

INDICATORS	Why does this indicator impact academic success?	Healthy People 2020 recommendations	American Academy of Pediatrics recommendations	MNPS Policies / Procedures	Nashville Data	Tennessee Data
VISION	Vision is an essential part of everyday life, influencing how children learn, communicate, work, play and interact with the world. Children who have undiagnosed visual difficulty are at risk for poor performance in the classroom as well as difficulty with assignments.	Increase the proportion of preschool children aged 5 years and under who receive vision screening. (1)	Vision risk assessment should be performed at every early developmental visit up to 3 years of age. Vision screenings should be performed at years 3, 4, 5, 6, 8, 10, 12, 15 and 18. (2)	Students in grades Pre-K, K, 2, 4, 6 and 8 are screened annually. (4)	29,257 MNPS students have had vision screening and 5,753 (20%) of those were referred. (5)	During the 2012-2013 school year, 353,407 vision screenings conducted in TN schools resulting in 41,896 referrals made to a health care provider through parental notification. (5)
ASTHMA	Asthma is a chronic lung disease that represents a significant public health burden. The number of children with asthma has been increasing. Children with poorly controlled asthma are at risk for increased absenteeism and may be limited in their ability to engage in many school activities.	Reduce the proportion of children aged 5 to 17 years with asthma who miss school days. (1)	Children with asthma should be able, and encouraged, to participate completely in physical education, sports and other activities in school. All students should have some knowledge of asthma basics and management. (3)	When a student enters school and is identified with asthma, the school nurse should be notified. Students with asthma must have an IHP developed by a registered nurse. The IHP can serve as the Asthma Action Plan / Safety Plan. (4)	During the 2012-2013 school year, 6.8% of MNPS students (5519) were identified with asthma, 559 students had controller substances at school, and more than 1500 emergency treatments were administered to 465 students. (5)	From 2011-2012, 12% of children under age 18 experienced problems with asthma. In 2013, according to the YRBS, 22.6% of high school students had been told by a nurse or doctor in their lifetime that they had asthma. (7)
TEEN PREGNANCY	Teens that experience an unintended pregnancy are at an increased risk of not graduating from high school and are also at risk for many negative health and economic consequences.	Reduce the rate of adolescent pregnancy for 15-17 year olds to 36.2 pregnancies per 1,000.	Information about contraception, including emergency contraception and STIs, should be offered to all sexually active adolescents and those who plan to become sexually active. (3)	n/a	Teen pregnancy rate for Davidson County was 21.6 per 1,000 females aged 15-17 in 2012. During 2012, the live birth rate for females aged 15 to 17 was 15.8 per 1,000 females aged 15-17. (6)	In 2012, the Tennessee teen pregnancy rate was 21.2 per 1,000 females aged 15-17. The live birth rate for females aged 15-17 was 17.4 per 1,000 females. (6)
AGGRESSION / VIOLENCE	Aggression/Violence are symptoms associated with Disruptive Behavior Disorder. Disruptive behavior hinders effective teaching and learning. Indicators can include injuries to teachers or students, discipline problems, bullying, physical fighting, perceived safety and school avoidance.	Reduce physical fighting among adolescents to 28.4%. Reduce bullying among adolescents to 17.9%. (1)	Early identification and treatment may increase the chances that you child can learn to control these behaviors. Children with disruptive behavior disorders often benefit from special techniques that can be implemented at home and at school. (3)	n/a	29,942 total MNPS students have shown some form of violence and aggression. There have been 93,550 total violent and aggressive incidents (8,411 elementary, 37,736 middle, 43,074 high)	In 2013, according to the Tennessee YRBS, 10.4% of high school students were in a physical fight on school property and 21.8% of high school students were bullied on school property. (8)
PHYSICAL ACTIVITY	Low levels of physical activity contribute to obesity and other preventable physical health conditions among youth. Physical activity affects all major body systems and impacts emotional stability, physical health and ability to learn.	n/a	Health care professionals can support children adolescents and families in this daily commitment by explaining why physical activity is important to overall health providing information about community physical activity resources and being physically active themselves. (3)	Each school must integrate a minimum of 90 minutes of physical activity per week into the instructional school day for all students. (4)	29,767 total MNPS students screened for BMI Underweight = 894 (3%), Healthy Weight = 18,009 (60.5%), Overweight = 5,031 (16.9%), Obese = 5,864 (19.7%) (5)	During the 2012-2013 school year, 327,487 students assessed (comprised of K, 2, 4, 6 and 8) 2.8% of students were underweight, 17.1% of students were overweight and 21.5% were obese. (9)
BREAKFAST	Research suggests that skipping breakfast may lead to adverse cognitive effects impacting alertness, attention, memory, problem solving abilities and processing of complex visual display	n/a	To achieve optimal growth and development, children need a variety of nutritious foods that provide sufficient calories, protein, carbohydrates, fat, vitamins and minerals. By middle childhood, a child needs 3 meals and 2-3 healthy snacks per day. (3)	All students in MNPS have access to free breakfast each school day as of the beginning of the 2014-15 school year. (4)	Breakfast participation rates at MNPS Elementary = 39.8% of students, MNPS Secondary (middle/high) - 26.5% of students (5)	Coordinated School Health District Coordinators reported 606 schools provided universal breakfast programs for all students in 2012-2013 school year. (5)
INATTENTION / HYPERACTIVITY	Children exhibiting problems with inattention or hyperactivity are at greater risk for lower reading and math test scores, grade repetition and placement in special education.	n/a	Adolescents with ADHD frequently procrastinate, may also do poorly on tests, be careless when doing their schoolwork and have trouble tracking and turning in their assignments on time...A treatment plan with specially targeted academic support at home and in the classroom is essential. (3)	n/a	1,859 MNPS students identified as affected by some form of inattention/hyperactivity. (5)	5.4% of children in Tennessee aged 2-17 have been diagnosed with ADHD and are taking medication. 2.5% of children aged 2-17 have been diagnosed with ADHD and are not taking medication. (10)

1. www.healthypeople.gov, 2. www.aap.org/en-us/professional-resources/practice-support/periodicity/periodicity%20schedule_FINAL.pdf, 3. AAP Bright Futures, 3rd Edition Guidelines, 4. Information provided by Metropolitan Nashville Public Schools, 5. Data provided by Metropolitan Nashville Public Schools, 6. TD0H <http://healthstate.tn.us/statistics>, 7. www.kidscountdata.org, 8. www.tn.gov/education/health_safety/yrbbs, 9. TN Department of Education Physical Education Report 2012-2013, 10. www.ncsdata.org