

Utah School Health Profiles Highlights 2018

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What are the School Health Profiles?

The School Health Profiles provides a snapshot of health-related education, policies, and programs in Utah schools. The Centers for Disease Control and Prevention, in collaboration with the Utah Department of Health, developed and conducts the School Health Profiles survey in secondary schools every other year. The profiles help state and local education and health agencies monitor and assess characteristics of school health programs. They include information on policies related to physical education, tobacco-use prevention, nutrition, asthma management, health services, and violence and injury prevention.

How are the data collected?

Two questionnaires were mailed to 256 Utah secondary public schools containing any of grades 6 through 12 during the spring of 2018. One questionnaire was for school principals and one for lead health education teachers. Findings from the school principal survey are highlighted in this report.

How can this help my school?

Data from the School Health Profiles can be used to plan and enhance school health programs. Staff with the Utah Department of Health have compiled key findings and recommendations school administrators can use to guide their efforts to improve health programs.

School Health Index

The School Health Index (SHI) is an online self-assessment and planning tool. It helps school administrators identify the strengths and weaknesses of their health and safety policies and programs; develop an action plan to improve student health; and engage teachers, students, and the community in promoting healthy behaviors. It is recommended school administrators use the [SHI](#) to strengthen their policies and programs. The Utah Department of Health offers a free training to help schools complete the SHI. Please contact Sarah Roundy at saroundy@utah.gov for more information. The percent of schools which have used the SHI to assess policies, activities, and programs in the following areas are:

- 37.6% physical activity
- 36.9% nutrition
- 40.2% tobacco prevention
- 27.8% chronic conditions
- 31.1% violence and injury prevention
- 27.5% HIV, STD, and teen pregnancy prevention



Physical Activity



87% of physical education teachers or specialists received professional development on physical education or physical activity in the past year

37.6% of schools used the School Health Index or other tool to assess policies, activities, and programs for physical activity

32.1% of schools have a written plan that provides opportunities for students to be physically active before, during, and after school

77.9% of schools provide the opportunity for students to be physically active at least 60 minutes during, before, and after school

Recommendations:

- Ensure individuals who teach physical education are implementing the [Utah Core Standards for Physical Education](#).
- Require school staff and faculty to receive training and instruction on physical activity and physical education.
- Use the [School Health Index: Self Assessment and Planning Guide](#) to identify strengths and weaknesses of school health policies and programs, create an action plan, and encourage the community to promote better health.
- Create opportunities that support the recommended 60 minutes or more of physical activity each day for children and adolescents aged 6-17.
- Under Utah Code (53G-7-1202 and 53G-4-402), all elementary, middle, and junior high schools are required to create and distribute a Safe Routes Plan. The Safe Routes Plans will encourage an increase of walking and biking to school.

Resources:

- The [School Health Guidelines](#) serve as the foundation to create school-based healthy eating and physical activity policies and practices for students. Schools can create environments that are supportive of healthy eating and physical activity by implementing policies and practices.
- The [Comprehensive School Physical Activity Program \(CSPAP\)](#) enables students to participate in daily physical activity. The goal of CSPAP is to increase physical activity opportunities before, during, and after school and increase students' overall physical activity and health.
- Each local education agency that participates in the National School Lunch Program or other federal child nutrition program is required by federal law to establish a [local school wellness policy](#) in all schools under its jurisdiction. Physical activity goals must be included in the policy. Local wellness policies can address policies and practices for students' physical activity before, during, and [after school](#).

