

SHAC MEETING MINUTES

Date: 18-Sep

Members Present:	Dr. Jamila Thomas	Co Chair	Ruth Gaspard	Nutrition
	Dr. Shirley Heitzman	Co Chair		
	Greg Mozley	Operations		
	Kiara Santana	Parent		
	Leonela Teniente	Parent/Nurse		

Convened 3:04 PM

Committee approved the minutes from last meeting. GM moved. JT seconded.

Old Business	LWP is approved, posted and active.
	SHAC Meeting dates for SY2526 are posted on website.

Changes in Campus Safety Since Last Meeting	Enclosed Circle of Honor with secured gate and no access for staff or students without security approve.

What have we done since the last meeting to:

Review Wellness Policy	LWP was board approved and posted to website.
Increase Physical Activity	
Increase Nutrition Awareness	
Improve School Health Services	Physicals performed for over 100 students.
Promote a Safe Environment	Staff are proceeding on compliance certifications.
including: guidance on bullying prevention,	
mental health and well-being,	
substance abuse prevention	
Promote School Safety & Security	
Parent and Family Engagement	

New Business:	Legislative Updates regarding Child Nutrition. The following updates were discussed by Mozley.
	~ TX law lists ingredients that will not be allowed in NSLP foods. Mozley says the co-op is working to identify them in all foods FFA may purchase. Menus will adjust accordingly.
	Legislative Updates regarding Health & Wellness were discussed by Heitzman.
	~ Nurses administering meds. FFA has adopted compliant policy.
	~ Concussion Protocol. FFA has written and distributed a protocol pamphlet.
	~ Cardiac Emergency Response Plan. Nurses, Coaches are trained on AED and First Aid, etc.
	~ Fire Safety Inspection procedures. AED's will be included now.
	~ Immunization Exemptions. FFA nurses are complying with new procedures.
	Safety & Security.
	~ FFA has complied in advance by using YNDR bags.
	~ Threat Assessment Team. Members must be board approved.
	~ Handout for Pre-Employment or Pre-Service Affidavit for Educational Entities (attached)
	School Health Highlights from Heitzman.

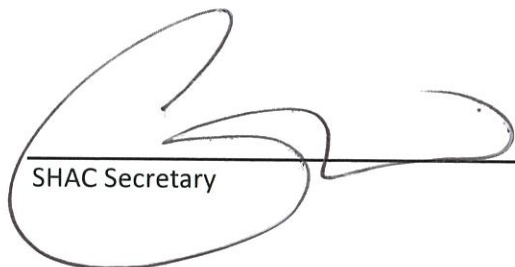
Well underway to completing all required School Health Screenings, including Vision, Hearing, Acanthosis Nigricans, and Spinal screenings at both campuses. We are able to offer students additional vision benefits through the Lions Club Vision Van and other partners for free followup eye exams and free glasses ~ New athletic trainer Linda Bui has been hired. This will promote student health in athletics and in the nurses office since Bui will fill in temporary vacancies there.

Gaspard updated on food services. New smart snack items this year including compliant slushies.

Santana asked about procedures for parents to report immunizations to FFA. Heitzman told procedures.

Teniente described the nurses office effort to keep parents informed and keep records updated. Mtrack Thomas appreciated and confirmed the committees' efforts and adjourned at 3:53.

Action Items For Next Meeting:	Discuss "cheat days" for this SY.	Who:	Heitzman/Mozley
	How will AED's be inspected during fire safety inspections.	Who:	Mozley
	Update board approved list of threat assessment team members.	Who:	Heitzman
	Schedule another vision screening.	Who:	Heitzman
		Who:	

 9/23/25

SHAC Secretary



**FAITH * FAMILY
ACADEMY.**

SCHOOL HEALTH HIGHLIGHTS

September 18, 2025

- Nurses' Office Visits: 974 in the first six weeks of school; 25% Chronic Health Issues
- 960 School Health Screenings Already Completed (Elementary & Secondary)
- New Athletic Trainer – Linda Bui
- New Partner: Prevent Blindness, Vision Screenings & Vision Exam/Glasses Supports;
- Vision Partner: Lions Club coming late October/November
- Immunization Clinic: Working on one in late October with Parkland
- Presenting at Texas Public Charter Schools Association Conference on School Health Partnerships on October 6, 2025 in Houston (Shirley Heitzman & Leonesea Morgan)
- Hiring New School Health Staff ASAP

