

HOWARD COUNTY SCHOOL HEALTH COUNCIL

July 1<sup>st</sup>, 2014

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Dear Drs. Foose and Rossman, and Chairpersons Giles and Sheesley,

On behalf of the School Health Council (SHC), I am very pleased to submit our annual report, which is due at the end of each school year, per the SHC's bylaws. You will find a summary of our accomplishments and information gathering activities during the past year in the attached document, which also makes the three following, broad recommendations for you to consider as we all continue to strive to improve our students' health, well-being and wellness in the school system and the community-at-large.

**Recommendation #1: Improve Communication about the School Health Council and the Wellness Policy in General.** See annual report, attached, for more details.

**Recommendation #2: Develop a Standard Data Collection Tool to Collect a Minimum Set of Measures on the Implementation of Wellness Policy No. 9090.** See annual report, attached, for more details.

**Recommendation #3: Staff the Wellness Sub-Committee of the School Health Council in Response to the Adoption of Wellness Policy No. 9090.** See annual report, attached, for more details.

We hope that our recommendations will be well received. Please let me know if you have any questions or would like to meet in person to discuss these further. I can be reached at [armarkus@gwu.edu](mailto:armarkus@gwu.edu) or 202.994.4139.

Warm Regards,



Anne Rossier Markus, JD, PhD, MHS  
Chairperson, Howard County School Health Council

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**Strengthening School Health and Wellness in Howard County:**  
*Recommendations from the Howard County School Health Council*  
(School Year 2013-2014)

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**1.0 Mission and Objectives**

The mission of the Howard County School Health Council (HC-SHC) is to promote coordinated school health policies and programs to enhance academic achievement, health and wellness for all students. The School Health Council is a COMAR-mandated advisory group, which identifies needs, reviews practices, programs and policies, and generally provides advice to the Howard County Public School System (HCPSS) and the Howard County Health Department (HCHD) on aspects of child health as defined by the Centers for Disease Control and Prevention (CDC) Coordinated School Health (CSH) approach. The CSH approach is a systems approach to improving the health and well-being of all students so they can fully participate and be successful in school. CSH integrates health promotion efforts across eight interrelated components: (1) Counseling, psychological, and social services; (2) Family and community involvement; (3) Health education; (4) Health promotion for staff; (5) Health services; (6) Healthy school environment; (7) Nutrition services; and (8) Physical education.

The HC-SHC has several objectives:

- Act as a “hub” between the Public School System (HCPSS), the Health Department (HCHD), the PTA Council of Howard County (PTACHC), and other community partners where any matter pertaining to school health, well-being, and wellness – broadly defined – can be discussed, studied, and considered for improvement on a system-wide level;
- Follow a transparent and systematic process for consideration of these matters;
- Assess the status of school health, well-being, and wellness, identify problems, and outline possible solutions for the development of broad policy recommendations and/or practices targeting areas selected for improvement;
- Monitor or evaluate the implementation of existing policies, and identify strengths to build upon and weaknesses to address.

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## 2.0 Meeting Snapshot for School Year 2013-2014

During the 2013-2014 School Year, the HC-SHC met 10 times, convening 5 times as a full council, and 5 times as a smaller, executive committee. The meeting dates, topics, and presenters are presented in Table 1, below. The membership roster is attached as Appendix 1.

**Table 1: Howard County School Health General Council Meeting Dates and Topics, 2013-2014**

Date	Topics	Speakers
9.11.13	Discussion of HCHD, HCPSS, and PTACHC Priorities - Foci for 2013-2014 School Year	SHC Members
11.13.13	Social Change Through Movement MD-SHC Call for Applications to Develop Strategic Plan	Anthony Newman, Baltimore Partnerships Coordinator, Move This World!
1.15.14	Update on Wellness Policy/Physical Activity Plan  Update on Wellness Center at Bollman Bridge	Linda Rangos, Coordinator, Office of Health and Physical Education, HCPSS  Marva Dickerson, Clinical Nurse Supervisor of Family Planning, HCHD
3.12.14	Healthy Howard and the Affordable Care Act  Update on Wellness Policy 9090  Feedback from the Maryland Wellness Policies and Practices Project  Maryland School Health Council grant application  Bright Minds Foundation	Patricia Omana, Regional Outreach Manager, Healthy Howard, Inc.  SHC Members  SHC Members (based on briefing at February Executive Committee meeting)  SHC Members  SHC Members
5.14.14	Update on Student Services Initiatives	Patty Daley, Executive Director, Student Services, HCPSS

Source: Howard County School Health Council, June 2014.

