

FLORIDA  
DEPARTMENT OF HEALTH (DOH)  
DOH17-006



10-2016

INVITATION TO BID (ITB)  
FOR  
**Broward School Health Services**

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## SECTION 1.0: INTRODUCTORY MATERIALS

### 1.1 Statement of Purpose

The purpose of this Invitation to Bid (ITB) is for the Department of Health to obtain competitive prices to provide basic school health services and track specialized services in designated schools during the public school calendar year.

### 1.2 Scope of Services

Detailed scope of services for this solicitation is provided as **Attachment A** in this ITB.

### 1.3 Definitions

**Annual School Health Services Report:** An annual report submitted to the State by August 15th of for the previous year that reflects reported health conditions, services provided, staffing and expenditures. The reporting period will cover July 1st through June 30th each year for the duration of this contract.

**Basic School Health Services:** In accordance with s. 381.0056, F.S., health services are conducted as a part of the total school health program and should be carried out to appraise, protect, and promote the health of students. Core program requirements include: health appraisal, records review, nurse assessment, vision screening, hearing screening, scoliosis screening, growth and development screening, health counseling, referral and follow up of suspected or confirmed health problems, first aid and emergency needs in each school, medication administration and medical procedures, prevention of communicable diseases, referral of students to appropriate health treatment, consultation with students' parent/guardian regarding need for health attention by an appropriate provider, and maintenance of student health information and records(s).

**Bid:** The complete written response of the Provider to this ITB, including properly completed forms, supporting documents, and attachments.

**Business days:** Monday through Friday, excluding state holidays.

**Business hours:** 8 a.m. to 5 p.m., Eastern Time on all business days.

**Calendar days:** All days, including weekends and holidays.

**Contract:** The formal agreement or order that will be awarded to the successful Provider under this ITB, unless indicated otherwise.

**Contract Manager:** The individual designated by the Department to be responsible for the monitoring and management of this contract.

**Department:** The Department of Health; may be used interchangeably with DOH.

**Eligible Students:** A student whose parent/guardian did not opt out of the required

screenings (vision, hearing, BMI, and scoliosis).

**Fiscal Year:** July 1st to June 30th.

**Full Service Schools:** These schools receive Basic School Health Services as well as specialized services provided by (School Board of Broward County (SBBC) or other community agencies, including but not limited to, nutritional services, economic and job placement services, parenting classes, counseling for abused children, mental health and substance abuse counseling, and adult education for parents in accordance with Section 402.3026, Florida Statutes and as specified in the most recent version of the local School Health Services Plan at designated full service schools. If provider becomes aware that a student is pregnant, provider must provide the student with information on counseling, education, prenatal care, and referrals to Health Start.

**Health Management System (HMS):** The Department's data system into which documented school health services are entered by service codes identified in the most current School Health Coding Manual, incorporated by reference. This data is used to provide a full accounting of school health services provided.

**Local Education Agency (LEA):** As defined in the Elementary and Secondary Education Act, a public board of education or other public authority legally constituted within a State for either administrative control or direction of, or to perform a service function for, public elementary schools or secondary schools in a city, county, township, school district, or other political subdivision of a State, or for a combination of school districts or counties that is recognized in a State as an administrative agency for its public elementary schools or secondary schools.

**Minor Irregularity:** As used in the context of this solicitation, indicates a variation from the ITB terms and conditions which does not affect the price of the Bid, or give the Provider an advantage or benefit not enjoyed by other Providers, or does not adversely impact the interests of the Department.

**Order:** As used in the context of this solicitation refers to a Purchase Order or a Direct Order.

**Provider:** The business entity that submits a Bid. This term also may refer to the entity awarded a contract by the Department in accordance with the terms of this ITB.

**Quarter:** One-fourth (three months) of a fiscal year. The quarters are July 1 through September 30 (quarter 1); October 1 through December 31 (quarter 2); January 1 through March 31 (quarter 3); and April 1 through June 30 (quarter 4).

**School Health Services Plan:** A document created by the Department, the Local Education Agency, and the local School Health Advisory Committee, that describes the school health services to be provided within the county, and the responsibility for provision of the services, as required by Section 381.0056(4)(a), Florida Statutes. The School Health Services Plan is developed every two years.

**Vendor Bid System (VBS):** Refers to the State of Florida internet-based vendor information system at: [http://myflorida.com/apps/vbs/vbs\\_main\\_menu](http://myflorida.com/apps/vbs/vbs_main_menu).

## **SECTION 2.0: PROCUREMENT PROCESS, SCHEDULE & CONSTRAINTS**

### **2.1 Procurement Officer**

The Procurement Officer assigned to this solicitation is:

Florida Department of Health  
Attention: Marc Parkent  
780 SW 24<sup>th</sup> Street  
Fort Lauderdale, FL 33315  
Email: marcus.parkent@flhealth.gov

### **2.2 Restriction on Communications**

Respondents to this solicitation or persons acting on their behalf may not contact, between the release of the solicitation and the end of the 72-hour period following the agency posting the notice of intended award, excluding Saturdays, Sundays, and state holidays, any employee or officer of the executive or legislative branch concerning any aspect of this solicitation, except in writing to the procurement officer as provided in the solicitation documents. Violation of this provision may be grounds for rejecting a response. Section 287.057(23), Florida Statutes.

### **2.3 Term**

It is anticipated that the Contract resulting from this ITB will be for a one year period from August 1, 2017, or the Contract execution date whichever is later, subject to renewal as identified in **Section 4.2**. The Contract resulting from this ITB is contingent upon availability of funds. The total award cannot exceed \$1,053,256.00 for the initial term and for each renewal thereof, if any.

