



**Critical Health Problems (CHP)  
&  
Comprehensive Health Education (CHE) Advisory Committee  
aka  
School Health Advisory Committee (SHAC)**

**January 24, 2013  
1:30 p.m. – 3:30 p.m.**

**Illinois State Board of Education  
Alzina Building  
100 N First Street  
3rd Floor (V-Tel)  
Springfield, Illinois**

**Illinois State Board of Education  
James R Thompson Center  
100 West Randolph Street,  
14th Floor (V-Tel)  
Chicago, Illinois**

**Illinois State University Campus  
Technology Development Center  
301 S. Main Street  
Room# 103 D  
Normal, Illinois**

**I. Opening Remarks:**

Jessica Gerdes: Welcomed everyone to the committee meetings. Until a chair has been appointed Joey Ohnesorge and Jessica Gerdes will coordinate this meeting today.

One member that is not part of the committee is the Joint Committee of School Health; this committee no longer exists. The plan is to ask legislative liaison at Illinois State Board of Education (ISBE) is propose to make a change in the statute. At this point we do not know if the revision will be to replace the Joint Committee of School Health will another entity, keeping the membership at eleven (11) or remove the Joint Committee and taking the membership down to ten (10). But currently we are at ten (10) members.

This is a continuing committee, not a task force. As of today everyone starts their four year term on the committee, since there are no roll-over of terms. There are a couple of objectives written into the act. Our interpretation of the act is to determine the following:

- What are critical health problems of the schools aged child and;
- How can health education address those problems?

## **II. Introductions of Committee Members:**

### **Members present:**

Vince Champagne, Illinois Department of Children and Family Services

Jeffrey K. Clark, Illinois State University (College/Universities Member)

Daniel Harris, Illinois Department of Human Services

Yamani Hernandez, Illinois Coalition for Adolescent Health (Voluntary Health Agency Member)

Sue Ickes, United Township High School District #30 (Local Boards of Education Member)

Victoria Jackson, Illinois Department of Human Services

Linda Kimel, Illinois Association of School Nurses (Professional Health Associations Member)

Conny Moody, Illinois Department of Public Health

Tom Schafer, Illinois Department of Public Health

Alexandra Schaible, Healthy Schools Campaign (Voluntary Health Agencies Member)

Member not present: Kim Peck, DCFS

### **Illinois State Board of Education present:**

Jessica Gerdes, School Nurse/Health Issues Principal Consultant

Joey Ohnesorge, Health/ Physical Education Principal Consultant

Katie Estes, Program Specialist

## **III. OMA & Ethics Requirements:**

Katie Estes is missing a few documents from a couple of the members. These persons will be contacted individually.

## **IV. Review Bylaws and Vote on Adoptions:**

Jessica Gerdes: We need to review guidelines for the committee. According to the guidelines we need to do the following:

- Elect a chairperson;
- Determine what number constitutes quorum
- Determine what voting margin is needed to pass a motion.

I am going to open the floor up for nominations for chair at this time.

Yamani Hernandez: Nominated herself to chair the committee. Motions were as follows:

- 1<sup>st</sup> Motion – Sue Ickes
- 2<sup>nd</sup> Motion – Tom Schafer
- Vote: all in favor, no nay, no abstention

Jeff Clark: Is there a stated number of meetings for this committee (i.e. once per year or quarterly)?

Jessica Gerdes: No, the number of meetings is not stated in the Act; this committee must establish.

Quorum: Jeff Clark moved that quorum for this group be six (6) members must be present for us to conduct business. Second by Conny Moody; all in favor, no nay, no abstentions.

Surrogates allowed: Motion to allow a surrogate to stand in place of an appointed member and the surrogate must be identified to committee chair before the start of the meeting. Motions were as follows:

- 1<sup>st</sup> Motion – Victoria Jackson
- 2<sup>nd</sup> Motion – Yamani Hernandez

Tie votes: In the guidelines to be discussed is a statement that tie votes will result in favor of the nay. Matter would drop unless vote to table to the next meeting for another vote.