PRE-EMPLOYMENT OR PRE-SERVICE AFFIDAVIT FOR EDUCATIONAL ENTITIES

*Pursuant to Texas Education Code (TEC) §22A.055, a person applying for employment with or who will act as a service provider for an educational entity (school district, district of innovation, open-enrollment charter school, other charter entity, regional education service center, or shared services arrangement) **must** submit, using a form adopted by the agency, a pre-employment or pre-service affidavit.*

Section 1 - Penalties for Failure to Disclose Required Information

A person commits an offense, a Class B misdemeanor, if the person fails to disclose information required to be disclosed under TEC §22A.055. Additionally, a determination that an employee or person providing services failed to disclose information required to be disclosed by a person under TEC §22A.055 is grounds for termination of employment or service.

Section 2 – Disclosure of Work History and Consent for Release of Records

Have you previously been employed by or acted as a service provider, or are you currently employed by or currently acting as a service provider for a public or private school?	Yes No ☐ ☐
Do you consent for release of your prior employment records? <i>Pursuant to TEC §22A.055, a person applying for employment with or who will act as a service provider for an educational entity must consent for release of the person's employment records.</i>	Yes No ☐ ☐

Section 3 – Disclosure of Investigation or Placement on the Do Not Hire Registry

Have you ever been terminated, non-renewed, or discharged from a public or private school?	Yes No ☐ ☐
Have you ever resigned, in lieu of being terminated or discharged, from a public or private school?	Yes No ☐ ☐

<p>Have you ever been investigated by a law enforcement or child protective services agency for, or charged with, adjudicated for, or convicted of, an offense involving the following conduct described by TEC §22A.051(a)(2)(A), (B), (C), or (D) ?:</p> <ul style="list-style-type: none"> abused or otherwise committed an unlawful act with a student or minor, including by engaging in conduct that involves physical mistreatment or constitutes a threat of violence to a student or minor and that is not justified under Chapter 9, Penal Code, regardless of whether the conduct resulted in bodily injury; was involved in or solicited a romantic relationship with or solicited or engaged in sexual contact with a student or minor; engaged in inappropriate communications with a student or minor, as defined by board rule; failed to maintain appropriate boundaries with a student or minor, as defined by board rule; 	
<p><i>Adjudication and conviction refer to a conviction, plea of guilty or no contest (nolo contendere), probation, suspension, or deferred adjudication.</i></p> <p><i>Charge refers to a formal criminal charge as documented by a primary charging instrument (a complaint, information, or indictment) under the Texas Code of Criminal Procedure.</i></p>	<p>Yes No</p> <p>☐ ☐</p>
<p>Have you ever been investigated by a licensing authority or had a license, certificate, or permit denied, suspended, revoked, or subject to another sanction in this state or another state for conduct described by TEC §22A.051(a)(2)(A), (B), (C), or (D), which is described above?</p>	<p>Yes No</p> <p>☐ ☐</p>
<p>Are you now the subject of an inquiry, disciplinary action, review, or investigation, by any public or private school, by a teacher-licensing agency, by any law enforcement agency, or in the court of Texas or any other state in connection with any alleged misconduct?</p>	<p>Yes No</p> <p>☐ ☐</p>
<p>Have you ever been listed on the Do Not Hire Registry under TEC §22A.151 by the Texas Education Agency.</p>	<p>Yes No</p> <p>☐ ☐</p>
<p>If you answered YES to any question in this section, disclose all relevant facts known to you pertaining to the matter, including, if applicable to the action, whether the allegation was determined to be true or false.</p>	

Section 3 – Declaration of Applicant

Name (First, Middle, Last)

Date of Birth

Address (House/Unit # and Street Name)

Address (City, State, Zip Code)

County

Signature

Date Signed

SIDELINE EVALUATION

Athlete _____ DOB _____
Date of Injury _____ Time of Injury _____
Sport _____ Place _____
Guardian _____ Phone _____
How Injury Occurred _____
Initial Observation _____

Loss of Consciousness: Y _____ N _____

Time: _____ in minutes

Slow Response or Responsive Instability: Y _____ N _____

Memory of Events Before Concussion

Who are we playing?
Are we winning or losing?
Are home or away?
What city are we in?
What day of the week is it?
What month is it?

