Sonora ISD

Student Health Advisory Council
(SHAC)

2018-2019

Board of Trustees Report

807 S Concho Ave
Sonora, TX 76950

Phone: 325-387-6940
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Chairperson: Jennifer Nichols – Elementary Counselor

Co-Chairperson: Theresa Ward – Community Member
Members:

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<th>Role</th>
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<tr>
<td>Ross Aschenbeck</td>
<td>Superintendent</td>
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<tr>
<td>Jennifer Nichols</td>
<td>Elementary and Intermediate Counselor</td>
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<td>Dana Leamon</td>
<td>Middle School Counselor</td>
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<td>Josie Torres</td>
<td>Food Service Director</td>
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<td>Pennie Litterell</td>
<td>Registered Nurse</td>
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<td>Karen Bunch</td>
<td>Elementary Physical Education Teacher</td>
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<td>David Gallegos</td>
<td>High School Dean of Students</td>
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<td>Chelsea Blackbird</td>
<td>Parent</td>
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<td>Robyn Bennie</td>
<td>Parent</td>
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<tr>
<td>Theresa Ward</td>
<td>Community Rep – Sutton County Food and Resource Center</td>
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<tr>
<td>Kailea King</td>
<td>Community Rep – Dept of State Health Services</td>
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Overview of SHAC

What is a School Health Advisory Council?

A School Health Advisory Council is a group of individuals representative of segments of the community, generally appointed by the school district to serve at the district level. They provide advice on coordinated school health programming and its impact on student health and learning.

What do SHACs do?

SHACs provide recommendations specific to changes and/or additions to the school’s health education curriculum or instruction that impact the entire school district, not just individual school campuses. School districts use a SHAC to advise them on a variety of topics, such as a comprehensive school health program and its various components. Moreover, SHACs provide an efficient, effective structure for creating and implementing an age-appropriate, sequential health education program, and early intervention and prevention strategies that can easily be supported by local families and community stakeholders. SHACs address all elements of the school’s health program including but not limited to: health instruction, school environment, health services, physical education, school counseling, food services, and health of staff/students.

Most commonly, SHAC programs will be assigned the following responsibilities, although this list is not to be exhaustive:

- **Program Planning:**
  SHACs ensure that professionals who directly influence student health meet regularly to learn what their colleagues are doing, share teaching strategies, problem solve, participate in curriculum selection and adaption, provide a forum for discussion of health issues, and facilitate innovation in health education.

- **Promotion and Advocacy:**
  Often the SHAC program is responsible for advocating and promoting school health with the school district and in the community. Spotlighting the SHAC’s efforts may help ensure sufficient resources are allocated to school health, provide a source for intervention when external or internal barriers arise, facilitate understanding between
school and community segments, and encourage representatives from local business, media, religious, and communities to provide resources and linkages.

- Fiscal Impact:
  SHACs should work with school personnel to determine the impact of their recommendations before they are presented to the board. They assist in determining how much funding is required to conduct school health programs and integrates the various funding sources for school health education.

- District and State Agency Interaction:
  SHACs may work with appropriate state agency personnel in curriculum selection, health services allocation, development of food service programs, distribution of federal or state funds and policymaking.

- District School Board Interaction:
  By law, school boards must consider the recommendations of their local SHAC before changing the district's health education curriculum or instruction. Therefore, if given the opportunity, SHACs should review and recommend available curriculum and instruction options using carefully evaluated information based on an understanding of community values and culture as well as youth health risks, and student, family and school staff needs.

- Evaluation, Accountability and Quality Control:
  Many SHACs are given responsibility to ensure school health funds are spent appropriately. Some SHACs will conduct focus groups with parents, teachers, administrators, and students to examine existing school services related to need or even assess the physical and psychological environment of the school. On occasion SHACs will make sure food service programs offer healthy menus according to established guidelines and that health-related activities are conducted.

