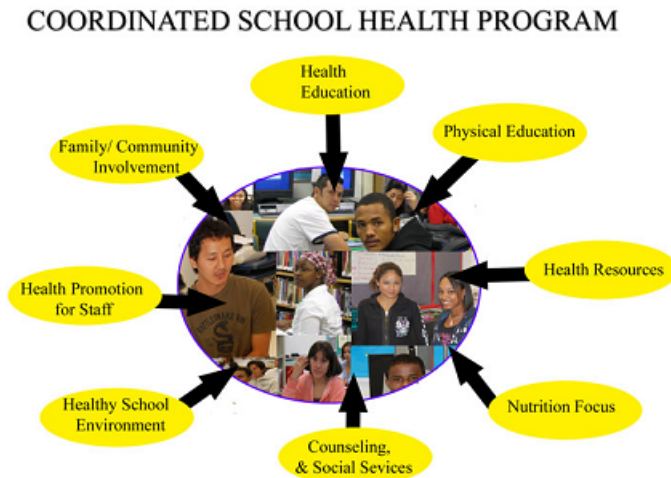


**Fairfax County Public Schools  
School Health Advisory Committee  
Annual Report Executive Summary 2008-2009**

School Board Charge: Continue to look into a comprehensive health plan and how Fairfax County Public Schools (FCPS) policies can be used to implement that plan.

The School Health Advisory Committee (SHAC) continues to support the recommendation outlined in the 2007-2008 SHAC annual report for a "Coordinated School Health Program". It is an eight component model with the central focus on students.



During the 2008-2009 school year, SHAC addressed the School Board's charge and explored other topics including:

1. School Health Study: Fairfax County Health Department and FCPS are working to formalize the relationship with a Memorandum of Understanding.
2. Fairfax County Clinic Room Aide Elimination Proposal: SHAC worked to promote the retainment of this position in the schools.
3. Results of the Fairfax County Youth Risk Survey: Focused on protective factors that influence students' well-being.
4. Cyberbullying: We detected need for improved parental education and information regarding technological advances in this area.
5. FCPS Golden Wellness Policy: Need for promotion of Golden Wellness Award for expanded participation in the program.
6. Start Later for Excellence in Education Proposal (SLEEP): SHAC continues to support the fundamental basis for SLEEP, that students perform better with later start times for school in the teenage years.
7. Northern Virginia Healthy Kids Coalition "9-5-2-1-0 For Health Program": SHAC supports this simple way to remind children about the five healthy habits for overall good health and weight.

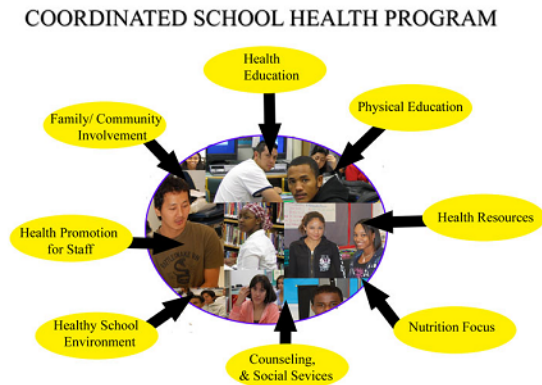
A common thread throughout our discussions and presentations during the year was that of parental involvement. Parents/guardians/caretakers are crucial protective factors when dealing with any topic involving school-aged children. SHAC would like to delve into this aspect in more depth during next year's meetings. Parental involvement is one of the eight components of the "Coordinated School Health Program" recommended by SHAC.

**Fairfax County Public Schools  
School Health Advisory Committee  
School Year 2008-2009  
Annual Report**

**School Board Charge:** Continue to look into comprehensive health plan, and how Fairfax County Public Schools (FCPS) policies can be used to implement that plan.

**School Health Advisory Committee (SHAC) response:** We continue to support the recommendation for a “Coordinated School Health Program” outlined in the 2007-2008 SHAC annual report. It is an eight component model with the central focus on the student. The components are:

1. Health Education
2. Physical Education
3. Health Services
4. Nutrition Services
5. Counseling, Psychological, and Social Services
6. Family/Community Involvement
7. Health Promotion for the Staff
8. Healthy School Environment



The SHAC membership consists of representatives from each component of the model.

During the 2008-2009 school year SHAC held seven meetings. As SHAC addressed the School Board charge and explored other topics during the year (see below), a common theme emerged throughout our discussions and presentations by invited guests: FCPS needs to strengthen, support and encourage parental involvement in their children’s lives at home and in school. We identified that parents need to know more about the school health policies and practices and that FCPS staff and volunteers should work to help parents learn about and take advantage of FCPS and Fairfax County health promotion resources. Parents/guardians/caregivers are crucial protective factors when dealing with any topic involving school-aged children. This focus aligns very well with the focus on the Coordinated School Health Program (CSHP) approach because parental involvement is one of the eight components of the CSHP model recommended by SHAC. We would like to delve into this aspect more during next year’s meetings.

