject area. These could be part of existing training such as Principals' Academy.</p>
Needs Assessment	Conduct surveys for physical educators to express areas of support needed, request materials and equipment, or general checks of progress
Recess/Teacher Directed Physical Education	Develop an activity plan for elementary classroom teachers that will provide them with safe, engaging physical activities to participate in with their classes. Assist administration in any way possible to support the integration of academic content into physical activities.
Content Area Recognition	Develop a district-wide program for recognition of excellence in education in physical education. Duval PE-TOY
Community Organizations/Partnerships	Continue to foster current relationships with community organizations and develop additional partnerships within the community.

SCHOOL HEALTH SERVICES

School health services are intended to minimize health barriers to learning for public school students in Pre-kindergarten through 12th grade. Good health is integral to the well-being, academic success, and life-long achievement of students. School nurses monitor normal development in students, promote health and safety, provide care for actual and potential health problems, and collaborate with staff, family members, and students to provide health care services to the students of our district. Within the past year, School Health Services has transitioned under the full oversight of the Wellness Department. The School Health Services Program is designed to appraise, protect, and promote the health of students. This program will provide the following health services to students:

Program	Description
School nursing services	School nursing services are provided to assist in the identification, assessment and counseling of students at risk or with potential health problems. In cooperation with school personnel, parents and other health professionals, nurses will take appropriate action to assist in obtaining needed services for students through referral to appropriate agencies. School nurses for the basic school health services program are scheduled in elementary, middle and high schools on a weekly basis.
School-Entry Health Examination and Early Periodic Screening Diagnosis and Treatment Program For Indigent Students	A school-entry health examination performed within one year prior to enrollment is required for all students entering Florida schools for the first time. Many parents will provide a school-entry health examination for their children through their private physician or health department clinics based upon financial eligibility. Those students exhibiting physical abnormalities need to be appropriately referred to the school nurse for attention.
Vision Screening	The vision screenings are conducted by district staff and trained volunteers and is designed to identify students with possible vision problems. Parents of students who fail vision screening are notified. Follow-up services for students with medical diagnosis and/or treatment are provided.
Hearing Screening	Hearing screenings are conducted by district staff and trained volunteers and is designed to identify students with possible hearing problems. Parents of students who fail the hearing screening will be notified. School nurses provide follow-up and assist parents, when appropriate, in securing further diagnosis and/or treatment for these students. Audiological services and referrals to otologists will be available to exceptional students and other students referred by the Child Study Team.
Scoliosis Screening	Scoliosis screening is conducted for sixth grade students. School health nurses conduct the screenings and follow-up on children referred to specialists for further diagnosis and treatment.
Human Growth and Development	Body Mass Index (BMI) is a person's weight in kilograms divided

(BMI) Screening	by the square of height in meters. For children and teens, BMI is age- and sex-specific and is often referred to as BMI-for-age. Children with BMI's outside of the healthy range receive communication from DOH-Duval with recommendations for obtaining optimal health.
Pre-participation Athletic Physicals	Pre-participating athletic health screening examinations for middle and high school male and female athletes in all sports is provided by Duval County Medical Society physicians. The examinations are given in July. Students identified as having significant medical problems will be referred to their private physician, the Duval County Health Department, or appropriate medical agencies.
Immunizations	School Health nurses provide follow-up services to schools for students with temporary immunization exemptions. Immunizations are available to students who financially qualify at the Duval County Health Department without cost to parents.
Review of health records for immunization and school-entry health examination compliance status and chronic health problems	The school nurses, in cooperation with other school personnel, will review health records of all new students to determine immunization status and the existence of medical problems such as diabetes, heart or pulmonary disease, etc. The nurse will notify school personnel of students with health problems and make the appropriate referral. Parent-teacher nurse conferences are arranged as necessary.
Tuberculosis screening, as necessary	Tuberculin skin tests are administered by Duval County Health Department personnel and school health nurses for students and school personnel who have been exposed to an active case of tuberculosis. Duval County Health Department medical staff and the school physician are available to provide tuberculosis in-service to students prior to the screening. Follow-up is provided by the Duval County Health Department.
In-service health training for school personnel	In-service training for school personnel on the administration of medication to students, immunization and health examination requirements, communicable diseases, pediculosis control and emergency care guidelines are conducted by either the school physician or school nurses annually and throughout the school year as necessary.
Consultation, referrals, and treatment	Referral and treatment of communicable diseases including pediculosis, consultation with parents and teachers regarding student health problems, health programs and practices, health counseling, referral, and follow-up services to elementary and secondary students
Exceptional Student Education Program	This program provides contracted medical services for eligible exceptional students. The Executive Director of Exceptional Student Education, in conjunction with the Executive Director of Alternative Education Programs and Behavioral Support, utilize the services of the exceptional center nurses and the Duval County Health Department as necessary to follow-up with

	parents and with other agencies to help meet the students' health needs. Specialized health care is provided full-time by assigned school nurses for handicapped students in exceptional education centers located at the following schools: Mt. Herman, Alden Road, Palm Avenue, Biltmore, Biscayne, Crystal Springs, Kernan Middle, Landmark Middle, Love Grove, Sabal Palm, Sandalwood, Stillwell, Mandarin Oaks, Mandarin Middle, Neptune Beach, and Ed White.
Emergency Health Care Plan	A training program in acute or emergency health care will be conducted for school personnel responsible for students. The instruction for this program is provided by the school physician and/or school nurses when agencies are unable to provide this service. Schools with established procedures and on-going programs are only provided monitoring and consulting services.
Dental Care Program	The Duval County Health Department's Children's Mobile Dental Units provide dental services at no cost to students in kindergarten, first, second, third, seventh, and eighth grades who are eligible for the free and reduced lunch program. Services include dental examinations, cleanings, and sealants. Parent permission is required. Dental treatment is available at the Duval County Health Department Children's Dental Clinics for students in grades kindergarten through twelve who qualify by reason of financial eligibility.

BACKGROUND INFORMATION

School Health Services, including comprehensive nursing services, within Duval County Public Schools is provided through a partnership with DCPS and The Florida Department of Health-Duval, School Health Services Office to ensure that the program and activities are carried out in accordance with Florida Statutes. DOH-Duval provides school health nurses for the basic school services program in elementary, middle, and high schools. Additionally, school health nurses and health support technicians are employed for the comprehensive school health services program. A supervisor provides coordination and supervision of school health services staff and activities to ensure the program is carried out in accordance with interagency contract agreement with the school board. Currently, School Health Services consists of 33 district nursing staff (39 upon the November hiring of LPNs for diabetic students), 1 part-time school board physician, 26 Department of Health nurses and 9 DOH health support technicians (Appendices J & K). DOH is responsible for compliance with State statutes that pertain to students in the public school system within in Duval County. The DOH-Duval staff primarily focus on administrative duties as they relate to immunization statistics, the creation of individualized health care plans for students with chronic diseases and severe allergies, and in-school care management for acute conditions. Furthermore, DOH staff are responsible for the education and training of DCPS staff on medical conditions, medication administration, and other important information.



In an effort to improve communication for schools, teachers, parents, and stakeholders, a referral list containing contact numbers for each department was created and posted to the website. This document can be referenced as Appendix I.

DOH is also mandated to screen, and report in specific areas of care. These screenings include: vision, hearing, scoliosis, and growth and development or body mass index. Upon completion of screenings, DOH staff refer students that are in need of follow-up care for those services to the appropriate medical entities. Vision screening is completed annually for students in designated grade levels.



Partnerships with the Duval County Council of PTAs, Baptist Health and Wal-Mart continue to provide free follow-up services to students who fail the screening and are identified with financial challenges. Hearing screening was also provided and follow up for students who fail is currently cared for through the Florida Department of Health – Duval County (FDOH-DC) nurses. Scoliosis screening is conducted solely by Florida DOH-DC nurses because the nature of the screening

being more intrusive. Finally, growth and development screening is a collaboration in most schools between the Health/Physical Education teachers and Florida DOH-DC in that measurements are taken either by the Health/PE teacher and shared with the Florida DOH-DC nurse or the nurse collects all information and cares for referral and follow up procedures. The two tables below represent the 2014-2015 data collected by DOH-Duval:

Screening	Total Screened	Referrals
Vision	63,236	6,091
Hearing	27,484	413
Scoliosis	7,378	107

BMI Screening		
	Elem.	Middle
BMI underweight	580	159
BMI at Risk	2616	1059
BMI Overweight	2696	1117
BMI Incomplete Underweight	37	13
BMI Incomplete Overweight	67	18

Per State Statute, DCPS employs numerous nurses to provide services to our students with diabetes, as well as the exceptional center nurses to provide concentrated care to our medically fragile student population. These nurses' foster relationships with the students, parents, and school staff to ensure that the individual needs of each child are satisfied.

Florida Statute 1002.20(3)(j) states that a school district may not refuse to assign a student to a school on the basis that the student has diabetes, that the school does not have a full-time nurse, or that the school does not have trained diabetes personnel. Pursuant to 6A-6.0253 Diabetes Management: (2) School districts are to have appropriate personnel, whether licensed nurses or trained school personnel, assigned to each school a student with diabetes would otherwise attend if he or she did not have diabetes. School districts are to ensure that such personnel are available to provide the necessary diabetes care throughout the school day and during school-sponsored activities.