Nutrition



82.5% of schools place fruits and vegetables near the cafeteria cashier

99.1% of schools allow students to have a water bottle with them during the school day

42% of schools offer a self-serve salad bar to students

14.7% of schools have planted a school food or vegetable garden

36.9% of schools have used the School Health Index or other tool to assess policies, activities, and programs in nutrition

72.3% of schools have policies that establish standards for competitive foods to be available during the school day

Recommendations:

- Use the [School Health Index: Self-Assessment and Planning Guide](#) to identify strengths and weaknesses of school health policies and programs, create an action plan, and encourage the community to promote better health.
- Adhere to the required nutrition guidelines and required standards for competitive foods (foods sold outside of school meals). This includes foods sold in vending machines, school stores, à la carte, or at fundraisers.
- Ensure school nutrition program employees participate in trainings that meet requirements for a key provision of the [Healthy, Hunger-Free Kids Act of 2010 \(HHFKA\)](#). USDA has established minimum professional standards requirements for school nutrition professionals who manage and operate the National School Lunch and School Breakfast Programs.
- Support the [Utah State Board of Education Child Nutrition Programs](#).

Resources:

- The [School Health Guidelines](#) serve as the foundation to create school-based healthy eating and physical activity policies and practices for students. Schools can create environments that are supportive of healthy eating and physical activity by implementing policies and practices.
- Each local educational agency that participates in the [National School Lunch Program](#) or other federal child nutrition programs is required by federal law to establish a local school wellness policy for all students under its jurisdiction. Utilize [WellSAT](#) which is a quantitative assessment tool to help score and improve a [school wellness policy](#).
- Consider implementing strategies from the [Smart Lunchroom Movement](#).
- Implement [farm-to-school](#) components.
- All foods sold at school during the school day are required to meet [nutrition standards](#). The Smart Snacks in School regulation applies to foods sold a la carte, in the school store, vending machines, and any other venue where food is sold to students. A number of [tools and resources](#) are available to help schools identify food items that meet Smart Snacks criteria.



Asthma



93.5% of schools routinely use school records to identify and track students with asthma

25.2% of schools provide referrals to a provider for students diagnosed with or suspected to have asthma

85.5% of schools report that all or most students with known asthma have an asthma action plan on file

Recommendations:

- Assign school office staff to keep a list of students with asthma on file. Track absenteeism for all students with asthma and refer to primary care providers when students with asthma have excess absences.
- Work with school nurses to have an asthma action plan completed yearly by parents of children with asthma.
- Periodically assess your school using the School Health Index for asthma related policies and programs.

Resources:

- Utah law allows students to carry and self-administer their asthma medications. Read and implement a school policy in accordance to [Utah Code 53A-11-602](#).
- [Athletes and Asthma: The Community Coach's Role](#) provides free training for coaches. Have your staff and coaches trained yearly.
- The [Utah Asthma School Form](#) combines all of the forms a student needs to manage asthma at school. It serves as an asthma action plan, medication authorization, and self-administration form.
- The [Utah Recess Guidance](#) is a set of recommendations for when elementary school students should stay indoors for recess based on current air quality.



Tobacco Prevention



97.3% of schools prohibit use of electronic vapor products as part of their tobacco policy

39.2% of schools require participation in a cessation program for students caught using regular cigarettes and 35.4% require participation for students caught using e-cigarettes

61.3% of schools have a tobacco-free school environment and 79.1% of schools post signs marking a tobacco-free zone

40.3% of schools teach 19 key tobacco-use prevention topics in a required course

Recommendations:

- Develop and enforce a comprehensive tobacco-free policy which includes prohibiting electronic vape products at your school or district.
- A key part of enforcement is signage; it is an easy, non-threatening way to inform parents and visitors that school property is a tobacco-free zone.
- Establish a protocol for those violating the policy. Disciplinary action can include referral to a cessation program, evidence-based prevention education (e.g. Aspire program), youth court, loss of privileges, etc.
- Ensure students and staff have access to cessation programs either on-site or through referrals to other health agencies.
- Ensure Botvins Life Skills Training (LST) is provided to each 7th or 8th AND each 9th or 10th grade student in accordance with 2018 Utah House Bill 456. LST is a research-validated prevention program proven to reduce the risks by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors.
- Provide instruction on avoiding tobacco use to all students.

