

EXECUTIVE SUMMARY

Title: 2011 Healthy Active Children Policy Report

Type of Executive Summary:

- Consent
- Action
- Action on First Reading
- Discussion
- Information

Policy Implications:

- Constitution _____
- General Statute # _____
- SBE Policy #GCS-S-000
- SBE Policy Amendment
- SBE Policy (New)
- APA # _____
- APA Amendment
- APA (New)
- Other _____

Presenter(s): Paula Hudson Hildebrand (Chief Health and Community Relations Officer, North Carolina Department of Public Instruction)

Description:

State Board of Education Policy GCS-S-000 requires the annual reporting of information in the section of the Healthy Active Children Policy. Data from the LEAs reflect implementation of local School Health Advisory Councils (SHACs), physical activity and physical education, recess, and coordinated school health programs.

Resources:

DPI-developed electronic survey by NC Healthy Schools staff per State Board policy

Input Process:

On-line self-reported data by LEA School Health Advisory Council or Healthful Living Contacts through a survey monkey format with report summary compiled by NC Healthy Schools staff

Stakeholders:

All North Carolina public school students, parents, staff, and local and state level decision makers

Timeline For Action:

This report is presented as an Information item at the February 2012 State Board of Education meeting.

Recommendations:

It is recommended that the State Board of Education accept the Healthy Active Children Policy report as submitted.

Audiovisual equipment requested for the presentation:

- Data Projector/Video (Videotape/DVD and/or Computer Data, Internet, Presentations-PowerPoint preferred)
Specify: _____
- Audio Requirements (computer or other, except for PA system which is provided)
Specify: _____
- Document Camera (for transparencies or paper documents – white paper preferred)

 Motion By: _____ Seconded By: _____
 Vote: Yes _____ No _____ Abstain _____
 Approved _____ Disapproved _____ Postponed _____ Revised _____

*Person responsible for SBE agenda materials and SBE policy updates: **Paula Hudson Hildebrand, 919-807-4068**

**NORTH CAROLINA STATE BOARD OF EDUCATION
Policy Manual**

Policy Identification

Priority: Globally Competitive Students

Category: Student Health Issues

Policy ID Number: GCS-S-000

Policy Title: Policy regarding physical education in the public schools

Current Policy Date: 04/07/2005

Other Historical Information: Previous board dates: 01/09/2003

Statutory Reference:

Administrative Procedures Act (APA) Reference Number and Category:

HEALTHY ACTIVE CHILDREN:

Section 1. LOCAL SCHOOL HEALTH ADVISORY COUNCIL

- (a) Each school district shall establish and maintain a local School Health Advisory Council to help plan, implement, and monitor this policy as well as other health issues as part of the coordinated school health plan.
- (b) The local School Health Advisory Council shall be composed of community and school representatives from the eight areas of a coordinated school health program mentioned in Section 4 (a), representatives from the local health department and school administration.

Section 2. PHYSICAL EDUCATION

- (a) To address issues such as overweight, obesity, cardiovascular disease, and Type II diabetes, students enrolled in kindergarten through eighth grades are to participate in physical activity as part of the district's physical education curriculum. Elementary schools should consider the benefits of and move toward having 150 minutes per week with a certified physical education teacher throughout the 180 day school year. Middle schools should consider the benefits of and move toward having 225 minutes per week of Healthful Living Education with certified health and physical education teachers throughout the 180-day school year.
- (b) The physical education course shall be the environment in which students learn, practice and receive assessment on developmentally appropriate motor skills, social skills, and knowledge as defined in the North Carolina Healthful Living Standard Course of Study and foster support and guidance for being physically active. In order to meet enhanced goals, these classes should be the same class size as other regular classes.

Section 3. RECESS AND PHYSICAL ACTIVITY

- (a) Structured/unstructured recess and other physical activity (such as, but not limited to, physical activity time, physical education or intramurals) shall not be taken away from students as a form of punishment. In addition, severe and inappropriate exercise may not be used as a form of punishment for students.

- (b) A minimum of 30 minutes of moderate to vigorous physical activity shall be provided by schools for all K-8 students daily. This requirement can be achieved through a regular physical education class and/or through activities such as recess, dance, classroom energizers, or other curriculum-based physical activity programs. However, such use of this time should complement and not substitute for the physical education program.
- (c) The physical activity required by this section must involve physical exertion of at least a moderate to vigorous intensity level and for a duration sufficient to provide a significant health benefit to students.

Section 4. COORDINATED SCHOOL HEALTH PROGRAMS (CSHP)

- (a) The State Board of Education shall make available to each school district a coordinated school health model designed to address health issues of children. The program must provide for coordinating the following eight components:
 - (1) safe environment;
 - (2) physical education;
 - (3) health education;
 - (4) staff wellness;
 - (5) health services;
 - (6) mental and social health;
 - (7) nutrition services; and
 - (8) parental/family involvement.
- (b) The North Carolina Department of Public Instruction shall notify each school district of the availability of professional development opportunities and provide technical assistance in implementing coordinated school health programs at the local level.

Section 5. THIS POLICY SHALL BE FULLY IMPLEMENTED BY THE 2006-2007 SCHOOL YEAR.

- (a) Each local school district shall develop an action plan prepared in collaboration with the local School Health Advisory Council to assist in the implementation of the policy. This action plan shall identify steps that need to be taken each year to fully implement the policy by the 2006-2007 school year and shall include a review and appropriate modification of existing physical education and health curricula.
- (b) Action plans shall be submitted to the North Carolina Department of Public Instruction by July 15, 2004.
- (c) Progress reports shall be submitted to the North Carolina Department of Public Instruction by July 15, 2005 and 2006.
- (d) Beginning July 15, 2007, each local school district in collaboration with the local School Health Advisory Council shall prepare a report annually which will include the minutes of physical education and/or healthful living, physical activity received by students in each school within the district. Indicators that will mark successful implementation and evidences of completion shall be a part of the plan.
- (e) This report shall be completed by July 15th each year and remain on file for a period of 12 months to be provided upon request of the North Carolina Department of Public Instruction and local boards of education.
- (f) Progress reports and the annual reports shall also include any other information that may be recommended from the State Board of Education's Ad Hoc Committee studying implementation of the physical education and Healthful Living programs in kindergarten through eighth grades.

Healthy Active Children (HAC) Policy Report GCS-S-000 2011



North Carolina Healthy Schools Initiative
Summary Data from LEA
School Health Advisory Councils

GCS-S-000

- Section 1. Local School Health Advisory Councils
- Section 2. Physical Education
- Section 3. Recess and Physical Activity
- Section 4. Coordinated School Health Programs
- Section 5. Action Plans and Reporting

HAC Policy Report Key Points

- 95% of LEAs Responded (106/112*)
- 85% of SHACs list a representative from each required area
- 41% of SHACs meet at least quarterly
- 55% of SHACs provide reports to their local BOE

*3 City LEAs Have Joint County/City SHAC

HAC Policy Report Key Points

- 51% report that **ALL** of their elementary schools provide 150 minutes of weekly PE with a certified PE teacher
- 52% report that **ALL** of their middle schools provide 225 minutes of weekly Healthful Living with certified health and physical education teachers

Healthy Active Children Policy Report

SHAC Successes

LEA SHAC Successes

- Recipient of the NC Prevention Partners Trailblazer award for employee staff wellness initiatives
- Recipients of USDA Fresh Fruit and Vegetables Grants
- Staff fitness, health and wellness classes
- Revision and improvement of local School Wellness Policies
- Mana Food Packs provided to needy students in the elementary and middle schools, weekly

LEA SHAC Successes

- Promotion of joint use agreements between schools and communities
- Creation of programs that support nutrition education for students and staff
- The use of Fitnessgram to monitor students' fitness levels
- Improvement made to mental health services available to students
- On campus Flu shot and Immunization clinics for students and staff

LEA SHAC Successes

- Information and other resources made available to parents and community members
- Teen Pregnancy Prevention Initiatives implemented
- SHAC and local health department co-sponsored anti-bullying workshops provided by the Department of Juvenile Justice and Delinquency Prevention for community and school professionals and parents.
- Vision, hearing, dental and BMI screenings for students

