



# 801 Program Guidance

## School Level Impact Measures (SLIMs) GLOSSARY

### **Asthma Management**

A comprehensive approach to ensuring a supportive learning environment for students with asthma that includes: an identified staff person(s) to coordinate the program; a confidential list of students who have asthma; school policies and procedures for administering medications, including protocols for emergency response to a severe asthma episode; specific actions for staff members to perform in the asthma management program; a written action plan for every student with asthma; education for staff and students about asthma; and a strong family-physician-school partnership.

### **Full Time**

Refers to present at school during all regular school hours.

### **Less Nutritious Foods And Beverages**

Foods and beverages that provide calories primarily through fats or added sugars and have minimal amounts of vitamins and minerals (e.g., chocolate candy, non-chocolate candy, salty snacks not low in fat, soft drinks, sports drinks, fruit drinks not 100% juice).

### **Negotiation Skills**

Strategies that enable students to listen openly, recognize differences of opinion or beliefs, articulate their position clearly, discuss and identify areas of commonality and differences in attempt to resolve disagreements, and to make healthy decisions. Such decisions include repeatedly refusing to have sexual intercourse or insistence on consistently and correctly using condoms and other contraception.

### **Outside The School Food Service Program**

Foods and beverages available in vending machines, school stores, canteens, or snack bars.

### **Policy**

Any mandate issued or policies adopted by school district boards of education, the state school board, state legislature, or other district or state agencies that affect the environment in school districts or throughout the state. These include policies developed by your state or those based on model policies developed elsewhere. Sample model policies are available in *Fit, Healthy, and Ready to Learn: A School Health Policy Guide* (March, 2004), developed by the National Association of State Boards of Education (NASBE). Sample policies can be viewed at NASBE's web site: [http://www.nasbe.org/healthy\\_schools/policy.htm](http://www.nasbe.org/healthy_schools/policy.htm).

### **Professional Development**

Systematic process used to strengthen the professional knowledge, skills, and attitudes of those who serve youth to improve the health, education and well-being of youth. Professional Development is consciously designed to actively engage learners and includes the planning, design, marketing, delivery, evaluation, and follow-up of professional development offerings (events, information sessions, and technical assistance).

### **Program**

A multi-faceted approach to decrease health risk behaviors that may include a combination of strategies such as one-on-one interventions, policy and climate changes, advocacy, peer interventions, mentoring programs, youth asset development, and outreach.

### **(Program) Activities**

Designed to decrease health risk behaviors and provide a multi-faceted approach that may include a combination of strategies such as one-on-one interventions, policy and climate changes, advocacy, peer interventions, mentoring programs, youth asset development, and outreach.

### **Secure**

Aspace locked or inaccessible to everyone except the school nurse or his/her designee.

### Students With Known Asthma

Students who are known or identified by the school to have a current diagnosis of asthma as reported by student emergency cards, medication records, health room visit information, emergency care plans, physical exam forms, parent notes, and other forms of health care clinician notification.

### Students With Poorly Controlled Asthma

Students with known asthma whose symptoms are impacting his/her quality of life. Schools or districts can use the following data to identify these students:

- Frequent absences from school.
- Frequent visits to the school health office due to asthma.
- Frequent asthma symptoms at school.
- Frequent non-participation in physical education class due to asthma.
- Students sent home early due to asthma.
- Calls from school to 911, or other local emergency numbers, due to asthma.

### Tobacco-Use Cessation Services

Individual or group interventions, may be brief counseling or formal cessation visits or group sessions.

### Youth At High Risk (For Hiv Infection)

HIV is primarily found in the blood, semen, or vaginal fluid of an HIV infected person. Based on the CDC's definition of Risk Factors for HIV Transmission, youth may be high risk for HIV infection if they:

- Have unprotected vaginal, anal, or oral sex (that is, sex without using condoms) with men who have sex with men, multiple partners, or anonymous partners.
- Exchange sex for drugs or money.
- Inject drugs or steroids, during which equipment (such as needles, syringes, cotton, water) and blood were shared with others been given a diagnosis of, or been treated for, hepatitis, tuberculosis (TB), or a sexually transmitted disease (STD).
- Have unprotected sex with someone who has any of the risk factors listed above.

Not all adolescents are equally at risk for HIV infection. Adolescents are not a homogenous group, and various subgroups of adolescents, often referred to as youth in high-risk situations, participate in higher rates of unprotected sexual activity and substance use, making them especially vulnerable to HIV and other STDs. Additionally, there are populations of youth for whom the incidence, prevalence, mortality, and burden of HIV transmission and prevalence of sexual risk behaviors and IV drug use make them at disproportionate risk than the comparison population. Populations can be defined in many ways including by race or ethnicity, gender or income, disability, geographic location (i.e., rural or urban), or sexual orientation.