

Fiscal Year 2015 Annual Report of the Texas School Health Advisory Committee

Name of advisory committee:

Texas School Health Advisory Committee

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Reporting period: July 1, 2014 – June 30, 2015

This advisory committee was created by state law and is partially (with the exception of §2110.008) subject to Texas Government Code, Chapter 2110. A reporting requirement is contained in rules found in Texas Administrative Code Chapter 37.350. The rule states:

The committee shall file an annual written report to the council.

1. The report shall list the meeting dates of the committee and any subcommittees, the attendance records of its members, a brief description of actions taken by the committee, a description of how the committee has accomplished the tasks given to the committee by the council, the status of any rules which were recommended by the committee to the council and anticipated activities of the committee for the next year.
2. The report shall identify the costs related to the committee's existence, including the cost of agency staff time spent in support of the committee's activities.
3. The report shall cover the meetings and activities in the immediate preceding 12 months and shall be filed with the council each June. The presiding officer and appropriate department staff shall sign it.

Part 1 – Review

1. **Description of the advisory committee, the committee's purpose, statutory authority, number and type of members, names of current members, and the number of meetings held over the past year.**

A. Committee Background and Purpose:

The Texas School Health Advisory Committee (TSHAC) was created by Senate Bill 42, 79th Legislature, Regular Session, 2005. Now codified in the Health and Safety Code, Section 1001.0711, the purpose of the TSHAC is to provide assistance to the State Health Services Council (council) in establishing a leadership role for the Texas Department of State Health Services (DSHS) in the support for and delivery of coordinated school health (CSH) programs and school health services. The TSHAC rules have been promulgated and are published in the Texas Administrative Code, Title 25, Part 1, Section 37.350.

The state-level advisory committee's membership reflects the diversity of school health issues and adds another level of professional expertise to the systematic dissemination of CSH programming and school health services in Texas.

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B. Membership:

By law, one representative from the Texas Education Agency (TEA) and one representative from the Texas Department of Agriculture (TDA) serve as members of the committee. By rule, the coordinator of the DSHS School Health Program and a representative of the Governor's Advisory Council on Physical Fitness (GACPF) serve as members along with 17 additional appointees. By rule, the criteria for membership specifically reflects the Centers for Disease Control and Prevention's CSH approach for integrating health-promoting practices in the school setting, including:

- Health Education
- Nutrition Environment and Services
- Employee Wellness
- Social and Emotional School Climate
- Physical Environment
- Health Services
- Counseling, Psychological, and Social Services
- Community Involvement
- Family Engagement
- Physical Education and Physical Activity

The criteria for membership can be reviewed at
<http://www.dshs.state.tx.us/schoolhealth/tshac/memberlist.shtm>.

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The following individuals are currently members of the TSHAC:

Members	Category
Debra Burnett, RN , School Nurse, Goodnight Middle School, San Marcos	Registered Nurse
Cynthia Cardenas Weslaco	Parent/Consumer
Robert Conlon, PhD , Whole Child Strategies PLLC, Sugarland	Counseling and Mental Health
William Coon , President/CEO, YMCA of El Paso, El Paso	Parent/Consumer
Susan Donnenfield, RN , School Nurse, Akiba Academy/Yavneh of Dallas, Dallas	Parent/Consumer
Melissa Dozier , Food and Nutrition Policy Liaison, Texas Department of Agriculture, Austin	Required by Law
Barney Fudge , Statewide Coordinator for Health Education, Texas Education Agency, Austin	Required by Law
Wrennah Gabbert, RN, PhD, CPNP, FNP-BC , Professor and Senior Associate Dean, Texas Tech University, Health Science Center, El Paso <i>TSHAC Assistant Presiding Officer</i>	Agency/Organization
Joan Guerin Lavis, MBA , Independent Facilitator, Love and Logic, Academic Tutor, El Paso	Parent/Consumer
Gilbert Handal, MD , Professor, Texas Tech University, Health Science Center, El Paso	Physician
Jan Hungate, EdD , Assistant Superintendent, West ISD, West <i>TSHAC Presiding Officer</i>	School Administrator
Carmela James, EdD, CSC , Counselor, Pasadena ISD, Pasadena	School Administrator
Steven Kelder, PhD, MPH , Associate Regional Dean, UT School of Public Health; Co- Director, Michael and Susan Dell Center for Healthy Living, Austin	Agency/Organization
Tamalyn Neuendorff , Social Studies Teacher, Columbus Jr. High, Columbus	Physical Educator
Kelly Reed-Hirsch, MPH, CHES , Public Health Program Manager, Harris County Public Health and Environmental Services, Houston	Agency/Organization
Becky Rendon, RN , School Nurse, Jackson Middle School, San Antonio	Parent/Consumer
Dora Rivas, RD , Executive Director, Food and Child Nutrition Services, Dallas ISD, Dallas	Nutrition Services
Josette Saxton, MSSW , Mental Health Policy Associate, Texans Care for Children, Austin	Agency/Organization
Linda Seewald, MEd , Director of Health and Physical Education, Northside ISD, San Antonio	Health Educator
Reenie Smith, MSci , Senior Lecturer, Health and Human Performance Dept., Texas State University, San Marcos, Member, Governor's Advisory Council on Physical Fitness	Required by Rule
Anita Wheeler-Hill, MSN, RN , Coordinator, School Health Program, Texas Department of State Health Services, Austin	Required by Rule

