

## Healthy Lifestyles Subcommittee of the Cancer Risk Reduction Committee

Meeting Minutes from Birth to Age 18 Meeting, January 27, 2020

Agenda Item	Discussion	Action Items/Recommendations
<p>Welcome from Chairs Approval of Minutes</p>	<ul style="list-style-type: none"> <li>• Dr. Rattay: Today’s meeting is about covering ages 0-18. We will look at where we currently are in Delaware and brainstorm further policy recommendations. We don’t expect that we are going to immediately come to consensus on all recommendations. More likely to find specific areas that we want more information (financial cost, etc.). Will be having some webinars to bring in national experts in February and March.</li> <li>• Dr. Rattay: Please look at meeting minutes from last meeting.               <ul style="list-style-type: none"> <li>○ December minutes were approved.</li> </ul> </li> <li>• Liddy Garcia-Bunuel: Went over packet materials: roster, December meeting minutes, January meeting agenda, January meeting slides, February reading executive summary, February readings.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Subcommittee Members:</b> Read February materials on Workplace Wellness to prepare for next meeting.</li> </ul>
<p>Birth to Age 5: Breastfeeding, early childhood education, WIC, and home visiting</p>	<ul style="list-style-type: none"> <li>• Diana Rodin: A quick skim of IOM and other recommendations to set the stage for our recommendations (see slides included in binder materials)</li> <li>• Dr. Rattay: Any questions from IOM report?</li> <li>• Jonathan Kirch: AAP AHA and others have conclusively said kids 0-5 shouldn’t consume sweetened drinks.</li> <li>• Liddy Garcia-Bunuel: Want to focus our discussion on what is currently in place and what are policies we can throw up on the wall.</li> <li>• Christine Alois: DOE got together as a team to look at what policies are in different departments. Looking at it through a needs-assessment grant (see slides for further detail).               <ul style="list-style-type: none"> <li>○ Working with DE Early Childhood Council to work together on policies, create strategic plans for action steps. Weren’t funded for the next steps portion, still going to attempt to do implementation.</li> <li>○ Attention should also be paid to helping coordinate supports; CACFP is adopting new child-level outcomes (including physical health). Should make sure that home visits are tailored to families’ needs.</li> <li>○ These are areas that have come up through needs assessment. Don’t have policy recommendations but have areas of further exploration/action.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>Christine Alois:</b> Recirculate DOE needs assessment. Continue to develop strategies for areas identified in needs assessment.</li> <li>• <b>HMA:</b> Research policies on workplace breastfeeding; Possibly review WIC retailer credentials; Get details on physical activity requirements for ECEs.</li> </ul> <p><b>Potential Recommendations:</b></p> <ul style="list-style-type: none"> <li>• Increase access to Early Childhood Education and Pre-K.</li> <li>• Provide technical assistance to Early Childhood Education Centers specific to nutrition, physical activity, and screen time.</li> <li>• No sugary/sweetened beverages in Early Childhood Education and no noncaloric sweeteners.</li> <li>• Develop physical activity guidelines for ECEs.</li> </ul>