- Direct Intervention:
  The SHAC program helps initiate policy related to smoking and alcohol use and the sale of nutritious foods at school. SHAC may also organize school-wide activities like health fairs and health promotions.
Reasons for SHAC

Today the health of children and adults alike is linked more than ever to the behaviors they adopt early in life. These six behaviors account for most of the serious illnesses and premature deaths in the United States:

1. Tobacco use
2. Poor eating habits
3. Abuse of alcohol and drugs
4. Behaviors that result in intentional (violence and suicide) and unintentional injuries (motor vehicle accidents)
5. Physical inactivity
6. Sexual behaviors that result in HIV infection and other sexually transmitted diseases and unintended pregnancies

Children and youth are at risk in the United States:

- 10% of students surveyed had smoked a whole cigarette for the first time before the age of 13 years
- 20% of students surveyed had drunk alcohol for the first time before the age of 13 years.
- 39% of students surveyed had used marijuana one or more times during their lifetime.
- 6% of students surveyed had had sexual intercourse for the first time before the age of 13 years.
- 32% of students surveyed watched television 3 or more hours per day on an average school day.
- 31% of students surveyed played video or computer games or used a computer for non-school work for 3 or more hours per day on an average school day.
- 13% of students were obese and 15% of students were overweight.
- 27% of students surveyed drank at least one soda per day.
- 11% of students surveyed drank three or more sodas per day.

Data was comprised from a 2011 National Youth Risk Behavior Study conducted by the Centers for Disease Control and Prevention. The sampling consisted of all public and private schools with students in at least one of grades 9-12 in all 50 states and the District of Columbia.
Effective SHACs can:

- Be instrumental in improving student health and creating healthy schools.
- Help schools meet community involvement mandates and community expectations.
- Support school-health staffed programs.
- Provide a way for community members to work together with school personnel to accomplish school district goals.
- Utilize and make the most of community resources and assets.
- Influence more people within a community than a single institution could.
- Be a credible, collective voice of support for healthy children and youth.
- Provide a forum for sharing youth health information and resources.
- Provide a range of advice and perspectives.
- Foster personal satisfaction and help members understand their roles in strengthening their community.
Vision Statement

The vision of Sonora ISD’s SHAC is to support all children in reaching their full potential in all aspects of health and wellness.

Mission Statement

All students will learn the skills necessary to be physically and emotionally healthy through academic classes in health education and through the promotion of good health practices.
Goals and Objectives

- To implement a variety of campaigns that focus on health and wellness at each campus.

- To continue the CATCH program and curriculum with Kinder- 5th grade students during specials.
What is Texas Law Regarding SHACs?

Every independent school district is required by law to have School Health Advisory Council.

The following text is from Title 2, Chapter 28, Section 28.004 of the Texas Education Code, the state statute that governs public schools in Texas. This section outlines the law regarding SHACs. For more information, the entire Texas Education Code can be obtained online by going to www.capitol.state.tx.us/statutes/ed.toc.htm.

CHAPTER 28.0004. LOCAL SCHOOL HEALTH ADVISORY COUNCIL AND HEALTH EDUCATION INSTRUCTION.

(a) The board of trustees of each school district shall establish a local school health advisory council to assist the district in ensuring that local community values are reflected in the district's health education instruction.

(b) A school district must consider the recommendations of the local school health advisory council before changing the district's health education curriculum or instruction.

(c) The local school health advisory council's duties include recommending:

(1) the number of hours of instruction to be provided in health education;

(2) curriculum appropriate for specific grade levels designed to prevent obesity, cardiovascular disease, and Type 2 diabetes through coordination of:

(A) health education;

(B) physical education and physical activity;

(C) nutrition services;

(D) parental involvement; and

(E) instruction to prevent the use of tobacco;

(3) appropriate grade levels and methods of instruction for human sexuality instruction; and

(4) strategies for integrating the curriculum components specified by Subdivision (2) with the following elements in a coordinated school health program for the district:

(A) school health services;
(B) counseling and guidance services;

(C) a safe and healthy school environment; and

(D) school employee wellness.

(d) The board of trustees shall appoint members to the local school health advisory council.

A majority of the members must be persons who are parents of students enrolled in the district and who are not employed by the district. The board of trustees also may appoint one or more persons from each of the following groups or a representative from a group other than a group specified under this subsection:

(1) public school teachers;

(2) public school administrators;

(3) district students;

(4) health care professionals;

(5) the business community;

(6) law enforcement;

(7) senior citizens:

(8) the clergy; and

(9) nonprofit health organizations.