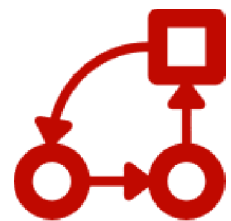
With over 600 medically challenged students attending Duval County Public Schools, district nurses tend to the individualized needs and care of each student. Medical management plans, or care plans, lay out the expectations and responsibilities of these nurses. Care for these students range from tube-feedings and catherizations, to emergency care for seizure disorders and complex medication administration. As previously mentioned, another sizable responsibility of district nursing is the direct care of over 200 type-1 diabetic students (current, number increases annually). It is the intent and focus of the diabetic nurses to educate and assist these students in caring for their condition to ensure they can self-manage upon their enrollment into middle school. These nurses provide parents a consistent, stable environment for their child to build self-confidence in managing their diabetes.



A school physician is employed for two days a week during the year. The Duval County Health Department supplements funds for the employment of the school physician. The physician's duties include serving as liaison between the Duval County School Board, administration, and the Duval County Health Department. Annually, the school physician makes over 700 calls to set up transportation and place students appropriately based on their medical needs, and confers with family physicians to remain current on medical management plans. The physician attends joint staff meetings of school administration and Duval County Health Department personnel to plan cooperatively for the improvement of both quality and quantity of School Health Services.

As required by Florida State Statute, DCPS and DOH-Duval collaborate to develop numerous plans, policies, and procedures.

Section 381.0056, F.S. requires each local Department of Health to develop, jointly with the school district and school health advisory committee, a School Health Services Plan (referred herein as the "Plan") that outlines the provisions and responsibilities to provide mandated health services in all public schools. Chapter 64F-6.002, Florida Administrative Code (F.A.C.) requires the plan to be completed biennially.



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

- Part I: Basic School Health Services - All Public Schools – this section contains each of the Florida statutes (Department of Health (DOH) and Department of Education (DOE)
- Part II: Comprehensive School Health Services – 46 counties receive state funding for comprehensive programs that provide enhanced services to high risk children. These services are in addition to the services identified in Part I.
- Part III: Health Services for Full Service Schools (FSS) – all counties receive funding for FSS serving high-risk students with limited access to services. These services are in addition to the services identified in Part I.

The U.S. Department of Health and Human Services recommends a school nurse to student ratio of 1:750, with a lower ratio recommended for special education and medically fragile populations. The approximate nurse to student ratio in Duval County Public Schools is 1 nurse per 2,100 students, which is nearly 3 times greater than the recommended service ratio. In addition, our district's School Health Advisory Council has advocated the need for a nurse in every school.

Previous to October 2015, the district's nursing services were managed by multiple departments. Funding from one department, oversight in another, and billing and contracts in third. Nursing services are now the sole responsibility of the Wellness Department. Upon gaining this responsibility, the Wellness team has taken a detailed approach to monitoring the placement of temporary nurses, review of invoices, and submission of payments. A proposal to replace temporary nurses that were being utilized for diabetic student care with licensed practical nurses was developed, submitted, and approved. Six additional school nurses to support students with diabetes will be hired prior to the conclusion of the calendar year, saving the district thousands of dollars. The proposal also allows for the hiring of medical assistants in the event that LPNs are not available. The revision of the language within the purchase orders with the agencies utilized for care will eliminate confusion previously experienced with billing.



STRENGTHS

Duval County Public Schools has the unique ability to rely on the direction of the Department of Health for school health services. Through collaboration, our nurses, administrators, and staff are ensured to have the most up to date information and resources available.

Diabetes education is also a strong point of our school health services program. District nurses are long term employees which results in continuity of care throughout the early stages of education. Multiple nurses specialize in diabetic care and have sought out additional certification. Effective clinical management, from both diabetic nurses and ESE nurses, of children that are challenged medically proves a strength as well.

Our district staff is certainly a strength of SHS. Our team-based approach provides compassion, care, and attentiveness to those we serve. District nurses coordinate with DOH and other local agencies to care for our students to provide a complex, evidence-based, caring team approach, which is a strength of our discipline.



WEAKNESSES

While partnering with DOH-Duval is certainly a strength of the district, it also causes points of weakness. Nurses, teachers, and administrators are often confused as to where the final responsibility of some tasks lie. The contract is referenced often and leaves room for interpretation in some areas. District staff has been working closely with DOH to improve communication and to clarify the responsibilities of each agency.

Staffing- the student to nurse ratio is well above the recommended average. While the DCPS nurses are able to develop meaningful relationships with students and families, the DOH nurses are limited in their ability to do this. The amount of time they are able to spend at single school locations is never enough to fully meet the needs of the school or to fully coordinate the complexities of care in some cases. The district is working with outside medical providers and foundations to explore the possibility of increasing the number of nurses in our schools that provide comprehensive nursing support.

Communication with school leaders is also an area of weakness. As touched upon in other areas of this document, the limited face time the department is provided is rarely enough to convey the severity of some of the procedural requirements or issues involved with student medical care. We are working to improve our communication with schools and frequently partner with the Region Superintendents to reiterate important information, as it is presented.

Finally, the overuse of agency nurses for coverage is certainly a weakness. In the past three school years, the district has found it necessary to over-utilize agency nurses for diabetic student coverage and absenteeism. Both the continuity of care and costs will be greatly alleviated as we move to a district nurse for care of students with diabetes, rather than relying on temporary nursing support.



OPPORTUNITIES

Revising the DOH nursing contract to provide clarity to all parties receiving service is essential the success of SHS, including the expansion of nursing services to provide support to more students. There are still many children within our county that can benefit from an expansion of nursing services in their schools.

The changed approach of management for district nursing to include all internal responsibilities for care of diabetic students will greatly enhance the continuity of care, as well as save funding. Wellness has an opportunity to address the absenteeism of district nursing personnel by implementing a plan centered on our team-based approach to coverage, once again reducing the need for temporary agency nurses.

DCPS must focus on building stronger relationships with community institutions, such as Wolfson's and Nemours. A strong partnership with medical institutions that serve our students and families outside of our care is integral to the success of our program



THREATS

Threats to our professional efforts come in several different forms related to nursing services. The constant conflict between statutory requirements and lack of funding will continue to present as a threat for large districts such as DCPS. Simply speaking, we do not have the funds to provide the quantity of nurses that are recommended or requested. We will continue to work with the medical community and foundations to advocate for assistance with additional nursing support in our schools.

The training of school personnel who are not comfortable in performing certain medical duties is also a concern. Medication administration is a key health service performed by Unlicensed Assistive Personnel (UAP) within our schools. The importance of this service cannot be overlooked. Several training sessions were held at the beginning of the school year for school administrators and school-based UAPs to provide specific training, answer questions, and provide resources. Those trainings will continue to be offered at regular intervals throughout the school year.

Nurse absences remain a concern as we sometimes experience difficulty in providing coverage when nurses are absent. The department has conveyed to all district nurses the importance of maintaining communication in the event of an absence, and has worked to rearrange coverage to ensure all medical needs are met on a daily basis.

In any setting, there is potential for students to become severely ill. AEDs should be in every school setting as they have proved themselves valuable in times of need. The district currently has AEDs in all secondary schools, but some of our elementary schools are not equipped with them. Department staff will continue to work with Risk Management to identify funding opportunities as they become available to increase the number of devices available in our schools. In addition, district staff will continue to provide training in their use and support Risk Management in the regular upkeep of the devices.

ACTION PLAN

<u>PROGRAM</u>	<u>ACTION</u>
Student Health Screenings	Continue to provide annual assessments of vision, hearing, BMI and scoliosis.
Athletic Physicals & Assessments	Annual sports physicals will continue to be given to middle and high school students who wish to participate in after school sports.
Immunization Compliance	In accordance with state laws, immunizations required for entry into Duval County Schools will be updated yearly.
Chronic Disease Reporting and Maintaining Healthcare Records committees	Students with chronic diseases that require emergency actions will be followed up on by the DOH nurses in every school to make sure students have the proper preparations in place in case of emergency.
Training for School Personnel	School personnel will be trained by the DOH nurse to administer daily medications, as well as, emergency medications. They will also be taught how to determine if a child has pediculosis.
Referrals to Providers	When locating a student in need of further medical attention, referrals are able to be given for treatment of certain communicable diseases or pediculosis.
Exceptional Student Education	Every student is entitled to a free and appropriate public education, so we will continue to provide appropriate nursing care for students with special needs.
Dental Care Program	The dental program will remain active for students with financial hardship, so their care can be up to date.
FOCUS	Beginning Fall 2015, FOCUS is being used for charting electronically for students. We will continue to learn the system and utilize it to the fullest extent to make sure students have the best continuity of care from one year to the next.
SEAS Computer System/Partnerships	Nursing services are now able to be charged to Medicaid, so some funding can be recovered for the care of students. This system allows us to track these services in an efficient and effective manner.
Relations with Providers	In the past, we have experienced issues with communication with providers that care for students. We are working to build these relationships, so the benefit to students is much greater. We, as nurses, spend a great deal of time with the students and want to pass all valuable information to the providers for continuity of care.
School Nurse Absenteeism	A goal for this year is to decrease nurse absences. It is very important for students to know that we are there for them on a daily basis. With this in mind, we have established goals for nurses. Calendars have been created, so nurses can see the number and locations of absences day to day.