**Additional topics explored by SHAC during this school year were:**

**1. School Health Study:**

The School Health Study was initiated to analyze the current and projected demand for school-based health services and to develop a plan to meet those demands. Currently, there are 59 public health nurses and 221 clinic room aides who work in the schools. They identify medical and health issues, provide training on health related topics, and care for sick and injured students.

FCPS and the Fairfax County Health Department (FCHD) have worked in collaboration for over 50 years. During the 2009-2010 school year, FCPS and the FCHD will work to formalize that collaboration by writing a Memorandum of Understanding. SHAC supports continued collaboration between FCPS and FCHD in developing a Memorandum of Understanding moving forward.

2. **Fairfax County Clinic Room Aide (CRA) Elimination Proposal:**

SHAC learned that due to tight budget constraints for the 2009-2010 school year, FCHD was determining ways to decrease their budget. Eliminating CRAs from FCPS was part of the proposed plan. SHAC wrote and distributed a letter to the School Board alerting them to the proposed situation. SHAC also wrote a letter to Sharon Bulova, then interim chair of the Fairfax County Board of Supervisors, urging retention of the position of CRA in each Fairfax County school (see attached letter). SHAC strongly urges the retention of the CRA in each Fairfax County school. [Note: We are very pleased that the Board of Supervisors has approved its FY 2010 budget to include a partial reduction of \$150,000 for CRAs achieved by reducing Monday hours to reflect early closing of school and reduction in training hours. Two new positions required for two new schools opening in FY 2011 are also included.]

3. **Results of the Fairfax County Youth Risk Survey:**

The Fairfax County Youth Survey Report was administered to 22,251 sixth, eighth, tenth, and twelfth graders in February 2008. The survey has been administered every two years since 2001. Although changes have been made in the survey each time it is administered, this is the first time questions regarding sexual activity were asked. The data guides the services, programs, and decision making by county agencies and the school division. The complete results can be found at [www.fairfaxcounty.gov/demogrph/youthpdf.htm](http://www.fairfaxcounty.gov/demogrph/youthpdf.htm). There were several key protective factors noted by the survey: family attachment, peer and individual social skills, and community awards for involvement. These factors, when present in students' lives, were linked with decreased gang involvement and alcohol usage. SHAC supports maintaining afterschool activities that promote these protective factors.

Overall, FCPS youth are below the national average in engaging in risky behaviors; however, depression still impacts a significant number of youth, there is increased reporting of several violence and bullying behaviors, eighth grade inhalant use remains higher than the national average, and our youth spend more time on non-academic electronic activities than peers nationally. SHAC has studied school-aged depression in the past and decided to explore the topic of cyberbullying this year.

4. **Cyberbullying:**

SHAC received a presentation from representatives of the Safe and Drug Free Youth Section of Student Services regarding cyberbullying and the effects that this type of bullying can have on students. Cyberbullying differs from other types of bullying in that it is faceless, and therefore students may experience a false sense of confidence and power and they may feel as though there are no consequences to their behavior since they are acting in an anonymous manner. It was mentioned that a recently passed Virginia law makes cyberbullying illegal. We also were told of ways parents could help protect their children from cyberbullying. For example, computers used at home should be kept in a public location to allow parents to monitor their child's computer usage and parents should block access to inappropriate sites. Also, parents themselves should become comfortable with using technology such as learning how to use text messaging and learning how to use social networking sites. Lastly, parents should maintain an open dialogue with their children to promote conversations about their child's lives. SHAC supports the Safe and Drug Free programs and increased awareness of cyberbullying through educational publications and presentations.

5. **Review of the FCPS Wellness Policy:**

SHAC had frequent updates regarding the nutrition programs in effect at FCPS. We learned about the Golden Wellness Program, a vehicle to enhance the visibility and implementation of the Wellness Policy and involves the entire school community. Schools may apply for the Golden Wellness Award using an online scorecard and winners will be recognized in May. SHAC would like to see increased promotion of these programs, perhaps through PTA and other community organizations.

6. **Start Later for Excellence in Education Proposal (SLEEP):**

SHAC also had frequent updates related to the progress of the SLEEP proposal. Without endorsing any particular proposal from FCPS or SLEEP, SHAC continues to support the fundamental basis for SLEEP, that students perform better with later start times for school in the teenage years.