2.4 **Timeline**

<b><u>EVENT</u></b>	<b><u>DUE DATE</u></b>	<b><u>LOCATION</u></b>
ITB Advertised / Released	<b>6/23/2017</b>	<b><u>Posted to the Vendor Bid System at:</u></b> <a href="http://vbs.dms.state.fl.us/vbs/main_menu">http://vbs.dms.state.fl.us/vbs/main_menu</a>
Questions Submitted in Writing	<b>Must be received PRIOR TO: 6/29/2017 @ 5:00 PM</b>	<b>Submit to:</b> Florida Department of Health Broward County <b>Attention: Marc Parkent</b> 780 SW 24 <sup>th</sup> Street Fort Lauderdale, FL 33315 E-mail: <a href="mailto:marcus.parkent@flhealth.gov">marcus.parkent@flhealth.gov</a>
Answers to Questions (Anticipated Date)	<b>07/03/2017</b>	<b><u>Posted to Vendor Bid System at:</u></b> <a href="http://vbs.dms.state.fl.us/vbs/main_menu">http://vbs.dms.state.fl.us/vbs/main_menu</a>
<b>Sealed Bids Due and Opened</b>	<b>Must be received PRIOR TO: 07/11/2017 @ 3:30 PM</b>	<b><u>PUBLIC MEETING</u></b> <b>Submit to:</b> Florida Department of Health Broward County <b>Attention: Marcus Parkent</b> Administration Auditorium 780 SW 24 <sup>th</sup> Street Fort Lauderdale, FL 33315
Anticipated Posting of Intent to Award	<b>07/13/2017</b>	<b><u>Posted to the Vendor Bid System at:</u></b> <a href="http://vbs.dms.state.fl.us/vbs/main_menu">http://vbs.dms.state.fl.us/vbs/main_menu</a>



## **2.5 Addenda**

If the Department finds it necessary to supplement, modify, or interpret any portion of the solicitation during the procurement process, a written addendum will be posted on the MyFlorida.com Vendor Bid System, [http://vbs.dms.state.fl.us/vbs/main\\_menu](http://vbs.dms.state.fl.us/vbs/main_menu). If the addendum alters the scope or specifications of the solicitation, the Provider will be required to sign the addendum acknowledging the changes and return it with the bid submittal. It is the responsibility of the Provider to be aware of any addenda that might affect their Bid.

## **2.6 Questions**

***This provision takes precedence over General Instruction #5 in PUR1001.***

Questions related to this solicitation must be received, in writing (either via U.S. Mail, courier, e-mail, fax, or hand-delivery), by the Procurement Officer identified in **Section 2.1**, within the time indicated in the Timeline. Verbal questions or those submitted after the period specified in the Timeline will not be addressed.

Answers to questions submitted in accordance with the ITB Timeline will be posted on the MyFlorida.com Vendor Bid System web site: [http://vbs.dms.state.fl.us/vbs/main\\_menu](http://vbs.dms.state.fl.us/vbs/main_menu).

## **2.7 Basis of Award**

A single award will be made to the responsive, responsible Provider offering the lowest grand total for the services requested in this ITB.

## **2.8 Identical Tie Bids**

Where there is identical pricing from multiple Providers, the Department will determine the order of award in accordance with Florida Administrative Code, Rule 60A-1.011.

## **SECTION 3.0: INSTRUCTIONS FOR BID SUBMITTAL**

### **3.1 General Instructions to Respondents (PUR 1001)**

This section explains the General Instructions to Providers (PUR 1001) of the solicitation process, and is a downloadable document incorporated into this solicitation by reference. This document should not be returned with the Bid. <http://dms.myflorida.com/content/download/2934/11780>

**The terms of this solicitation will control over any conflicting terms of the PUR1001.**

### **3.2 Instructions for Submittal**

1. Providers are required to complete, sign, and return the “Price Page” with the Bid submittal. (**Mandatory Requirement**)
2. Providers must submit all technical and pricing data in the formats specified in the ITB.
3. Submit one original Bid and one electronic copy of the Bid on CD or thumb drive. The electronic copy should contain the entire Bid as submitted, including all supporting and signed documents. Refer to **Section 3.4** for information on redacting confidential information, if applicable.
4. Bids may be sent by U.S. Mail, Courier, or Hand Delivered to the location indicated in the Timeline.
5. Bids submitted electronically will **not** be considered.
6. Bids must be submitted in a sealed envelope/package with the solicitation number and the date and time of the Bid opening clearly marked on the outside.
7. The Department is not responsible for improperly marked Bids.
8. It is the Provider’s responsibility to ensure its Bid is submitted at the proper place and time indicated in the ITB Timeline.
9. The Department’s clocks will provide the official time for Bid receipt.

Materials submitted will become the property of the State of Florida and accordingly, the State reserves the right to use any concepts or ideas contained in the response.

### **3.3 Cost of Preparation**

Neither the Department of Health nor the State is liable for any costs incurred by a Provider in responding to this solicitation.

### **3.4 Public Records and Trade Secrets**

Notwithstanding any provisions to the contrary, public records must be made available pursuant to the provisions of the Public Records Act. If the Provider considers any portion of its Bid to this solicitation to be confidential, exempt, trade secret or otherwise not subject

to disclosure pursuant to Chapter 119, Florida Statutes, the Florida Constitution or other authority, the Provider must segregate and clearly mark the document(s) as “**CONFIDENTIAL**”.

Simultaneously, the Provider will provide the Department with a separate redacted paper and electronic copy of its Bid and briefly describe in writing the grounds for claiming exemption from the public records law, including the specific statutory citation for such exemption. This redacted copy must contain the solicitation name, number, and the name of the Provider on the cover, and must be clearly titled “**REDACTED COPY**”.

