CHAPTER 2015-67

Committee Substitute for Senate Bill No. 954

An act relating to involuntary examinations of minors; amending s. 381.0056, F.S.; revising the definition of the term "emergency health needs"; requiring school health services plans to include notification requirements when a student is removed from school, school transportation, or a school-sponsored activity for involuntary examination; amending s. 394.4599, F.S.; including health care surrogates and proxies as individuals who may act on behalf of an individual involuntarily admitted to a facility; requiring a receiving facility to immediately notify the parent, guardian, caregiver, or guardian advocate of the whereabouts of a minor who is being held for involuntary examination; providing circumstances when notification may be delayed; requiring the receiving facility to make continuous notification attempts; authorizing the receiving facility to seek assistance from law enforcement under certain circumstances; requiring the receiving facility to document notification attempts in the minor's clinical record; amending ss. 1002.20 and 1002.33, F.S.; requiring public school or charter school principals or their designees to provide notice of the whereabouts of a student removed from school, school transportation, or a school-sponsored activity for involuntary examination; providing conditions for delay in notification; requiring district school boards and charter school governing boards to develop notification policies and procedures; providing an effective date.

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

Section 1. Subsection (2) and paragraph (a) of subsection (4) of section 381.0056, Florida Statutes, are amended to read:

381.0056 School health services program.—

- (2) As used in this section, the term:
- (a) "Emergency health needs" means onsite <u>evaluation</u>, management, and aid for illness or injury pending the student's return to the classroom or release to a parent, guardian, designated friend, <u>law enforcement officer</u>, or designated health care provider.
- (b) "Entity" or "health care entity" means a unit of local government or a political subdivision of the state; a hospital licensed under chapter 395; a health maintenance organization certified under chapter 641; a health insurer authorized under the Florida Insurance Code; a community health center; a migrant health center; a federally qualified health center; an organization that meets the requirements for nonprofit status under s. 501(c)(3) of the Internal Revenue Code; a private industry or business; or a philanthropic foundation that agrees to participate in a public-private partnership with a county health department, local school district, or school

in the delivery of school health services, and agrees to the terms and conditions for the delivery of such services as required by this section and as documented in the local school health services plan.

- (c) "Invasive screening" means any screening procedure in which the skin or any body orifice is penetrated.
- (d) "Physical examination" means a thorough evaluation of the health status of an individual.
- (e) "School health services plan" means the document that describes the services to be provided, the responsibility for provision of the services, the anticipated expenditures to provide the services, and evidence of cooperative planning by local school districts and county health departments.
- (f) "Screening" means presumptive identification of unknown or unrecognized diseases or defects by the application of tests that can be given with ease and rapidity to apparently healthy persons.
- (4)(a) Each county health department shall develop, jointly with the district school board and the local school health advisory committee, a school health services plan.; and The plan must include, at a minimum, provisions for all of the following:
 - 1. Health appraisal;
 - 2. Records review;
 - 3. Nurse assessment;
 - 4. Nutrition assessment;
 - 5. A preventive dental program;
 - 6. Vision screening;
 - 7. Hearing screening;
 - 8. Scoliosis screening;
 - 9. Growth and development screening;
 - 10. Health counseling;
- 11. Referral and followup of suspected or confirmed health problems by the local county health department;
 - 12. Meeting emergency health needs in each school;
- 13. County health department personnel to assist school personnel in health education curriculum development;

- 14. Referral of students to appropriate health treatment, in cooperation with the private health community whenever possible;
- 15. Consultation with a student's parent or guardian regarding the need for health attention by the family physician, dentist, or other specialist when definitive diagnosis or treatment is indicated;
- 16. Maintenance of records on incidents of health problems, corrective measures taken, and such other information as may be needed to plan and evaluate health programs; except, however, that provisions in the plan for maintenance of health records of individual students must be in accordance with s. 1002.22;
- 17. Health information which will be provided by the school health nurses, when necessary, regarding the placement of students in exceptional student programs and the reevaluation at periodic intervals of students placed in such programs; and
- 18. Notification to the local nonpublic schools of the school health services program and the opportunity for representatives of the local nonpublic schools to participate in the development of the cooperative health services plan; and:
- 19. Immediate notification to a student's parent, guardian, or caregiver if the student is removed from school, school transportation, or a school-sponsored activity and taken to a receiving facility for an involuntary examination pursuant to s. 394.463, including the requirements established under ss. 1002.20(3) and 1002.33(9), as applicable.
 - Section 2. Section 394.4599, Florida Statutes, is amended to read:

394.4599 Notice.—

(1) VOLUNTARY <u>ADMISSION PATIENTS</u>.—Notice of <u>an individual's a</u> voluntary <u>patient's</u> admission shall only be given <u>only</u> at the request of the <u>individual patient</u>, except that, in an emergency, notice shall be given as determined by the facility.

(2) INVOLUNTARY <u>ADMISSION</u> PATIENTS.—

- (a) Whenever notice is required to be given under this part, such notice shall be given to the <u>individual patient</u> and the <u>individual's patient's guardian</u>, guardian advocate, <u>health care surrogate or proxy</u>, attorney, and representative.
- 1. When notice is required to be given to <u>an individual</u> a <u>patient</u>, it shall be given both orally and in writing, in the language and terminology that the <u>individual</u> <u>patient</u> can understand, and, if needed, the facility shall provide an interpreter for the <u>individual</u> <u>patient</u>.

