

From:

Through:

To: The Honorable Karen Graf, Chair, and Members of the Alexandria City School Board

Date:

Topic: School Health Advisory Board 2015-16 End of Year Report

The School Health Advisory Board accomplished the following items during the SY 2015-2016:

- Worked on health access outreach for uninsured families to increase participation in FAMIS and FAMIS Plus and use of local safety net providers. (See Attachment A. SHAB Health Outreach Access Report)
- Monitored ongoing programs, needs and implementation of school-based healthcare initiatives including general nursing care, oral health screenings, the Teen Wellness Center and the WOW Bus.
- Reviewed new Federal Food and Nutrition Services guidelines and Smart Snacks and drafted relevant policy.
- Analyzed weight status (BMI) data from incoming Kindergartners for school year 2014-2015 and wrote up findings in a report submitted to ACPS for review. (Attachment B forthcoming)
- Monitored problems with substance abuse and reviewed Youth Risk Behavior Survey (YRBS) data. Oversaw coordination of results to various preventive programming for students. (See Attachment C. SAPCA Recommendations based on 2013-2014 YRBS Data)
- Reviewed Family Life Education (FLE) curriculum implementation process. (See Attachments D. and E. for FLE reports by Michael Humphreys)
- Research national best practices for required daily physical activity.
- Encouraged staff to incorporate exercise and movement into daily activities, including the support of bike and walk to school programs and movement during classes.
- Monitored ACPS strategic plan implementation of health and wellness goals. Advise pursuance of a federal grant for a School Based Health Center.
- Edited, approved, and updated SHAB By-Laws. ((See Attachment F. SHAB Bylaws)

ATTACHMENT A.

SHAB Health Access Outreach Project April 6, 2016

2016-17 Goals

- Prepare data summary on health coverage for Alexandria children including total number of uninsured and estimate of children eligible for coverage but not enrolled.
- Disseminate data summary to School Board, Administrators and School Support Teams
- Monitor ACPS efforts to identify uninsured students eligible for coverage and make referrals for enrollment assistance.

2015-16 Goals Completed

- Updated outreach flyer to prepare for fall 2015 federal marketplace open enrollment period.
- Ensured distribution of flyer through back-to-school packets.
- Prepared and disseminated data summary on health coverage for Alexandria children.
- Presented materials to PTAC and did outreach to PTAs.
- Posted updated materials on ACPS website.

2014-15 Goals Completed

- Updated technical assistance paper and outreach flyer to prepare for fall 2014 federal marketplace open enrollment period.
- Ensured distribution of flyer through back-to-school packets.
- Posted updated paper and flyer on ACPS website; worked with staff to improve navigability to make documents more accessible.
- Presented project update and materials to PTAC and interested WOW Bus schools.

2013-14 Goals Completed

- Finalized and distributed one-page flyer for families in four languages.
- Held informational forum for all School Support Teams.
- Held informational sessions for PTAC and WOW Bus schools.
- Coordinated outreach between WOW Bus provider and potential patients.
- Coordinated outreach to families with Virginia Health Insurance Exchange navigator.

2012-13 Goals Completed

- Reviewed ACPS health coverage outreach practices.
- Gathered and analyzed data available to show the number of uninsured children in Alexandria; also considered problem of families moving on and off coverage throughout the year.
- Gathered information about new federal health coverage options available in 2014 through Virginia health insurance exchange.
- Evaluated information currently used to identify needs to support increased outreach efforts.
- Prepared technical assistance document for use by all ACPS Nurses, Administrators, Counselors and Social Workers.
- Drafted summarized one-page outreach brief for families.
- Reported back to School Board on outreach education efforts.
- Held informational session for administrators.

ATTACHMENT B.

DRAFT

ATTACHMENT C.



School Health Advisory Board Meeting
March 17, 2015

Based on the 2013 - 2014 Youth Risk Behavior Survey the Substance Abuse Prevention Coalition of Alexandria recommends the following activities to address youth substance use among Alexandria youth:

YRBS Finding: The youth usage rate is highest among 12th grade students for all substances. Twelfth graders also have the lowest perception of risk from regular use of alcohol and marijuana than any other grade level. Substance abuse prevention curriculum and/or programming is currently delivered during health class which ends in tenth grade.

