



# ***School-Based Strategies***

## Facilitator

Mark Holmes, PhD

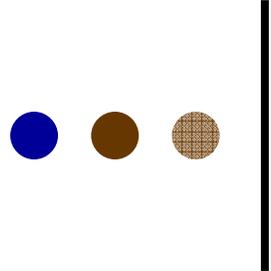
Vice President, North Carolina Institute of Medicine

## Content Experts

Paula Hudson Collins, MHDL, RHEd

Senior Policy Advisor, NC State Board of Education





# Agenda

**1:15-1:30:** Welcome, introductions and overview of Task Force's priority recommendations addressing public policies

**1:30-2:15:** Implementing Task Force priority recommendations

- What needs to be done?
- Who's going to take the lead?
- What other groups should be involved?

**2:15-2:30:** Implementation ideas for other recommendations





# Agenda

**1:15-1:30: Welcome, introductions and overview of Task Force's priority recommendations addressing public policies**

- **Rec. 4.3: Improve school health services**
- **Rec. 5.1: Increase high school graduation rates**
- **Rec. 5.2: Fund healthy school coordinators**
- **Rec. 10.2: Healthy food in middle and high school**

**1:30-2:15: Implementing Task Force priority recommendations**

- What needs to be done?
- Who's going to take the lead?
- What other groups should be involved?

**2:15-2:30: Implementation ideas for other recommendations**



# ● ● ● | Health and Clinical Care

- *Priority recommendation 4.3:* The NCGA should provide funding to the Division of Public Instruction and the Division of Public Health to work together and improve school-based health services in middle and high schools.
  - NCGA should appropriate \$7.8 M (R)(SFY 2011), and \$13.1 M (R) (SFY 2012) and additional funds in future years to support school-based or school-linked health centers, additional school nurses, and Child and Family Support teams (if effective).

# ● ● ● | Education Strategies

- *Priority recommendation 5.1*: NC State Board of Education and NC Department of Public Instruction should expand efforts to increase the high school graduation rates.
  - Information about evidence-based and promising practices should be provided to the NCGA along with any needed funding to support these efforts.

# ● ● ● | Education Strategies

- *Priority recommendation 5.2:* The NCGA should fund a local healthy schools coordinator in each local education agency (LEA) to support implementation of the coordinated school health approach.
  - NCGA should appropriate \$1.64M (R) increased by a similar amount each year up to \$11.5 M (R) (SFY 2017) to fund a healthy schools coordinator in each LEA, and an additional 3 positions at DPI to support local coordinated school health programs.



# Preventing Adult Chronic Disease

- *Priority recommendation 10.2:* North Carolina funders should fund pilot programs to deliver healthy meals in middle and high schools.



## Other School Recommendations Not Discussed in Other Breakouts

- 3.3: Funding for multi-faceted adolescent health demonstrations
- 4.4: Develop sixth grade school health assessment
- 5.3: Promote Youth Risk Behavior & School Health Profiles Survey
- 5.4: Improve Healthful Living curriculum
- 6.2: Strengthen DWI enforcement
- 6.3: Sports injury prevention
- 7.1: Substance abuse prevention in schools
- 7.3: Substance abuse prevention programs.
- 8.1: Enhance injury surveillance
- 9.2: Opt-out for reproductive health and safety education
- 10.3: Establish joint-use agreements



# Agenda

1:15-1:30: Welcome, introductions and overview of Task Force's priority recommendations addressing public policies

## **1:30-2:15: Implementing Task Force priority recommendations**

- **What needs to be done?**
- **Who's going to take the lead?**
- **What other groups should be involved?**

2:15-2:30: Implementation ideas for other recommendations





## Rec. 4.3: Improve school health services

- *What needs to be done:*
- *Who will take the lead:*
- *What other groups should be involved:*



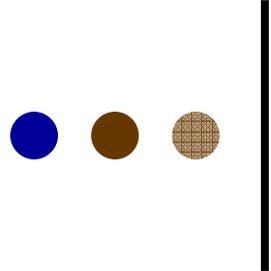
## Rec. 5.2: Fund healthy school coordinators

- *What needs to be done:*
- *Who will take the lead:*
- *What other groups should be involved:*



## Rec. 10.2: Healthy food in middle and high school

- *What needs to be done:*
- *Who will take the lead:*
- *What other groups should be involved:*



# Agenda

**1:15-1:30:** Welcome, introductions and overview of Task Force's priority recommendations addressing public policies

**1:30-2:15:** Implementing Task Force priority recommendations

- What needs to be done?
- Who's going to take the lead?
- What other groups should be involved?