7. **Northern Virginia Healthy Kids Coalition:**

This is a partnership between Inova Health System and Northern Virginia communities to address childhood obesity. SHAC member Penny McConnell, RD, director FCPS Food & Nutrition Services, is a charter member of this coalition. Goals of this coalition are to: increase daily physical activity among children, adolescents and families; reduce the amount of recreational screen time for children; decrease consumption of energy-dense, high sugar/high fat foods; increase the consumption of nutritious foods; and to create social, monetary and policy driven incentives that reinforce long-term environmental and behavioral changes.

The **9-5-2-1-0 For Health Program** was highlighted:

**9** - Get at least nine hours of sleep per night

**5** - Eat five servings of fruits and vegetables per day

**2** - Limit screen time outside of school work to no more than two hours per day

**1** - Get at least one hour of physical activity per day

**0** - Eliminate or minimize consumption of beverages with sugar added

SHAC supports this simple way to remind children about the five healthy habits for overall good health and weight.

In closing, SHAC would like to thank the School Board members for the opportunity and support to explore relevant issues related to the health of FCPS students. The chair would like to express appreciation for the energy and dedication of SHAC members who brought valuable information and ideas to the committee. We enjoyed having the unique perspective of a FCPS student on our committee this year. His input greatly enhanced our discussions. SHAC appointees also appreciate the dedication and regular attendance of both FCHD and FCPS staff. Their expertise and experience added valuable information to our discussions.

**Conclusion:**

SHAC appreciates the opportunity to explore such a wide range of health issues that are integral to the success of all students in school and to the fulfillment of the FCPS mission. We welcome continued guidance from the School Board and are pleased that the School Board recognizes that schools share responsibility with parents and interested members of the community to guide and support students in their healthy development.

January 7, 2009

Sharon Bulova  
Vice Chairman  
Fairfax County Board of Supervisors  
9002 Burke Lake Road  
Burke, VA 22015

Dear Vice Chairman Bulova:

We write as members of the School Health Advisory Committee (SHAC), the state mandated advisory committee to the Fairfax County School Board for health issues. Over the past several weeks SHAC has been made aware of an issue that affects each and every child in Fairfax County Public Schools.

On October 9<sup>th</sup>, 2008, a proposal was presented to the Fairfax County Board of Supervisors that would eliminate the Clinic Room Aide position at all Fairfax County Public Schools. The Clinic Room Aide is the primary source of care for sick or injured students, and administers routine and emergency medications to students to manage acute or chronic conditions.

During the 2007-08 school year, clinic room aides provided 238,140 hours of clinic room coverage and provided services for 755, 200 clinic visits. In addition, each day the clinic room aides assisted with 850 medication orders in the schools. The Clinic Room Aides provide a crucial role in maintaining the health of our students. The duties of the Clinic Room Aide could not be picked up by the school staff without having a significant impact on the educational process as well as disruption and inconsistency in routine and emergency health care for many students.

In response to a significant budget deficit in April 1992, the Fairfax County Board of Supervisors voted to reduce the CRA Program budget by reducing clinic aide hours to four hours per school per day and eliminate the CRA substitute positions for FY 1993, thus effecting the 93-94 school year. After significant public outcry and concern that the reduction of hours left the FCPS student without adequate care for illnesses and injuries, the Board of Supervisors voted to restore the funding effective January 1994, to once again provide full day coverage.

We understand that budget cuts are necessary within Fairfax County and that the position of Clinic Room Aides in each school is not a state mandated service. However, as an advisory committee focused on the health of school children, SHAC believes that eliminating these positions would be a service that Fairfax County cannot afford to lose.

Sincerely,

School Health Advisory Committee Members

cc: Fairfax County School Board

Jack Dale, Superintendent of Fairfax County Public Schools

Joanne Jorgenson, Director of Health Services, Fairfax County Health Department

# SCHOOL HEALTH ADVISORY COMMITTEE MEMBERS

## 2008-2009

### School Board Member Representatives

Ms. Laura Wheeler Poms	Braddock District
Barbara Boardman, M.D.	Dranesville District
Mr. Theodore (Ted) Wyka	Hunter Mill District
Ms. Jill Allen Murray	Lee District
Ms. Sandy Evans	Mason District
Ms. Hope Warshaw	Mount Vernon District
Ms. Evelyn H. Turner	Providence District
Ms. Thérèse Tuley	Springfield District
Ms. Elaine Casey (chair)	Sully District
Steven Bunn, D.D.S.	At-Large - Raney
Gil Kim, M.D.	At-Large - Moon
Ms. Brenda Zanger Greene	At-Large - Hone
Mr. Jonathan Torre	Student Representative

### Community Representatives

Ms. Pamela Jones	City of Fairfax School Board
Mr. Kenton H. Pattie	Fairfax County Council of PTAs
Ranjana Jain, M.D.	Medical Society of Northern Virginia
Ms. Esther Walker	Fairfax County Health Department
Ms. Jill Christiansen (Associate Member)	Inova Health System Partnership for Healthier Kids