(e) Any course materials and instruction relating to human sexuality, sexually transmitted diseases, or human immunodeficiency virus or acquired immune deficiency syndrome shall be selected by the board of trustees with the advice of the local school health advisory council and must:

(1) present abstinence from sexual activity as the preferred choice of behavior in relationship all sexual activity for unmarried persons of school age;

(2) devote more attention to abstinence from sexual activity than to any other behavior;

(3) emphasize that abstinence from sexual activity, if used consistently and correctly, is the only method that is 100 percent effective in preventing pregnancy, sexually transmitted diseases,
infection with human immunodeficiency virus or acquired immune deficiency syndrome, and the emotional trauma associated with adolescent sexual activity;

(4) direct adolescents to a standard of behavior in which abstinence from sexual activity before marriage is the most effective way to prevent pregnancy, sexually transmitted diseases, and infection with human immunodeficiency virus or acquired immune deficiency syndrome; and

(5) teach contraception and condom use in terms of human use reality rates instead of theoretical laboratory rates, if instruction on contraception and condoms is included in curriculum content.

(f) A school district may not distribute condoms in connection with instruction relating to human sexuality.

(g) A school district that provides human sexuality instruction may separate students according to sex for instructional purposes.

(h) The board of trustees shall determine the specific content of the district's instruction in human sexuality, in accordance with Subsections (e), (f), and (g).

(i) A school district shall notify a parent of each student enrolled in the district of:

(1) the basic content of the district's human sexuality instruction to be provided to the student; and

(2) the parent's right to remove the student from any part of the district's human sexuality instruction.

(j) A school district shall make all curriculum materials used in the district's human sexuality instruction available for reasonable public inspection.

(k) A school district shall publish in the student handbook and post on the district's Internet website, if the district has an Internet website:

(1) a statement of the policies adopted to ensure that elementary school, middle school, and junior high school students engage in at least 30 minutes per school day or 135 minutes per school week of physical activity; and

(2) a statement of:

(A) the number of times during the preceding year the district's school health advisory council has met;
(B) whether the district has adopted and enforces policies to ensure that district campuses comply with agency vending machine and food service guidelines for restricting student access to vending machines; and

(C) whether the district has adopted and enforces policies and procedures that prescribe penalties for the use of tobacco products by students and others on school campuses or at school-sponsored or school-related activities.

Note: This represents only a small portion of the law regulating schools in Texas. Additional information on laws, regulations and policies related to schools can be accessed through the following sites and is addressed in detail in the Resources section of this guide on pages numbered 21-24.

- Texas Education Code: [www.capitol.state.tx.us/statutes/ed.toc.htm](http://www.capitol.state.tx.us/statutes/ed.toc.htm)
- Texas Education Laws and Rules: [www.tea.state.tx.us/educationlaw.html](http://www.tea.state.tx.us/educationlaw.html)
- Texas Health and Safety Code: [www.capitol.state.tx.us/statutes/hs.toc.htm](http://www.capitol.state.tx.us/statutes/hs.toc.htm)
Sonora ISD Local Policy

FFA(Local)
The District shall support the general wellness of all students by implementing measurable goals to promote sound nutrition and student health and to reduce childhood obesity.

[See EHAA for information regarding the District’s coordinated school health program.]

DEVELOPMENT, IMPLEMENTATION, AND REVIEW OF GUIDELINES AND GOALS

The local school health advisory council (SHAC), on behalf of the District, shall review and consider evidence-based strategies and techniques and shall develop nutrition guidelines and wellness goals as required by law. In the development, implementation, and review of these guidelines and goals, the SHAC shall permit participation by parents, students, representatives of the District’s food service provider, physical education teachers, school health professionals, members of the Board, school administrators, and members of the public.

[See BDF for required membership of the SHAC.]