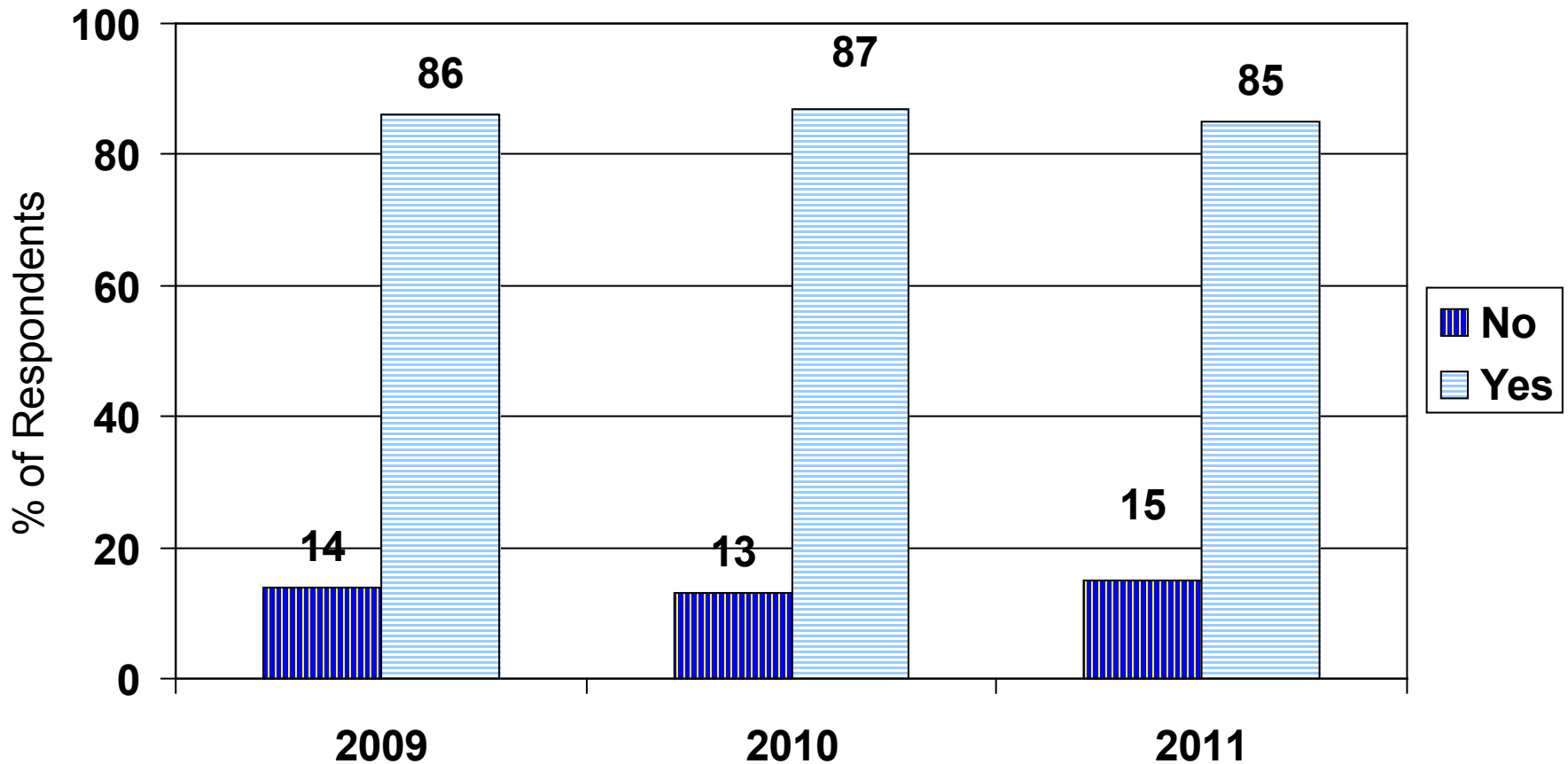
LEA SHAC Successes

- Support staff trained in Child Sexual Abuse Prevention
- Formation of school-based Wellness Committees
- Implementation of local Youth Risk Behavior Survey (YRBS)
- Implementation of daily Positive Behavioral Intervention and Support (PBIS) activities
- School wide presentations on drug awareness and the benefit of making healthy choices