The redacted copy must be provided to the Department at the same time the Provider submits its Bid and must only exclude or obliterate those exact portions which are claimed confidential, proprietary, or trade secret. The Provider will be responsible for defending its determination that the redacted portions of its Bid are confidential, trade secret or otherwise not subject to disclosure. Further, the Provider must protect, defend, and indemnify the Department for any and all claims arising from or relating to the determination that the redacted portions of its Bid are confidential, proprietary, trade secret or otherwise not subject to disclosure. If the Provider fails to submit a redacted copy with its Bid, the Department is authorized to produce the entire documents, data or records submitted by the Provider in answer to a public records request for these records.

### **3.5 Price Page (Mandatory Requirement)**

The Price Page is **Attachment B** of this ITB. Providers must fill out the Price Page as indicated, sign it, and return it with their Bid.

### **3.6 Documentation**

Providers must complete and submit the following information or documentation as part of their Bid:

#### **3.6.1 Minimum Qualifications**

The Provider must have a minimum of one year experience in providing basic school health services, as defined in **Section 1.3, to** at least 30 schools in a single school year. The experience must be between the years 2012 to 2017.

#### **3.6.2 Organizational Profile**

Providers must submit a completed **Organizational Profile** form, **Attachment E**.

### **3.6.3 References**

Providers must provide contact information for three references. At least one reference must include a school based health program. The references must evidence the minimum qualifications, that the Provider has provided basic school health services, as defined in **Section 1.3**, in at least 30 schools in a single school year between 2012 and 2017. Providers must use **Attachment C**, Reference Form of this ITB to provide the required information. The Department reserves the right to contact any and all entities in the course of this solicitation in order to verify experience. Information received may be considered in the Department's determination of the Provider's responsibility. The Department's determination is not subject to review or challenge.

### **3.6.4. Statement of Non-Collusion**

Providers must sign and return with their Bid the **Statement of Non-Collusion** form, **Attachment D**.

### **3.6.5. Licenses/Certifications**

Providers must submit the names and resumes of key healthcare staff that would be available to provide services during the term of this contract. Indicate and submit current State of Florida clear/active license and certification(s) as applicable, for all healthcare provider staff that may be assigned.

### **3.6.6. Litigation Attestation**

Providers must not have been named as a party in any litigation or regulatory action related to the delivery of any and all school health services in the past five (5) years or currently be a party in any litigation, or regulatory action related to the delivery of any and all school health services. Submission of a response to this ITB is an affirmation of the above statement.

## **3.7 Special Accommodations**

Any person requiring special accommodations at DOH Purchasing because of a disability should call DOH Purchasing at (850) 245-4199 at least five (5) work days prior to any pre-Bid conference, Bid opening, or meeting. If hearing or speech impaired, please contact Purchasing by using the Florida Relay Service, at 1-800-955-8771 (TDD).

## **3.8 Responsive and Responsible (Mandatory Requirements)**

Providers must complete and submit the following mandatory information or documentation as part of their Bid. Any Bid which does not contain the information below will be deemed non-responsive.

- Bids must be received by the time specified in **Section 2.4**.
- **Attachment B**: Price Page as specified in **Section 3.5**.
- **Attachment C**: References (evidencing experience required in **Section 3.6.1**)
- **Attachment D**: Statement of Non-Collusion as specified in **Section 3.6.3**.
- **Attachment E: Organizational Profile** as specified in **Section 3.6.2**.

### 3.9 Late Bids

The Procurement Officer must receive Bids pursuant to this ITB no later than the date and time shown in the Timeline (Refer to **Section 2.4**). Bids that are not received by the time specified will not be considered.

## SECTION 4.0: SPECIAL CONDITIONS

### 4.1 **General Contract Conditions (PUR 1000)**

The General Contract Conditions (PUR 1000) form is a downloadable document incorporated in this solicitation by reference, that contains general Contract terms and conditions that will apply to any Contract resulting from this ITB, to the extent they are not otherwise modified. This document should not be returned with the Bid. <http://dms.myflorida.com/content/download/2933/11777>

**The terms of this solicitation will control over any conflicting terms of the PUR1000. Paragraph 31 of PUR 1000 does NOT apply to this solicitation or any resulting contract.**

### 4.2. **Renewal**

The Contract resulting from this solicitation may be renewed. Renewals may be made on a yearly basis or for a period that may not exceed three years or the term of the original Contract, whichever is longer. Renewals must be in writing, subject to the same terms and conditions set forth in the initial Contract and any written amendments signed by the parties. Renewals are contingent upon satisfactory fiscal and programmatic performance evaluations as determined by the Department and are subject to the availability of funds.

### 4.3 **Conflict of Interest**

Section 287.057(17)(c), Florida Statutes, provides “A person who receives a Contract that has not been procured pursuant to subsections (1)-(3) to perform a feasibility study of the potential implementation of a subsequent Contract, who participates in the drafting of a solicitation or who develops a program for future implementation, is not eligible to Contract with the agency for any other contracts dealing with that specific subject matter, and any firm in which such person has any interest is not eligible to receive such Contract. However, this prohibition does not prevent a vendor who responds to a request for information from being eligible to Contract with an agency.”

The Department of Health considers participation through decision, approval, disapproval, recommendation, preparation of any part of a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, or auditing or any other advisory capacity to constitute participation in drafting of the solicitation.

Refer to Statement of Non-Collusion, **Section 3.6.3.**

### 4.4 **Certificate of Authority**

All limited liability companies, corporations, corporations not for profit, and partnerships seeking to do business with the State must be registered with the Florida Department of State in accordance with the provisions of Chapters 605, 607, 617, and 620, Florida Statutes, respectively prior to Contract execution. The Department retains the right to ask for verification of compliance before Contract execution. Failure of the selected contractor to have appropriate registration may result in withdrawal of Contract award.