Resources:

- Contact your local health department for free signage and resources. Training and technical assistance can be provided to implement the above recommendations.
- [The Tobacco Talk](#) is a campaign used by schools and community groups to educate parents and encourage them to have the new tobacco talk with their child.
- [CATCH My Breath Youth E-cigarette Prevention Program](#) is a free program that offers in-class activities, teacher education, online resources, and take-home material for parents.
- [The Tobacco Prevention Toolkit](#) contains a set of modules focused on e-cigarettes and vapes, and messages on nicotine addiction.
- [ASPIRE](#) is a free program that can be used for prevention in the classroom or as a stand alone resource for policy violations. Contact your local health department to enroll.

Violence and Injury Prevention



84.9% of schools have a policy requiring information on sexual abuse prevention to be distributed to teachers and staff

59% of schools have a policy requiring information on suicide to be distributed to parents

68.5% of schools use the Student Injury Reporting System (SIRS) to collect data on injuries that occur during school

66.1% of schools have procedures to inform coaches about the school's concussion policy

Recommendations:

- Require school staff to receive training and instruction on child sexual abuse prevention and awareness, responding to a disclosure of child sexual abuse, and mandatory reporting requirements according to the Utah Child Sexual Abuse Prevention law (53A-13-112).
- Adopt comprehensive school policies and procedures for suicide prevention, intervention, and post-intervention. This can reduce the risk of suicide and prevent suicide contagion.
- Require all school staff, and create opportunities for parents, to receive evidence-based training in suicide prevention (e.g., QPR, Mental Health First Aid, etc.) every year.
- Require schools to offer yearly parent seminars on substance abuse, bullying, mental health, depression, suicide awareness, suicide prevention, internet safety, and the School Safety and Crisis Line according to the Utah Parent Education law (53A-15-1301).
- Participate in the [Student Injury Reporting System](#) (SIRS). The SIRS allows schools to track injuries that happen on school grounds during school hours or school-sponsored activities.
- Require coaches, trainers, officials, and student athletes to be trained on recognizing and responding to concussions and the Protections of Athletes with Head Injuries Act (HB204). A child who gets a head injury must be removed from play and may only return after written clearance from a qualified health care provider according to HB204.

Resources:

- Approved [instructional materials for child sexual abuse prevention](#) for youth, youth-serving adults, and parents/caregivers.
- [Model School Policy for Suicide Prevention](#).
- Funding from the Utah State Board of Education is available to implement evidence-based and best practice [suicide prevention programs](#).
- [HEADS UP concussion management training](#) and educational materials for parents, coaches, youth athletes, and schools.

School Health Services



24.9% of schools include health services in their written School Improvement Plan

71.4% of schools have an asthma action plan for all students known to have asthma

Recommendations:

- Improve your school nurse-to-student ratio. A school nurse is essential for a healthy school. Healthy People 2020 aims for a nurse-to-student ratio of 1:750 students.
- Consider developing a School Improvement Plan if your school doesn't already have one. A School Improvement Plan is a document that specifies concrete objectives for improving the health of students along with a list of activities for meeting those objectives.
- Schools can help students with chronic health issues by assisting them with access to care and referrals. They can also help make sure uninsured students are enrolled in a private, state, or federally funded health insurance programs if they are eligible.
- Make sure all students with a chronic health issue, such as asthma, diabetes, seizures, or severe allergies, have a written care plan on file. Written care plans can include:
 - Individualized Healthcare Plan (IHP)
 - Emergency Action Plan (EAP)
 - Individual Education Plan (IEP)
 - Section 504 Plan

Resources:

- [Whole School, Whole Community, Whole Child: A Collaborative Approach to Learning.](#)
- [The Healthy People 2020 school nurse ratio goal.](#)
- [FAQs](#) about and benefits to hiring school nurses.
- [Attendance Works](#) is a national and state initiative that promotes better policy and practice around school attendance.