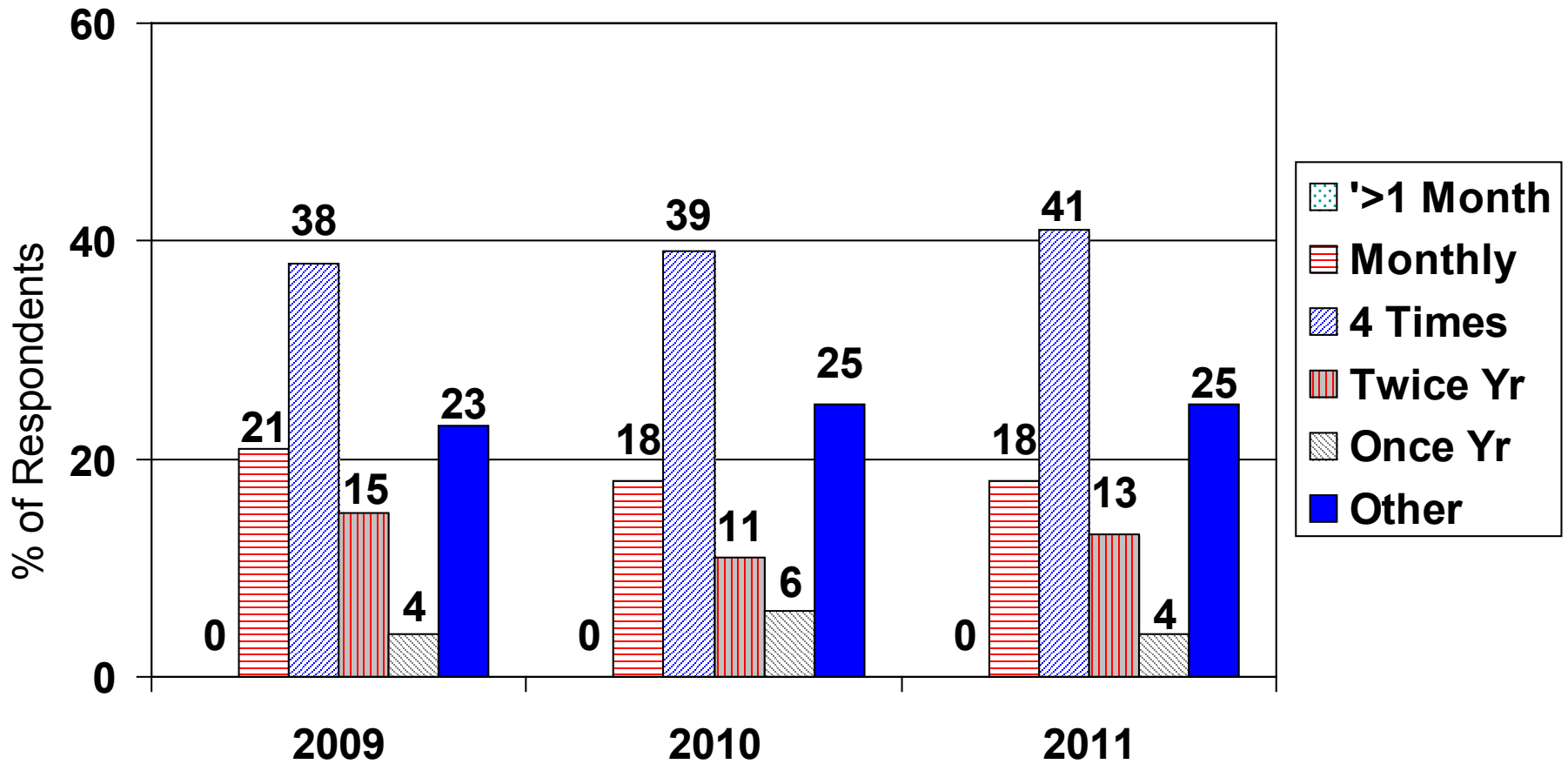
SECTION 1

School Health Advisory Councils

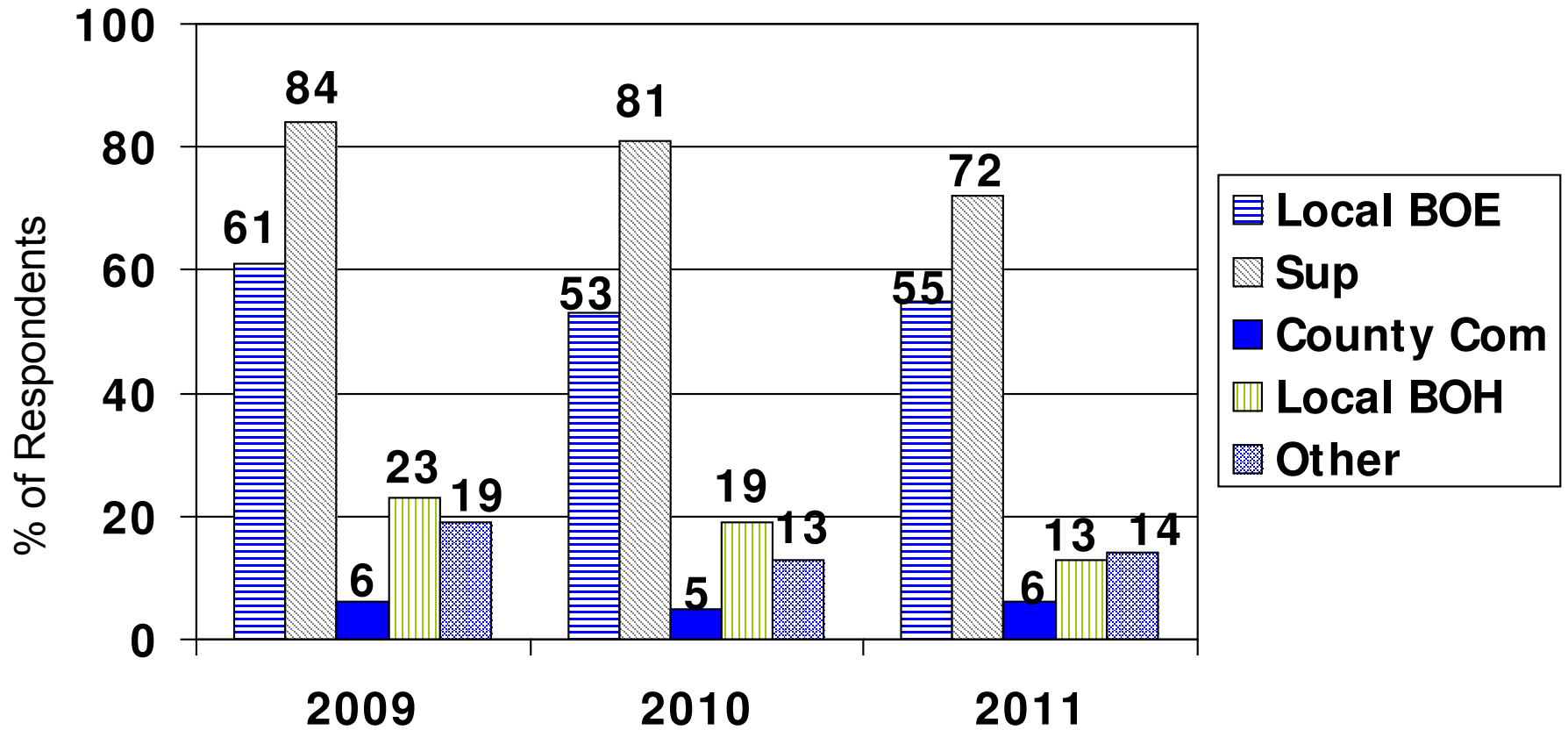
SHAC Has Required Representatives From All 8 Areas of Coordinated School Health