Funding for Nursing	This is a new responsibility for the department. It will allow us to look at nursing coverage situations and decide the best solution in a timely manner. It will also allow us to completely manage the billing and payment processes, which will decrease the opportunity for payment errors.
District based Physician	Our district physician is a respected pediatrician who has practiced in the community for many years. He provides parents assistance in placing students where they will best benefit medically and academically. He communicates throughout the school year with other physicians, parents, nurses and administrators. He also oversees the district-based nurses.
Nursing Contract- DOH	Contract will be reviewed and revised to clearly state responsibilities of DCPS and DOH-DC

STRATEGIC PLAN TARGETS, INITIATIVES & PROJECTS

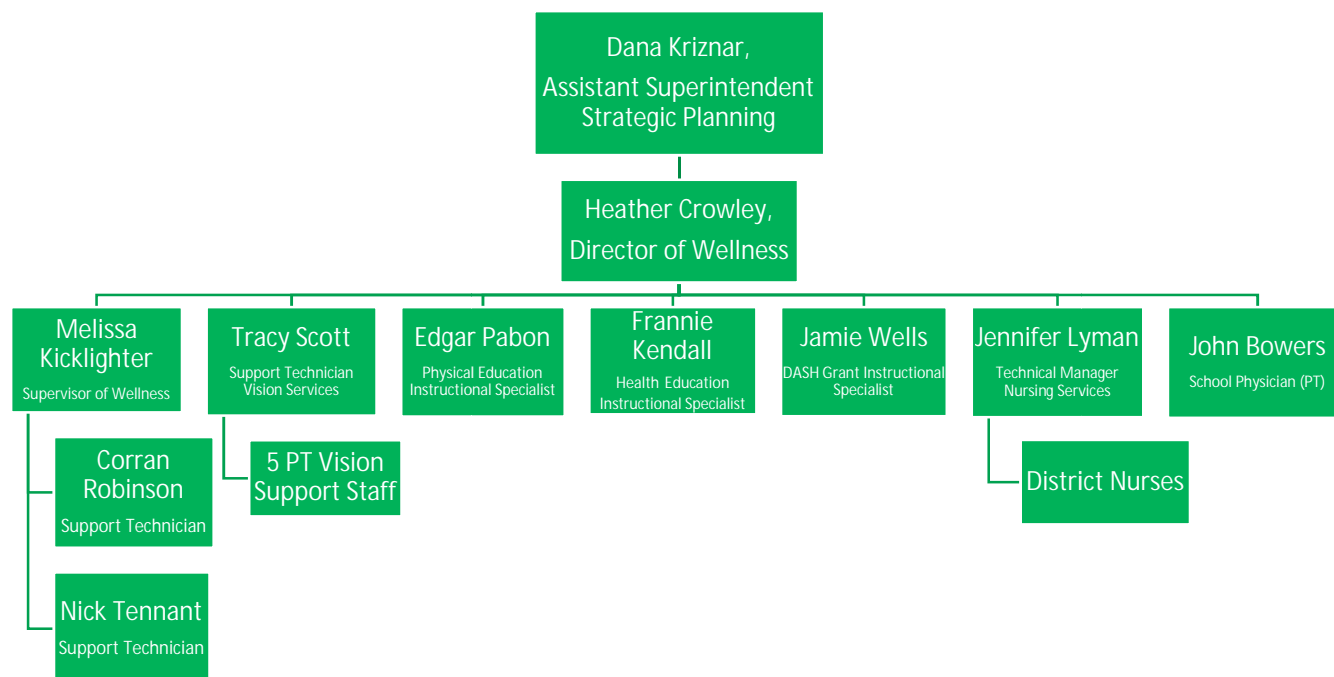
Strategy	Measurable Objective	2014	2015 Target	2015 EOY	2016 Target
2.3	Increase reporting for mandatory health screenings by 7%, to become compliant with DOH reporting guidelines (45% mid-year by December 11, 95% goal by March 31)	N/A	N/A	87.86%	95%
1.3	Increase number of Wellness Ambassadors who participate in district meetings/workshops by 10%	46	90	100	110
3.2	Increase the number of schools/worksites participating in the Wellness Awareness Program (WAP) by at least 25% (250%)	9	15	16	40
4.1	Increase student participation in district vaccination program(s) by at least 25%	768	7,500	12,834	16,043*
4.1	Increase percentage of attendance in Physical Education & Health PLC meetings by 4%	57%	65%	66%	70%
4.1	Increase participation in community initiatives by 4%: NFL Play 60, Fuel Up to Play 60, various competitions throughout the year (Defend Your Turf, Breakfast with Coach Bradley)	37%	55%	86%	90%
4.1	Increase the total number of submissions of FITNESSGRAM scores used for evaluation of student physical fitness based on the percentage of required physical fitness courses	93.3% (based on 25 schools)	95% (based on 25 schools)	94.7% (based on 25 schools)	80% (based on all schools)
2.1	Maintain the participation of Principals and Health teachers completing the School Health Profiles questionnaire within 95%	100%	+95%	100%	+95%
4.3	Increase the number of GSAs (Gay/Straight Alliances) in the 21 priority schools (high schools) by 20%	N/A	N/A	11	13
3.2	Complete/participate in SHAC School Health Services and UNF Nursing Study Survey at schools with district nurses by 5%	N/A	N/A	95%	100%
4.1	Increase percentage of 5 th grade students prepared for middle school diabetes self-management by 20%	N/A	N/A	75%	95%

2015-16 Additional Departmental Targets, Initiatives & Projects

ID	Targets
1.3	Increase number of Wellness Ambassadors who participate in district meetings/workshops by 10%
4.1	Increase percentage of attendance in Physical Education & Health PLC meetings by 4%
2.1	Maintain the participation of Principals and Health teachers completing the School Health Profiles questionnaire within 95%
4.1	Increase percentage of 5 th grade students prepared for middle school diabetes self-management by 20%
4.3	Increase the number of GSAs (Gay/Straight Alliances) in the 21 priority schools (high schools) by 20%
3.2	Complete/participate in SHAC School Health Services and UNF Nursing Study Survey at schools with district nurses by 5%
ID	Initiatives
1.3	Develop Blackboard Collaborate/YouTube sessions for information for employees
2.3	Increase awareness and promote partnership with Nemours in regards to diabetic students
3.3	Develop Blackboard Collaborate/YouTube sessions for professional development for health and physical education teachers
1.3	Provide education sessions for nurses, teachers, staff and parents regarding diabetic management
3.1	Create temporary nursing calendar indicating days, times, locations of coverage
2.3	Identify resources available to assist in obtaining school health materials
2.3	Schedule hearing screening and enter data into FOCUS
ID	Projects
1.3	Conduct FITNESSGRAM training for, at least, one physical education teacher from each eligible school in the district
1.3	Increase the number Professional Development opportunities for Health Educators and Physical Educators
2.3	Plan and implement a spring release for the YRBS 2015 Data
3.2	Continue internal communication on availability of flu shots for district staff
3.2	Continue internal communication on availability of health screenings for district staff

3.2	Continue promotion of diabetes prevention/management resources for district staff
3.2	Continue promotion of tobacco cessation resources for district staff
3.2	Continue to offer schools the opportunity to participate in Hands Only CPR program
3.2	Continue to offer opportunities for participation in district intramural program
3.3	Continue to encourage district staff, families and community members to visit the District Wellness website for information and resources
3.2	Continue FOCUS and SEAS on-going training for DCPS nurses

ORGANIZATION OF DEPARTMENT



BUDGET

CATEGORY	DESCRIPTION	COST
PERSONNEL	1 Director 1 Supervisor 2 Wellness Support Technicians 1 Health Education Specialist 1 Physical Education Specialist 1 PT School Physician 1 Nurse Technical Manager 1 Screening Support Technician 4 PT Screening Liaisons 1 Screening Clerk Typist	\$708,935
SCHOOL BASED PERSONNEL *	Health Education Teachers Physical Education Teachers Physical Education Itinerants Specially Designed/Adaptive Physical Education Teachers Diabetic Nurses Exceptional Student Education Nurses	\$15,337,111 \$968,643
EQUIPMENT, SUPPLIES & PROGRAM COSTS	District Wellness Programs (i.e. Intramurals, themed events, etc.) Wellness Awareness Program ** subject to annual approval via insurance committee Florida Department of Health-Duval County School Health Services Contract Temporary Nursing Services School Based Personnel CPR Training Travel Rentals (Wellness/Screening Copiers) Health & Physical Education Materials FITNESSGRAM Assessment Tool Other Materials & Supplies	\$15,000 \$10,000 \$257,529 \$150,000 \$6,400 \$21,000 \$7,625 \$17,000 \$58,524 \$17,432

The chart represents budget items that are currently unfunded but would be beneficial to the Wellness Program if funds became available. Note: currently budgeted positions/programs have not been repeated; only aspirational increases or additions are reflected in this table.