WELLNESS PLAN

The SHAC shall develop a wellness plan to implement the District’s nutrition guidelines and wellness goals. The wellness plan shall, at a minimum, address:

1. Strategies for soliciting involvement by and input from persons interested in the wellness plan and policy;
2. Objectives, benchmarks, and activities for implementing the wellness goals;
3. Methods for measuring implementation of the wellness goals; and
4. The manner of communicating to the public applicable information about the District’s wellness policy and plan.

The SHAC shall review and revise the plan on a regular basis and recommend revisions to the wellness policy when necessary.

NUTRITION GUIDELINES

The District’s nutrition guidelines for reimbursable school meals and all other foods and beverages sold, otherwise made available, or marketed to students during the school day shall be designed to promote student health and reduce childhood obesity and shall be at least as restrictive as federal regulations and guidance, except when the District allows an exemption for fundraising activities as authorized by state and federal rules. [See CO and FJ]

WELLNESS GOALS

NUTRITION PROMOTION AND EDUCATION

The District shall implement, in accordance with law, a coordinated school health program with a nutrition education component. [See EHAA] The District’s nutrition promotion activities shall encourage participation in the National School Lunch Program, the School

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Breakfast Program, and any other supplemental food and nutrition programs offered by the District.

The District establishes the following goal for nutrition promotion:
The District's food service staff, teachers, and other District personnel shall consistently promote healthy nutrition messages in cafeterias, classrooms, and other appropriate settings.

The District establishes the following goal for nutrition education:
The District shall deliver nutrition education that fosters the adoption and maintenance of healthy eating behaviors.

**PHYSICAL ACTIVITY**
The District shall implement, in accordance with law, a coordinated health program with physical education and physical activity components and shall offer at least the required amount of physical activity for all grades. [See BDF, EHAA, EHAB, and EHAC]

The District establishes the following goal for physical activity: The District shall encourage students, parents, staff, and community members to use the District's recreational facilities, such as tracks, playgrounds, and the like, that are available outside of the school day. [See GKD].

**SCHOOL-BASED ACTIVITIES**
The District establishes the following goal to create an environment conducive to healthful eating and physical activity and to promote and express a consistent wellness message through other school-based activities: The District shall allow sufficient time for students to eat meals in cafeteria facilities that are clean, safe, and comfortable.

**IMPLEMENTATION**
The Superintendent shall oversee the implementation of this policy and the development and implementation of the wellness plan and appropriate administrative procedures.

**EVALUATION**
The District shall comply with federal requirements for evaluating this policy and the wellness plan, as well as the District's and each campus's level of compliance with the policy and plan.

Annually, the SHAC shall assess and prepare a report of each campus's progress toward meeting the goals listed in this policy and in the wellness plan, including a summary of each campus's major activities and events tied to the wellness program and the extent to which the wellness policy and plan compare with any state- or federally designated model wellness policies.

**PUBLIC NOTIFICATION**
The District shall inform and update the public about the content and implementation of the wellness policy, including posting on its website a copy of the wellness policy and the wellness plan, as well as a copy of the annual report.
RECORDS RETENTION  The District shall retain all records associated with the wellness policy, in accordance with law and the District's records management program. [See CPC and FFA(LEGAL)]
FITNESSGRAM

FITNESSGRAM is the national fitness assessment and reporting program for youth grades 3-12. The assessment was developed by The Cooper Institute in response to the needs in physical education programs for a comprehensive assessment protocol. The assessment includes a variety of health-related physical fitness tests designed to assess cardiovascular fitness (one mile), muscle strength (push-ups), muscular endurance (sit-ups), flexibility (shoulder stretch), and body composition (height-weight).

Criterion-referenced standards associated with good health have been established for children and youth for each of the health-related fitness components. The software for the program produces an individualized report card that summarizes the child’s performance on each component of health-related fitness and provides suggestions for how to promote and maintain good fitness. The FITNESSGRAM report cards are sent home at the end of the year along with their final academic report card. These assessments are reported to TEA every year.

