I. What is the School Health Advisory Committee (SHAC)?

State law mandates that each school district have a School Health Advisory Committee (SHAC) that reviews health curriculum and supports a Coordinated School Health Program in the district. The Dallas Independent School District’s SHAC is composed of approximately 35 members. The membership includes parents, DISD staff and representatives from community groups interested in the physical and behavioral health of children. The School Health Advisory Committee works to strengthen programs with DISD to promote the health of the students. It focuses on the critical health issues of DISD students of obesity, diabetes and asthma.

Responsibilities of the SHAC include:

- Approval of health curriculum, including human sexuality education
- Review of the Dallas ISD wellness policy required for schools participating in the USDA National School Meals Program
- Foster implementation of Coordinated School Health across the district

For the past year the SHAC has been co-chaired by Julie Grim MPH, RD, LD, Vice President of Operations of the Baylor Health Care System Diabetes Health and Wellness Institute and Meridith Manning, mother of a fourth grade student at Withers Elementary and second grade student at Dealey Montessori. The SHAC advises and works in conjunction with the District Coordinated School Health Leadership Team, chaired by Barbara Johnson, Director of Health and Physical Education.

The SHAC meets at least four times annually, as outlined in Table 1.

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<th>Table 1. Meetings of the DISD SHAC</th>
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<td>2011-2012</td>
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<td>January 19, 2012</td>
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<td>June 14, 2012</td>
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<td>2012-2013</td>
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<td>September 11/12 – new members</td>
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II. Accomplishments of the School Health Advisory Committee include:

A. In response to previous SHAC recommendations the District has:

- Purchased and trained all elementary and middle schools in the state-approved CATCH (Coordinated Approach To Child Health) Program.
- Maintained a .5 Health Education credit and 1.5 Physical Education credit for high school graduation.
- Allocated funds to support a quality health and physical education program that meets and exceeds state and local requirements.
- Considered revisions to FFA (REGUALTION) with a heavier emphasis on monitoring and regulatory activities, nutrition promotion activities, and expansion to include other components of Coordinated School Health.

B. Established a formal Calendar of Meetings that reflected Action meetings and Subcommittee meetings. The subcommittees included:

- Health Education
- Human Growth, Development and Sexuality
- Food and Child Nutrition
C. Approved recruitment materials to increase parental and community involvement in the School Health Advisory Council.

III. Recommendations to the Board of Trustees:
A. Continue to maintain a .5 health education credit and 1.5 physical education credit for high school graduation
B. Continue to support and monitor implementation of district-wide Coordinated School Health initiative to include all nine components
C. Continue to offer Prep University parent classes next year that include more topics about school health
D. Formal board presentations for the Health Education subcommittee and Human Growth, Development and Sexuality subcommittee will be made in the early fall of the 2013-2014 school year to include:
   i. Adoption and purchase of a new Human Growth, Development and Sexuality Program
   ii. Revision to local policy to require one semester of Health Education at the middle school level to be taken by all students during the 7th or 8th grade
   iii. Keep the .5 Health Education graduation requirement for high school students to be taken only during grades 9-12 or during summer school before entering the 9th grade

IV. SHAC Plans for the 2013-2014 school year:
A. Parent and Community Involvement: Create options to pilot in identified schools that will increase parental awareness of CSH and CATCH efforts. Ideas include: increase use of school messenger about family wellness events, creating a promotional video, connecting with PTA.
B. Human Growth, Development and Sexuality: Review suggestions for elementary human growth, development and sexuality programs and protocol for community presenters
C. Health Education: Review implementation of elementary integrated health curriculum and health education as part of the Dallas ISD Coordinated School Health initiative to ensure compliance
D. Data Analysis: Review progress in implementation of 2011-2012 recommendations, as well as analyze the MVP Profile results collected for the 2012-2013 school year/implementation of the CATCH Program, evaluate implementation of Breakfast in the Classroom, review feasibility of creating a central database to house demographic, health and performance data of Dallas ISD students
E. Food and Child Nutrition: Actively promote revised FFA (REGULATION) when passed; review progress of Breakfast in the Classroom, a la carte items served in the cafeteria, and compliance with not selling competitive foods during the school day (e.g., field day).
F. Review indicators for evaluating effectiveness of Coordinated School Health Programs per SB 892.

For any clarification or discussion of concerns, please contact:

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