The remainder of the proposed operating guidelines are formative or written into the act, stating:

- Members of the committee are representative of the stakeholders.
- Committee is required to follow Open Meetings Act and the Ethics Act.
- Committee will post information about the committee on a website, and this Committee chooses the ISBE website
- Committee will adhere to the Gift Ban Act, FERPA, Illinois School Student Records Act, FOIA Act laws
- Committee will appoint an Ethics Officer. We can choose to appoint a member from the group or choose to use the ISBE Ethics Officers, Marceline Dutton, Deputy Director General Counsel.

Motion to appoint Marceline Dutton, ISBE as the appointed Ethics Officer for the committee:

- 1<sup>st</sup> Motion – Jeff Clark
- 2<sup>nd</sup> Motion – Sue Ickes

Motion to adopt the operating guidelines as the bylaws. Motions were as follows:

- 1<sup>st</sup> Motion – Linda Kimel
- 2<sup>nd</sup> Motion – Vince Champagne

#### **V. Review PA 77-1405 (105 ILCS 110/1 from Ch. 122, par. 861)**

This Act shall be known and may be cited as the “Critical Health Problems and Comprehensive Health Education Act”.

#### **VI. Overview of HP 2010 and other national and state studies related to critical health problems of the school age child:**

Jessica Gerdes: Suggested that we have input from the group to discuss, what are the critical health problems of the school aged child? Each of us represents a group or agency that has identified those problems.

Tom Schafer: From the Public Health standpoint one of the biggest issues we are dealing with is obesity. This would be the most critical health issue in Illinois and nation-wide.

Conny Moody: The CDC reminded me this morning that we no longer use the term “obesity”; it is now “healthy weight.” Linked along with the weight issues, we need to increase physical activity in children. Along with a reduction in caloric intake from sugar sweetened beverages. Also the lack of decline in youth smoking rates in the most recent years. Those are some of the chronic disease areas that we should be looking at.

Jeff Clark: One of the underlying issues that also need to be addressed is mental health.

Linda Kimel: Asthma is a huge problem. In the schools we have a huge problem with asthmatic children and proper management.

Sue Ickes: Agreed with all the other critical health problems. One other problem is with health literacy.

Victoria Jackson: Statistics from school based health centers shows the following most common reasons that students visit are:

- 1<sup>st</sup> – Health Maintenance (Physical, immunizations, etc.)
- 2<sup>nd</sup> – Reproductive Health Related Issues. Students have lots of questions, which are reflected in the Youth Risk Behavior Survey (YRBS).
- 3<sup>rd</sup> – Mental Health Issues
- 4<sup>th</sup> – Acute Illness

Yamani Hernandez: In Chicago area not only is reproduction a major issue but also our sexually transmitted diseases (Chlamydia and Gonorrhea) are off the charts compared to other cities in the nation. We need to make sure the resources are available.

Vince Champagne: The Department of Children and Family Services (DCFS) has been working with Chapin Hall on trying to find out what are the critical health problems, for children in foster care. In general most children in foster care still experience the same health issue as children not in foster care but at higher rates. With our foster care population we see the rate of children and youth with chronic health problems (physical and behavior) is about twice the rate of the general population.

Daniel Harris: Added that some of the health problems in children have a lot to do with what the child is dealing with at home such as possible substance abuse etc.

Jessica Gerdes: We need to make sure we have data to support what we are experiencing and seeing. I have distributed the results from the 2011 YRBS which outlines some of the issues we are seeing. This report is coordinated by ISBE and the data is compiled by the CDC.

Victoria Jackson: After looking at the 2011 results, a concern is the number of students who have said they have been hit, slapped, or physically hurt by a boyfriend or girlfriend (11.1%) as well as those that reported carrying weapons. In addition the sexually transmitted infections like Chlamydia is 11.5%, those results are higher than the rates seen in prisons.