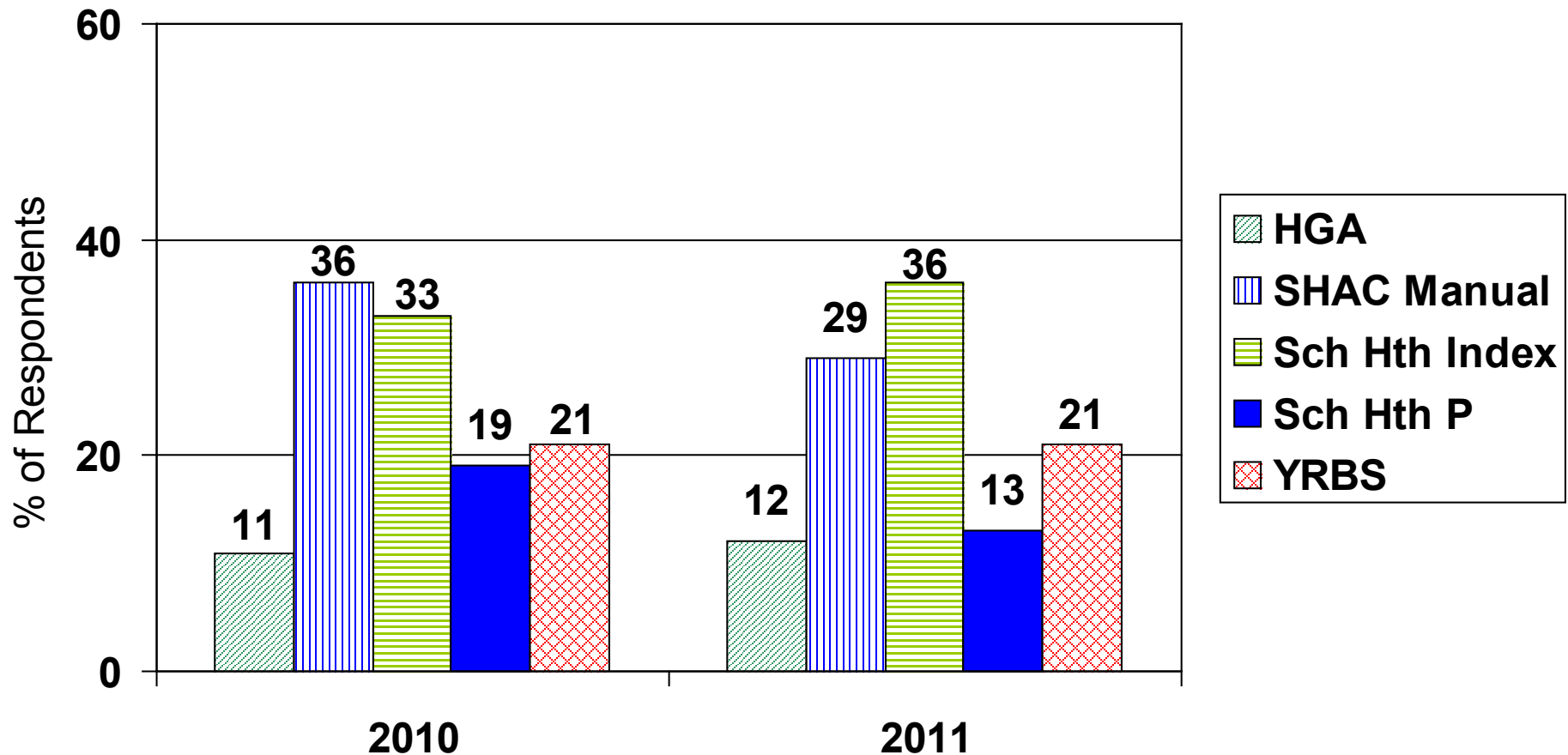
How Often SHAC Meets



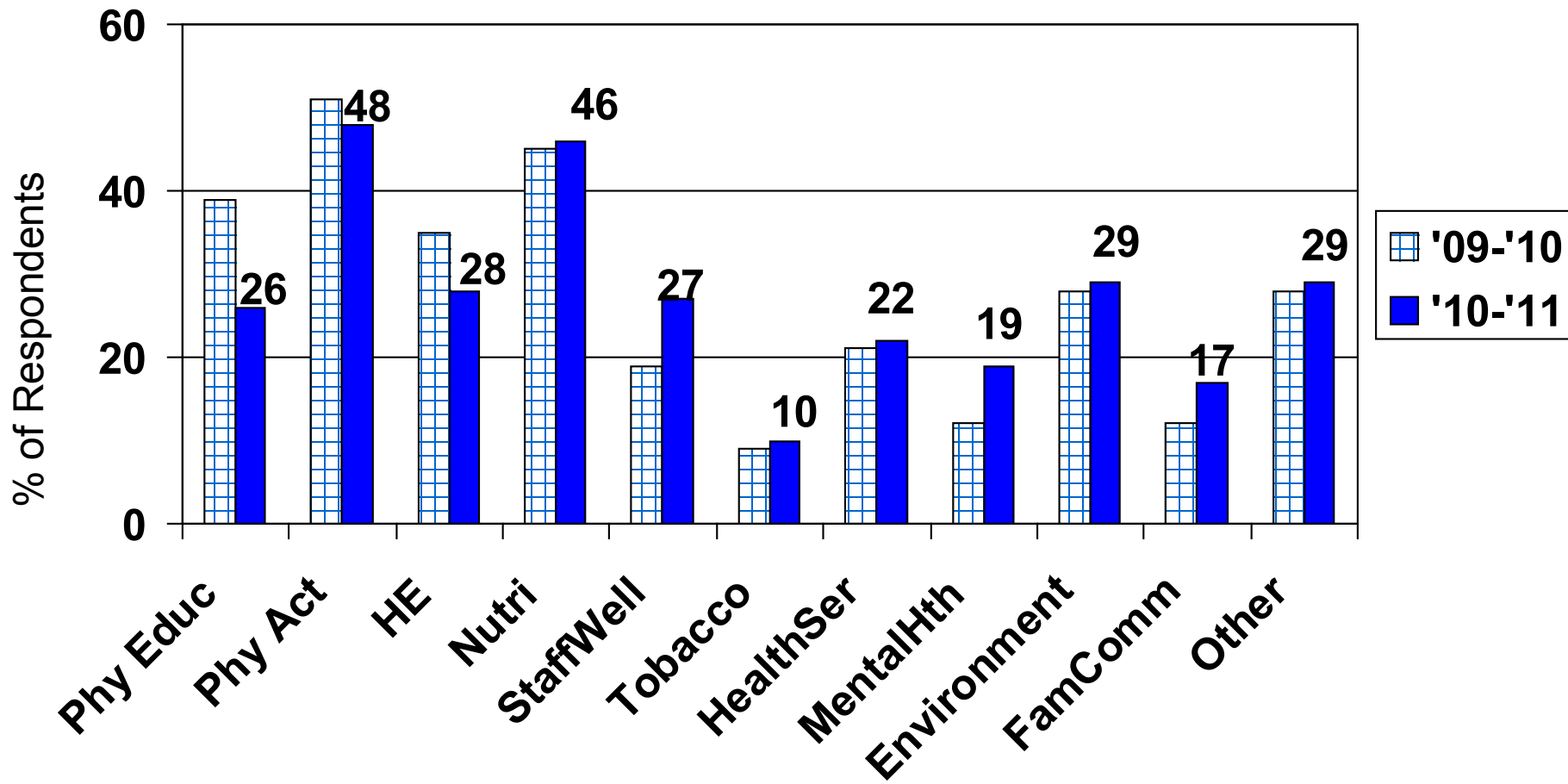
Use of SHAC Reports



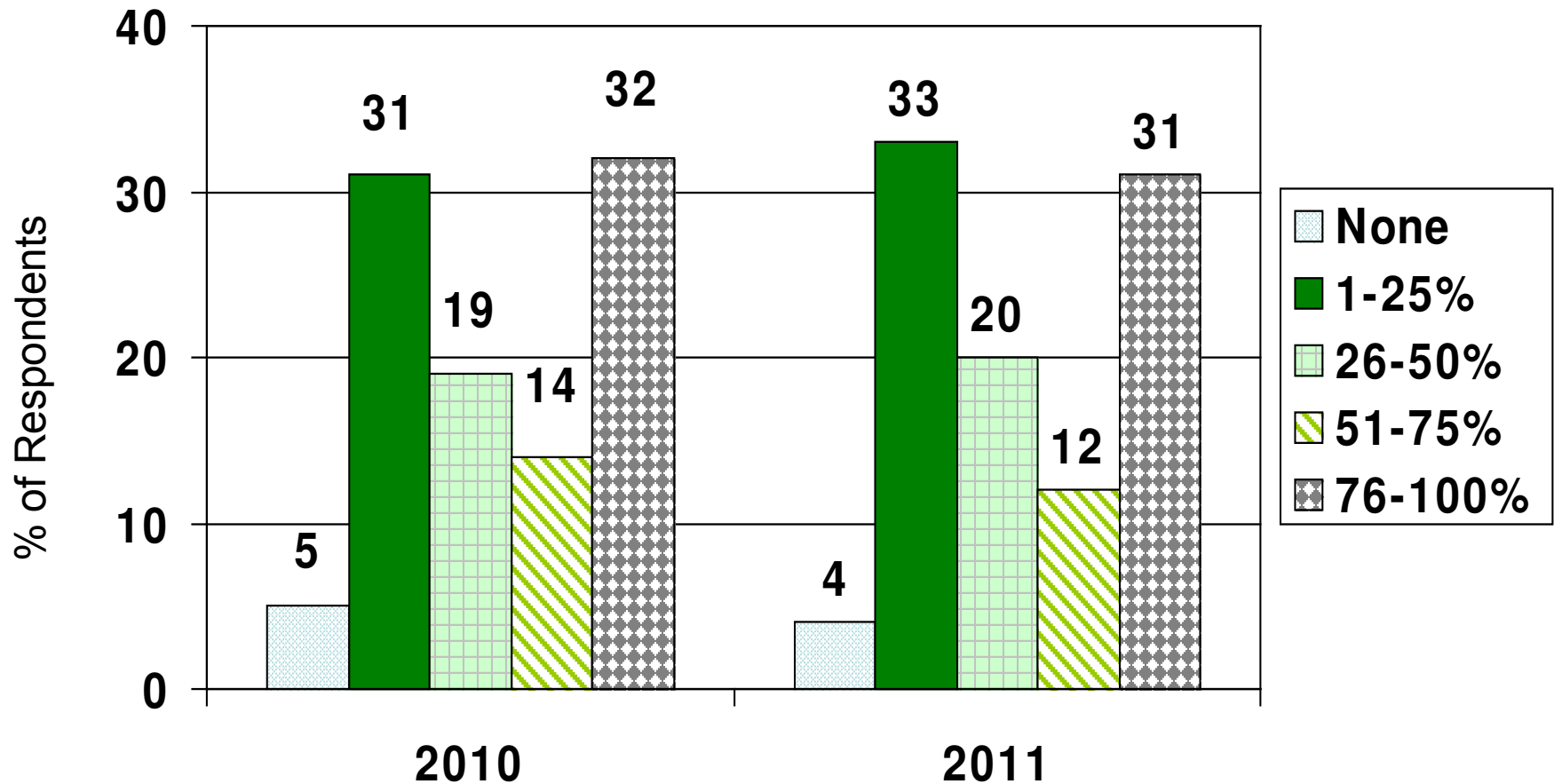
Name of the School Health Assessment Tool Used by LEA



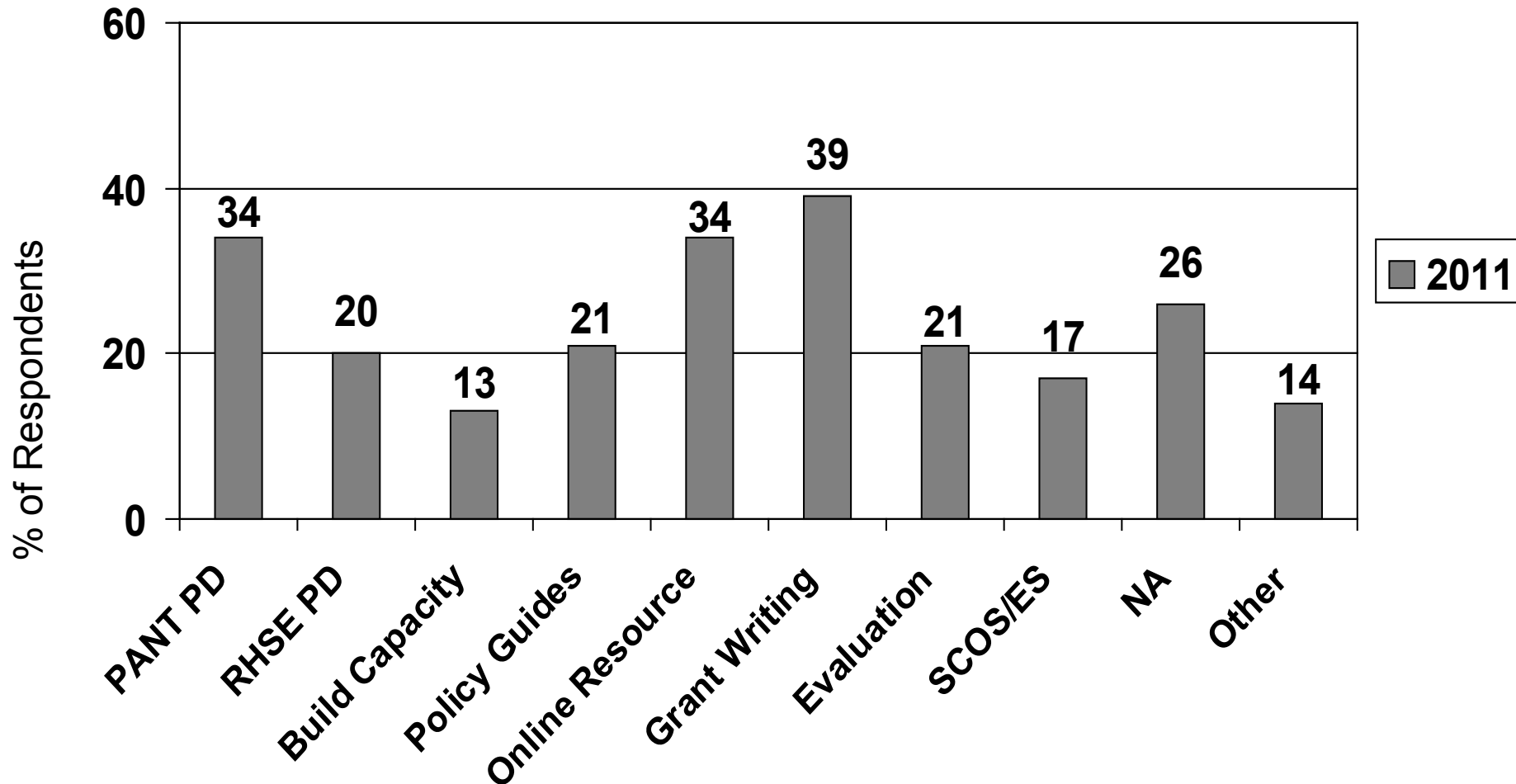
Primary Focus of Your SHAC's Action Plan