Who is your parent?

MEMORY

Recall the months of the year
Subtract 4 from 40.
Events before the injury.
Events after the injury.

Word recall (3 words)	Immediate	Delayed
Word 1	_____	_____
Word 2	_____	_____
Word 3	_____	_____

SYMPTOMS

RATE FROM 0 - 6

Headache _____
Nausea _____
Balance Problems _____
Dizziness _____
Blurry/Double Vision _____
Fatigue _____
Sensitivity to Light _____
Sensitivity to Noise _____
Numbness/Tingling _____
Feeling Foggy _____
Feeling Slowed Down _____
Difficulty Concentrating _____
Difficulty Remembering _____
Drowsiness _____
Irritability _____
Sadness _____
Nervousness _____
Feeling more emotional _____

CONCUSSION SPECIALIZED PHYSICIANS

James Sterling, MD
Baylor Scott & White
469-800-7540
BSWsportsconcussion.com

Mat Stokes, MD
Children's Hospital - Dallas
214-456-2400
Childrens.com (search for concussion)

Jarod Cloud, MD
Sideline Orthopedics and Sports
817 960-9120

www.texashealth.org/thpg/sideline-orthopedics-and-sports/

Shane Miller, MD
Scottish Rite for Children
469-515-7100
tsrhc.org/sports

**Please contact Faith Family Academy
athletic trainers and school health professionals
if you have any questions or concerns.**

CONCUSSION RED FLAGS!
Seek immediate medical attention if
Loss of Consciousness
Seizures
Numbness in arms or legs
Irregular pulse or breathing
Vomiting
Slow or unresponsive to questions



HOME CARE FOR A CONCUSSION

Monitor your child: You know how they act and if they are not acting normal.

Notice if any symptoms increase: Not all symptoms appear right away; it may take up to 24 hours for all symptoms to appear.

TIPS TO MANAGE A CONCUSSION

- You can give Tylenol for a headache.
- Use ice packs to relieve head and neck pain.
- Get some sleep! No need to check them every hour.
- A walk is OK for exercise.
- Limit usage of phones and computers; moderate amount of watching TV is OK.
- Contact a concussion specialist for an office visit.

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury caused by a direct or indirect contact to your head. Concussions should be treated as a serious injury. The post effects of a concussion could be life changing if not treated by a physician who specializes in concussion and management.

It takes all of us to make sure your child recovers from their concussion and is able to return to normal functions: The child, guardian, physicians, athletic trainer/school health professional, coaches, teachers, and the school district.

PLEASE REFER TO

THE FAITH FAMILY ACADEMY STUDENT HEALTH POLICIES AND PROCEDURES HANDBOOK

For more detailed information on FFA concussion symptoms, policies, procedures, and practices.

PLAN OF ACTION

Return to Play _____ Remove from Play _____

See athletic trainer _____ Go to ER or hospital _____

Follow up with concussion specialist _____

Post-injury impact test given _____

Complete return to learn and return to play steps _____

RETURN TO PLAY RULES

Following a head injury during sports competition, your child must be seen by a concussion specialist physician, as instructed by the school district athletic trainer.

- **Your child must follow all instructions given to them by the doctor.** Paper notification must be given to the school with a Return to Learn instruction page so that the school can give limitations and restrictions on studying while your child is recovering. During this time, your child should meet with the athletic trainer during their sports period and is not allowed to participate in sports activities.

- **After your child is back to full school learning status** (full days of school and completing all schoolwork) they will be given a Return to Play Form by the doctor. Return to Play does not mean your child is cleared to return to sports. RTP is a five-day (5) progression with the athletic trainer. Your child must complete all five (5) days of exercise and be symptom free.

- **Once all five (5) days are complete,** the athletic trainer will notify the physician, and the physician will release your child to return to sports. The athletic trainer will send a form home with your child that is for the guardian to sign and return with the child. The child will give the form to the athletic trainer.

Once this form is returned with your signature, your child is finally cleared to return to their sport.

FAITH FAMILY ACADEMY
OAK CLIFF ★ WAXAHACHIE

ON-FIELD CONCUSSION
AND
POST-CONCUSSION
MANAGEMENT



FAITH ★ FAMILY
ACADEMY

OAK CLIFF CAMPUS

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214-375-7682



WAXAHACHIE CAMPUS

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Waxahachie, TX 75167
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