### School Representatives

Eleanor Barnes, Ed.D. (Associate Member)	DSS, Director, Student Services
Ms. Elizabeth Donaldson	DSS, SR, Health & Home Instruction Specialist
Vacant	Elementary Principal's Association
Ms. Beverly R. Wilson	High School Principal's Association
Mr. Chad Lehman (Associate Member)	DIS, Health and Physical Education Specialist
Penny McConnell, RD, SNS (Associate Member)	DFS, Director, Food and Nutrition Services
Mr. Douglass T. O'Neill (Associate Member)	DF&TS, Coordinator, Safety Office of Safety & Security

**SCHOOL HEALTH ADVISORY COMMITTEE  
2008-2009  
MEETING ATTENDANCE BY SCHOOL BOARD APPOINTEES**

NAME	SEPT	OCT	NOV	JAN	FEB	MAR	APR
Braddock – Laura Poms		X	X	X	X	X	X
Dranesville – <b>Barbara Boardman</b>							
Hunter Mill – Ted Wyka							
Lee – Jill Allen Murray	X	X					X
Mason – Sandy Evans	X	X	X	X	X	X	
Mount Vernon – <b>Hope Warshaw</b>	X	X	X	X	X		X
Providence – <b>Evelyn Turner</b>						Appointed after meeting	
Springfield – <b>Therese Tuley</b>	X		X	X	X		X
Sully – Elaine Casey	X	X	X	X	X	X	X
At Large – Raney <b>Steven Bunn</b>	X		X	X	X	X	X
At Large – Moon <b>Gil Kim</b>			X				
At Large – Hone <b>Brenda Greene</b>		X	X	X			X
Student Rep–Marshall HS <b>Jon Torre</b>	X	X	X	X	X		
Elem. Principal Assoc. –							
HS Principal Association <b>Beverly Wilson–</b>	X		X		X	X	X
Fairfax City School Board- <b>Pamela Jones</b>	X	X	X	X	X	X	X
Fairfax Council of PTAs – <b>Kenton Pattie</b>	X		X			X	
Med. Soc. Northern VA – <b>Ranjana Jain</b>							
FCPS Health & PE – <b>Chad Lehman</b>	X	Kim Clancy	X	X	X	X	X
Inova, PHK – <b>Jill Christiansen</b>	X		X		X	X	X
FCHD – <b>Esther Walker</b>	X	X	X	X	X	X	X
FCPS, DSS – <b>Elizabeth Donaldson</b>	X	X	Ellie Barnes	X	X	X	X
FCPS, Food & Nutrition <b>Penny McConnell</b>	X		X		X	X	
FCPS, Safety & Security <b>Doug O’Neill</b>	X	X	X	X	X	X	X
Guests	Arvin Ahmadi, Pat Trahan, P.J. Maddox, Rosalyn Feroobar		Denise Raybon, Clarence Jones		Stefan Mascoll, Clarence Jones		

**Fairfax County Public Schools  
School Health Advisory Committee**

**2008 – 2009 Annual Report  
Committee Membership Endorsement**

**School Board Member Representatives**

Laura Poms	Braddock District	Approved
Barbara Boardman	Dranesville District	No Response
Ted Wyka	Hunter Mill District	Approved
Jill Allen Murray	Lee District	Approved
Sandy Evans	Mason District	Approved
Hope Warshaw	Mount Vernon District	Approved
Evelyn Turner	Providence District	Approved
Thérèse Tuley	Springfield District	Approved
Elaine Casey	Sully District	Approved
Steven Bunn	At Large - Raney	Approved
Gil Kim	At Large - Moon	No Response
Brenda Greene	At Large - Hone	Approved
Jonathan Torre	Student Representative	Approved

**Community and School Representatives**

Pamela Jones	City of Fairfax School Board	Approved
Kenton Pattie	Fairfax County Council of PTAs	Approved
Ranjana Jain	Medical Society of Northern Virginia	No Response
Esther Walker	Fairfax County Health Department	Approved
Vacant	Elementary Principal's Association	
Beverly R. Wilson	High School Principal's Association	Approved
Jill Christiansen	Inova Partnership for Healthier Kids	Approved

**School Staff Support**

Eleanor Barnes, Director	Dept. of Special Services, Student Services
Elizabeth Donaldson, Specialist	Dept. of Special Services - Health & Home Instruction
Chad Lehman, Specialist	Instructional Services Dept - Health & Physical Education
Penny McConnell, Director	Financial Services Dept - Food & Nutrition Services
Douglass O'Neill, Coordinator	Facilities Services – Safety & Security