Number of Schools within LEA Providing Staff Wellness Programs



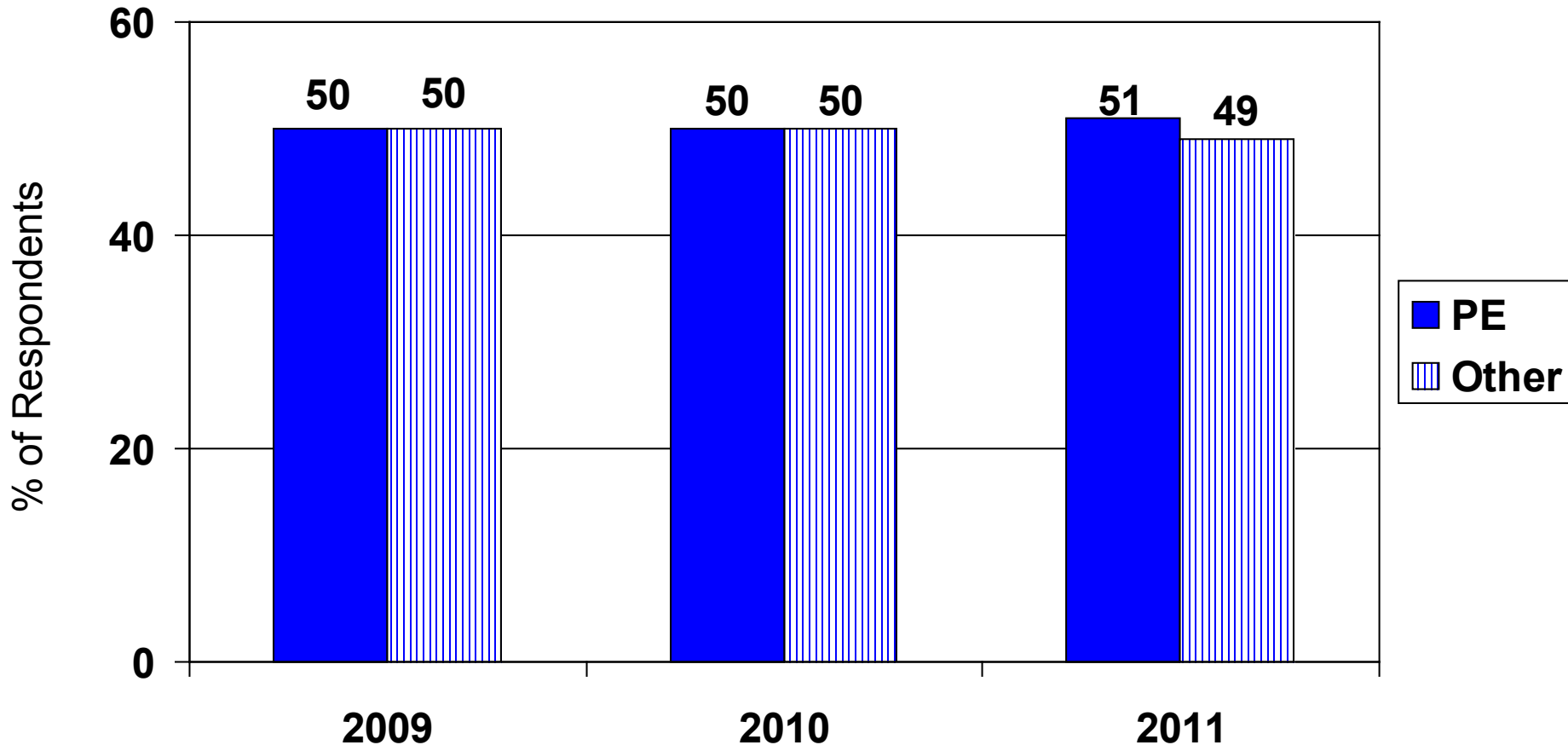
Specific Resources and Additional Assistance Requested by LEA's



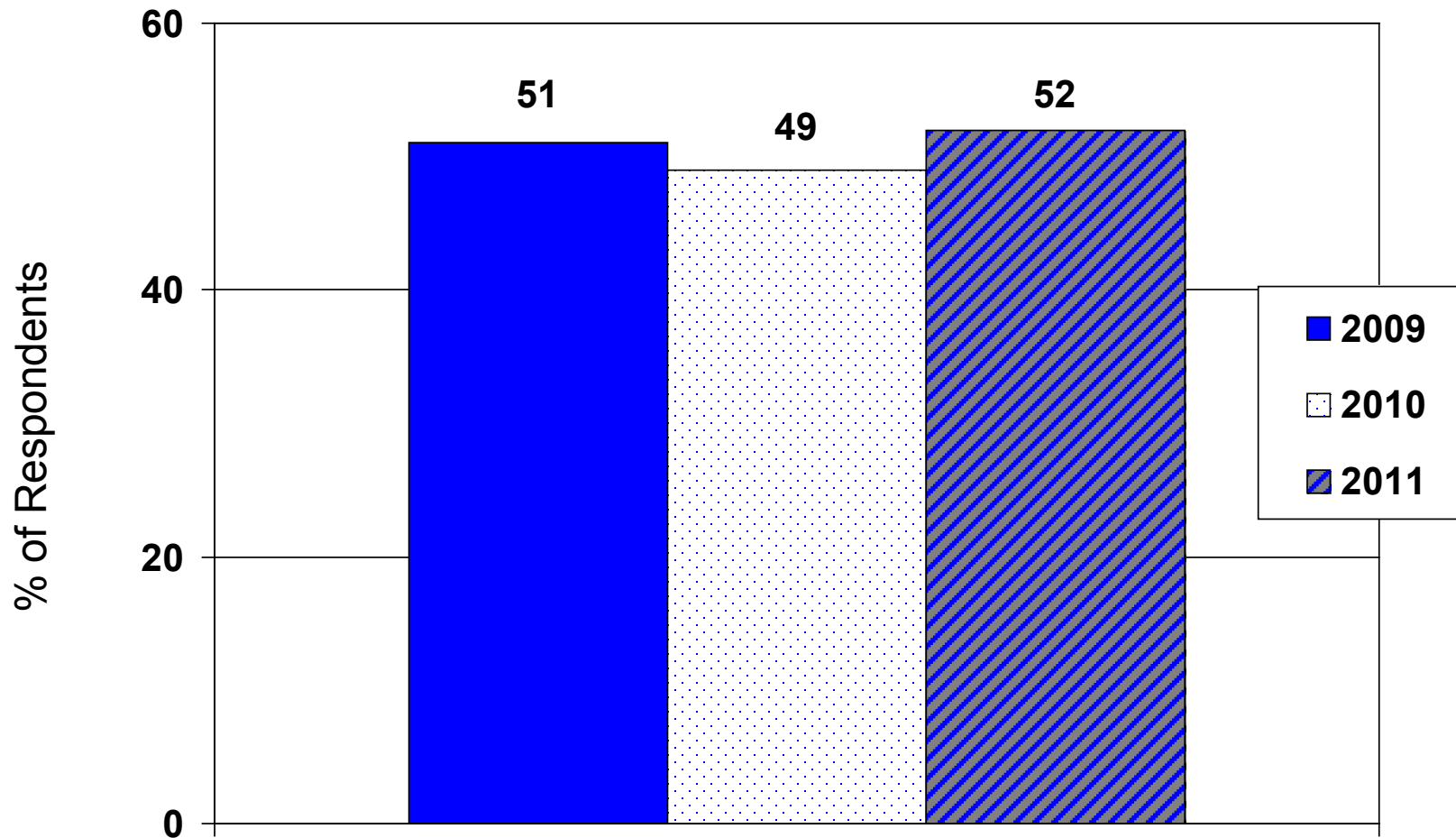
SECTION 2

Physical Education

LEAs with ALL Elementary Schools Receiving 150 Minutes per Week of PE Taught by a Certified PE Teacher