Expenditure	Cost
One nurse per school (RN)	\$5,361,175
One Nurse per school (LPN)	\$3,866,989
One Medical Assistant Per School	\$2,780,344
Stipend for Wellness Ambassador (\$500 per school)	\$75,000
One Additional Dedicated Health Teacher per School (to reduce class sizes)	\$3,200,000
Additional PE Teachers to Reduce Class Size	\$3,200,000

APPENDICES

Appendix A- Wellness Calendar

JULY						
S	M	T	W	R	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25

AUGUST						
S	M	T	W	R	F	S
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

SEPTEMBER						
S	M	T	W	R	F	S
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6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

OCTOBER						
S	M	T	W	R	F	S
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4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

NEFEDA Wellness Life Diabetes Management classes (ongoing)
15 - SHAC
20 - SHAC Health Education Committee

NEFEDA Wellness Life Diabetes Management classes (ongoing)
3 - SHAC Health Education Committee
4, 6, 11, 13, 18, 20, 27, 29 - iQuit AHEC classes
14 - Mission Be Possible Field Day
18 - Diabetes Management Class - Refresher
19 - SHAC/SHAC Health Services Committee

NEFEDA Wellness Life Diabetes Management classes (ongoing)
1, 3, 8-10, 15, 17, 19, 22, 24, 26, 29-30 - iQuit AHEC classes
10 - Wellness Ambassador Workshops
12 - Diabetes Management Class - Initial
15 - Diabetes Management Class - Refresher
15, 17 - School Health Services Screening Workshop
19 - Heart Walk
21 - SHAC Health Education Committee
23 - SHAC/SHAC Health Services Committee
28, 29, 30 - Flu Mist
29-30 - Essilor Vision Services

NEFEDA Wellness Life Diabetes Management classes (ongoing)
1-2, 5-9 - Flu Mist
1-2 - Essilor Vision Services
1, 3, 6, 8, 10, 13, 15, 17, 20, 22, 24, 28-29 - iQuit AHEC classes
2, 6-9, 12-16, 19-23, 26-30 - Flu Shot
14 - SHAC/SHAC Health Services Committee
15 - New Employee Orientation
16 - SHAC Wellness Committee
17 - Susan Komen Race for Cure
19 - SHAC Health Education Committee
20, 22, 27, 29 - Volleyball Intramurals
20 - Diabetes Management Class - Refresher
24 - American Cancer Society - Making Strides Against Breast

Cancer

27 - SHAC Parent Voice - Family/Community Involvement Meeting

30 - Alliance for a Healthier Generation - Healthy School Program

NOVEMBER						
S	M	T	W	R	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

NEFEDA Wellness Life Diabetes Management classes (ongoing)

2-6, 9, 10, 12, 13, 16-20, 23, 24 - Flu Shots

3, 5, 10, 12, 17, 19, 24, 26 - iQuit AHEC classes

3, 5, 10, 12, 17, 19 - Volleyball Intramurals

12-13, 17-18, 20, 23 - Health Screenings

12 - Hands-Only CPR (through February)

14 - Diabetes Management Class - Initial

17 - Diabetes Management Class - Refresher

16 - SHAC Health Education Committee

18 - SHAC/SHAC Health Services Committee

21 - Intramural Golf Tournament

DECEMBER						
S	M	T	W	R	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

NEFEDA Wellness Life Diabetes Management classes (ongoing)

Hands-Only CPR Program (continuing)

Quest Off-site Health Screening (through March)

Volleyball Intramural Championship (TBD)

SHAC Wellness Committee (TBD)

1-3, 8, 10, 15 - iQuit AHEC classes

2-3, 7, 9-10, 15, 17-18 - Health Screenings

16 - Food Expo

JANUARY						
S	M	T	W	R	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

NEFEDA Wellness Life Diabetes Management classes (ongoing)

Hands-Only CPR (continuing)

Quest Off-site Health Screening (continuing)

Basketball Intramurals (TBD)

Health Trails - Wellness Challenge (TBD)

7, 14, 19, 21, 23, 26-28, 30 - iQuit AHEC classes

11 - SHAC Health Education Committee

13 - SHAC/SHAC Health Services Committee

14 - Wellness Ambassador Workshops

19 - Diabetes Management Class Refresher

21 - New Employee Orientation

26 - SHAC Parent Voice - Family/Community Involvement Meeting

FEBRUARY						
S	M	T	W	R	F	S
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29					

NEFEDA Wellness Life Diabetes Management classes (ongoing)

Hands-Only CPR (continuing)

Quest Off-site Health Screening (continuing)

Basketball Intramurals (TBD)

Health Trails - Wellness Challenge (TBD)

On-site Health Screenings (TBD)

MARCH						
S	M	T	W	R	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
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20	21	22	23	24	25	26
27	28	29	30	31		

APRIL						
S	M	T	W	R	F	S
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10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

MAY						
S	M	T	W	R	F	S
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8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

JUNE						
S	M	T	W	R	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

2, 4, 6, 9, 11, 13, 16, 18, 20, 27 - iQuit AHEC classes
 6 - Diabetes Management Class Initial
 15 - SHAC Health Education Committee
 16 - Diabetes Management Class Refresher
 17 - SHAC/SHAC Health Services Committee

NEFEDA Wellness Life Diabetes Management classes (ongoing)
 Quest Off-site Health Screening (continuing)
 Basketball Intramurals (TBD)
 On-site Health Screenings (TBD)
 SHAC Wellness Committee (TBD)
 14 - SHAC Health Education Committee
 16 - SHAC/SHAC Health Services Committee
 16-17, 22, 29, 31 - iQuit AHEC classes

NEFEDA Wellness Life Diabetes Management classes (ongoing)
 Intramural Sports (TBD)
 TDAP Vaccinations (TBD)
 5, 7, 14, 19, 21 - iQuit AHEC class
 7 - New Employee Orientation
 18 - SHAC Health Education Committee
 19 - Diabetes Management Class Refresher
 20 - SHAC/SHAC Health Services Committee
 26 - SHAC Parent Voice - Family/Community Involvement Meeting

NEFEDA Wellness Life Diabetes Management classes (ongoing)
 Intramural Sports (TBD)
 TDAP Vaccinations (TBD)
 Wellness Ambassador Workshop (TBD)
 Alliance for a Healthier Generation - Healthy School Program Workshop (TBD)
 7 - Diabetes Management Class
 9 - SHAC Health Education Committee
 11 - SHAC/SHAC Health Services Committee
 17 - Diabetes Management Class Refresher
 17, 19, 24, 26, 31 - iQuit AHEC classes

NEFEDA Wellness Life Diabetes Management classes (ongoing)
 Intramural Sports (TBD)
 SHAC Wellness Committee (TBD)
 2, 7, 9, 14, 16, 21, 23 - iQuit AHEC classes
 13 - SHAC Health Education Committee
 15 - SHAC/SHAC Health Services Committee
 21 - Diabetes Management Class Refresher

Appendix B- Feeding Northeast Florida

Feeding Northeast Florida SnackPack Program Locations		
	Communities in Schools Sites	DCPS General Population Sites
1	CIS A Phillip Randolph	Susie Tolbert Middle
2	CIS Bridge to Success	S.P. Livingston Elementary
3	Lake Forest Elementary School	Eugene Butler Middle
4	Northwestern Middle School	Joseph Finegan Elementary
5	Raines High School	RV Daniels Elementary
6	Ribault High School	Ruth Upson Elementary
7	Andrew Jackson High School	Southside Middle
8	Matthew Gilbert Middle School	Neptune Beach Elementary
9	Ribault Middle School	Mayport Coastal Sciences Middle
10		Dinsmore Elementary- SP & School Pantry
11		Center for Language and Culture (Kings Trail)
12		West Riverside Elementary *Pick Up
13		Thomas Jefferson Elementary *Pick Up
14		West Jacksonville Elementary Waitlist
15		Ft. Caroline Elementary Waitlist
16		Woodland Acres Elementary Waitlist

Appendix C- Wellness Ambassadors

SCHOOL	#	PRINCIPAL	Wellness Ambassador
Abess Park	263	Shore, Kristin M.	Ester Franqui
Alimacani	257	Stalls, Katherine R.	Maida Squaire
Anderson, Douglas	107	Cornelius, Jacquelyn H.	Amy Kovalchik-Mele
Arlington E	46	Brown, Kimberly N.	Arnita Baskin
Arlington Heights	240	Latimer, Patricia A.	Taffee Timmons
Arlington M	213	Sanders, Yolanda S.	Annie Furlow
Atlantic Beach	65	McLendon, Mindy	Spencer Carper
Atlantic Coast	268	Lynch, Debra W.	Laura Solomon
Axson, J. Allen	141	Robinson-Vanhoy, Cecilia	
Baldwin M/H	38	Hall, Denise	Nicholas Beninati
Bartram Springs	161	Wright, Kimberly B.	Kathleen Carney
Bayview	84	Jordan, Brenda M.	Mark Benner
Beauclerc	230	Spasoff, Mariah D.	Eric Nelson
Biltmore	78	Dunbar, Helen S.	Kimberly Mack
Biscayne	269	Bush, DeShune	Debra Williams-Woods
Brentwood	15	Laws, Carolyn L.	Mirjana Obradovic
Brewer, Don	217	Gray, Jennifer T.	Daniel Berry/ Barbara Pipkin
Brookview	206	Adams, Shana L.	Shanita Hairston/ Heidi Williams
Brown, Richard L.	148	Sessions-Jones, Sabrina A.	Bernadette Harris
Butler, Eugene	92	Moreland, Williams	Portia Monroe
Carver, George W.	158	Riley, Katrina R.	Brittney Holmes
Cedar Hills	97	McKinney, Marva M.	Joan Armorer- Clarke
Central Riverside	18	Stewart, Dinah M.	Nicole Cannon
Chaffee Trail	142	Doyle, Casie L.	Jim Hayes
Chets Creek	264	Phillips, Susan T.	Julie Witt