#### **4.5 Provider Registration**

Each Provider doing business with the State of Florida for the sale of commodities or contractual services as defined in section 287.012, Florida Statutes must register in the MyFloridaMarketPlace system, unless exempted under Florida Administrative Code Rule 60A-1.030. State agencies must not enter into an agreement for the sale of commodities or contractual services as defined in section 287.012, Florida Statutes, with any Provider not registered in the MyFloridaMarketPlace system, unless exempted by rule. The successful Provider must be registered in the MyFloridaMarketPlace system within 5 days after posting of intent to award.

Registration may be completed at:

<https://vendor.myfloridamarketplace.com/vms-web/spring/login?execution=e2s1>

Providers lacking internet access may request assistance from MyFloridaMarketPlace Customer Service at 866-352-3776 or from State Purchasing, 4050 Esplanade Drive, Suite 300, Tallahassee, FL 32399.

#### **4.6 Minority and Service-Disabled Veteran Business-Participation**

The Department encourages Minority, Women, Service-Disabled Veteran, and Veteran-Owned Business Enterprise participation in all its solicitations.

#### **4.7 Performance Measures**

Pursuant to section 287.058, Florida Statutes, the resulting Contract must contain performance measures which specify the required minimum level of acceptable service to be performed. These will be established based on final determination of tasks and deliverables.

#### **4.8 Financial Consequences**

Pursuant to section 287.058, Florida Statutes, the resulting Contract must contain financial consequences that will apply if the Provider fails to perform in accordance with the Contract terms. The financial consequences will be established based on final determination of the performance measures and Contract amount.

#### **4.9 Standard Contract**

Providers must become familiar with the Department's Standard Contract which contains administrative, financial and non-programmatic terms and conditions mandated by federal laws, state statutes, administrative code rules, and directive of the Chief Financial Officer.

Use of the Standard Contract is mandatory for Departmental contracts and the terms and conditions contained in the Standard Contract are non-negotiable. The Standard Contract terms and conditions are located at: <http://www.floridahealth.gov/about-the-department-of-health/about-us/administrative-functions/purchasing/documents/DOH-Standard-Contract.pdf>

#### **4.13 Conflict of Law and Controlling Provisions**

Any Contract resulting from this ITB, and any conflict of law issue, will be governed by the laws of the state of Florida. Venue must be in Broward County, Florida.

#### **4.14 Agency Inspectors General**

It is the duty of every state officer, employee, agency, special district, board, commission, contractor, and subcontractor to cooperate with the inspector general in any investigation, audit, inspection, review, or hearing pursuant to section 20.055, Florida Statutes.

#### **4.15 Records and Documentation**

To the extent that information is used in the performance of the resulting Contract or generated as a result of it, and to the extent that information meets the definition of “public record” as defined in Section 119.011(12), Florida Statutes, said information is hereby declared to be and is hereby recognized by the parties to be a public record and absent a provision of law or administrative rule or regulation requiring otherwise, Provider must make the public records available for inspection or copying upon request of the Department’s custodian of public records at cost that does not exceed the costs provided in Chapter 119, Florida Statutes, or otherwise, and must comply with Chapter 119 at all times as specified therein. It is expressly understood that the Provider’s refusal to comply with Chapter 119, Florida Statutes, will constitute an immediate breach of the Contract resulting from this ITB and entitles the Department to unilaterally cancel the Contract agreement.

Unless a greater retention period is required by state or federal law, all documents pertaining to the program contemplated by this ITB must be retained by the Provider for a period of six years after the termination of the resulting Contract or longer as may be required by any renewal or extension of the Contract. During the records retention period, the Provider agrees to furnish, when requested to do so, all documents required to be retained. Submission of such documents must be in the Department’s standard word processing format. If this standard should change, it will be at no cost incurred to the Department. Data files will be provided in a format readable by the Department.

The Provider must maintain all records required to be maintained pursuant to the resulting Contract in such manner as to be accessible by the Department upon demand. Where permitted under applicable law, access by the public must be permitted without delay.

#### **4.16 Protests**

Failure to file a protest within the time prescribed in section 120.57(3), Florida Statutes, or failure to post a bond or other security required by law within the time allowed for filing a bond shall constitute a waiver of proceedings under Chapter 120, Florida Statutes.

Only documents delivered by the U.S. Postal Service, a private delivery service, in person, or by facsimile during Business hours (Monday-Friday, 8:00 a.m. - 5:00 p.m., Eastern Standard Time) will be accepted. Documents received after hours will be filed the following business day.



**No filings may be made by email or any other electronic means.** All filings must be made with the Agency Clerk ONLY and are only considered "filed" when stamped by the official stamp of the Agency Clerk. It is the responsibility of the filing party to meet all filing deadlines.

**Do not send Bids to the Agency Clerk's Office. Send all Bids to the Procurement Officer and address listed in the Timeline.**

**The Agency Clerk's mailing address:**

Agency Clerk  
Florida Department of Health  
4052 Bald Cypress Way, BIN A-02  
Tallahassee, FL 32399-1703  
Telephone No. (850) 245-4005

**The Agency Clerk's physical address for hand deliveries is:**

Agency Clerk  
Florida Department of Health  
2585 Merchants Row Blvd.  
Tallahassee, FL 32399  
Fax No. (850) 413-8743

## **ATTACHMENT A**

### **Scope of Services**

#### **A. Background**

The Florida Department of Health in Broward County has solicited in the past for basic school health services for a number of schools in the district. Through the use of competitive solicitation, the Department provides opportunity to the many vendors able to provide the state these services.