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The TSHAC committee met five times during fiscal year 2015: September 8, 2014; November 10, 2014; January 12, 2015; March 3, 2015; and May 11, 2015. Minutes of all meetings were forwarded to the council as required by rule, and are available online at www.dshs.state.tx.us/schoolhealth/shadvisecalendar.shtm. Attendance records for each meeting are included in minutes.

Meetings have been scheduled for fiscal year 2016 as follows: September 14, 2015; November 9, 2015; January 11, 2016; March 7, 2016; and May 9, 2016.

2. Overview of the activities of the advisory committee over the past year including major accomplishments, as well as future activities and plans.

The committee spent fiscal year 2015 assessing, studying, and framing the priority recommendation and resource documents to be developed during fiscal year 2016, derived from objectives identified in its new five-year plan.

Additionally, to comply with the TSHAC Document Revision Schedule, several documents were revised and approved by the committee.

A. Document Revisions

1. Bullying Prevention Toolkit
2. SHAC Self-Assessment
3. Research and Recommendation of Student Consumption of Regular and Diet Sodas in High Schools
4. Coordinated School Health Data Sets
5. SHAC Annual Progress Report to the Board of Trustees

The revised documents were posted on the TSHAC website and promoted through the DSHS *Friday Beat* e-newsletter to TSHAC stakeholder subscribers and through partner e-transmissions and websites. To view the revised documents, go to <http://www.dshs.state.tx.us/schoolhealth/shadviserecommendations.shtm> and <http://www.dshs.state.tx.us/schoolhealth/shadviseresources.shtm>.

B. Current and Future Projects

The TSHAC is currently working on the following projects as determined by its new five-year plan, expected to be fully or mostly completed during Fiscal Year 2016:

1. Mental Health and Suicide Prevention Resources Toolkit
2. Research and Recommendation on Health Issues and Parent Involvement
3. Research and Recommendation on Physical Activity and Academic Achievement
4. Research and Recommendation on Safe School Climate

C. Document Revisions for fiscal year 2016

The following documents will be revised in compliance with the committee's document revision schedule:

1. Research and Recommendation on Recess and Physical Activity: Impact on Student Health and Academics

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2. Research and Recommendation on Physical Activity
3. Research and Recommendation on Health Education for all Texas Students, Kindergarten through 12th Grade
4. Resolution Supporting Inclusive Practices for Students with Exceptionalities in Texas Public Schools
5. Childhood Obesity Prevention Resolution
6. Resources for Students and Families Dealing with Economic Crisis
7. School Bus and Automobile Idling
8. School Health Initiative Screening Tool
9. Benefits to Students in School Districts that Prohibit Physical Education as Punishment

D. Partner Collaboration

An exchange of ideas and information occurred among partners such as TEA, TDA, and GACPF during TSHAC meetings. Discussions and recommendations focused on statewide resources and initiatives as well as shared objectives.