Chimney Lakes	232	Knott, Janet D.	Caren Gordon
Crown Point	245	Owens-Thompson, Jayne E.	Deborah Magahey
Crystal Springs	226	Maxwell-Rivers, Chiquita	Shamar Johnson
Darnell-Cookman	145	Daniels, Carol H.	Lisa Norton
Davis, Jefferson	216	Ashby, Nidia A.	Lauren Tenholder
Dinsmore	45	Reese, Wanda W.	Steve Boatright
DuPont, Alfred	66	Barnwell, Marilyn M.	Catherine Sanchez
Englewood E	87	Griffin, Kenya C.	Terry Robinson
Englewood H	90	Bravo, Sara E.	Dora Johnson
Enterprise Academy	255	Wakefield, Aszloyn N.	
Evans, Saint Clair	124	Polydore, Lawanda H.	Letecia Newman
Finegan, Joseph	247	Brown, Shameka	Velda Thomas
First Coast	265	Brennan, Alvin L.	Chrirtopher Campbell
Fishweir	20	Dennis, Kimberly M.	Melissa Schick
Fletcher H	223	Nelson, Donald F.	Corey French
Fletcher M	63	Mowbray, Teresa H.	Jayme Hillyer
Ford, John E.	154	Renfro, Paula S.	Penny Bowyer
Fort Caroline E	235	Stovall, Violet E.	Cheryl Conklin
Fort Caroline M	238	Shelton, Maysha L.	Laurel Valley
Garden City	59	Gerdes, Barbara J.	James Menchan
Gilbert, Matthew	146	Goodwin, Jamelle	Nakeisha Tinsley
GRASP Choice Academy	215	Sauer, Ellen A.	Michael Grillo
Greenfield	222	Simpson, Todd R.	Christy Braughton
Greenland Pines	249	Sneddon, Jacquelyn R.	Gabriela Ruiz
Gregory Drive	243	Tucker, Detra C.	Marla Boone-McCray
Hendricks Avenue	71	Healy, Lacy R.	Jane Moore
Highlands E	99	Collins, Jeffrey R.	Christen Suratt

Highlands M	244	Simmons, Jackie	Dawnette Lawrence
Hogan-Spring Glen	64	James, Charlene T.	Daniel Zutell
Holiday Hill	209	Haberman, Tammy L.	Linda Cook
Hull, S. A.	169	Lott, Angela Y.	Allen Shephard
Hyde Grove	214	Isidore, Contrina W.	Andrea Negron
Hyde Park	77	Mitchell, Tarsha N.	Wynee Brown
Jackson, Andrew	35	Daniels, Evan	Jennifer Huesman/Jennifer Owen
Jackson, Stonewall	234	Starling, Erica	Susan Jeffers
Jacksonville Beach	144	Mattingly, Cameron A.	Suzanne Heideman/ Hillary Siragusa
Jacksonville Heights	229	Walsh, Michelle C.	Alison Ossorio
Jefferson, Thomas	48	Turner, Lori A.	Tim Young
Johnson, James Weldon Middle	152	Peek, Sharwonda D.	Kimberly Pierce/Tracy Adams
Jones, Mamie Agnes	236	Jordan, Angela L.	Bill Sweers
Kernan Middle	279	Hemphill, Julie A.	Cheryl Hall
Kernan Trail	231	Shall, Suzanne M.	Thomas Hazouri/Marcy Dunavant
King, Martin Luther	220	Gentry, Cindy V.	Lizzie Peeples
Kings Trail	203	Shubert, Sanethette S.	Bridget Coyne
Kirby-Smith	25	Marshall, June L.	Sandra Armour-Harris
Kite, Henry F.	37	Davis, Carolyn F.	
Lake Forest	74	Thomas, Cassandra L.	
Lake Lucina	85	Winfrey, Shirley R.	John Brent
Lake Shore	69	Begley, Christopher E.	Shayla Ranger
Landmark	256	Gilmore, David L.	
Landon	31	Feagins, Timothy M.	Petika Tave
LaVilla School of the Arts	267	Knight, Lianna M.	Andrea Karpus
Lee, Robert E.	33	Schneider, Scott J.	Rosalyn Bloxom-Johnson

Livingston, S. P.	149	Williams-Scott, Andrea M.	Carolyn Perkins
Lone Star	233	Lingren, Amy	Jennifer Kovir
Long Branch	106	Brown, Viveca L.	Marva Payne
Loretto	30	Kemp, Kristie D.	Sandra Foskey
Love Grove	82	Emanuel-Wright, Tiffany K.	Chad Carlson
Love, John	73	Johnson, Niketah M.	Melissa Marshall
Mandarin H	260	Richardson, Donna H.	Renate Dewberry
Mandarin M	259	Ledford, James D.	Vanna Parks
Mandarin Oaks	258	Carson, Patricia P.	Carol Butler
Mathis, Sallye B.	91	Adkins, Kathleen M.	Zayna Harb/ Abigail Miller
Mayport E	227	Ferguson, Yvonne M.	Sara Baker
Mayport M	254	McCray, Katrina E.	Patti Powers
Merrill Road			Nicole Boley
Morgan, Annie R.	21	Streater, LaShawn N.	Jamie Myers
Neptune Beach	246	Kavanagh, Elizabeth A.	
New Berlin	150	Lewis, Crystal R.	Erin Simonton
Normandy Village	221	Connor, Lindsey S.	Liza Pereles
North Shore	70	Hardaway, Felicia W.	Traci Zamor
Northwestern	155	Lyles, Tyrus	
Oak Hill	210	St. Amand, Clair H.	
Oceanway E	270	Hinkley, Michelle L.	Kenneth Anderson
Oceanway M	62	Marx, Tonya A.	Kimberly Mashek
Ortega	16	Brannan, Stephanie	
Parker, Terry	86	Pardue, Megan B.	Danita Clark
Parkwood Heights	208	Price, Ashton J.	Demetrice Sapp
Paxon	75	Turner, Royce L.	Kenneth DeVoe
Payne, Rufus E.	163	Day-Killette, Weisha D.	Lisa Gadson

Pearson, Rutledge H.	95	Crotty, Deborah W.	Khahala Stamper
Peterson, Frank H.	280	Barnes, Cathy B.	Channell Jones
Pickett	205	Brown, Carol A.	Michelle Bradner
Pine Estates	250	Quarles, Michelle L.	Karine Jones
Pine Forest School of the Arts	159	Jackson, Stephanie G.	Diane Atwill
Pinedale	93	Hinson, Alicia R.	Barbara Graham
Raines, William	165	Hall, Vincent R.	
Ramona Boulevard	79	Russ, Lashawn S.	Kimberly Rigdon
Randolph, A. Philip, Academy	285	Lewis, Robert	Jessica Lance
Reynolds Lane	202	Simon, Marianne P.	Katie LeBoeuf
Ribault H	96	Jackson, Christopher L.	Aleandria Condell
Ribault M	212	Maxey, Angela F.	Seanta Jones
Robinson, Andrew	262	Fann, Latrese M.	Eugenia Williams/ Eddie Thompkins
Sabal Palm	239	Graham, Linda F.	Keith LaVine
San Jose	83	Smith, Paula F.	Sandra Reeder
San Mateo	218	Wells, Caroline L.	Susan Hofrichter
San Pablo	80	Manabat, Stephanie A.	Dana Pardee
Sandalwood	237	Schultz, Victoria N.	Mitchell Press/ Annalee McPhilomy
Seabreeze	225	Bennett, Tina M.	Joanne Swetman
Sheffield, Louis	242	Delay, Cassandra N.	Vince Librandi
Southside Estates	76	Washington, Anastasia M.	
Southside Middle	211	Spaulding, Zeina	Kirby Leigh
Spring Park	72	McWilliams, Aaron M.	Susan Bell
Stanton College Prep	153	Majova-Seane, Nongongoma P.	Amy Johns
Stilwell, Joseph	219	Raulerson Campese,	

		Jennifer R.	
Stockton, John N.C.	88	McEarl, Charlene C.	Adam Przymyski
Stuart, J.E.B.	207	Milliner-Smith, Sadie L.	Rachel Lucas
Tillis, Sadie	116	Lee, Marianne G.	Troy Greem
Timucuan	98	Perry, Darrell P.	Kim Randich
Tolbert, Susie	128	Blackshear, LaShawn L.	
Twin Lakes E	251	Robertson, Denise M.	Susan Beauchamp
Twin Lakes M	253	Tuschhoff, Tamara A.	Molly Bryan
Upton, Ruth N.	19	Stahlman, Theresa R.	Arianne Smith
Venetia	68	Collins, Jennifer L.	William Jackson
Waterleaf	160	Brady, Lisa G.	Sara Fretz
West Jacksonville	143	Floyd-Hatcher, Michele Y.	Edward Grant
West Riverside	12	Johnson, Sylvia M.	Dennis Hodges
Westside H.S.	241	Bostic, Gregory D.	Melanie Rogers
Westview	274	Walker, Beverly L.	Keri Dixon
White, Edward H.	248	Bloom, Jason S.	
Whitehouse	51	Gilley, Bill O.	Brian Naines
Windy Hill	94	Reddick, Calvin B.	Ann Nessler
Wolfson, Samuel W.	224	Connor, Terrence	Phylliss Thompson
Woodland Acres	89	Fullwood, Tiffany L.	Karleen Nickerson
Woodson, Carter G.	166	Quarles-Gaston, Cheryl R.	

