

**TO:** Honorable Mark R. Wilkoff, Chairman of Alexandria City School Board

**FROM:** Roszena Sutton, Staff Liaison of Alexandria City School Health Advisory Board

**RE:** School Health Advisory Board 2003-2004 Annual Report

**DATE:** June 10, 2004

The School Health Advisory Board met 6 times. The following is an outline of 2003-2004 committee activities.

**2003-2004 MEMBERSHIP:**

- New and returning members: Robert Bregman, Rose Berler, Dennis Burstein, Ronnie Campbell, Sophia Collins, Wendy Harper, Darhyl Jasper, Jackie Marson, Arthur Schmalz, Thomas Sullivan, Roszena Sutton, Robin Wallin, Olga Wright,

**ELECTIONS/VOTES:**

- Rose Berler was re-elected as the committee chairperson.

**REPORTS AND PRESENTATIONS MADE TO THE SCHOOL BOARD AND OTHER ACPS GROUPS:**

- A written proposal to revise the current ACPS PPD policy was made to the School Board.
- Dr. Bregman gave a presentation on the prevention of childhood obesity at the March 2004 Principals' Council.

**PRESENTATIONS MADE TO SHAB:**

- Patrick Devereaux on Megan's Law
- Special Education Panel-Michael Carrasco, Anne Lipnick, Chris Roman gave an overview on Special Education
- Lisa Baker, Office of Women on Alexandria Teen Pregnancy Prevention Plan and the 2002 Teen Pregnancy Report
- Becky Bomokos-Bays, ACPS Director of Food Services gave an Overview of Food Services and the Nutrition Integrity Proposal

**RESEARCH:**

- The committee conducted extensive research on Tuberculosis to assist in the development of the ACPS PPD policy change proposal.
- Committee members participated in the ongoing Alexandria Community Health Assessment

## **School Health Advisory Board 2003-2004 Annual Report**

### **COMMITTEE DISCUSSIONS:**

- Review of SHAB purpose and state requirements
- Development of SHAB By-laws
- Review, support and promotion of the Alexandria Student Physical and Immunization Fair
- Virginia Action for Healthy Kids meetings and efforts
- Immunization efforts:
  - A. The 5th Grade Hepatitis B Drive
  - B. The Middle School PPD Drive
- Welligent year two update and improvements noted in the documentation process
- Review of Access to Care for Kids efforts
- Partnership for Healthier Kids achievements and activities
- Support and celebration of the Carol M. Whit PEP Grant award
- BMI data collection
- Nutrition Program Offerings
- Childhood Obesity Prevention
- Playground Safety
- Introduction to the changes in School Health Centers' Supervision and Leadership Organization Structure
- ADHD--Vanderbilt
- Random dot Stereo Depth Perception Test

### **PUBLISHED LITERATURE/ ARTICLES READ AND DISCUSSED:**

- *Getting to the Heart of Diabetes*
- *Get Real*, Winter 2003 on Teenage Pregnancy Prevention
- Supt's Memo #196 on *Walk Smart* --November 21, 2003

**SCHOOL HEALTH ADVISORY BOARD (SHAB) ANNUAL REPORT FORM**  
**2003-04 SCHOOL YEAR**

**I. IDENTIFYING INFORMATION**

School Division: Alexandria City Public Schools  
SHAB Chairperson: Rose Berler  
Address: 5909 Kelley Court, Alexandria, VA 22312

Telephone: (703) 354-6340

Fax: (703) 931-0187

Person Completing this Report: Roszena Sutton  
Telephone: (703) 824-6650

Date: June 10, 2004  
Fax: (703) 931-0187

E-Mail Address: roszena.sutton@acps.k12.va.us

**II. STRUCTURE AND OPERATION OF YOUR SHAB**

**A. Membership**

Please identify the composition of your SHAB by marking the appropriate boxes with the number of SHAB members in each category. Count members in all appropriate categories; e.g., a member may be a "PTA representative" and a "Medical professional."

**Parent**

- 6 Parent of a school aged child
- 1 Parent of a medically fragile child
- 1 PTA representative
- \_\_\_\_\_ Resource center representative

**Community Representative**

- \_\_\_\_\_ Civic group
- \_\_\_\_\_ Religious group
- \_\_\_\_\_ Human services
- \_\_\_\_\_ Youth services

**Health Professional**

- 5 Medical
- \_\_\_\_\_ Dentistry
- \_\_\_\_\_ Mental Health
- 1 Public Health
- \_\_\_\_\_ Other (specify) \_\_\_\_\_

**Educator**

- 3 School nurse
- \_\_\_\_\_ Health Teacher
- \_\_\_\_\_ Physical Education Teacher
- \_\_\_\_\_ Other Teacher
- 2 Administrator
- \_\_\_\_\_ Program supervisor
- \_\_\_\_\_ Counselor
- \_\_\_\_\_ Food Services
- \_\_\_\_\_ Other (specify) \_\_\_\_\_

**Student**

**Miscellaneous**

- \_\_\_\_\_ Business
- \_\_\_\_\_ Government Official
- \_\_\_\_\_ Law Enforcement
- \_\_\_\_\_ Other (specify) \_\_\_\_\_

**Total number of members (unduplicated count): 12**

Does your School Health Advisory Board serve as the forum for leadership for multiple committees (e.g., part of PTA, Safe and Drug Free School Committee, etc.)? YES  NO   
If yes, explain:

Are there other boards in your school division that work on issues that might be relevant to your SHAB?  
YES  NO

If yes, list: PTA, Substance Abuse, Special Education, Family Life

**B. Meetings**

How many general meetings did your SHAB hold this school year (excluding subcommittee meetings)?  
6 meetings

How many subcommittee meetings did your SHAB hold this school year? 0 meetings  
List subcommittees: \_\_\_\_\_

**C. Reports**

How many reports did your SHAB make during this school year to:

(1) Your local school board? 1 Written reports        Oral reports

(2) Central office personnel? 1 Written reports        Oral reports

(3) Other groups?