Recommendation: Provide substance abuse prevention curriculum/programming to students through 12th grade.

YRBS Finding: The perception of risk from marijuana use significantly declined among high school students since 2011. Youth lack the proper information and are unaware of the consequences of youth marijuana use.

Recommendation: Increase education on the harms of youth marijuana use and the impact youth use will have on the adolescent brain.

Based on the YRBS findings and the needs of the Alexandria's youth, SAPCA recommends the following:

Recommendation: Provide annual professional development opportunities for physical education and health teachers to improve their knowledge and understanding of youth substance use and the risks associated with use. Health and physical education teachers lead the prevention efforts among Alexandria youth, educating youth on the harms of youth substance use. Teachers need support and professional development opportunities to learn about the harms of youth substance use and understand the latest research on the adolescent brain.

ATTACHMENT D.

Status of Family Life Education Curriculum

Mike Humphreys

1/21/16

- At present, only those teachers who have taken the Human Sexuality course—or are able to demonstrate an equivalent content base via undergraduate or graduate studies—are permitted to teach Family Life. Currently, the division offers one fall class and one spring class of Human Sexuality with plans to expand to a summer offering. While many PE teachers and traditional classroom teachers have taken the course, FLE content is almost exclusively delivered by classroom teachers.
- The new curriculum at the elementary level is still in production. I have planned for a February 8th announcement that the new curriculum is on Blackboard and up for ACPS employee review—with adjustments and additions to be made over the summer and implemented fall of 2016. Members of this board will also be invited to review the new guides. This announcement will be supplemented by my visits to elementary school staff meetings to ensure teachers are aware of the release and review. At the middle school level, training in a new program entitled *Draw the Line/Respect the Line* will begin in March with implementation in two of our three middle schools to follow immediately. It is an evidenced-based curriculum with 6 - 8 modules offered to students in all three grades. At the 9th grade level, Human Growth & Development teachers have recently been trained in a similar program, *Be Proud!, Be Responsible!*, and are currently seeking methods of implementation in their classrooms.
- Implementation at the elementary level should take place at all schools beginning at the end of this year at the beginning of next. With hopes of creating a summer “certification” class, more teachers should be qualified to teach FLE. And beginning next year, once a curriculum is in place at the elementary level, schools will be more accountable as to how each grade level is receiving FLE instruction. I will lead discussions with principals and create a matrix that allows for the tracking of content delivery in each building. At the middle school level, I will work with several teachers in the late spring or over the summer to revamp the existing curriculum including the *Draw the Line* program.
- I have developed a school-by-school spreadsheet that shows which teachers, according to our records, have either taken the course or are exempt based on background. I sent that list to the principals at the beginning of the school year and plan to do so annually moving forward.
- I would be very interested in developing a plan—especially at the younger grades—to measure the impact of the curriculum. Beyond the current survey data that exists, I don’t believe anything in place to measure effectiveness.
- Summing up, my biggest concern is implementation at each school and in each classroom (at the elementary level). The aforementioned matrix to keep track of who is providing the specific teaching at each school will be a nice step in this direction.

ATTACHMENT E.

FLE Questions and Answers March 17, 2016 SHAB Meeting

- 1 Are classroom or PE teachers being trained and teaching the new curriculum? If/where PE teachers are being trained instead of classroom teachers, please explain why. One elementary school reports that letters for parents of fourth grade students indicate that physical education teachers will teach content. Have Physical Education staff been included/informed of this decision?

The model in development will be for classroom teachers (with possible assistance from other student service employees) to implement the curriculum. In one school the PE teachers are implementing the curriculum presently, so letters home might be tailored in that fashion. A full curriculum rewrite is still in production with an end goal of May of this school year, a June – August vetting, and an implementation beginning next school year.

2. Is PE space, specifically elementary school gyms, the proper setting for this curriculum to be taught?

Not in most cases. As stated above, this is not the design of the curriculum implementation.

3. Have parent concerns been addressed regarding the fact that FLE classes will take the place of physical activity day during PE.

This is not the case.

4. Dissemination of information: Will everything come from you, Mike, regarding communicating the changes for implementation or are other staff involved as well? If it's the latter, how is it coordinated/standardized across all schools?