Appendix D- Alliance for Healthier Generation Schools

Alliance for a Healthier Generation - Healthy Schools Program	
Highlighted schools indicate feeder high school	
School	2015-16 Leader
Ed White	Patrick Adams
Joseph Stilwell	Erika Gaffney
	Takita Williams
Whitehouse	Brian Naines
Chaffee Trail	Jim Hayes
Normandy Village	Liza Pereles
Crystal Springs	Shamar Johnson
Andrew Jackson	Jennifer (Huesman) Owen
Matthew Gilbert	Katharine Beatty
John E. Ford K-8	Penny Bowyer
John Love	Melissa Marshall
Long Branch	Marva Payne
R. L. Brown	Bernadette Harris
	Dwayne Massey
Andrew Robinson	Eddie Thompkins
	Latrece Brown
First Coast	Jamel Dunn
Highlands Middle	Dawnetta Lawrence
	Leteia Schwander
Garden City	James Menchan
Highlands Elementary	Christen Suratt
	Vicki Everson
Pine Estates	Karine Jones
Biscayne	Debra Williams-Woods
Oceanway Middle	Kimberly Mashek
New Berlin	Madeline Alt
	Ellen (Golden) Graw
San Mateo	Geraldine Madison
Louis Sheffield	Vince LiBrandi

	Jamzee Davis
Oceanway Elementary	Ken Anderson
Fletcher	Corey French
Fletcher Middle	Jayme Hillyer
San Pablo	Dana Pardee
	Sarah Satterwhite
Seabreeze	Joanne Sweetman
Alimacani	Maida Squire
Mayport Middle	Patricia Powers
Atlantic Beach	Spencer Carper
Mayport	Sara Baker
Neptune Beach	Claire Todd
Joseph Finegan	Velda Thomas
Ribault High	Barb Koopman
	Alex Condell
Ribault Middle	Andrea Chaouloff
Sallye B. Mathis	Zayna Harb
	Abigail Miller
	Nathaniel Harris
Rutledge Pearson	Khahala Stamper
M. L. King Jr.	Lizzie Peeples
Henry Kite	Robin Renelus
Englewood High	Dora Johnson
Southside Middle	Victoria Carle
Hogan-Spring Glen	Daniel Zutell
Spring Park	Susan Bell
Love Grove	Chad Carlson
Englewood Elementary	Terry Robinson
Greenfield	Christy Braughton
Southside Estates	Thomasina Wilson

Appendix E- School Health Advisory Council Members

School Health Advisory Council (SHAC) Members		
Last	First	Organization
Alderson	Louisa	Chartwell's
Arceneaux	Dustin	Planned Parenthood
Barnack	Nicole	Unknown
Beverly	Laura	NEFPS
Boone	Jenny	JAX UFL
Bowers	Al	DCPS
Braga	Luciana	UNF
Brown	Nicole	DCPS
Bourchand	Toni	DOH
Chandler	Tierra	DOH
Cicero	Terri	DCPS
Collins	Julie	Unknown
Comeaux	Judy	UNF
Crowley	Heather	DCPS
Denk	Megan	Players
Diefenderfer	Marissa	UNF
Dienst	Kate	Chartwell's
Eisenberg	Iris	MD
Ellis	Monique	UF Health
Ermice	Katrina	DCPS
Finn	Sally	Drug Free Duval
Freeman	Pat	DOH
Graves-Smith	Etoile	Nova SE
Guiler	Cathy	PTA/Parent
Heilig	Vicki	DOH
Howard	LaRonda	NEFHSC
Kendall	Frannie	DCPS
Kennedy	Shane	Hubbard House
Kerekes	Charles	Naval Hospital
Kicklighter	Melissa	DCPS
LukensBull	Katryne	UF Health
Lyman	Jennifer	DCPS
Mansarey	Rugiatu	DOH
McCabe	Patrick	Nemours
McCumber	Renee	DOH
McNair	Gloria	DOH
Monicalvo	David	U F Health
Monroe	Candace	Juvenile Diabetes

Monroe	Candace	Unknown
Pabon	Edgar	DCPS
Radjenovic	Doreen	UNF Nursing
Reinecke-Clayton	Laine	Hubbard House
Rolle	Pauline	DOH
Santa	RayKay	JAX UFL
Saraga	Frieda	PFLAG
Seaton	Leslie	Players
Smith-Juarez	Ashley	DCPS
Thomas	Kathleen	BMC
Tutt	Felita	PTA/Parent
Waverly	Jordan	Hubbard House
Wells	Jamie	DCPS
Wright	Marin	UNF
Zolondek	Kris	LSF

Appendix F- Calendar of Events- Health & Physical Education

AUGUST						
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

SEPTEMBER						
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

OCTOBER						
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

17-21- Pre-Planning
 17- SHAC Health Education Sub-Committee Meeting
19- Subject Area Planning @ First Coast High 8-3
 19- SHAC Meeting
 24- First day for students
 31- Armada Healthy Heroes at San Pablo Elem.

7- Labor Day-schools/admin office closed
 9- Early Dismissal PLC for some PE and all SDPE teachers
 14- Armada Healthy Heroes at Susie Tolbert Elem.
 14- SHAC Health Education Sub-Committee Meeting
 21- Armada Healthy Heroes at Kings Trail Elem.
 23- Early Dismissal PLC for all Gen Ed PE teachers
 1, 15, 29- Teen Health Center at **Jackson** High
 2, 16, 30- Teen Health Center at **Sandalwood** High
 8, 22- Teen Health Center at **Englewood** High
 9, 23- Teen Health Center at **Ribault** High
 23- SHAC Meeting
 29- NFL Play 60 Kickoff at Oceanway Middle School

5- Armada Healthy Heroes at Hogan-Spring Glen Elem.
 7- Early Dismissal PLC for some PE and all SDPE teachers
 12- SHAC Health Education Sub-Committee Meeting
 13- NFL Play 60 Kickoff at Stilwell Military Academy
 14- SHAC Meeting
 15-17- SHAPE FL Conference in St Pete, FL
 16- PD: Reducing the Risk (High School Sexuality Curriculum)
 19- Armada Healthy Heroes at New Berlin Elem.
 21- Early Dismissal PLC for all Gen Ed PE teachers
 13, 27- Teen Health Center at **Jackson** High
 14, 28- Teen Health Center at **Sandalwood** High
 6, 20- Teen Health Center at **Englewood** High
 7, 21- Teen Health Center at **Ribault** High
 27- Health/PE Textbook Adoption Committee meetings
 30- Planning Day PD: Flag Football and Basic Archery Training

NOVEMBER						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

DECEMBER						
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13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

JANUARY						
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3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

FEBRUARY						
31	1	2	3	4	5	6

4- Early Dismissal PLC for some PE and all SDPE teachers
 11- Veteran's Day - Schools/Offices Closed
 16- SHAC Health Education Sub-Committee Meeting
 17- Health/PE Textbook Adoption Committee meetings
 18- Early Dismissal PLC for all Gen Ed PE teachers
 18- SHAC Meeting
 10, 24- Teen Health Center at **Jackson** High
 3, 17- Teen Health Center at **Englewood** High
 4, 18- Teen Health Center at **Ribault** High
 24- NFL Play 60 Kickoff at Arlington Middle School
 25- Weather Day
 26, 27- Thanksgiving Break
 30- Weather Day

2- Early Dismissal PLC for some PE and all SDPE teachers
 8- Teen Health Center at **Jackson** High
 9- Teen Health Center at **Sandalwood** High
 1, 15- Teen Health Center at **Englewood** High
 2, 16- Teen Health Center at **Ribault** High
 21-23- Weather Day
 28-31- Winter Break - Schools Closed

1- New Year's Day - Holiday
 6- Early Dismissal PLC for some PE and all SDPE teachers
 11- SHAC Health Education Sub-Committee Meeting
 13- SHAC Meeting
 18- Martin Luther King B'Day - Schools/Offices Closed
 20- Early Dismissal PLC for all Gen Ed PE teachers
 21-23- Share the Wealth Conference in Jekyll Island
 22- Planning Day PD: Physical Activity Leaders (PAL)
 22- Planning Day PD: Teaching Respect for All
 5, 19- Teen Health Center at **Jackson** High
 6, 20- Teen Health Center at **Sandalwood** High
 12, 26- Teen Health Center at **Englewood** High
 13, 27- Teen Health Center at **Ribault** High

10- Early Dismissal PLC for some PE and all SDPE teachers

7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29					

MARCH						
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20	21	22	23	24	25	26
27	28	29	30	31		

APRIL						
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17	18	19	20	21	22	23
24	25	26	27	28	29	30

MAY						
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15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

15- President's Day - Schools Closed
 15- SHAC Health Education Sub-Committee Meeting
 17- SHAC Meeting
 24- Early Dismissal PLC for all Gen Ed PE teachers
 2, 16- Teen Health Center at **Jackson** High
 3, 17- Teen Health Center at **Sandalwood** High
 9, 23- Teen Health Center at **Englewood** High
 10, 24- Teen Health Center at **Ribault** High

9- Early Dismissal PLC for some PE and all SDPE teachers
 14- SHAC Health Education Sub-Committee Meeting
 16- SHAC Meeting
 18-28- Spring Break- Schools Closed
 30- Early Dismissal PLC for all Gen Ed PE teachers
 1, 15, 29- Teen Health Center at **Jackson** High
 2, 16, 30- Teen Health Center at **Sandalwood** High
 8- Teen Health Center at **Englewood** High
 9- Teen Health Center at **Ribault** High

5-9- SHAPE America Conference in Minneapolis
 8- Planning Day PD:TBD
 11- SHAC Health Education Sub-Committee Meeting
 13 - Early Dismissal PLC for some PE and all SDPE teachers
 20- SHAC Meeting
 27 - Early Dismissal PLC for all Gen Ed PE teachers
 29 - Spring Holiday
 12, 26- Teen Health Center at **Jackson** High
 13, 27- Teen Health Center at **Sandalwood** High
 5, 19- Teen Health Center at **Englewood** High
 6, 20- Teen Health Center at **Ribault** High

11- SHAC Meeting
 16- SHAC Health Education Sub-Committee Meeting
 18 - Early Dismissal PLC for all Gen Ed PE teachers
 10, 24- Teen Health Center at **Jackson** High
 11, 25- Teen Health Center at **Sandalwood** High
 3, 17, 21- Teen Health Center at **Englewood** High
 4, 18- Teen Health Center at **Ribault** High

