

Form Approved
OMB No: 0920-1049
Exp. Date: 02/28/2018

“Promoting Adolescent Health through School-Based HIV/STD Prevention”

Att. 5b

LEA SHS Items

Public reporting burden of this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-1049)

LEA Measures

LEA SHS Measures

Measures	Questions for Collection of Measures								
<u>SHS Performance</u> <u>Measure 1:</u> Funded LEA has a system to refer students to youth-friendly off-site providers for key SHS	<p>Currently, does your district have any of the following components for referral of students to sexual health services? (Mark yes or no for each component.)</p> <p>a. Organizational partnerships, whether formal or informal, between the district and youth-friendly sexual health service providers. Yes <input type="radio"/> No <input type="radio"/></p> <p>b. A list of youth-friendly organizations to which youth can be referred for sexual health services. Yes <input type="radio"/> No <input type="radio"/></p> <p>c. A written procedure for making referrals. Yes <input type="radio"/> No <input type="radio"/></p> <p>d. A written procedure for maintaining student confidentiality throughout the referral process. Yes <input type="radio"/> No <input type="radio"/></p>								
<u>SHS Performance</u> <u>Measure 3:</u> # of referrals made by school staff to youth-friendly off-site providers or SBHCs for ANY of the following key sexual health services	<p>In the past 6 months, how many instances of referrals were made within each priority school to youth-friendly off-site providers or SBHCs for ANY of the key sexual health services? (Indicate the number of referrals made for each priority school.)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 2px;">Priority School Name</th> <th style="text-align: center; padding: 2px;"># of Referrals Made</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;"> </td> <td style="text-align: center; padding: 2px;"> </td> </tr> <tr> <td style="padding: 2px;"> </td> <td style="text-align: center; padding: 2px;"> </td> </tr> <tr> <td style="padding: 2px;"> </td> <td style="text-align: center; padding: 2px;"> </td> </tr> </tbody> </table>	Priority School Name	# of Referrals Made						
Priority School Name	# of Referrals Made								
<u>SHS Process</u> <u>Measure 1:</u> Funded LEA has assessed its SHS-related policies	<p>In the past six months, did you complete each of the following actions regarding SHS- related policies (including, laws, codes, or regulations)? (Mark yes or no for each item.)</p> <p>a. Identified policies that guide SHS related work. Yes <input type="radio"/> No <input type="radio"/></p> <p>b. Determined whether SHS policies are aligned with state policies, codes, laws, and regulations. Yes <input type="radio"/> No <input type="radio"/></p> <p>c. Documented gaps in SHS policies as compared with the SHS Performance Measures. Yes <input type="radio"/> No <input type="radio"/></p> <p>d. Collaborated with LEA leadership and staff to prioritize actions for addressing identified gaps in SHS policies. Yes <input type="radio"/> No <input type="radio"/></p>								

Measures	Questions for Collection of Measures
<p><u>SHS Process</u></p> <p><u>Measure 2:</u> Funded LEA has monitored the implementation of SHS-related policies in priority schools</p>	<p>In the past six months, did you complete each of the following actions regarding monitoring of priority schools' implementation of SHS-related policies (including, laws, codes, or regulations)? (Mark yes or no for each item.)</p> <p>a. Developed or maintained a list of current school-level SHS policy guidance for priority schools. Yes <input type="radio"/> No <input type="radio"/></p> <p>b. Reviewed priority schools' SHS policy guidance to ensure alignment with state law, state education agency policy, and district policy. Yes <input type="radio"/> No <input type="radio"/></p> <p>c. Tracked priority schools' implementation of SHS related policies. Yes <input type="radio"/> No <input type="radio"/></p> <p>d. Prepared informational materials about current SHS policies or policy options for stakeholders. Yes <input type="radio"/> No <input type="radio"/></p> <p>e. Maintained a tracking system of priority schools that have used CDC's School Health Index to evaluate SHS policy implementation. Yes <input type="radio"/> No <input type="radio"/></p>
<p><u>SHS Process</u></p> <p><u>Measure 3:</u> % of priority schools that received assistance on SHS</p>	<p>1. In the past six months, how often did you interact with [PRIORITY SCHOOL NAME] to provide assistance (e.g., professional development events, technical assistance, guidance or resource materials, and referrals to other agencies or organizations) on SHS?</p> <p>_____ Never _____ 1 time _____ 2 times _____ 3 - 5 times _____ 6 - 10 times _____ 11 - 15 times _____ 16 - 20 times _____ 21 or more times</p> <p>1. On what ESHE topics did you provide assistance to [PRIORITY SCHOOL NAME]? (check all that apply)</p> <p><input type="radio"/> Assess curricula with the Health Education Curriculum Analysis Tool (HECAT) <input type="radio"/> Select an appropriate curriculum (including evidence-based interventions, if appropriate) <input type="radio"/> Implement a specific curriculum with appropriate fidelity (including evidence-based interventions, if appropriate) <input type="radio"/> Make appropriate adaptations to curricula (including evidence-based interventions, if appropriate) <input type="radio"/> Implement a viable scope-and-sequence for sexual health education</p>

Measures	Questions for Collection of Measures
	<ul style="list-style-type: none"> <input type="radio"/> Assess sexual health and/or HIV education policies <input type="radio"/> Monitor the implementation of sexual health and/or HIV education policies <input type="radio"/> Manage controversy around sexual health education <input type="radio"/> Build instructional competencies and techniques for sexual health education <input type="radio"/> Assess school policies with School Health Index <input type="radio"/> Establish and maintain a state- or district-level school health advisory council (SHAC)
<u>SHS Process</u> <u>Measure 4:</u> Frequency with which funded LEA received assistance from NGO on SHS	<p>In the past six months, how often did you interact with CAI to receive assistance (e.g., professional development events, technical assistance, guidance or resource materials, and referrals to other agencies or organizations) on SHS?</p> <p>_____ Never _____ 1 time _____ 2 times _____ 3 - 5 times _____ 6 - 10 times _____ 11 - 15 times _____ 16 - 20 times _____ 21 or more times</p>