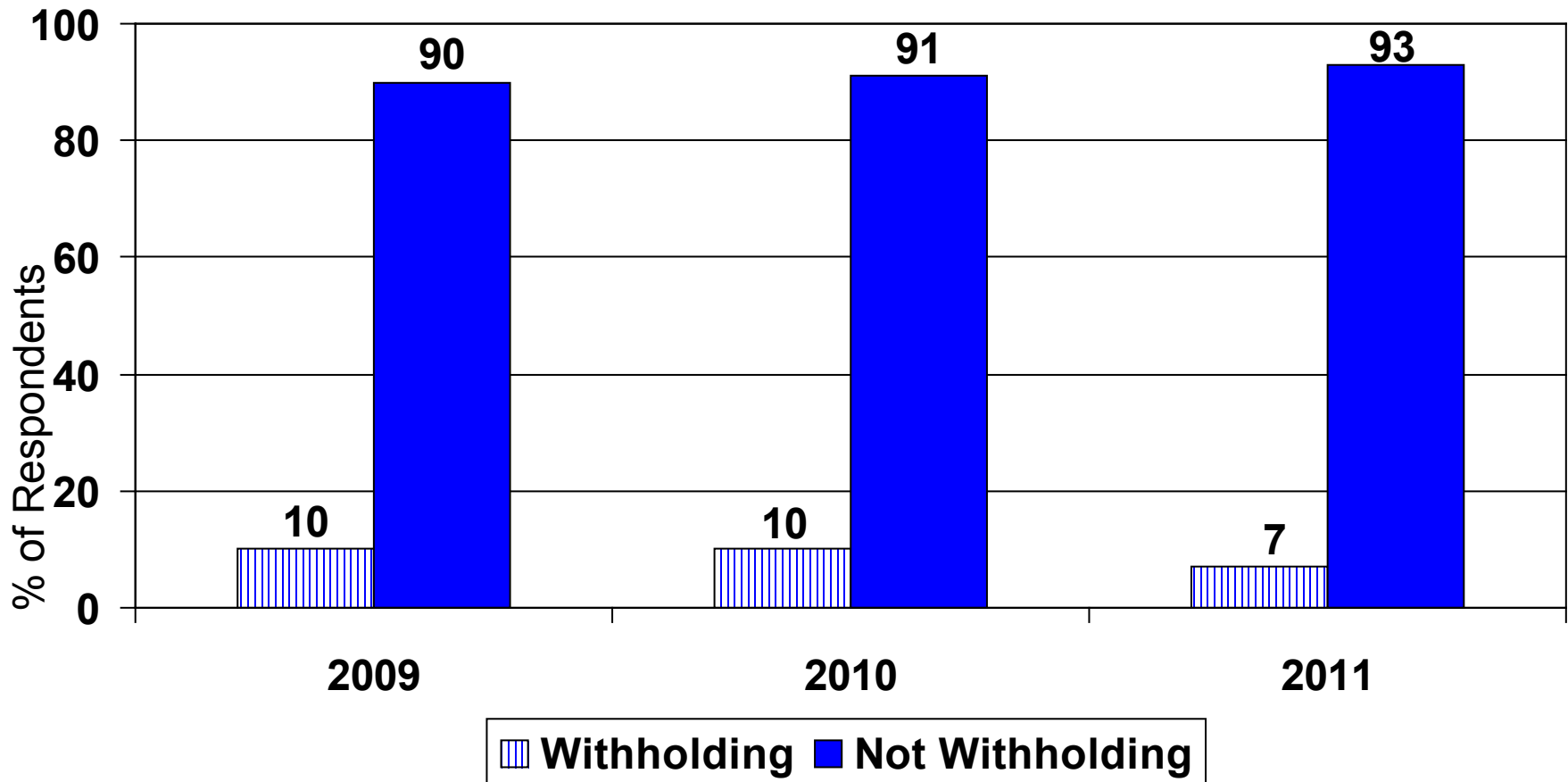
ALL Middle Schools in LEA Providing 225 Minutes per Week of Healthful Living with Certified Health and Physical Education Teachers