#### **B. Service Tasks**

1. Provider must provide basic school health services in 38 public schools to include 10 full service schools. In accordance with s. 381.0056, F.S., health services are conducted as a part of the total school health program and should be carried out to appraise, protect, and promote the health of students. Core program requirements, addressed in the School Health Services Plan (Exhibit 21) include: health appraisal, records review, nurse assessment, vision screening, hearing screening, scoliosis screening, growth and development screening, health counseling, referral and follow up of suspected or confirmed health problems, first aid and emergency needs in each school, medication administration and medical procedures, prevention of communicable diseases, referral of students to appropriate health treatment, consultation with students' parent/guardian regarding need for health attention by an appropriate provider, and maintenance of student health information and records(s).
2. Provider must track specialized services that are provided in the full service schools in accordance with Section 402.3026, Florida Statutes and as specified in the most recent version of the local School Health Services Plan.
3. Provider is responsible to access, review, and train staff to adhere to the following: Electronic copies are available from the Department upon request.
  - a. The Role of the Professional School Nurse in the Delegation of Care in Florida Schools  
<http://www.floridahealth.gov/programs-and-services/childrens-health/school-health/documents/role-of-rn-in-delegation-of-care-in-florida-schools.pdf>
  - b. Guidelines for the Care and Delegation of Care for Students with Asthma in Florida Schools  
<http://www.floridahealth.gov/programs-and-services/childrens-health/school-health/documents/asthma-guidelines-2013.pdf>
  - c. Guidelines for the Care and Delegation of Care for Students with Diabetes in Florida Schools  
<http://www.floridahealth.gov/programs-and-services/childrens-health/school-health/documents/diabetes-guidelines-for-the-care-delegation-of-care-for-students-with-diabetes-in-florida-schools.pdf>
  - d. EMERGENCY GUIDELINES FOR SCHOOLS 2016 FORIDA EDITION

**ATTACHMENT A**  
**Scope of Services**

<http://www.floridahealth.gov/programs-and-services/childrens-health/school-health/ documents/emergency-guidelines-for-schools-2016.pdf>

- e. FLORIDA STATUTES AND ADMINISTRATIVE CODE REQUIREMENTS FOR SCHOOL HEALTH SERVICES AND RELATED ACTIVITIES IN SCHOOLS 2016-2017

<http://www.floridahealth.gov/programs-and-services/childrens-health/school-health/ documents/Statutory-Rule-Requirements-for-School-Health-2016-2017.pdf>

- f. Florida School Health Administrative Guidelines

<http://www.floridahealth.gov/programs-and-services/childrens-health/school-health/ documents/adminstrative-guidelines.pdf>

- g. Broward County Public Schools Coordinated Student Health Services

<http://www.browardschools.com/departments/coordinated-student-health-services-cshs>

4. Provider must perform the following screenings:

- a. Perform vision screenings each contract year for eligible students in kindergarten, first, third, and sixth grades who were absent on scheduled screening days or new to the school within 30 calendar days of scheduled screening date or school entry date.
- b. Contact the School Board of Broward County (SBBC) screening staff to schedule hearing screenings each contract year for eligible students in kindergarten, first, and sixth grades who were absent on scheduled screening days or new to the school within 30 calendar days of scheduled screening date or school entry date.
- c. Perform scoliosis screenings each contract year for eligible students in sixth grade who were absent on scheduled screening days or new to the school within 30 calendar days of scheduled screening date or school entry date.
- d. Perform growth and development screenings, which must include a body mass index (BMI) percentile calculation, each contract year for eligible students in first, third, and sixth grades who were absent on scheduled screening days or new to the school within 30 calendar days of scheduled screening date or school entry date.
- e. Refer all students with abnormal screening results to appropriate health care providers for further evaluation and or treatment within 45 calendar days of receiving an abnormal screening result.
- f. Follow-up with parents of students referred for further evaluation and or treatment to ensure the students received the necessary additional evaluation and or treatment within 30 calendar days of referral.
- g. Submit all service and screening data for each month to the Department

## **ATTACHMENT A**

### **Scope of Services**

Contract Manager within 10 calendar days following the end of each month.

5. Full Service Schools. Track provision of specialized services provided by SBBC or other community agencies, including but not limited to, nutritional services, economic and job placement services, parenting classes, counseling for abused children, mental health and substance abuse counseling, and adult education for parents in accordance with Section 402.3026, Florida Statutes and as specified in the most recent version of the local School Health Services Plan at designated full service schools. If provider becomes aware that a student is pregnant, provider must provide the student with information on interagency collaborations for assistance, counseling, education, and prenatal care.
6. By September 15 of each year, review each schools immunization compliance report and work with school personnel to obtain required student immunization documentation.
7. RN supervisors must conduct and document skills assessments every 90 days with health support technicians (HSTs) under their supervision utilizing the Skills Assessment Form (Exhibit 1).
8. By October 1 of each year, for all students, in all schools served by this contract, with: allergies, diabetes, asthma, seizure disorder, ADHD, autism, eating disorders, blood disorders, cardiac disorders, respiratory disorders, psycho/social issues, hearing impairment, visual impairment or other medical condition or a medical authorization, the RN must complete a Student Assessment Checklist (Exhibit 2). The Student Assessment Checklist will guide the RN supervisor and the RN in determining if an Individualized Health Care Plan (Exhibits 3-6) and if warranted an Emergency Care Plan should be written (Exhibits 3A-6A).
9. If during the completion of the Student Assessment Checklist it is determined that a student requires an Individualized Health Care Plan and if warranted, an Emergency Care Plan, it must be completed at that time for all students, in all schools served by this contract. Standardized Individual Health Care Plans and Emergency Care Plans are provided for use for the following health conditions: allergies, diabetes, asthma, and seizure disorder. Plans for all other health conditions are to be developed by the RN supervisor and/or the RN as needed. Individualized Health Care Plans should be developed in conjunction with the parent, staff, health care provider and student (as appropriate).
10. After October 1 when a new or newly diagnosed student with a chronic health condition is identified, a Student Assessment Checklist should be completed by the RN supervisor and/or the RN and if needed an Individualized Health Care Plan and, if warranted, an Emergency Care Plan should be completed within 30 calendar days as appropriate.
11. On school days at each school served by this contract, the RN and/or HST provides medication administration and treatment services, as prescribed by the student's healthcare provider on the Authorization for Medication (Exhibit 7) and documented on the Student Medication Log (Exhibit 8).
12. On each school day at each school served by this contract, the RN and/or HST