	<ul style="list-style-type: none"> <li>• Jeanne Chiquoine: Does Office of Child Care Licensing (OCCL) require CMEs for licensing? <ul style="list-style-type: none"> <li>○ Answer: They do have CE requirements for licensure, looking at incorporating nutrition.</li> </ul> </li> <li>• Jonathan Kirch: Would be good to recirculate DOE needs assessment in subcommittee.</li> <li>• Dr. Rattay: According to the literature, there are other things to potentially integrate (adverse child events, parental skills development, etc.). May be helpful to review these.</li> <li>• Jonathan Kirch: Sufficient evidence to recommend expansion of access to Pre-K and Early Childhood Care/Education for obesity prevention. Some evidence is focus on Early Headstart/Headstart programs but could be generalizable. Expect movement on this in the future.</li> <li>• Dr. Rattay: A system recommendation. Regulations have improved, could have an enhancement CACFP and OCCL. Tech system and support can make difference (with DOE with OCCL) in support system for early childhood education (ECEs). There is existing focus on nutrition, physical activity, and screen time. Now could incorporate behavioral health, parental coaching, etc.</li> <li>• Liz Brown: Want to talk about supports for breastfeeding, particularly in the workplace. <ul style="list-style-type: none"> <li>○ Where does DE stand with policies on pumping in the workplace and pumping breaks, etc.? Are there policies in other states to look to? Should look at breast pump policies in Medicaid.</li> </ul> </li> <li>• Dr. Rattay: For home visiting, there is a continuum of services (different levels of intensity and when/how they provide services). Ones that DPH are responsible for provide breastfeeding education and can connect individuals to WIC program and refer people to lactation consultants, nurses, social workers. <ul style="list-style-type: none"> <li>○ Look into studies accessing home visiting programs and childhood nutrition/outcomes. HRSA is solid on guidance that you must implement these programs. Need to investigate opportunities for home visiting to enhance nutrition, physical activity, and breastfeeding components. Are they policy or system pieces?</li> <li>○ Evidence also shows that educational attainment for moms also is correlated.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Promote breastfeeding opportunities and education through WIC peers, lactation consultants.</li> <li>• Provide healthy lifestyle support to caregivers themselves.</li> <li>• Increase home visiting.</li> <li>• Sugary/sweetened beverage tax.</li> <li>• Fund implementation of DOE needs assessment.</li> </ul>
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- Dr. Rattay: There was an Executive Order from Obama administration on pumping in the workplace, but only for state/public employees.
- Liddy Garcia-Bunuel: I interviewed Minding the Baby, they have a focus on breast-feeding and teach parents to respond to baby's cries in ways other than just feeding.
- Allison Karpyn: We need tech support for ECE workers. There are not often enough time and resources to support them in implementing their own healthy lifestyle. Need to support ECE workers in making their own healthy lifestyle choices.
  - Question: WIC went to the cash value benefit, but how much of that cash value goes unclaimed?
  - Answer: Unlike other states, a large majority of that cash value benefit is claimed.
- Allison Karpyn: There is an opportunity to connect with communities through WIC retailers. Should also review WIC retailer credentials to make sure they are up to standard.
- Liz Brown: Policy recommendation to investigate sugary/sweetened beverage tax. Can this be implemented? And how?
- Dr. Rattay: Looking at drilling down into the evidence in March.
- David Edgell: Follow through on work that has already been going on. Even though there is lack of funding for needs assessment, continue to work on implementation. Question: where do we need to go to align with other states? Are we doing things a different way? What is missing?
- Liddy Garcia-Bunuel: Refers to slide 10. This is how we align with other states for examples of policies for ages 0-5.
  - Defined physical activity in ECE settings
  - Link to CACFP standards that automatically update
  - Nutrition standards for ECEs that meet USDA and CACFP standards
- Jonathan Kirch: Should ask RWJF why they did not have DE as meeting those requirements? What were the metrics/definitions for these policies? What is DE missing? What are examples of policies in other states that met it?
- Dr. Rattay: There was previously a link to CACFP guidelines on state licensing laws page, but this was removed. OCCL reintegrated guidelines into webpage. They mirror CACFP guidelines, but do not