SECTION 3

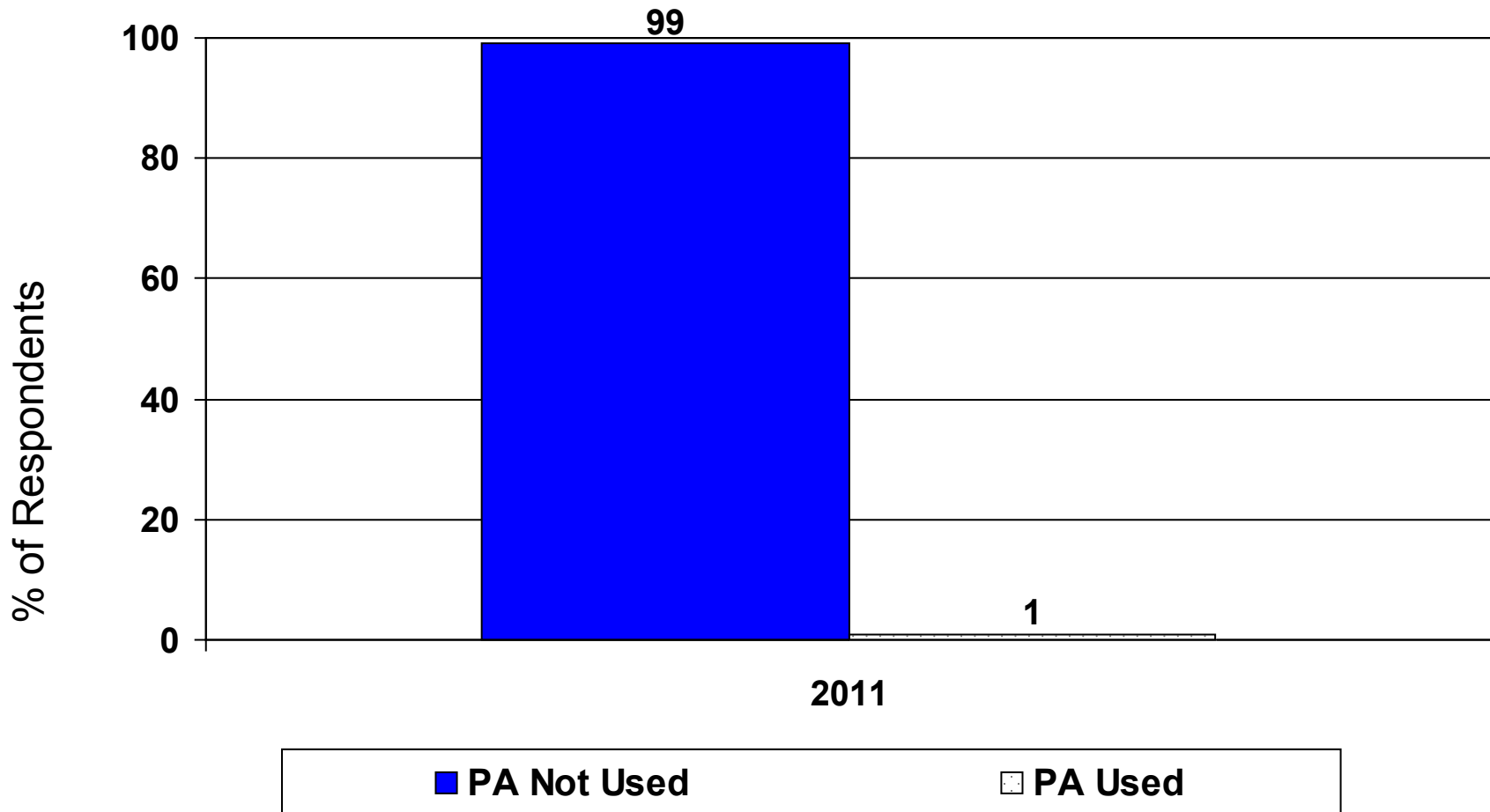
Recess and Physical Activity

% of LEAs in Which No School or Teacher Withholds Recess as a Punishment.*

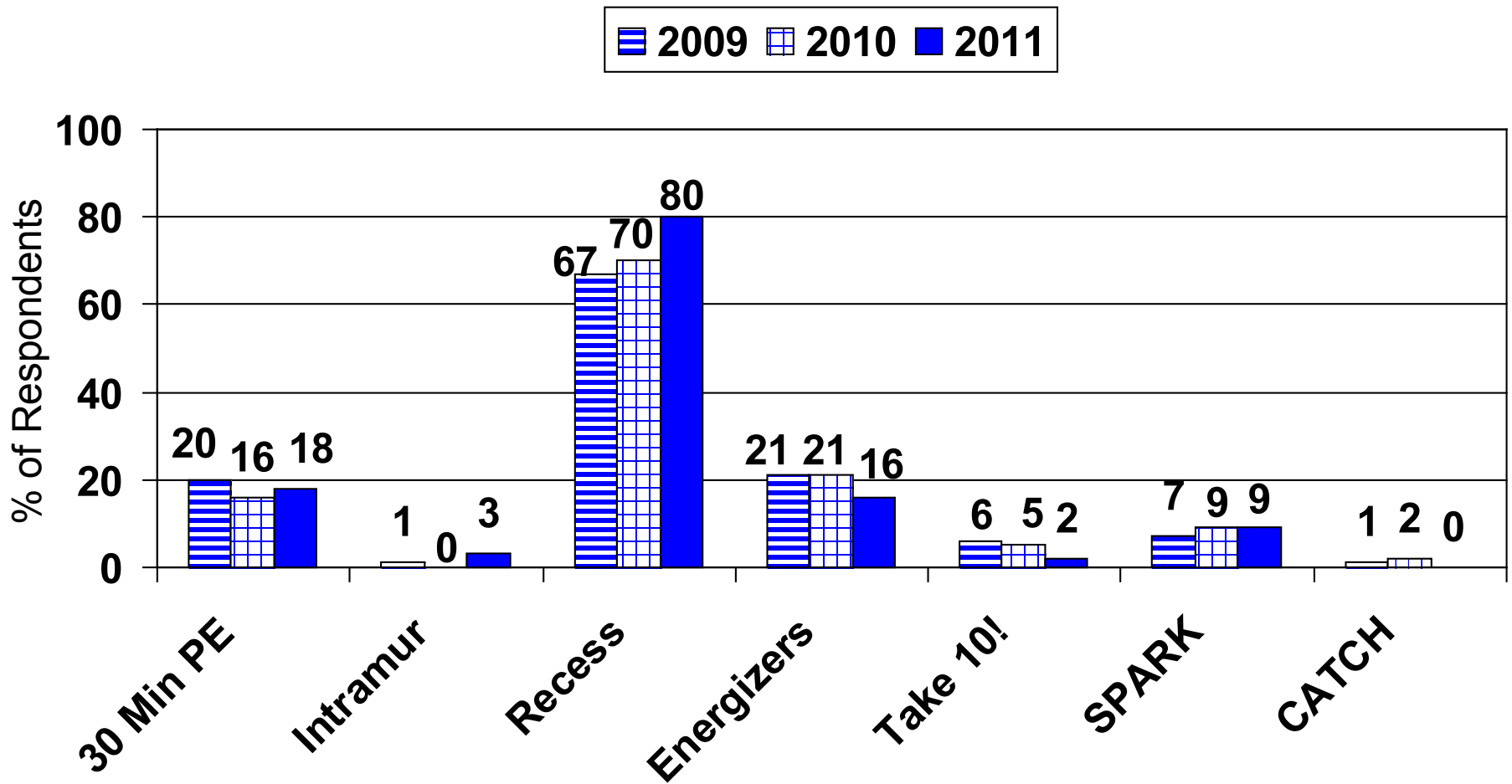


* This includes staying in to make up work or to do extra work

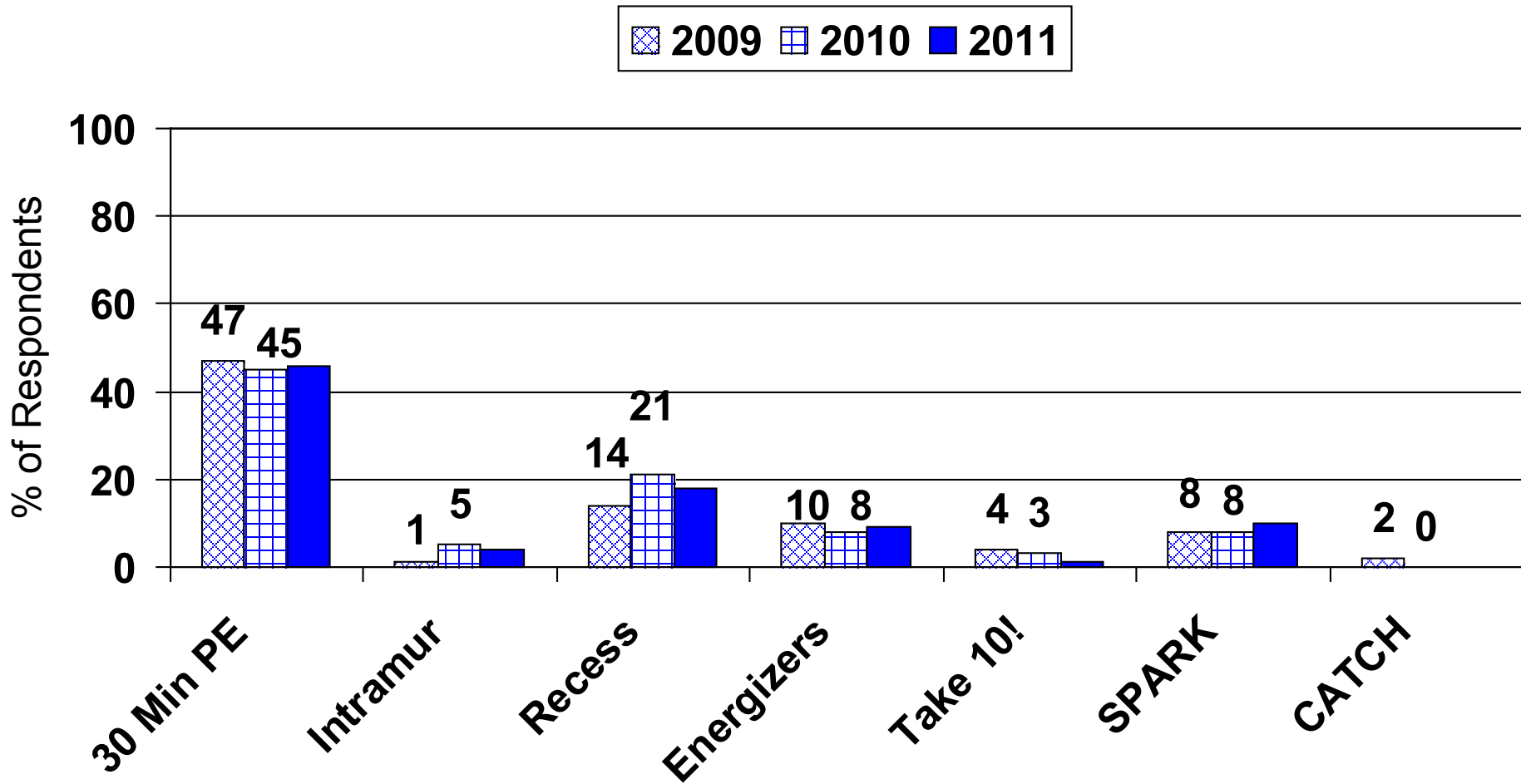
% of LEAs in Which No School or Teacher Uses PA as a Punishment.*



LEA Provides Moderate to Vigorous Physical Activity Through Daily (ES):

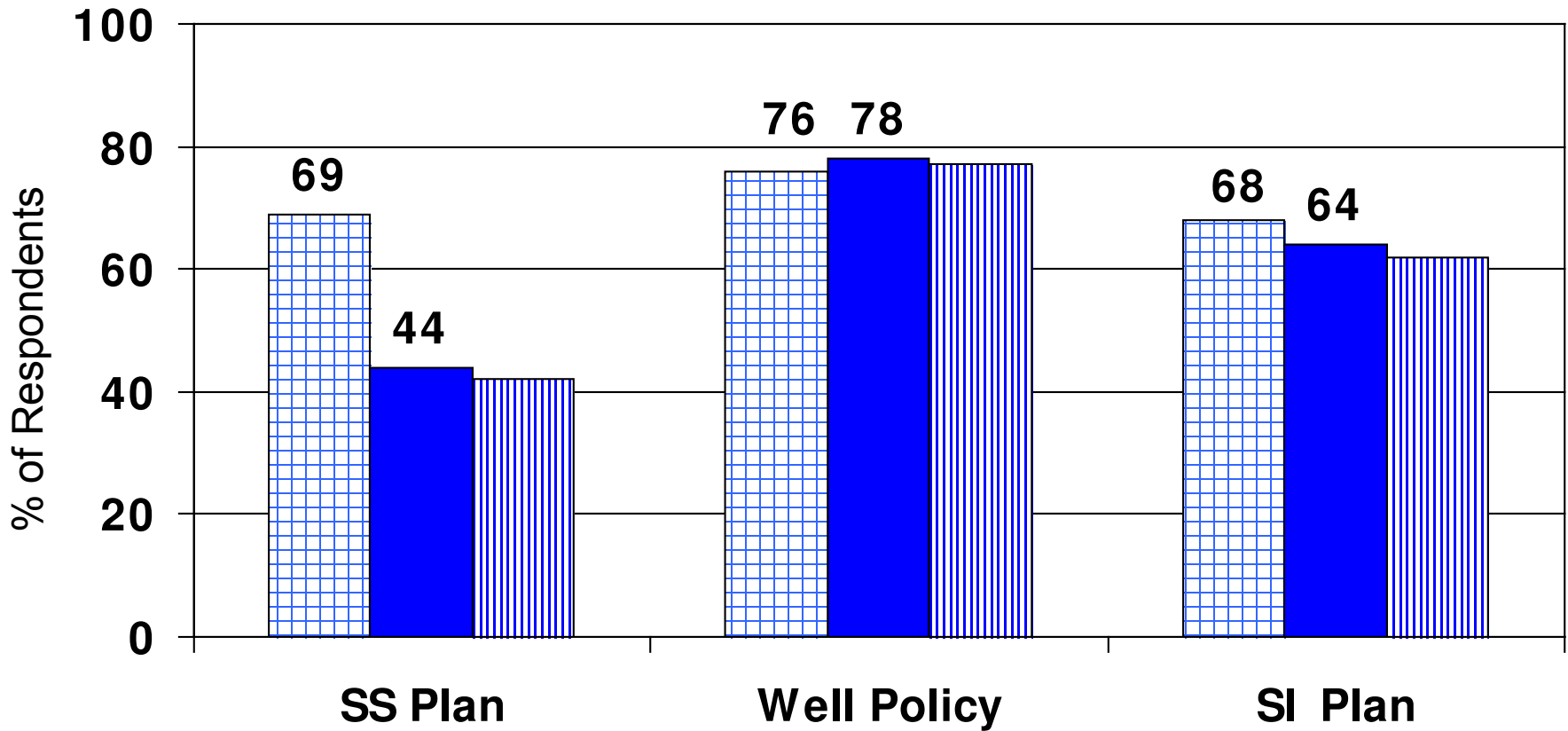


LEA Provides Moderate to Vigorous Physical Activity Through Daily (MS):