### 3.0 Summary of Key Accomplishments

The SHC continues to be active, following up on several items from the previous school year (e.g., Wellness Policy No. 9090) and adding new ones as needs are identified as priorities. Among the Council's key accomplishments for the 2013-2014 School Year are the following:

- The SHC sought and successfully obtained funding from the MD-SHC, which issued a call for small grant applications to local councils throughout the state. The purpose of the HC grant would be to work with high school clusters, targeting those where students have fewer opportunities, are minority in higher numbers, and/or have parents who are non-English speaking, to identify, recruit and train a small cadre of high school students who would become public health ambassadors. Our ambassadors would share information (already developed by HCHD and Healthy Howard, Inc., but tailored to a high school audience) about the importance of health insurance and accessing needed care and describe coverage options available in the county. They would work in tandem with the Regional Outreach Manager, Healthy Howard, Inc., who oversees all of the patient navigators in the county. Their participation could count toward community service credits and potentially fall under one of the academies for further recognition. The SHC would oversee the whole initiative, approach high school principals to discuss it, and evaluate its success through some simple measures. The SHC is awaiting final word of the final amount of funding to be awarded. The HCHD will be the keeper of the fund. PTACHC, HCHD and HCPSS all provided letters of support for the initiative.
- The SHC Chair met with the President of the BrightMinds Foundation, the Chair of the Foundation's Board and the Chair of the Grants Sub-Committee to the Board to discuss opportunities for teachers to apply for grants to develop and implement innovative initiatives on nutrition and physical activity that would be tied to a broad, common framework. Also discussed was the role of the SHC in following some of these developments and providing feedback to the Foundation and the school system. The Chair drafted and submitted a framework for a potential partnership between the SHC and the Foundation focused on physical activity, which was well received. The partners are currently discussing next steps with the school system, Healthy Howard, Inc., and the Foundation.
- Throughout the School Year, the SHC continued to track local, state, and federal developments pertaining to the federally-required revisions to Wellness Policy No. 9090. The Council specifically focused on physical activity this year and the plans for rolling out increased physical activity throughout the day. It also reviewed the meaning of the Affordable Care Act in the county, including outreach and enrollment efforts. The new Wellness Center at Bollman Bridge was discussed within that context and several updates on enrollment and visits were provided throughout the year. The Chair testified at the March 2014 hearing of the Board (see Appendix 2).
- The University of Maryland, MSDE and DHMH briefed the Council on the results from the state evaluation of local wellness policies. One main finding was that only 66% of those interviewed at individual HC schools knew of the SHC and its purpose. Otherwise, findings were similar to those of the SHC reported 2 years ago, which highlighted weak and less than comprehensive language throughout the previous wellness policy. Many of these weaknesses have been addressed in the newly-adopted policy. Several members of the SHC attended the wellness conference held in May at the University of Maryland and organized by the University, MSDE and DHMH.

## 4.0 Recommendations

The SHC is pleased to submit three main recommendations for consideration by the Superintendent, Health Officer, Boards of Education and Health, as well as other interested parties in the county to further our common goal of improving student health, well-being and wellness in the context of broader population health improvement in the community-at-large.

### **Recommendation #1: Improve Communication about the SHC and the Wellness Policy in General.**

Several take home messages from the May conference on wellness (*Making Wellness Work: One School at a Time*) included the following three items: 1) better communicate the content the wellness policy locally (e.g., what's new, what's required); 2) recommend tools/measures to wellness coordinators/teams and central office to standardize the information collected to monitor the policy and its implementation; and 3) track the status of the implementation of the adopted policy over time to inform future change and create an environment and culture of wellness that permeates the system rather than being seen as "on top" of what is required in the area of academics.

The SHC proposes to follow up on these items by creating a website/webpage devoted to the Council and wellness-related activities. In order to do this, the SHC would seek approval by the school system. It also proposes to target principals with a short message about the SHC and its purpose and how it can support what they do in the area of wellness. Finally, it would develop some simple and short materials, such as fact sheets, that explain what is new and what is required under the new policy and how these changes relate to the main components of Coordinated School Health.

### **Recommendation #2: Develop a Standard Data Collection Tool to Collect a Minimum Set of Measures on the Implementation of Wellness Policy No. 9090.**

In the 2014 Board-adopted version of Wellness Policy No. 9090, "the Howard County School Health Council, which serves in an advisory capacity, will provide feedback annually to the Board."

The SHC plans on inviting targeted presentations to perform this function. It also would like to provide some technical assistance, working with HCPSS and HCHD, on developing a minimum set of data elements that would be collected across all schools in the county in order to ensure some consistency in the reporting and monitoring of the implementation of the policy. Finally, since we remain without any funding resources, we are also requesting that the Health Department allocate an internship position to provide support for data collection and analysis.

### **Recommendation #3: Staff the Wellness Subcommittee in Response to the Adoption of Wellness Policy No. 9090.**

The 2014 Board-adopted version of Wellness Policy No. 9090 encourages the community to participate and provide input on the implementation of the policy via several existing conduits, including the Wellness Sub-Committee of the SHC, which was established in the SHC bylaws adopted in Spring 2013. Article VIII of the bylaws, which addresses committees, states that one of the Sub-Committees of the SHC is the

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Wellness Sub-Committee. Furthermore, the “Council Chairperson with the approval of the Executive Board shall appoint the sub-committee Chairpersons, on an as needed basis.”

