

## **Interlocal Agreement for Community Health Screenings Between City of Austin and Austin Independent School District**

This Interlocal Agreement for Community Health Screenings is between the City of Austin ("City"), a Texas municipal corporation, through its Health and Human Services Department's Community Health Initiative program, and the Austin Independent School District ("AISD"), and sets forth the terms and conditions under which the parties will participate in outreach activities related to health screenings for AISD students from low income families.

### **A. Purpose**

This Agreement reflects the common commitment of the City and AISD to address the public health challenges facing certain low-income Austin residents, and reflects the intent of each party to work together toward achieving improved health screenings for students at LBJ High School and Pearce Middle School.

### **B. Roles and Responsibilities**

The City shall:

1. Provide licensed nurses to perform the following health screenings and education at LBJ High School and Pearce Middle School: blood pressure readings; blood sugar tests; diabetes information and group education, and obesity information. The screenings will occur during the each school's Fall and Spring semesters on dates and at times to be mutually agreed upon by the parties. Health screening services will be offered free of charge to adults and, as appropriate, to minors who are accompanied by a parent or who present valid consent forms signed by a parent or legal guardian.
2. Require City staff to comply with City policies, procedures and standing delegation orders.
3. Include City name on any promotional and educational materials
4. Re-check abnormal screening results and, when appropriate, recommend that the student or the student's parent follow-up with his or her private physician.
5. Provide needed screening equipment and supplies.
5. Provide sign in sheet (names only) and any appropriate consents or waivers.
6. Provide translator, if pre- arranged and staff is available.
7. Perform screenings with minimal disruption to other services being provided at the school.
8. Identify a City contact person to address questions, concerns, and arrange screening schedules.

9. Provide Austin ISD School Health Coordinator with an evaluation of the program annually.

Each school shall:

1. Provide private office space with sufficient seating.
2. Provide sufficient space and furniture for the screenings, including space for equipment and staff.
3. Provide utilities and disposal of any trash generated during screening events.
4. Coordinate the distribution of information about upcoming screening events to students and parents.
5. In advance of each screening event, coordinate the distribution of consent and waiver forms provided by City to students' parents.
6. Identify a contact person at each school who will address questions, concerns, and arrange screening schedules. The school contact person shall be present whenever screening services are being provided by the City staff.
7. Require school staff to comply with applicable local, state and federal laws, and require students to comply with school rules and policies.
8. Provide assistance from school staff to supervise students who participate in the health screenings.

#### **C. Funding**

This shall not be construed to commit either party to provide any funding.

**D. Services Limited to Screenings.** AISD and the schools acknowledge that the City will not be providing medical treatment or diagnoses to students under this Agreement. Services shall be limited to those health screenings determined to be appropriate by the Medical Director of the City's Health and Human Services Department. Screening services shall be provided only to students enrolled at a school who either: 1) present a signed written authorization from a parent or legal guardian, or 2) present valid photo identification showing they are at least 18 years of age.

#### **D. Term/Amendment**

This agreement shall commence on March 1, 2010 and terminate on September 1, 2010. The parties may renew the agreement for up to three (3) additional one-year terms. Either party may terminate this Agreement at any time with or without cause by providing not less than twenty-one (21) days written notice to the other party, at the addresses or facsimile numbers set forth

below. This agreement may be modified only in a writing signed by an authorized official of each party.

**E. Notices/Contacts**

Any notice to the other party under this Agreement shall be sent, via confirmed facsimile or certified mail, return receipt requested, to the following address:

**To City:**

City of Austin  
David Lurie, Director, Health & Human Services Department  
7201 Levander Loop, Building E  
Austin, Texas 78702

Facsimile: 512-972-5016

**To AISD:**

Dr. Meria Carstarphen  
Austin ISD  
1111 W. 6<sup>th</sup> St  
Austin, Texas 78703  
Facsimile: 512-414-1486  
Telephone: 512-414-2412

**CITY OF AUSTIN**  
**Health & Human Services Department**

**By:** \_\_\_\_\_  
Bert Lumbreras, Assistant City Manager

**Date:** \_\_\_\_\_

**AUSTIN INDEPENDENT SCHOOL DISTRICT**

**By:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_