Initially, I will be the one communicating the messages. I will go through Dr. Piehota, Executive Director of Elementary Instruction, to reach the principals and other building-based administrators, but I will be the primary point of contact. Messaging is currently in place around the division that a new curriculum is in development and is expected to be implemented next year.

5. Schedule for teaching the content: Is there a template for a schedule for classroom teachers to follow instead of waiting until the end of the year to implement the curriculum?

Yes. There will be two models of implementation from which each building can choose. One will be through a regularly occurring weekly or bi-weekly FLE "period," and one will be with multiple lessons occurring in the same week, happening several times per year.

6. There are inconsistencies in the FLE parent letter on Bb in regards to opt-out procedures: one option is a yes/no choice which makes it easier for families to "opt out" of the program.

I am in the process of updating all FLE-related material on the website.

7. Please provide data on the number of families opting-out of FLE in ES, MS & HS and explain how ACPS ensures opt-outs are strictly for religious and other allowed reasons. (There is concern opt-out numbers increase at HS simply because of course-load management. If families are opting-out for the allowed reasons, there should not be an increase in percentage of opt-outs as students age.)

I know that for the elementary school and middle school levels, opt-out is low (I am in the process of trying to collect specific data at those levels). I have heard as many 40% opt out in 9th grade, and the thought is that most of it is because of competing classes (band, foreign language, STEM Academy, etc.).

ATTACHMENT F.

ADVISORY COMMITTEES TO THE ALEXANDRIA SCHOOL BOARD

SCHOOL HEALTH ADVISORY BOARD

BY-LAWS

REGULATIONS GOVERNING SCHOOL HEALTH SERVICES

The School Health Services Program seeks to strengthen and facilitate the educational process by improving and protecting the health of children and by identification and assistance in the removal or modification of health related barriers to the learning process for individual children.

The major focus of school health services is the prevention of illness and disability, and the early detection and correction of health related problems.

MISSION

The mission of the School Health Advisory Board (SHAB) is to assist with the development of health policies in the school division and the evaluation of the status of school health, health education, the school environment and health services.

PREFACE

The Advisory Committee By-Laws have been created to assist the staff, parents and community members of Alexandria City Public Schools in their roles and interactions with the School Health Services Program.

Section 22.1-275.1 of the *Code of Virginia* provides guidance to school divisions about establishing SHABs to assist with the development of health policies and with the evaluation of school health programs and services. It is intended that the local school board receive recommendations of the school health advisory board procedures relating to children with acute or chronic illnesses or conditions, including, but not limited to, appropriate emergency procedures for any life threatening conditions and designation of school personnel to implement the appropriate emergency procedures. The procedures relating to children with acute or chronic illnesses or conditions shall be developed with due consideration of the size and staffing of the schools within the jurisdiction.

MEMBERSHIP

1) The Code of Virginia establishes specific requirements for the number of the SHAB members, which shall consist of no more than twenty members to include broad-based community representation including but not limited to, parents, students, health professionals, educators and others. Membership in Alexandria City Public Schools' SHAB continues to be diverse among parents, students, health professionals and community groups. Members shall be appointed by the Alexandria City Public School Board.

2) Members must attend 75% of meetings held to maintain active membership status.

BOARD OFFICERS

- 1) Chairperson
- 2) School Board Liaison

MEETINGS

- 1) The School Health Advisory Board shall meet at least semi-annually between September and June. A schedule of meeting dates and times are determined no later than the first SHAB meeting of each school year.
- 2) The first meeting shall be convened no later than October of each school year.

OPERATIONS AND PROCEDURES

- 1) Topics explored and discussed by the School Health Advisory Board shall reflect current conditions and latest research findings on various school health-related issues.
- 2) Coordinate presentations and consult with local and regional agencies that may have an impact on the School Health Services Program.
- 3) Facilitate committee discussions and serve on subcommittees when recommendations come before the advisory committee.
- 4) The School Health Advisory Board shall forward to the School Board a report of committee activities and recommendation with supporting documents no later than July 1st of each year.

EXCEPTIONS

The School Board may make exceptions to these practices and procedures as it deems appropriate.

Adopted: March 17th, 2016