The SHC proposes to appoint a Chair and a Co-Chair to run this Sub-Committee, which would be entirely focused on the implementation of 9090 and obtaining feedback from the community on how it is rolling out. The Sub-Committee would report back to the full Council at regular Council meetings every other month. The Sub-Committee would also serve as a resource to the School Improvement Office in developing standard communication and data collection tools that can be distributed to individual schools to provide an easy-to-use framework for identifying opportunities, setting goals and recording outcomes.

The SHC would like to ensure that a majority of members are from a mix of community groups and non-organized members of the community. It would also like to request the School System and the Health Department to appoint a few staff to this Sub-Committee, but in no case a majority. The SHC established an *ad hoc* Outreach Sub-Committee last year, which developed an outreach strategy and several outreach materials that could be adapted for this purpose.

### **5.0 Conclusion**

This year has been extremely productive as evidenced by the information summarized in this final report. The SHC looks forward to the next School Year and anticipates continuing to work on the issues highlighted in this report, as well as monitoring progress toward better health, well-being and wellness for all students in Howard County.

*Respectfully Submitted July 1<sup>st</sup>, 2014 on behalf of HC-SHC by Anne Rossier Markus, Chair*

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**Appendix 1. HC-SHC MEMBERSHIP LIST, SCHOOL YEAR 2013-2014**

**Officers**

Anne Markus, At-Large, Chair  
Joan Webb Scornaienchi, At-Large, Vice-Chair  
Joanne Jackson, At-Large, Secretary

**HCPSS**

Kim Flyr  
Filipa Gomes  
Carol Hahn  
Keisha Major  
Marcy Maxwell-Hersl  
Marion Miller  
Linda Rangos  
Mike Senisi  
Dulcy Sullivan  
Linda VonParis  
Kami Wagner

**HCHD**

Kelley Bickersteth  
Marva Dickerson  
Jackie Dougé  
Robin McClave  
Elizabeth Menachery  
Colleen Nester  
Lorraine Quarrick

**PTACHC**

Deb Lattimer  
Caroline Rothfield

**COMMUNITY-AT-LARGE**

Terri Ann Chiu  
Rebecca Ramsing  
Jo Greenberg

**HOWARD COUNTY BOARD OF EDUCATION**

Ann DeLacy

**Administrative Support**

Joan Ford, HCPSS

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### Appendix 2. HC-SHC TESTIMONY ON WELLNESS POLICY 9090

#### Testimony before the Board of Education of Howard County

March 13, 2014 Public Hearing on Policy 9090 Wellness Through Nutrition and Physical Activity

Anne Rossier Markus  
Chair, Howard County School Health Council

My name is Anne Markus. I am a long time resident of Howard County and have two children in the Public School System. I am Associate Professor at The George Washington University in Washington, DC, in the Milken Institute School of Public Health Department of Health Policy. I am not here today as an academic but as an “on-the-ground” member of this community and as the Chair of the Howard County School Health Council (SHC).

The School Health Council is a state-mandated, advisory committee composed of three main groups: (1) individuals and organizations from the community, (2) public school system and health department staff, and (3) parents from the PTA Council of Howard County. Although the School Health Council as an entity is mandatory for each local school district in Maryland, many of its members participate on a completely voluntary basis. Why? Because investing in health and wellness in our schools (and in our community) is not only important to improve health outcomes, it is also the key to brain health and academic performance, the main goal of the school system.

The policy under discussion today proposes two new tasks for the SHC:

- 1) Provide “feedback” to the Board of Education on the implementation of the policy once adopted.
- 2) Establish a new wellness sub-committee to increase community representation in policymaking.

The SHC believes these tasks are responsive to the new federal requirements and appropriate functions for the Council under certain conditions, including some financial and non-financial support:

- 1) “Feedback” function: The SHC would like to ask the Board to ensure that the Council can easily seek information from within the school system and review adequate, appropriate, timely and necessary de-identified data in order to be effective in meeting the new expectations tied to this “feedback” function. We applaud the emphasis in the policy on establishing wellness teams at each school in the County, which is an important infrastructure change that will support implementation and monitoring of the policy at the most local level. However, the

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policy – as currently drafted – lacks clarity on how this information will “trickle back up” to the central office as well as to the SHC and who will be in charge or what mechanism will be in place to make sure that this effort is coordinated and shared at a systems level. The policy is delegating many important monitoring and evaluation functions to each individual school with little accountability to the school system as a whole. Building in more accountability would be beneficial.

- 2) Community representation function: There is some concern among some community members about the potential make-up of the new sub-committee. The policy does not provide assurances that the majority of the membership has to be from the community nor does it spell out that the Chair/Co-Chair should preferably be from the community. While these issues can be addressed in a revision to the Council's bylaws, the policy is silent on some broad principle of balancing interests from the community with the interests from other members of the Council, especially those who are either School System or Health Department staff. It would be beneficial to mandate that the leadership and a large majority of the sub-committee be non-staff members. The Board should also consider having the new sub-committee provide input on the implementation of Phases II and III recommendations.

Thank you for the opportunity to testify today and share some of our thoughts that pertain to the infrastructure surrounding the implementation and assessment of the policy. We look forward to our continued collaboration with the Board on these important issues.