E. Work Plan

The TSHAC continues to move toward its vision of “healthier Texans through coordinated school health” by following a well-designed plan. The first plan was initiated in fiscal year 2007, and the objectives and strategies of that plan have been completed or are ongoing at this time. The TSHAC is working on its second five-year plan. Objectives have been identified and prioritized, and assignments made. Priority objectives are currently undergoing development.

3. Challenges encountered by the advisory committee over the past year and how they were addressed.

- A. Past funding cuts in education and health and changes in the school health laws have presented challenges for the TSHAC in regard to its ability to completely administer its charge.
- B. In light of these barriers, the TSHAC has realized, now more than ever, the importance of continuing to develop tools and resources needed by schools to help navigate these overarching changes.
- C. By statute, the majority of members cannot be reimbursed for travel expenses. Because of budget concerns, some of these members find it difficult to travel to all of the TSHAC meetings. Therefore, exploring alternative ways to conduct meetings is ongoing. One member has chosen to participate by teleconference which is now offered as a communication option.

4. Why is this advisory committee useful to the agency?

Issues and priorities identified by the TSHAC provide focus for the DSHS School Health Program. The TSHAC priorities reinforce the importance of coordinating chronic disease prevention and health promotion initiatives, beginning with the school-age population.

The TSHAC helps support public health priorities by recommending, developing, and implementing initiatives based on school health legislation. The Legislature relies on the expertise of the TSHAC

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by charging it with specific duties (e.g., the Legislature required TSHAC to assist TEA in the development of rules that address physical activity requirements and CSH program recommendations.)

By focusing on its mission, described as its “charge” in the statute, the TSHAC furthers its goals by forging new partnerships, maintaining current ones, and strengthening others. The TSHAC serves as a central coordinating resource in assisting state agencies, organizations, and local SHACs with the creation or revision of school health documents and tools impacting the health of students and staff at the school site.

The TSHAC provides specific resources for local districts to facilitate and guide their work and provides a structure for the local SHACs to evaluate and report their progress to local school boards and the school community.

5. Additional information pertinent to the committee.

All recommendation and resource documents are exclusively created by TSHAC work groups to address relevant and priority school health topics important to school districts. These resources fill gaps in available resources and serve as valuable tools for school districts and local SHACs. The TSHAC will continue to focus on gaps in school health resources and new and emerging issues, determine its capacity to fill these gaps, respond to requests, and further its assistance to local SHACs. The Bullying Prevention Toolkit is an example of a product developed by the TSHAC to fulfill a need identified by local SHACs.

Part 2 – Evaluation

6. Costs related to the advisory committee.

A. Travel and related reimbursements for committee members:
\$3,370.

B. Agency staff time and salary: The estimated annual staff time dedicated to the TSHAC is 719 hours. The annual related salary expense is \$20,053. The primary staff supporting the TSHAC are:

1. Information Specialist III:
20 percent of time allocated = \$10,398.
2. School Health Coordinator/Program Specialist V:
15 percent of time allocated = \$9,655

C. Other expenses: Office supplies: \$600

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7. Summary of Activities and Recommendations.

A. Summary of Activities:

Just finishing its ninth year, the TSHAC has developed a new five-year work plan. Part of that plan involves the revision of TSHAC-created documents to stay in compliance with the TSHAC Document Revision Schedule. The TSHAC also focuses on support for local SHACs by providing tools to address new and emerging issues and challenges, such as addressing parent involvement in school health issues.

The state agency representatives (DSHS, TEA, TDA, and GACPF) frequently poll member opinions and seek recommendations in areas beyond legislated requirements. TSHAC members have also made recommendations in the areas of school health services, CSH, and local SHAC infrastructure.

The members' commitment to sharing best practices is evident during discussions and the careful screening of resources posted on the DSHS school health website from local districts and local SHACs. Dissemination of information and research is a critical component of the work plan, and every meeting includes some action related to communication with school health stakeholders.

B. Recommendations:

The following recommendations are presented for consideration by the council:

1. Encourage state agencies to utilize the expertise of the TSHAC when:
 - a. promulgating or amending rules and regulations related to the health of students in schools and requirements for local SHACs;
 - b. addressing CSH programs and services; and
 - c. developing or revising school health education programs.

2. Explore collaboration between new traditional and non-traditional partners to further the TSHAC mission and goals.