On average, the Sonora students score well above the performance standards each year.
Sonora ISD    Student Health Advisory Council

Highlights

- Continued district-wide compliance with TEA mandate on SHAC
- TEA-approved CATCH (Coordinated Approach to Child Health) curriculum implemented in grades Kindergarten through 8th grade.
- Cafeteria sponsored a parental involvement opportunity inviting parents to come and eat with their child during the National School Lunch Week. (PK-12)
- School Breakfast Week campaign implemented in the form of daily announcements. (PK-8)
- Cafeteria meets all guidelines on calorie, fat, and saturated fat grams. (PK-12)
- Cafeteria follows the Smart Snacks guidelines for any food item sold a la carte. (PK-12)
- Cafeteria continues to offer fat-free milk, reduced-sugar cereals, and low sodium vegetables. (PK-12)
- Cafeteria regularly offers fresh fruit and vegetables. (PK-12)
- Monthly menu sent home containing a newsletter covering various topics related to building healthy diets. (PK-5)
- All vending machines meet TEA compliance. (PK-12)
- SISD encourages the students, parents, staff and community members to use the district’s recreational facilities outside of the school day. (PK-12)
- District staff trained in CPR
- District staff completed Child Abuse Training
- Child Abuse Prevention campaign “Go Blue Day” (PK-12)
- Drug prevention Red Ribbon Week campaign (PK-12)
- Character building campaigns implemented in the elementary and intermediate campuses throughout the school year in the form of classroom lessons taught by the school counselor and other school-wide assemblies (PK-5)
- Utilized community agencies (department of health, county extension agent) to come in and present lessons related to building a healthy diet and staying well. (PK-8)
- Participated in Jump Rope and Hoops for Heart (PK-5)
- The Fitnessgram was conducted as mandated by law. (3-12)
- Walk Across Texas Campaign (5th)
- Field Day (PK-5)
- Best of the West Special Olympics (PK-12)
- Texas HOT Jobs spoke with HS students about healthcare professions.
- DPS spoke with HS students about the dangers of vaping.
Highlights

- Cyber Bullying posters hung around the high school teaching what it is and what to do (9-12)
- Click It Campaign sponsored by TxDot (9-12)
- Blood Drive sponsored by the high school Health Science students
- SISD continued to utilize the Bullying Hotline and it was closely monitored by the district’s counselors on each campus. (PK-12)
- Nursing class presented a dental hygiene lesson to 1st grade and gave them a dental hygiene kit provided by the Masonic Lodge.
- Fun ways to incorporate exercise into your daily routine was promoted and encouraged during Flex Friday classes; i.e. hikes to Eaton Hill, Zumba (K-5)
- District Wide “Walk to School Day” was implemented encouraging families to begin their day with exercise. (K-12)
SHAC Meeting

Minutes
In Attendance:
Jennifer Nichols
Ross Aschenbeck
Josie Torres
Pennie Litterell
Kailea King

Minutes:
- Introductions made and contact information updated. We welcomed our new SISD nurse, Pennie Litterell as well as Kailea King from the Department of State Health Services.
- Committee reviewed highlights from the 17/18 school year
- Committee reviewed goals and objectives of SHAC, vision statement, and mission statement for the 18/19 school year. Committee updated goals and objectives and accepted to keep the vision and mission statements.
- Committee discussed possible campaigns to be considered at each campus.
  - CATCH curriculum will be continue to be implemented during the PE class (Elementary)
  - Coach Bunch
  - Family Fitness Days (Elementary) – Coach Bunch
  - Walk to School Day (District Wide) will be October 5, 2018 – Jennifer Nichols
  - Flu Shot Clinic or booth set up at a school function – Kailea King and Pennie Litterell
  - Kailea to come in and teach health/wellness lessons to Kinder and 1st
- Open Forum – No concerns at this time.
- Next Meeting was set for October 10, 2018
- Adjournment
Sign In Sheet

August 29, 2018

1. Jennifer Nichols

2. Kailee King

3. Rennie Leiponell

4. Jessie Jones

5. Ross Ascherbeck

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Agenda

August 29, 2018

1. Introductions, Update contact information
2. Review goals, vision statement, and mission statement for district.
3. Discuss upcoming campaigns to be considered at each campus
   - Family Fitness Days
   - Walk to School Day – October 5

Any other ideas??