**2:15-2:30: Implementation ideas for other recommendations**





## Other School Recommendations Not Discussed in Other Breakouts

- 3.3: Funding for multi-faceted adolescent health demonstrations
- 4.4: Develop sixth grade school health assessment
- 5.3: Promote Youth Risk Behavior & School Health Profiles Survey
- 5.4: Improve Healthful Living curriculum
- 6.2: Strengthen DWI enforcement
- 6.3: Sports injury prevention
- 7.1: Substance abuse prevention in schools
- 7.3: Substance abuse prevention programs.
- 8.1: Enhance injury surveillance
- 9.2: Opt-out for reproductive health and safety education
- 10.3: Establish joint-use agreements



# Quality of Programs/Services

- *Priority recommendation 3.2:* Private and public funders should place priority on funding evidence-based programs that meet the needs of the population being served.
  - NCGA should appropriate \$25,000 to NC Child and Family Leadership Council (NCCFLC), including SBE/DPI.
  - NCCFLC should encourage state and local agencies to adopt common evidence based community prevention programs that improve outcomes across multiple risk and protective factors.



# Quality of Programs/Services

- *Recommendation 3.3:* The NCGA should provide funding to the Division of Public Health to support multifaceted adolescent health demonstration projects
  - NCGA should appropriate \$1.5 mil (R) to DPH to support four multi-component, locally implemented adolescent health demonstration programs, involving different community partners.
  - Focus on counties with low graduation or health measures.

# ● ● ● | Health and Clinical Care

- *Recommendation 4.4:* The Women and Children's Health Section of the Division of Public Health should develop a sixth grade school health assessment for all students
  - Should work with DPI.



# Education Strategies, Cont.

- *Recommendation 5.3:* The SBE should promote the participation of Local Education Agencies in the Youth Risk Behavior Survey and School Health Profiles Survey

# ● ● ● | Education Strategies

- *Recommendation 5.4:* The NCGA should require the NC State Board of Education to require schools to use evidence-based curricula when available to teach the objectives of the Healthful Living Standard Course of Study.
  - NCGA should appropriate \$1.15 M (R) to DPI to program grants to LEAs to implement evidence-based curricula.
  - NCGA should require SBE to implement a 5-year phase in to require additional Healthful Living and physical education.

# ● ● ● | Unintentional Injuries

- *Priority Recommendation 6.1*: The NCGA should continue funding driver education through the North Carolina Department of Transportation so they can work to improve drivers education training.

# ● ● ● | Unintentional Injuries

- *Recommendation 6.3:* The NCGA should provide funding to the University of North Carolina (UNC) Injury Prevention Research Center to support injury prevention educators
  - NCGA should appropriate \$300,000 (R) to the Injury Prevention Research Center at UNC-CH to hire staff to train coaches and implement injury prevention programs in schools and youth sports leagues.

# ● ● ● | Substance Abuse and Mental Health Prevention and Treatment

- *Recommendation 7.1:* The NCGA should direct the SBE, Office of Non-Public Education, NC Community College System, and the UNC System to review substance abuse and mental health prevention plans, programs, and policies and services.
  - Ensure that these educational institutions offer comprehensive substance abuse and mental health prevention, early intervention and treatment services.

# ● ● ● | Substance Abuse and Mental Health Prevention and Treatment

- *Recommendation 7.3.* Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMHDDSAS) should develop and implement a comprehensive substance abuse prevention plan.
  - NCGA should appropriate \$1.95M (SFY 2011) and \$3.72 M (R)(SFY 2012) to implement six local comprehensive substance abuse prevention pilots.
  - Involve local LEAs.

# ● ● ● | Violence

- *Recommendation 8.1:* The NCGA should provide funds to the Division of Public Health to enhance injury and violence surveillance for intentional and unintentional injuries with linkages between data systems.
  - DJJDP should collect gang activity from schools every year.



# Sexual Health

- *Recommendation 9.2:* Local school boards should adopt an opt-out consent process to automatically enroll students in comprehensive reproductive health and safety education programs unless a parent or legal guardian specifically requests that their child not receive any or all of this education.



# Preventing Adult Chronic Disease, Cont.

- *Recommendation 10.3:* Local government agencies, including schools, parks, health departments, county commissions, and other relevant organization should work together to establish joint-use agreements that would expand the use of school facilities for after-hours community physical activity and make community facilities available to schools.



# Summary of School-Based Recommendations

- **3.2: Fund evidence-based programs**
- 3.3: Funding for multi-faceted adolescent health demonstrations
- **4.3: Improve school health services**
- 4.4: Develop sixth grade school health assessment
- **5.1: Increase high school graduation rates**
- **5.2: Fund local healthy school coordinators**
- 5.3: Promote Youth Risk Behavior & School Health Profiles Survey
- 5.4: Improve Healthful Living curriculum
- **6.1: Enhance drivers education**
- 6.2: Strengthen DWI enforcement
- 6.3: Sports injury prevention
- 7.1: Substance abuse prevention in schools
- 7.3: Substance abuse prevention programs.
- 8.1: Enhance injury surveillance
- 9.2: Opt-out for reproductive health and safety education
- **10.2: Fund pilot programs to deliver healthy meals in schools**
- 10.3: Establish joint-use agreements