Conny Moody: Suicide rates are also concerning, Illinois Department of Public Health has just been awarded a grant to help identify children at risk and make referrals within the community.

Jessica Gerdes: Jeff Clark had sent a list of data comparing Illinois vs. U.S. as far as risk behavior. The list indicates that Illinois is doing something right in some behaviors. Let's look at those and maintain efforts.

To recap the issues that we have discussed on critical health problems:

- Obesity (high rate),
- Smoking,

- Mental Health,
- Access to Care
- Violence,
- Sexual Behavior,
- Asthma,
- Health Literacy,
- Reproductive Health Issues,
- Foster Care (Mental/Physical Health Problems),
- Pregnancy (high rate)
- Sexually Transmitted Infections (high rate),
- Traumatic Events (Substance abuse has a negative impact on those children),
- Building Resiliency Factors (Help establish goals and develop coping mechanisms).

Vince Champagne: Related to the Health Literacy matter there is a lot we can do. But we need to teach youth responsibility for managing their health. Once youth reach seventeen (17) they are responsible for their own health.

Linda Kimel: Health Literacy will be really key that we start building that into school programs.

Yamani Hernandez: Bullying based on sexual orientation is another data point that we also should look into.

## **VII. Overview of Illinois Learning Standard related to health education:**

Joey Ohnesorge: We have provided you with a couple handouts, one Critical Health Problems and Comprehensive Health Education Act, the second is 2006 School Code references. In regard to the Comprehensive Health Education Act, you can see what is mandated in schools curriculum. It starts in Section 3; a majority of these requirements have been in effect for a long time. These are things that we might want to take a look at and consider updating them to meet the needs of today.

Listed in the 2006 Schools Code References, these are a list of the topics that should be addressed in schools:

- AIDS Education/Training (Grades 6-12)
- Adolescent Suicide Training (Grades 7-12)
- Alcohol and Drug Use and Abuse (Grades 5-12)
- Bullying
- Child Abduction
- Comprehensive Health Education (Grades K-12)
- CPR
- Family Life
- Parenting (Optional)
- Physical Education (K-12)
- Sex Education (Optional in Grades K-12)

These are things we really could a lot with as far as curriculum. We have a chart that shows descriptors by grade level showing what is being taught at each grade level.

Linda Kimel: Are any of these mandated curriculums being monitored?

Jessica Gerdes: The Regional Offices of Education monitor the LEAs for adherence to mandates.

Joey Ohnesorge: Administrators are also supposed to make sure these things are being taught.

Linda Kimel: Math and Reading are becoming so important because of test scores. Teachers are being told to put Science and Social Studies on the back burner; of course if those topics are being put on the back burner then Physical Education is being put on the back burner as well.

Victoria Jackson: Regional Offices of Education have a tool to monitor statewide, could we possibly see that tool?

Jessica Gerdes: We have a copy of the document that the Regional Offices use to monitor the schools. It can be shared with this group.

Tom Schafer: Physical Education is mandated, but it also has a number of opt out options (waivers). Do any of the other health education curriculums have options to receive a waiver as well?

Jessica Gerdes: A school district can request a waiver on almost anything; ISBE approves or the legislature approves.

Conny Moody: In some of the topic areas it states that some of these curriculums must be done annually and in others it is not specified.

Joey Ohnesorge: The document I will be sending out to everyone showing the breakdown of grade levels and types of health education taught to those grade levels with descriptors, does show how often these topics need to be taught. Enhanced Physical Education Task Force is trying to increase the physical education minutes per school day. We are looking at a Physical Education class as forty-five minutes but how many of those minutes are actually spent doing physical activity. So the task force is trying to make sure that students are going to be able to get the full thirty or sixty minutes of physical activity time required.

Vince Champagne: Will the Physical Education Task Force be looking at things like concussions?