## **ATTACHMENT A**

### **Scope of Services**

provides diabetes medication and/or treatment services as prescribed by the student's healthcare provider on the Diabetes Medication /Treatment Authorization (Exhibit 9) form and documented on the Daily Diabetes Log (Exhibit 10).

13. As needed, child specific trainings should be completed and documented by the RN supervisor and the RN for all students with chronic health conditions requiring interventions at school. Trainings are to be provided to teachers, HSTs, and other school staff who have interactions with the student. Trainings should be completed within 30 calendar days of the start of school or within 30 calendar days of notification of a new chronic health condition.
14. As needed, a chronic health condition overview will be provided and documented by the RN supervisor and the RN for teachers, HSTs and other school staff who have a "need to know" on the Emergency Care Plans.
15. On school days at each school, the RN and/or HST shall provide basic school health services. These services are to include, but not be limited to medication, First Aid, complex procedures and referrals, and should be documented on the Daily Summary Log (Exhibit 11).
16. Weekly at each school served by this contract, the RN and/or the HST shall monitor health room supplies and equipment for inventory and expiration. The AED machine should be checked bimonthly to ensure it is functional, along with the 911 posters, CPR certification, and medication administration certification to ensure they are present and current.
17. Weekly at each school served by this contract, the RN and/or the HST shall monitor medications and treatments for expiration, label, lock and quarantine expired medications, and work with SBBC Risk Management for expired medication pick up.
18. The Provider's Clinical Nurse Manager shall develop and facilitate a minimum of five (5) mandatory days of trainings per year on topics approved by the Department in order to safely provide assigned health services.
19. Provider shall ensure all staff attend a minimum of six (6) days of mandatory trainings per year on topics approved by the Department, in order to safely provide assigned health services. These trainings shall be provided prior to and during the school year on days when students are not in school.
20. The Clinical Nurse Manager shall complete and submit FTE Week Report (Exhibit 19) for each school according to the annual FTE week schedule.
21. The Clinical Nurse Manager and/or Registered Nurse and/or RN Supervisor, shall assist with communicable disease investigations and management.
22. RN Supervisors and RNs shall complete and maintain the following documentation:
  - a. Monthly Summary Log (Exhibit 14)
  - b. School Monthly Data Collection Form by Grade Level (Exhibit 15)

**ATTACHMENT A**  
**Scope of Services**

- c. RN School Visit Log (Exhibit 20) *(RN Supervisors only)*
  - d. Confidentiality of individual student health records and individualized medication administration records, as provided by physicians, psychologists or other recognized health professionals and paraprofessionals, used in connection with the provision of medical treatment on school grounds, field trips, off-campus work, and bus transportation must be maintained.
  - e. Health records of individual students must be maintained in accordance with Section 1002.22, Florida Statutes
  - f. FTE Week report
  - g. School Monthly Data Collection Form by Grade Level
  - h. The RNs and HSTs shall complete and maintain the following documentation:
    - Student Medication Log (Exhibit 8)
    - Daily Diabetes Log (Exhibit 10)
    - DOH-Broward Unduplicated Log (Exhibit 12)
    - Daily Clinic Log (Exhibit 13)
    - Daily Summary Log (Exhibit 11)
23. The Provider's Clinical Nurse Manager shall participate in monthly meetings, QA monitoring, and site visits as scheduled by the Department.

**B. Deliverables**

1. One hour or prorated partial hour (rounded up or down to the nearest quarter hour) of Clinical Nurse Manager services for a total of 40 hours per week year round. Clinical Nurse Manager shall develop and facilitate five (5) days of training for HSTs, RN and RN Supervisors.
2. One hour or prorated partial hour (rounded up or down to the nearest quarter hour) of Registered Nurse Supervisor services for a total of eight (8) hours per day for 189 days (180 days when students are present, a minimum of six (6) mandatory days of training, 2 days prior to beginning of school year and 1 day after the end of the school year).
3. One hour or prorated partial hour (rounded up or down to the nearest quarter hour) of Registered Nurse services 6 hours per day for 180 school days (when students are present) and a minimum of six (6) mandatory days of training days.
4. One hour or prorated partial hour (rounded up or down to the nearest quarter hour) of Health Support Technician services 6 hours per day for 180 school days (when students are present) and a minimum of six (6) mandatory days of training days.
5. Submission of completed monthly summary logs and completed monthly data

## **ATTACHMENT A Scope of Services**

collection forms for each school to the Florida Department of Health in Broward County (DOH-Broward) Contract Manager by the 10th day of the month following the month being reported.