JUNE						
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

30 - Memorial Day - Schools/Offices Closed

10- Last Day for Students

13-14 - Post Planning Days

13- SHAC Health Education Sub-Committee Meeting

15- SHAC Meeting

7- Teen Health Center at **Jackson** High

8- Teen Health Center at **Sandalwood** High

1- Teen Health Center at **Ribault** High

Weather days will be considered holidays unless needed

Additional Workshops TBA

Appendix G- Professional Learning Community Sites

PLC Location/Hosts for Health and Physical Education 2015-2016	
Elementary Schools 2:15	
Loretto- Eric Dubisky (Every ER day) Chimney Lakes- Caren Gordon (Every ER day) Sabal Palm- Keith Lavine (Every ED day) San Pablo- Joe Gilbert (Last ER of the month) Sheffield- Vince Librandi (Last ER of the month) R V Daniels-Mickey Santiago (Last ER of the month) Thomas Jefferson- Tim Young (Last ER of the month)	
Extended Hour Schools	
Highlands- Tito Williams (Last ER of the month) Dinsmore- Steve Boatright (Last ER of the month)	
Middle Schools 3:15	
Lakeshore-Henry Lewitt (Last ER of the month) Oceanway- Claudia Ina (Last ER of the month) Landmark- Murielle Grey (Last ER of the month) Mandarin- Amy Brown (Last ER of the month)	
High Schools 1:15	
Sandalwood- Julie Geis (Last ER of the month) Wolfson- Scott Marabell (Last ER of the month) Ed White- Amber Duke (Last ER of the month) Rains- Renee Livingston (Every ER day)	
Specially Designed Physical Education 1:45	
Alden Road- Scott Adolf (First ER of the month)	
Modified Bell Schools/Secondary	
Stanton College Prep- Bob Fleming (Last ER of the month) 2:00 Stilwell- Niccole Thompson (Last ER of the month) 2:45	

Appendix H- Itinerants

Itinerant Teacher Assignments									
#	SCHOOL	FTE	TEACHER	-	M	T	W	R	F
3258	Mandarin Oaks	.5	Natasha Tinsley	PE			r	x	x
3030	Loretto	.5	Natasha Tinsley	PE	x	x	r		
3226	Crystal Springs	.5	Kimberly Dill	PE			r	x	x
3232	Chimney Lakes	.5	Kimberly Dill	PE	x	x	r		
3264	Chets Creek	.5	Ray Robinson	PE		x	r	x	
3239	Sabal Palm	.5	Ray Robinson	PE	x		r		x
3150	New Berlin	.5	Robert Riley	PE	Rotation weekly, A week: New Berlin B week: Bartram Springs				
3161	Bartram Trail	.5	Robert Riley	PE					
3245	Crown Point	.5	Eric Nelson	PE	Rotation weekly, A week: Beauclerc B week: Crown Point				
3230	Beauclerc	.5	Eric Nelson	PE					
3246	Neptune Beach	.5	Roberto Gonzalez	PE	x	x	r		
3274	Westview K-8	.5	Roberto Gonzalez	PE			r	x	x
3082	Love Grove	.4	John Gelles	SDPE		x	x		
3231	Kernan Trail	.2	John Gelles	SDPE	x				
3210	Oak Hill	.4	John Gelles	SDPE				x	x
3091	Salley B Mathis	.4	Jessica Naughton	SDPE	x	x			
3226	Crystal Springs	.4	Jessica Naughton	SDPE			x		x
3161	Bartram Springs	.2	Jessica Naughton	SDPE				x	
3239	Sabal Palm	.4	Zachary Patterson	SDPE		x	x		
3142	Chaffee Trail	.4	Zachary Patterson	SDPE				x	x
3076	Southside Estates	.2	Zachary Patterson	SDPE	x				
3269	Biscayne	.4	Joan Moore	SDPE		x	x		
3078	Biltmore	.4	Joan Moore	SDPE				x	x
3154	John E. Ford	.2	Joan Moore	SDPE	x				
3090	Englewood	.4	VACANT	SDPE					
3258	Mandarin Oaks	.4	Frank Goldberg	SDPE		x	x		
3099	Highlands Elem	.2	Frank Goldberg	SDPE	x				
3259	Greenland Pines	.4	Frank Goldberg	SDPE				x	x
3249	Mandarin Middle	.4	Janna Brunet	SDPE				x	x
3284	Bayview	.4	Janna Brunet	SDPE		x	x		
3030	Loretto	.2	Janna Brunet	SDPE	x				
3093	Pinedale	.2	Dianne Cooper	SDPE	x				
3246	Neptune Beach	.4	Dianne Cooper	SDPE		x	x		
3256	Landmark MS	.4	Dianne Cooper	SDPE				x	x
3222	Greenfield	.4	Nicole Albino	SDPE				x	x
3160	Waterleaf	.4	Nicole Albino	SDPE		x	x		

3227	Mayport ES	.2	Nicole Albino	SDPE	x				
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DCPS/DOH School Health Phone Referral List

3241	Westside HS	.4	Lauren Correa	SDPE			x	x	
3212	Ribault MS	.2	Lauren Correa	SDPE					x
3219	Stilwell	.4	Lauren Correa	SDPE	x	x			

<u>Issue/Topic</u>	<u>Agency</u>	<u>Phone Number:</u>
Communicable Diseases	FL DOH-Duval School Health	904-253-1580
<ul style="list-style-type: none"> • Reportable/Non-Reportable • Referral • Treatment 	FL-DOH-Duval Epidemiology	904-253-1851
Immunizations/Vaccinations	DOH School Health Office	904-253-1580
	DOH Pearl Street Immunization Center	904-254-1420
	State of FL Immunization Program	904-253-2512
Medical Emergency	DCPS	911
School Health Policy and Statutory Regulations	FL DOH-Duval School Health	904-253-1580
Medication Administration	FL DOH-Duval School Health	904-253-1580
School Health Physicals	FL DOH-Duval School Health	904-253-1580
Mandatory Screenings	FL DOH School Health Office	904-253-1580
<ul style="list-style-type: none"> • Scoliosis • BMI • Hearing • Vision 	Duval County Public Schools	
	Hearing Services	904-858-1950
	Vision Services	904-858-1950
DCPS School Personnel In-Service Health Training	FL DOH-Duval School Health	904-253-1580
School Nurse Location	FL DOH-Duval School Health	904-253-1580
Dental Care Program	FL DOH-Duval Dental Administration	904-253-1200
		904-253-1210
Pregnancy	Teen Pregnancy Nurse	904-524-0769
		904-253-1580
	DCPS Teen Parent Office	904-390-2050
Facilities DCPS	DCPS Facility Management	904-390-2360
Environmental Health	FL DOH-Duval Environmental Services	904-390-2279
		904-253-1330
Financial Eligibility DOH Clinics	FL DOH-Duval Clinics	904-253-1360
Central Scheduling Clinic Appointments		904-253-1130
DOH Consultant to DCPS	Kelli Wells, MD	904-253-1010
	Director-FL DOH-Duval	904-451-0319
DOH Consultant to DCPS	Pauline Rolle, MD	904-253-1735
	Medical Director, FL-DOH-Duval	904-524-5858
School Board Physician	Al Bowers, MD	904-390-2523
Refugee Services	FL DOH-Duval Refugee Services	904-253-1070

TB Clinic	FL DOH Center for Pulmonary Services	904-253-1070
STD/HIV	FL DOH STD/HIV Clinics	904-253-1250 904-253-1000
DOH School Health Fax # FL DOH-Duval School Health	FL DOH	904-253-1580 904-253-1896
District Student Records (Medical)	Duval County Public Schools Nursing Services	904-651-0393
Diabetes Management Care	Duval County Public Schools Nursing Services	904-651-0393
Medical Pupil Placement	Duval County Public Schools Physician	904-390-2523
Medical Pupil Transportation	Duval County Public Schools Physician	904-390-2523
General Program Questions	Heather Crowley, Director of Wellness Melissa Kicklighter, Supervisor of Wellness	904-390-2315 904-390-2633

Appendix J- Department of Health Nursing

Department of Health Nurse Assignment List		
School Health Nurses, RN		
Melody Alt - 253-1187	Mary Stewart Farnell -253-1198	Alexandra Jones-Paul 253-1215

