



Language from School Health Index 2017

The following questions are excerpts from various modules of the full School Health Index (SHI), collected here for your convenience.

The SHI can be a convenient way to place national, research-based language into your policy that aligns with the Whole School, Whole Community, Whole Child framework and deepens the connection between student health referrals, health education and academic outcomes.

Here is an example of how the language in the SHI questions might be used to create your district policy:

Question in School Health Index	Could appear in policy as
Does the school nurse or other health services provider promote the health of students and their families through classroom activities and otherwise on preventing HIV, other STDs and unintended pregnancy?	The school nurse partners with the health services provider to promote the health of students and their families by educating on prevention of HIV, STDs and unintended pregnancies through classroom activities and the distribution of a student self-referral guide.

1. Does your school or district have written health and safety policies that include the following components?

- Rationale for developing and implementing the policy
- Population for which the policy applies (e.g., students, staff, visitors)
- Where the policy applies (e.g., on or off school property)
- When the policy applies
- Programs supported by the policy
- Designation of person(s) responsible (e.g., school administrator(s), teachers) for implementing the policy
- Designation of person(s) responsible (e.g., school administrator(s), teachers) for enforcing the policy
- Communication procedures (e.g., through staff meetings, professional development, website, staff handbook) of the policy
- Procedures for addressing policy infractions

2. Does your school communicate its school or district health and safety policies in all of the following ways?

- Signs
- Staff member orientation
- Staff meetings
- Student orientation
- Student handbook
- Staff handbook or listserv
- Employee contracts
- Parent handbook, newsletters, or listserv
- Policies included in contracts with outside vendors and organizations that use school facilities
- Announcements at school events
- School-sponsored meetings
- Community meetings
- School or district website

3. Does your school facilitate access to providers not on school property who have experience providing health services, including HIV/STD testing and counseling and reproductive health care, to LGBT youth?

4. Does your health education curriculum address how to obtain and correctly use pregnancy and STD prevention methods, including condoms?

5. Does your health education curriculum address finding valid information or services, including testing and counseling, related to HIV, STD, and pregnancy?

6. Does the school nurse or other health services provider promote the health of students and their families through classroom activities and otherwise on preventing HIV, other STDs and unintended pregnancy?

7. Does your school implement a systematic approach (including the following components) for referring students, as needed, to appropriate school- or community-based health services?

- Contact parents of students identified as potentially needing additional health services and recommend that the students be evaluated by their primary health care provider or specialist.
- Contact parents of students without a primary health care provider and give information about child health insurance programs and primary care providers.

- Referral information is distributed widely (e.g., through flyers, brochures, website, student handbook, health education class) so that students, staff, and families can learn about school and community services without having to contact school staff.
- Staff members are given clear guidance on referring students
- Referral forms are easy for staff members to access, complete, submit and keep confidential.
- A designated staff person or interdisciplinary student supports team (e.g., school nurse, counselor) regularly reviews referral forms and conducts initial screening.
- With written parental permission, additional information (e.g., questionnaires, relevant records, brief testing) is gathered as necessary and in compliance with **FERPA**.
- Written consent is obtained, in compliance with **HIPAA**, to gather relevant records from other professionals or agencies, if applicable.
- A list is kept and regularly updated of youth-friendly referral providers along with basic information about each (e.g., cost, location, language, program features, previous client feedback)
- Meetings are held with all relevant parties to discuss referral alternatives.
- Potential barriers (e.g., cost, location, transportation) and how to overcome them are discussed.
- Follow-up (e.g., via telephone, text messaging, email, personal contact) is conducted to evaluate the referral and gather feedback about the service.
- Professional development is provided to all staff members about the referral process.

8. Does your school identify youth-friendly community-based health services providers and systematically link with them to provide sexual and reproductive health services to students?