



Healthy Futures

Building Bright Futures' Proposed Coordinated School Health Program Model (CSHP)



What is a CSHP?

Building Bright Futures' coordinated school health (CSH) model consists of nine interactive components. As defined by the Centers for Disease Control, Coordinated School Health (CSH) is a planned, organized set of health-related programs, policies, and services coordinated to meet the health and safety needs of PreK-12 students both at the school district and individual school building levels. A CSH is a proactive model that aids in the process of reviewing, prioritizing and conceptually linking the myriad of programs, guidelines and requirements faced by schools. The CSHP would address our students' well-being and the ability to learn by avoiding gaps, allow for collaboration on over-lapping functions, and eliminate unnecessary duplication of efforts.

Nine Component Model

1. **Health Education:** A planned, sequential, PreK-12 curriculum that addresses the physical, mental, emotional and social dimensions of health. The curriculum is designed to motivate and assist students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors. It allows students to develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices. The comprehensive health education curriculum includes a variety of topics such as personal health, family health, community health, consumer health, environmental health, sexuality education, mental and emotional health, injury prevention and safety, nutrition, prevention and control of disease, and substance use and abuse. Qualified, trained teachers provide health education.

2. **Health Science Education:** A body of subject matter and of planned learning experiences designed to prepare students with competencies required to pursue healthcare careers in diagnostic, therapeutic, preventive, restorative, and rehabilitative services. Health Science Education includes career choices, skill development, and application of health concepts relative to becoming a health care professional; creating a diverse and well-educated community of health practitioners and advocates to support communities for future generations.
3. **Physical Education:** A planned, sequential PreK-12 curriculum that provides cognitive content and learning experiences in a variety of activity areas such as basic movement skills; physical fitness; rhythms and dance; games; team, dual, and individual sports; tumbling and gymnastics; and aquatics. Quality physical education should promote, through a variety of planned physical activities, each student's optimum physical, mental, emotional, and social development, and should promote activities and sports that all students enjoy and can pursue throughout their lives. Qualified, trained teachers teach physical activity.
4. **School Health Services:** Services provided for students to appraise, protect, and promote health. These services are designed to ensure access or referral to primary health care services or both, foster appropriate use of primary health care services, prevent and control communicable disease and other health problems, provide emergency care for illness or injury, promote and provide optimum sanitary conditions for a safe school facility and school environment, and provide educational and counseling opportunities for promoting and maintaining individual, family, and community health. Qualified professionals such as physicians, nurses, dentists, health educators, and other allied health personnel provide these services.
5. **Counseling, Psychological & Social Services:** Services provided to improve students' mental, emotional, and social health. These services include individual and group assessments, interventions, and referrals. Organizational assessment and consultation skills of counselors and psychologists contribute not only to the health of students but also to the health of the school environment. Professionals such as certified school counselors, psychologists, and social workers provide these services.
6. **Nutrition Services:** Access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students. School nutrition programs reflect the U.S. Dietary Guidelines for Americans and other criteria to achieve nutrition integrity. The school nutrition services offer students a learning laboratory for classroom nutrition and health education, and serve as a resource for linkages with nutrition-related community services. Qualified child nutrition professionals provide these services.
7. **Healthy School Environment:** The physical and aesthetic surroundings and the psychosocial climate and culture of the school. Factors that influence the physical environment include the school building and the area surrounding it, any biological or chemical agents that are detrimental to health, and physical conditions such as temperature, noise, and lighting. The psychological environment includes the physical, emotional, and social conditions that affect the well-being of students and staff.
8. **Employee Wellness:** Opportunities for school staff to improve their health status through activities such as health assessments, health education and health-related fitness activities. These opportunities encourage school staff to pursue a healthy lifestyle that contributes to their improved health status, improved morale, and a greater personal commitment to the school's overall coordinated health program. This personal commitment often transfers into greater commitment to the health of students and creates positive role modeling. Health promotion activities have improved productivity, decreased absenteeism, and reduced health insurance costs.
9. **Family & Community Involvement:** An integrated school, parent, and community approach for enhancing the health and well-being of students. School health advisory councils, coalitions, and broadly based constituencies for school health can build support for school health program efforts. Schools actively solicit parent involvement and engage community resources and services to respond more effectively to the health-related needs of students

Marx E, Wooley SF, Northrop D. "Health Is Academic: A Guide To Coordinated School Health Programs." Teachers College Press, 1998.