(name) Principal's Council 1 Written reports 1 Oral reports

(name)        Written reports        Oral reports

**D. Operating Procedures**

Does your SHAB have operating procedures/bylaws?  
YES  NO

Have you made any changes to your operating procedures/bylaws for your SHAB in the past year?

YES  (please attach a copy if revised in the past year)

NO

**III. GOALS AND ACCOMPLISHMENTS**

**A. Goals**

In the first column, check the goals that were identified by your SHAB for this school year. In the second column, check the goals that were accomplished.

	<b>Identified Goals</b>	<b>Accomplished Goals</b>
<b>Health Services</b>		
Increase school nursing staff	<input type="checkbox"/>	<input type="checkbox"/>
Develop/improve school health services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Develop/improve student wellness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Review procedures for student health screening, record keeping, and referrals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Health Education/Instruction</b>		
Review health education curriculum	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Review health education assessment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Reduce teen pregnancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Develop/revise Family Life Education Curriculum	<input type="checkbox"/>	<input type="checkbox"/>
Revise HIV Policy for School Attendance	<input type="checkbox"/>	<input type="checkbox"/>
Reduce drug, alcohol, and/or tobacco use	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Healthy Environment</b>		
Review emergency/crisis medical situations	<input type="checkbox"/>	<input type="checkbox"/>
Review school health policies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Review school safety procedures	<input type="checkbox"/>	<input type="checkbox"/>
<b>Physical Education</b>		
Review physical education curriculum	<input type="checkbox"/>	<input type="checkbox"/>
Review physical education assessment	<input type="checkbox"/>	<input type="checkbox"/>
Review availability of instructional resources	<input type="checkbox"/>	<input type="checkbox"/>
Increase student's physical activity	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Nutrition Services</b>		
Review school nutrition program procedures and offerings	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Counseling</b>		
Review psychological and social services for diagnosing special needs for students	<input type="checkbox"/>	<input type="checkbox"/>
Review counseling services for helping students set education and social goals	<input type="checkbox"/>	<input type="checkbox"/>
<b>Staff Wellness</b>		
Review staff wellness initiatives	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	<b>Identified Goals</b>	<b>Accomplished Goals</b>
<b>Parent/Community Involvement</b>		
Improve parent communication/education	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Develop/maintain community partnerships	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Other</b>		
Conduct a needs assessment/data collection Please list topic(s): <u>PPD Policy</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Improve operations of SHAB	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

**B. Successes**

Please describe your SHAB's two greatest accomplishments this school year. What were your goals and what projects/activities were used to meet the identified goals? How many students did it impact? Who were your community partners? Add an additional sheet, if necessary.

The greatest accomplishments of SHAB this school year were in the areas of member participation, School Health Policy and Procedure, Physical Education/Activity and School Nutrition.

1. The committee was successful in accomplishing a variety of goals due to it's flexible meeting schedule that provided the opportunity for the appointed School Board Liaison to participate and convey our recommendations to the School Board.
3. One recommendation proposed to the School Board was the revision of the district's PPD policy as a school entry requirement. The School Board approved the policy revision and will implement a TB awareness/educational component in it's school registration process.
2. The committee continues to support and promote Alexandria's Annual Student Health and Immunization Fair in collaboration with participating local community agencies.
3. The ACPS SHAB gave support to the Physical Education Program in their successful efforts to obtain the the Carol M. Whit PEP Grant award. Funding from the grant went to erecting tread and climbing walls within the schools, securing heart rate monitors, launching a bicycle program and providing pedometers for every child in the district participating in physical education.
4. The committee provided recommendations in support of the efforts of the district's Food Services Program and continues to support their Nutrition Integrity Proposal

Will you allow the Virginia Department of Education to post/share information about your successes on its Web site? YES  NO

**IV. ADDITIONAL INFORMATION**

Use this space to provide additional information about your SHAB that you feel is important to share.

Use this space to indicate whether you would like some assistance from the VDH or DOE and the nature of the assistance needed.

## **SCHOOL HEALTH ADVISORY BOARD**

### 2004-2005 Point of Contact

Below, please provide the name of the individual you wish to serve as the point of contact for your local School Health Advisory Board (SHAB) during the 2004-05 school year. (In many localities, the SHAB chair or a school contact person serves this role.) Any resources or information relevant to SHABs will be distributed to this person.

Date Submitted: June 29, 2004

School Division: Alexandria City Public Schools

Name of "Point of Contact": Roszena Sutton

Position or Role on the SHAB: School Liaison

#### **Mailing**

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**Please return this form by July 1, 2004 (via fax, email or regular mail) to:**

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