6. Clinical Nurse Manager is to conduct on-site quality assurance for each of the 38 schools one time per quarter utilizing the School Health Room Review Sheet (Exhibit 17) and the School Health Record Review Worksheet (Exhibit 18) and document findings. Upon completion of these forms they should be placed in the Health Room binder.
7. Submission of all information necessary for the completion of the Annual School Health Services Report to the DOH-Broward Contract Manager by July 15.
8. Submission of the In-Kind Services in Full Service Schools no later than July 15 to the DOH- Broward Contract Manager.
9. Provide a substitute HST/RN to a school within 2 hours of being advised of an HST/RN absence. If an HST cannot be substituted within the 2 hour time frame the RN supervisor must go to the HSTs assigned school to provide coverage for that day/s. If an RN supervisor is absent the Program Manager must provide the oversight of the absent RN supervisor's five (5) schools.
10. Provider shall submit a sign-in sheet and agenda for all five (5) required days of training.

### **C. Staffing Levels**

1. Provider will maintain an administrative organizational structure sufficient to discharge its contractual responsibilities. The Provider shall assign Registered Nurses (RN) and Unlicensed Assistive Personnel (UAP) otherwise known as Health Support Technicians (HST) to specific schools with the expectation that the Provider's employee will remain assigned to that school absent the resignation or separation of the employee from the Provider or a request to move or remove the RN or HST from the school as determined by DOH-Broward. Provider must replace any employee whose continued presence would be detrimental to the success of the program with an employee of equal or superior qualifications. DOH-Broward will endeavor to provide no less than 3 days' notice but, in any event, such replacement must be made immediately if such action is requested by the DOH-Broward Contract Manager. Information to document staffing configuration for basic school health services and full services school specialized services that may include: nutritional services, basic medical services, aid to dependent children, parenting skills, counseling for abused children, counseling for children at high risk for delinquent behavior and their parents, and adult education will be provided to the DOH-Broward Contract Manager for inclusion in the Annual School Health Services Report each year for the duration of this contract. There shall be one (1) FTE Clinical Nurse Manager to oversee the School Health Program and Staff, seven (7) RN Supervisors, three (3) RN's and 35 HSTs. Each RN Supervisor shall supervise five HSTs at five different schools as assigned by the department. If staff in any of these positions, with the exception of the HSTs, is absent or the position is vacant, the direct supervisor of the person in that position will be responsible for covering the position until the return of staff or the position is filled.

**ATTACHMENT A  
Scope of Services**

2.

# of Positions	Position Title	Education	Experience	Duties	Days/Hours
1	Clinical Nurse Manager	Registered Nurse, currently licensed with a clear/active status under Chapter 464 F.S., and a Bachelor's Degree. Current Healthcare Provider CPR with the American Heart Association	School Health Program Management or similar experience. Two (2) years supervisory experience.	See Roles and Responsibilities (Exhibit 22)	Year Round Full Time Position. Monday-Friday 40 hour work week.
7	Registered Nurse Supervisors	Registered Nurse, currently licensed with a clear/active status under Chapter 464 F.S. Current Healthcare Provider CPR with the American Heart Association	One (1) year experience as a Registered Nurse supervising an unlicensed assistive personnel or HST. School Health or pediatric nursing preferred.	See Roles and Responsibilities (Exhibit 22)	Full Time Position 8 hours per day (180 days when students are present, a minimum of six (6) mandatory days of training days, 2 days prior to beginning of school year and 1 day after the end of the school year).
3	Registered Nurses	Registered Nurses, currently licensed with a clear/active status under Chapter 464 F.S. Current Healthcare Provider CPR with the American Heart Association	School Health or pediatric nursing preferred.	See Roles and Responsibilities (Exhibit 22)	6 hours per day for 180 school days (when students are present) and a minimum of six (6) mandatory days of training days.
35	Health Support Technicians	High School Diploma or GED. Current/Active certification in First Aid and Cardiopulmonary Resuscitation (CPR) per 64F-6.004 F.A.C.	One (1) year providing direct patient care services of a medical nature.	See Roles and Responsibilities (Exhibit 22)	6 hours per day for 180 school days (when students are present) and a minimum of six (6) mandatory days of training days.



**ATTACHMENT B  
PRICE PAGE**

A single award solicitation will be made to the responsive, responsible Provider offering the lowest grand total for the services requested in this solicitation not exceeding \$1,053,256 per year. Hourly rate will control in case of any mathematical error.

\*\*The estimated quantities of hours per position in this Invitation to Bid are only to be used in determining bid prices and not to be considered as definite quantities to be ordered by the Department. The ordered quantities may be less than or greater than those stated in this solicitation at no penalty to the Department.\*\*

**Initial Year Term August 2017 - July 2018**

Description	Quantity (Positions)	Hours Per Position	Hourly Rate	Total
Clinical Nurse Supervisor Services	1	x 2008	x \$ _____ =	\$ _____
RN Supervisor Services	7	x 1512	x \$ _____ =	\$ _____
School Nurse services	3	x 1116	x \$ _____ =	\$ _____
Health Support Technician (HST)* Services	35	x 1116	x \$ _____ =	\$ _____

**Initial Year Term Total: \$ \_\_\_\_\_**

**Renewal Term 1 August 2018 - July 2019**

Description	Quantity (Positions)	Hours Per Position	Hourly Rate	Total
Clinical Nurse Supervisor Services	1	x 2008	x \$ _____ =	\$ _____
RN Supervisor Services	7	x 1512	x \$ _____ =	\$ _____
School Nurse services	3	x 1116	x \$ _____ =	\$ _____
Health Support Technician (HST)* Services	35	x 1116	x \$ _____ =	\$ _____

**ATTACHMENT B  
PRICE PAGE**

**Renewal Term 2 August 2019 - July 2020**

<b>Description</b>	<b>Quantity (Positions)</b>	<b>Hours Per Position</b>	<b>Hourly Rate</b>	<b>Total</b>
Clinical Nurse Supervisor Services	1	x 2008	x \$ _____ =	\$ _____
RN Supervisor Services	7	x 1512	x \$ _____ =	\$ _____
School Nurse services	3	x 1116	x \$ _____ =	\$ _____
Health Support Technician (HST)* Services	35	x 1116	x \$ _____ =	\$ _____