- 2. Notice to <u>an individual's a patient's</u> guardian, guardian advocate, <u>health care surrogate or proxy</u>, attorney, and representative shall be given by <u>United States mail and by registered or certified mail with the date, time, and method of notice delivery documented in receipts attached to the <u>patient's</u> clinical record. Hand delivery by a facility employee may be used as an alternative, with <u>the date and time of</u> delivery documented in the clinical record. If notice is given by a state attorney or an attorney for the department, a certificate of service <u>is shall be sufficient</u> to document service.</u>
- (b) A receiving facility shall give prompt notice of the whereabouts of an individual a patient who is being involuntarily held for examination to the individual's guardian, guardian advocate, health care surrogate or proxy, attorney or representative, by telephone or in person within 24 hours after the individual's patient's arrival at the facility, unless the patient requests that no notification be made. Contact attempts shall be documented in the individual's patient's clinical record and shall begin as soon as reasonably possible after the individual's patient's arrival. Notice that a patient is being admitted as an involuntary patient shall be given to the Florida local advocacy council no later than the next working day after the patient is admitted.
- (c)1. A receiving facility shall give notice of the whereabouts of a minor who is being involuntarily held for examination pursuant to s. 394.463 to the minor's parent, guardian, caregiver, or guardian advocate, in person or by telephone or other form of electronic communication, immediately after the minor's arrival at the facility. The facility may delay notification for no more than 24 hours after the minor's arrival if the facility has submitted a report to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect and if the facility deems a delay in notification to be in the minor's best interest.
- The receiving facility shall attempt to notify the minor's parent, guardian, caregiver, or guardian advocate until the receiving facility receives confirmation from the parent, guardian, caregiver, or guardian advocate, verbally, by telephone or other form of electronic communication, or by recorded message, that notification has been received. Attempts to notify the parent, guardian, caregiver, or guardian advocate must be repeated at least once every hour during the first 12 hours after the minor's arrival and once every 24 hours thereafter and must continue until such confirmation is received, unless the minor is released at the end of the 72-hour examination period, or until a petition for involuntary placement is filed with the court pursuant to s. 394.463(2)(i). The receiving facility may seek assistance from a law enforcement agency to notify the minor's parent, guardian, caregiver, or guardian advocate if the facility has not received within the first 24 hours after the minor's arrival a confirmation by the parent, guardian, caregiver, or guardian advocate that notification has been received. The receiving facility must document notification attempts in the minor's clinical record.
- (d)(e) The written notice of the filing of the petition for involuntary placement of an individual being held must contain the following:

- 1. Notice that the petition has been filed with the circuit court in the county in which the <u>individual patient</u> is hospitalized and the address of such court.
- 2. Notice that the office of the public defender has been appointed to represent the <u>individual patient</u> in the proceeding, if the <u>individual patient</u> is not otherwise represented by counsel.
- 3. The date, time, and place of the hearing and the name of each examining expert and every other person expected to testify in support of continued detention.
- 4. Notice that the <u>individual patient</u>, the <u>individual's patient's</u> guardian, guardian advocate, health care surrogate or proxy, or representative, or the administrator may apply for a change of venue for the convenience of the parties or witnesses or because of the condition of the <u>individual patient</u>.
- 5. Notice that the <u>individual patient</u> is entitled to an independent expert examination and, if the <u>individual patient</u> cannot afford such an examination, that the court will provide for one.
- (e)(d) A treatment facility shall provide notice of <u>an individual's</u> a patient's involuntary admission on the next regular working day after the <u>individual's</u> patient's arrival at the facility.
- $\underline{\text{(f)(e)}}$ When <u>an individual a patient</u> is to be transferred from one facility to another, notice shall be given by the facility where the <u>individual patient</u> is located <u>before prior to</u> the transfer.
- Section 3. Paragraph (l) is added to subsection (3) of section 1002.20, Florida Statutes, to read:
- 1002.20 K-12 student and parent rights.—Parents of public school students must receive accurate and timely information regarding their child's academic progress and must be informed of ways they can help their child to succeed in school. K-12 students and their parents are afforded numerous statutory rights including, but not limited to, the following:

(3) HEALTH ISSUES.—

(l) Notification of involuntary examinations.—The public school principal or the principal's designee shall immediately notify the parent of a student who is removed from school, school transportation, or a school-sponsored activity and taken to a receiving facility for an involuntary examination pursuant to s. 394.463. The principal or the principal's designee may delay notification for no more than 24 hours after the student is removed if the principal or designee deems the delay to be in the student's best interest and if a report has been submitted to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect. Each district school board shall develop a policy and procedures for notification under this paragraph.

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

1002.33 Charter schools.—

(9) CHARTER SCHOOL REQUIREMENTS.—

(q) The charter school principal or the principal's designee shall immediately notify the parent of a student who is removed from school, school transportation, or a school-sponsored activity and taken to a receiving facility for an involuntary examination pursuant to s. 394.463. The principal or the principal's designee may delay notification for no more than 24 hours after the student is removed if the principal or designee deems the delay to be in the student's best interest and if a report has been submitted to the central abuse hotline, pursuant to s. 39.201, based upon knowledge or suspicion of abuse, abandonment, or neglect. Each charter school governing board shall develop a policy and procedures for notification under this paragraph.

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

Approved by the Governor May 21, 2015.

Filed in Office Secretary of State May 21, 2015.