<ol style="list-style-type: none"> 1. Brookview 2. Chet's Creek 3. Finegan 4. Jacksonville Beach 5. Lone Star 6. Merrill Road 7. Seabreeze 8. Twin Lakes Middle 	<ol style="list-style-type: none"> 1. Baldwin M/S 2. Central Riverside 3. Jackson, Stonewall 4. Jones, Mamie A 5. Ortega 6. Stockton, John 7. Venetia 8. West Riverside 	<ol style="list-style-type: none"> 1. J. Allen Axson 2. Biltmore 3. Johnson, J. W. 4. Justina/GRASP 5. Mandarin Oaks 6. Stanton
Toni Bouchard - 253-1439 <ol style="list-style-type: none"> 1. Fishweir 2. Lavilla 3. Lee High (On Call) 4. North Shore 5. Timucuan 6. Upson, Ruth 	Primrose Galasco - 253-1216 <ol style="list-style-type: none"> 1. Brentwood 2. Carver, George W. 3. Evans, St. Clair 4. Ford, John E. 5. Lake Forest 6. New Berlin 7. West Jax 8. Woodson, C. G. 	Michelle Laycock - 253-1211 <ol style="list-style-type: none"> 1. Darnell-Cookman 2. Davis, Jeff 3. Dinsmore 4. King, M. L. 5. Kings Trail 6. Pine Forest 7. Randolph, A. P. 8. San Jose 9. Windy Hill
Cheryl Eng - 253-1197 <ol style="list-style-type: none"> 1. Atlantic Coast (On Call) 2. Bartram Springs 3. Chimney Lakes 4. DuPont 5. Englewood E. 6. Greenfield 7. Loretto 8. Mandarin High(On Call) 	Stephanie Helou 253-1226 <ol style="list-style-type: none"> 1. Anderson, D. (On Call) 2. Enterprise 3. Jefferson, T. 4. Mandarin Middle 5. Peterson (On Call) 6. Tillis, Sadie 7. Twin Lakes E. 8. Wolfson (On Call) 	Michelle Logan - 253-1213 <ol style="list-style-type: none"> 1. Crystal Springs 2. Gregory Drive 3. Hyde Grove 4. Hyde Park 5. Normandy Village 6. Pickett 7. Stillwell 8. Whitehouse
Renee McCumber - 253-1214 <ol style="list-style-type: none"> 1. Alimacani 2. Arlington E. 3. Arlington Hgts. 4. Brewer, D. 5. Lake Lucina 6. Sabal Palm 	Linda Rathbun - 253-1218 <ol style="list-style-type: none"> 1. Biscayne 2. First Coast High(On Call) 3. Garden City 4. Oceanway E. 5. Oceanway M. 6. San Mateo 7. Sheffield 	Kathy Scranton - 253-1196 <ol style="list-style-type: none"> 1. Beauclerc 2. Crown Point 3. Greenland Pines 4. Highlands M. 5. Holiday Hill 6. Payne, R. 7. Robinson, A.
Glenda O'Neill - 253-1232 <ol style="list-style-type: none"> 1. Butler 2. Cedar Hills 3. Davis, Jeff 4. Jax Heights 5. Jefferson, T. 6. Livingston, S.P. 7. Westview 8. White, Ed 	Monica Scharf - 253-1235 <ol style="list-style-type: none"> 1. Abess 2. Grand Park (On Call) 3. Kernan Trail 4. Mayport E. 5. Morgan, A.R. 6. Ramona 7. Rutherford, M.V. 8. San Pablo 9. Waterleaf 	Michele Presley - 253-1201 <ol style="list-style-type: none"> 1. Chaffee Trail 2. Daniels, R.V. 3. Hendricks Ave. 4. Highlands E. 5. Kite, H.F. 6. Pine Estates 7. Reynolds Lane 8. Tolbert, S.
Twana Anderson - 253-1215 <ol style="list-style-type: none"> 1. Butler 2. Livingston, S.P. 	Franita Adams - 253-1242 Cell - 524-0769 Prenatal / Young Parent Coverage at High Schools	
Comprehensive SHIP Schools		
Kendra McCray - 253-1234 Jackson, Andrew	Nonyelum Ezinwa – 253-1319 1. Hull, S.A.	Regina Reddick - 253-1238 1. Brown, R.L

	2. Mathis, Sallye B. 3. Ribault MI 4. Ribault Sr. High	2. Gilbert, Matthew 3. Kirby-Smith
Rugie Mansaray - 253-1219 DOH Nursing Supervisor 1. Long Branch 2. Love, John		
Full Service Schools		
Erica Hawkins - 253-1405 1. Arlington MI. 2. Ft. Caroline E. 3. Ft. Caroline MI. 4. Hogan Spring Glen 5. Love Grove 6. Parker, Terry 7. Parkwood Hgts. 8. Spring Park	Vicki Heilig - 253-1208 1. Englewood High 2. Kernan MI. 3. Landmark MI 4. Landon 5. Sandalwood 6. Southside Estates 7. Southside MI.	Courtnei Dexter- 253-1229 1. Atlantic Beach 2. Fletcher MI 3. Fletcher Sr 4. Mayport MI 5. Neptune Beach
Monica Lopez - 253-1236 1. Bayview 2. Lake Shore MI 3. Northwestern 4. Oak Hill 5. Paxon 6. Pearson, R.H. 7. Raines High 8. Stuart, J.E.B. 9. Westside High 10. Woodland Acres		
Comprehensive SHIP Health Technicians		
Paula Hylton-Smith Mathew Gilbert	Deirdre Eady Kirby Smith Clinic	Annie Hall Sallye B. Mathis Clinic
Shekelia Baker S.A. Hull Clinic	Nicolette Ruise Ribault Sr. Clinic	Ofel Ntui Ribault MI. Clinic
Intervention School Health Technicians		St. Vincent's Foundation
Athelene Sandy North Shore	Domenique Harvey Raines HS	Stephanie Bowman Pinedale

Appendix K- Duval County Public Schools Nursing

2015-2016 DCPS Nurse List			
<u>School</u>	<u>Nurse</u>	<u>Phone#</u>	<u>Principal</u>
Alden Road #252	Tina Fauth, RN Lisa Guiliano, LPN	565-2722	Stephanie Smith
Atlantic Coast #268	Amy McMullen, RN	538-5120	Debra Lynch
Biltmore Elem #78	Catherine Huntley, RN	693-7569 X169	Helen Dunbar
Biscayne Elem #269	Mildred E. White, RN	714-4650	DeShune Bush
Crystal Springs Elem #226	Vickie Williams, RN	693-7645 X262	Chiquita Maxwell-Rivers
Kernan Middle #279	Jane Robinson, RN	220-1350 X169	Julie Hemphill
Love Grove #82	Shelly Sheperd, RN	720-1645	Tiffany Emanuel-Wright
Landmark Middle #256	Jowann Reed, RN	221-7125 X133	David Gilmore
Mandarin Middle #259	Ronna Murphy, RN	292-0555 X178	Debbie Smith
Mandarin Oaks Elem #258	Louise Daniel, RN Candice Register, LPN	260-5820 X1131	Patti Carson
Mt. Herman #164	Kelly Dekin, RN Nathalie, Asselin, RN LaFonda Hayes, LPN	630-6740 X108	Mark Cashen
Neptune Beach Elem #246	Bobbie Regina, RN Carrie Ford, RN, MSN	247-5954X1017	Elizabeth Kavanagh
Palm Avenue #170	Jana Rice, LPN	693-7516 X105	Michael Alexander
Sabal Palm #239	Diane Schweinfurth, RN Annette Thomas, RN	221-7169 X1125	Linda Graham
Stilwell Middle #219	Brenna Yordie, RN	693-7523	J. Rebecca Raulerson-Campese
Westview K-8 #274	Larisa Churchill, RN Barbara Chaney, LPN	573-1082 X2183	Beverly Walker
White, Ed High #248	Cavelle Adams, LPN	693-7620 X164	Jason Bloom
Diabetes Nurses			
Abess Park #263	Nichole Sapp	220-1260	Kristin Shore
Beauclerc #230	Katriel Williams	739-5226	Mariah Spasoff
Central Riverside #18	Blaire Grant	381-7495	Dinah Stewart
Chimney Lakes	Mike Wells	573-1100	Janet Knott
Crown Point #245	Stacey Dotson	260-5808	Jayne Owens-Thompson
Lone Star #233	Carolyn Murray, RN	565-2711	Amy Lingren
Loretto #30	Mary Johnson, RN	260-5800 X4	Kristie Kemp
San Mateo #218	Mindie Rose, RN	696-8750	Deidra Johnson
Seabreeze #225	Tamika Lane	247-5900	Tina Bennett
Sheffield #242	Natoka Spann-Durousseau	696-8758	Cassandra DeLay
District Float Nurses			
Jennifer Lyman	Nurse Manager	651-0393	
Alecia Evans, LPN	Float Nurse	894-6612	
Stehpanie Pritchett, LPN	Float Nurse	487-5202	
Twiquilla Favroth, RN	Float Nurse	304-2372	
Sabrina Kalinski, RN	Float Nurse	316-4475	

AED Program Proposal

CURRENT PROGRAM:

Overview:

- We currently have approximately 150 AED's
 - All the high schools have at least three district supplied units, two wall mounts and a portable unit to be used at athletic events
 - All the middle schools have at least one district supplied wall mounted unit
 - Some schools have purchased additional AED's with "school based" funds
- Currently elementary schools are not included in the program. We do have units in a handful of elementary schools, generally associated with an "at risk" population.
- The Risk Management Department maintains a supply of replacement pads and batteries for use as needed.
- The units are checked regularly by school based staff (Athletic Director, SRO, physical education teacher) and annually by the district Safety Specialist during their safety inspection process.
- The district provides training at all facilities with AED units on a biannual basis as recommended by the American Heart Association.

Costs:

- Each unit needs one battery and 4 sets of pads over a four year cycle. Pads are approximately \$32.00 per set ($4 \times \$32 = \128) and batteries are \$245.00 for a total costs of \$373.00 per 4 year cycle.
 - $150 \text{ Units} \times \$373.00 = \$55,950.00$ (four year cycle)
 - $\$55,950.00 \div 4 = \$13,987.50$ current annual costs

Basic Program Expansion:

Elementary Schools (One unit per school)

Unit Costs: $89 \times \$1095.00 = \$97,455.00$

Annual Maintenance Costs=

$100 \times \$373.00 = \$37,300.00$ (four year cycle)

$\$37,300.00 \div 4 = \$9,325.00$ (annual maintenance costs)

State statute requires that a minimum of two persons responsible for the health room/clinic are trained in first aid, CPR, and AED procedures. Current cost of training is \$40 per employee.

$\$80 \text{ per school} \times 163 = \$13,040$ (108 elem, 29 MS, 21 HS, 5 Alt).

Additional training costs for AED ONLY would be approximately \$5000.00 per year. This cost is calculated at 10 persons per school at \$15.00 (training costs).