4. Open Forum
5. Set next meeting date: October ______
6. Adjournment

NOTES:
Regular Meeting
October 24, 2018
Minutes

In Attendance:
Jennifer Nichols
Josie Torres
Pennie Litterell

Minutes:
- Nichols reported on Walk to School Day campaign. We had a great turn out. Committee decided to keep this as an annual event.
- Committee discussed progress on upcoming campaigns.
  - Rethink Your Drink (District Wide) will take place in March
  - Family Fitness Days (Elementary) will occur in conjunction with Jump Rope for Heart
- Open Forum — No concerns at this time.
- Next Meeting was set for February 21, 2019
- Adjournment
Sign In Sheet

October 24, 2018

1. Jennifer Nichols
2. opie Jones
3. Dennis Smith
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Agenda

October 24, 2018

1. Report on Walk to School Day – any suggestions for improvement?
2. Report on Progress made towards upcoming campaigns:
   1. Rethink Your Drink: January/February
   2. Family Fitness Days: Spring
3. Discuss possible campaigns to be considered at each campus

4. Open Forum
5. Set next meeting date: February 20, 2019
6. Adjournment

NOTES:
Regular Meeting  
February 21, 2019  
Minutes

In Attendance:
Jennifer Nichols  
Karen Bunch  
Pennie Litterell

Minutes:
• Nichols finalized plans for Rethink Your Drink campaign – month of March
• Bunch finalized plans for Family Fitness Day/Jump Rope for Heart (late March) and Field Day (late April)
• LWP Checklist and Election of Officers moved to the April meeting
• Open Forum – No concerns at this time.
• Next Meeting was set for April 25, 2019
• Adjournment
Sign In Sheet
February 21, 2019

1. Jennifer Nichols
2. Ronnie Littlefield
3. Karen Bunch
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Regular Meeting

Agenda

February 21, 2019

I. Call Meeting to Order

II. Reading of Minutes
   - Approval of Minutes

III. Old Business
   - Rethink Your Drink - March
   - Family Fitness Day – Jump Rope for Heart

IV. New Business
   - Look over LWP Checklist sent by Josie Torres
   - Election of Officers

V. Open Forum

VI. Set Next Meeting – April

VII. Adjourn

NOTES:
In Attendance:
Jennifer Nichols
Ross Aschenbeck
Pennie Litterell
Josie Torres

Minutes:
- Meeting was called to order at 3:30 by Jennifer Nichols. No quorum.
- Minutes from February meeting were reviewed.
- Old Business – Jump Rope and Hoops for Heart campaign underway! Kick off assemblies happened today! Rethink Your Drink campaign did not happen in March. We will try again for May 6-10.
- New Business – Reviewed LWP checklist received by Josie. Nichols stepped down as chair. Mr. Aschenbeck will appoint new chair. Nichols will serve as co-chair for the upcoming school year. More parents need to be on SHAC for next year.
- Open Forum – No concerns at this time.
- Next Meeting will be set in August 2019.
- Adjournment at 4:06
Sign In Sheet

April 23, 2019

1. Jessie Jones
2. Renee Szente
3. Jennifer Nichols
4. Ross Smolen
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Regular Meeting

Agenda

April 23, 2019

I. Call Meeting to Order

II. Reading of Minutes
   • Approval of Minutes

III. Old Business
   • Family Fitness Day – Jump Rope for Heart

IV. New Business
   • Look over LWP Checklist sent by Josie Torres
   • Election of Officers – Jennifer Nichols stepping down as Chair

V. Open Forum

VI. Set Next Meeting – August 2019

VII. Adjourn

NOTES:
Recommendations for the 2019-2020 School Year

- Implement more campaigns district wide:
  - Possible Food Diary for middle school
  - Possible Anonymous Survey for high school addressing drug use, alcohol use, tobacco use, etc.
  - "Sugar Detox" program for faculty and staff
  - Zumba Class during Specials (Elementary)
  - Fun Run of some sort – District Wide
  - Homerun Derby – “Beat Aschenbeck” or “Parents vs Students”

- Encourage more parent and community participation on all campuses.

- Continue to meet federal guidelines regarding district-wide SHAC program.