Conny Moody: No, the task force has a specific mandate to make recommendations to the Governor and the General Assembly on specific goals that are in the Illinois Learning Standards for Physical Development and Health. Specifically those goals are as follows:

- Movement Skills,
- Physical Fitness,
- Team Building,
- Health Promotion, Prevention and Treatment,
- Human Body,
- Communications,
- Decision making

Those are a list of the goals the task force has been asked to look at and make recommendations to the Governor and General Assembly on ways to update and improve those goals.

Yamani Hernandez: Can someone explain what the difference of the Physical Education Task Force and this Committee is?

Jessica Gerdes: The Physical Education Task Force is part of legislative act that is just for this year, they are supposed to make recommendations by August 2013. This is an on-going Advisory Committee. The Task Force is mainly reviewing and looking at Physical Education and School Health Policy and Wellness. This committee may look at anything in health and education.

Yamani Hernandez: Who has been appointed to the Physical Education Task Force?

Conny Moody: We can share the background and a list of the members.

Tom Schafer: What are the penalties for the schools that do not follow through with the mandated curriculums?

Jessica Gerdes: The only financial penalty that I am aware of is in regards to compliance with immunizations and health examinations; however, few, if any, districts have been known to have been penalized for failure to meet at least 90% compliance each year.

Conny Moody: Reviewing the Act, I am assuming this has grown and developed over the years, as issues have popped up, topics have been added. As a committee we need to look at "what should this act look like today"?

Conny Moody: When we are able to view the spreadsheet laying out all the health curriculum I think it will make it easier to view required vs. optional.

Yamani Hernandez: On the handout "2006 School Code List" has there not been an updated list?

Jessica Gerdes: Yes, the School Code is updated every two years; we just have not had a chance to update that list. Katie and Joey are going to work on compiling a new list with page numbers from the 2012 School Code.

Joey Ohnesorge: Just a comment to add, from my experience working in the schools and teaching the curriculum. Schools in Illinois have the right to exercise local control. I have worked in five different schools, in every school it has been done differently.

#### **VIII. Establish Goals, Timelines, Future Meetings:**

Jessica Gerdes: Do we have mission statement to guide us through our four year terms?

Jeff Clark: Based on what we have received on legislation says we are to provide advice to ISBE; regarding health education and critical health issues.

Jeff Clark: What is ISBE's role and responsibilities to be able to make sure this committee is going to be effective?

Jessica Gerdes: If you look on section four of the Act it helps explain. I will also work with ISBE legal division to find out if there are more specific guidelines.

Yamani Hernandez: It seems to be a clear goal to take the current Act and revise it with updates. Then present it to ISBE with our suggestions. I would suggest that we meet quarterly.

Tom Schafer: The current task is overwhelming. Can ISBE give us some main points they would like us to look into first?

Jeff Clark: Possibly the next meeting would entail pressing issues ISBE wants addressed.

Conny Moody: Maybe first charge may be, what is a comprehensive program for Illinois? Then we can present to ISBE what we think it should really look like.

Yamani Hernandez: Do we know what the original committee did?

Jessica Gerdes: We unfortunately have had little luck in finding minutes from the original committee. I have found a list of the original committee members.

Yamani Hernandez: Was Jenny Knaus (sp) the chair of the original committee? I only ask because we have some archived records I can look through to see if I can locate some of the old minutes to see where they were headed with the original committee, or what they left of with.

Next meeting: The committee voted (6-4) in favor of holding quarterly meetings.

We set four tentative dates for the next meeting: April 8<sup>th</sup>, 9<sup>th</sup>, 15<sup>th</sup>, or 16<sup>th</sup> at 1:30 p.m., depending on room availabilities. ISBE will notify all of the selected date when location is confirmed.

**IX. Public Comment:**

None

**X. Adjourn:**

Motion to adjourn.

- 1<sup>st</sup> Motion – Linda Kimel
- 2<sup>nd</sup> Motion – Vince Champagne