Incorporating the HAC Policy

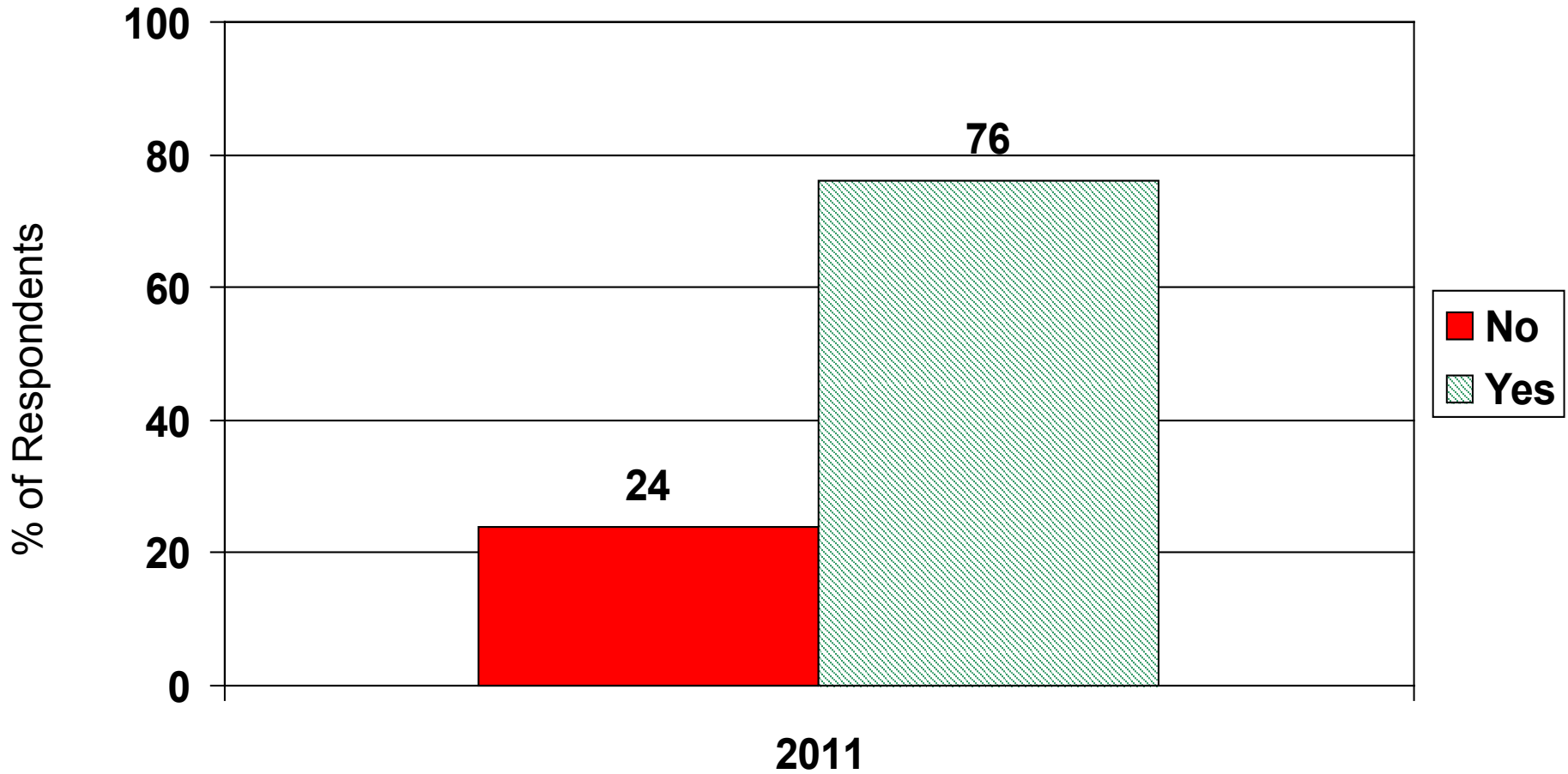
2009 2010 2011



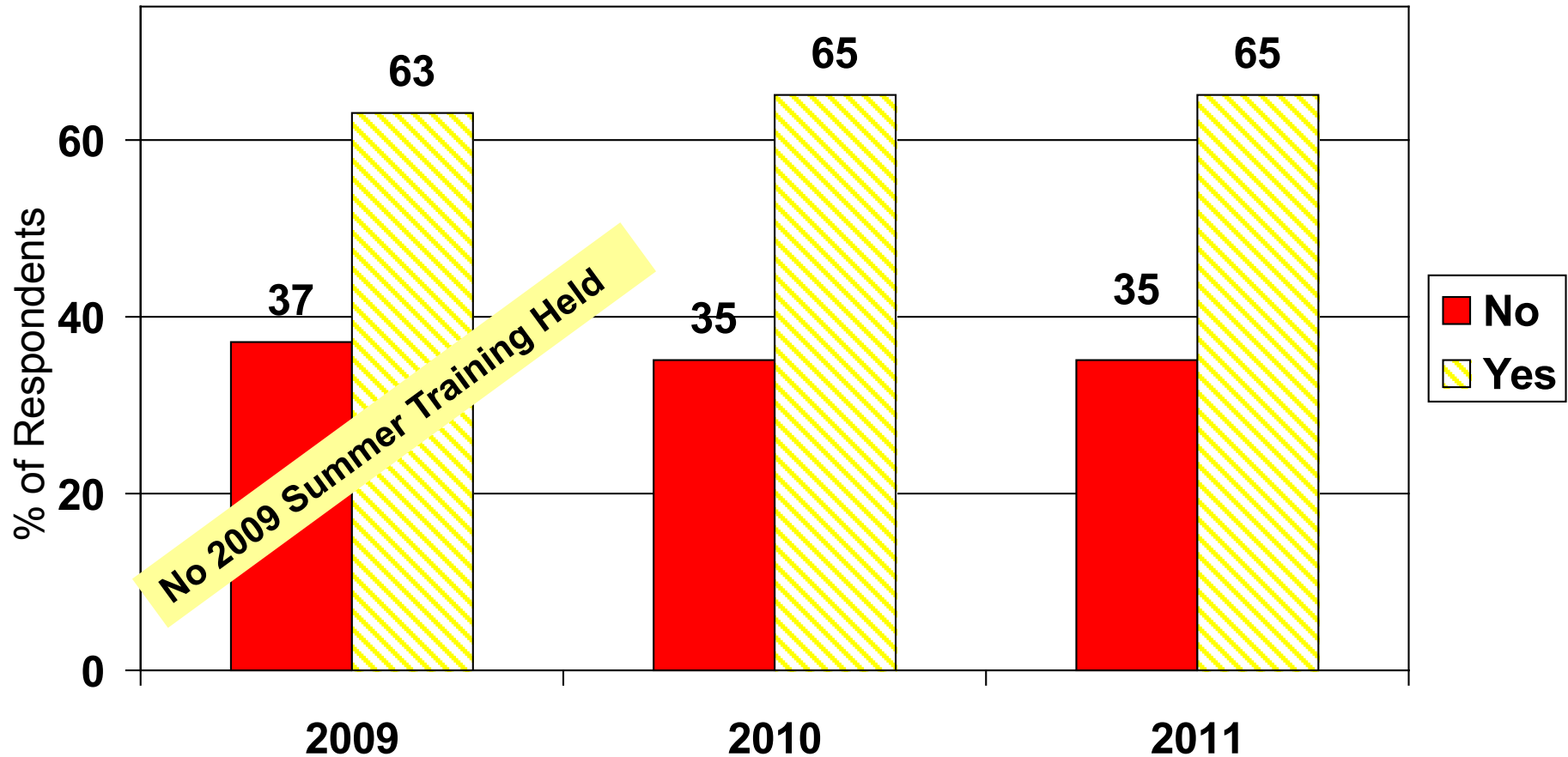
SECTION 4

Coordinated School Health

LEAs With Joint Use Agreements



LEA Has Sent a Representative or Team to Annual SHAC Training*



Reasons for Not Attending Annual SHAC Training