**Renewal Term 3 August 2020 - July 2021**

<b>Description</b>	<b>Quantity (Positions)</b>	<b>Hours Per Position</b>	<b>Hourly Rate</b>	<b>Total</b>
Clinical Nurse Supervisor Services	1	x 2008	x \$ _____ =	\$ _____
RN Supervisor Services	7	x 1512	x \$ _____ =	\$ _____
School Nurse services	3	x 1116	x \$ _____ =	\$ _____
Health Support Technician (HST)* Services	35	x 1116	x \$ _____ =	\$ _____

**Renewal Year Terms Total: \$ \_\_\_\_\_**

**GRAND TOTAL \$ \_\_\_\_\_  
(Initial Year Term plus Renewal Terms)**

**ATTACHMENT B  
PRICE PAGE**

**Provider Name:** \_\_\_\_\_

**Provider Mailing Address:** \_\_\_\_\_

**City-State-Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Federal Employer Identification Number (FEID):** \_\_\_\_\_

BY AFFIXING MY SIGNATURE ON THIS BID, I HEREBY STATE THAT I HAVE READ THE ENTIRE ITB TERMS, CONDITIONS, PROVISIONS AND SPECIFICATIONS AND ALL ITS ATTACHMENTS, INCLUDING THE REFERENCED PUR 1000 AND PUR 1001. I hereby certify that my company, its employees, and its principals agree to abide to all of the terms, conditions, provisions and specifications during the competitive solicitation and any resulting Contract including those contained in the **Standard Contract**.

**Signature of Authorized Representative\*:** \_\_\_\_\_

**Printed (Typed) Name and Title:** \_\_\_\_\_

\*An authorized representative is an officer of the Provider's organization who has legal authority to bind the organization to the provisions of the Bids. This usually is the President, Chairman of the Board, or owner of the entity. A document establishing delegated authority must be included with the Bid if signed by other than the President, Chairman or owner.

**ATTACHMENT C  
REFERENCE FORM**

Provider's Name:

---

Providers must provide contact information for three references evidencing one year of experience between 2012 and 2017 in providing basic school health services, as defined in Section 1.3, in at least 30 schools. Providers must use this reference form to provide the required information. The Department reserves the right to contact any and all entities in the course of this solicitation in order to verify experience. Information received may be considered in the Department's determination of the Provider's responsibility. The Department's determination is not subject to review or challenge.

1.	<b>Company/Agency Name:</b>		
	<b>Address:</b>		
	<b>City, State, Zip:</b>		
	<b>Contact Name:</b>		
	<b>Contact Phone:</b>		
	<b>Contact Email Address:</b>		
	<b>If <u>school based</u> reference, be specific in type of service and number of schools serviced:</b>	# of Schools serviced:	
		Type of services provided:	
	<b>If non-school based reference, be specific in describing services provided:</b>	Type of services provided:	
	<b>Service Dates:</b>		
<b>Approximate Contract Value:</b>	\$		
2.	<b>Company/Agency Name:</b>		
	<b>Address:</b>		
	<b>City, State, Zip:</b>		
	<b>Contact Name:</b>		
	<b>Contact Phone:</b>		
	<b>Contact Email Address:</b>		
	<b>If <u>school based</u> reference, be specific in type of service and number of schools serviced:</b>	# of Schools serviced:	
		Type of services provided:	
	<b>If non-school based reference, be specific in describing services provided:</b>	Type of services provided:	
	<b>Service Dates:</b>		
<b>Approximate Contract Value:</b>	\$		

**ATTACHMENT C  
REFERENCE FORM**

3.	<b>Company/Agency Name:</b>		
	<b>Address:</b>		
	<b>City, State, Zip:</b>		
	<b>Contact Name:</b>		
	<b>Contact Phone:</b>		
	<b>Contact Email Address:</b>		
	<b>If <u>school based</u> reference, be specific in type of service and number of schools serviced:</b>	# of Schools serviced:	
		Type of services provided:	
	<b>If non-school based reference, be specific in describing services provided:</b>	Type of services provided:	
	<b>Service Dates:</b>		
<b>Approximate Contract Value:</b>	\$		

**ATTACHMENT D  
STATEMENT OF NON-COLLUSION**

I hereby certify that my company, its employees, and its principals, had no involvement in performing a feasibility study of the implementation of the subject Contract, in the drafting of this solicitation document, or in developing the subject program. Further, my company, its employees, and principals, engaged in no collusion in the development of the instant Bid, proposal or reply. This Bid, proposal or reply is made in good faith and there has been no violation of the provisions of Chapter 287, Florida Statutes, the Administrative Code Rules promulgated pursuant thereto, or any procurement policy of the Department of Health. I certify I have full authority to legally bind the Provider, Respondent, or Vendor to the provisions of this Bid, proposal or reply.

\_\_\_\_\_  
Signature of Authorized Representative\*

\_\_\_\_\_  
Date

\*An authorized representative is an officer of the Provider's organization who has legal authority to bind the organization to the provisions of the Bids. This usually is the President, Chairman of the Board, or owner of the entity. A document establishing delegated authority must be included with the Bid if signed by other than the President, Chairman or owner.

**ATTACHMENT E  
ORGANIZATIONAL PROFILE**

<b>1. Numbers of Full Time Equivalent (FTE) in your company as of submission date:</b>	
<b>2. Numbers of contracted employees in your company as of submission date:</b>	
<b>3. Number of years in business:</b>	
<b>4. Name of the Director of Healthcare and attach a copy of the Director's clear/active license as a healthcare provider:</b>	Name of the Director of Healthcare:
	Type of License and License #