	<p>link to them, because ECEs are not required to follow exact CACFP guidelines.</p> <ul style="list-style-type: none"> <li>• Allison Karpyn: How can we enforce ECEs to comply with guidelines? <ul style="list-style-type: none"> <li>○ Amy: Can take fiscal action if not compliant. No additional funding aside from federal funding tied to regulations.</li> </ul> </li> <li>• Allison Karpyn: All ECEs follow CACFP-like guidelines, but DOE only oversees the ones that are certified through CACFP. The rest are overseen OCCL.</li> <li>• Christine Alois: As of July 1, that oversight will change. Need to make sure that oversight and standards are consistent.</li> <li>• Dr. Rattay: Did previous recommendations for physical activities go away? They used to be there. <ul style="list-style-type: none"> <li>○ Need get more details on physical activity in ECEs.</li> </ul> </li> <li>• Jonathan Kirch: Explicit statement in OCCL nutrition standards that ECEs should not serve sugary/sweetened beverages or noncaloric sweetener.</li> <li>• Aaron Schrader: Should also look at role of pediatricians. Parents rely heavily on guidance from provider community. Potentially investigate strengthening access to pediatricians and awareness and education for pediatricians.</li> <li>• Dr. Rattay: Are CACFP standards at odds with Trump Administration school lunch guidelines? <ul style="list-style-type: none"> <li>○ Amy: No, this is not a concern. Should start to set guidelines on styles of eating (family meals, educator-administered meals) with CACFP so that we can then start implementing exactly what nutrition standards need to be.</li> </ul> </li> </ul>	
<p><a href="#">Age 6 to 18:</a> School-aged children</p>	<ul style="list-style-type: none"> <li>• Diana Rodin: Summarized CPSTF guidelines (see slides). Highlighted Fitnessgram in GA (fitness assessments in schools with PE minimum requirements). Generate individual reports that went to parents. High implementation, 98% at end. Got evaluations to at least a million parents, saw positive trends in results. <ul style="list-style-type: none"> <li>○ Summarized Trump administration rollback of Healthy Hunger-Free Kids Act of 2010: started to add flexibility in nutrition requirements (flavored milks, etc).</li> </ul> </li> <li>• Christine Alois: DOE just added an associate for education health and wellness (Sabra Collins). Need to monitor implementation of current regulations to see what is working. There are updated health regulations (Article 851) around substance abuse prevention that were reviewed with stakeholders. Let's talk about how we will</li> </ul>	<ul style="list-style-type: none"> <li>• <b>HMA:</b> Consider looking into counter-marketing measures for food retailers; Explore policies on student hydration.</li> <li>• <b>David Edgell:</b> Circulate Food Policy Council report on mapping food and wellness centers.</li> </ul> <p><b>Potential Recommendations:</b></p> <ul style="list-style-type: none"> <li>• Create interagency governance structure/agreements dedicated to ensuring implementation of health and wellness in schools.</li> </ul>

	<p>move forward with these and incorporate nutrition and physical activity into them.</p> <ul style="list-style-type: none"> <li>• Sabra Collins: First step is to collaborate with curriculum directors to figure out what is going on in classroom to figure out what changes need to be made. Have a workgroup meeting in February. First task is to review curriculum around tobacco, alcohol, and drugs. Surveys will go out to districts to understand what they're doing. We will make sure that we get the survey responses back. Then need time devoted to review districts' wellness plans, what is in them and how can we work to improve implementation and add on. Also, should review implementation of DE Fitnessgram.</li> <li>• Jeanne Chiquoine: Are the parents still getting a letter getting results of Fitnessgram? <ul style="list-style-type: none"> <li>○ Sabra Collins: I will ask to make sure the reports are getting to the parents.</li> </ul> </li> <li>• Christine Alois: A lot of work should be bringing these practices/policies back to the forefront. A lot went astray because there have been vacant positions.</li> <li>• Jonathan Kirch: What if there was a governance structure that consisted of state Board of Education, district Superintendents, etc. that met routinely and acted as high-level oversight specifically looking at health efforts in schools (substance use, school nutrition, physical activity, family health). Policy to create this so that top leadership thinks about these issues more often.</li> <li>• Dr. Rattay: Do you anticipate that nutrition and physical activity will be incorporated into assessment with curriculum directors? <ul style="list-style-type: none"> <li>○ Sabra Collins: We're first trying to understand where the gaps are and where can we add more support. How can we go out into community to go about enhancing support? Online, in schools, what methodology? Need more stakeholder engagement about regulations before we formally change them and need community feedback. Vetting what resources are going into schools. School board provides/implements curriculum, but DOE provides support to make sure that they are in line.</li> <li>○ Dr. Rattay: Are you thinking to expand on Fitnessgram with CACFP plans. How can physical activity get incorporated?</li> <li>○ Sabre Collins: Can put more emphasis on physical activity in classrooms on the radar.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Increase technical assistance related to physical activity and nutrition in schools to support wellness committees.</li> <li>• Commit to implementation of Fitnessgram in DE.</li> <li>• Develop after-school nutrition policies.</li> <li>• Formally set nutrition standards to the 2013 USDA model (before standards were relaxed).</li> <li>• Recess requirements for all schools.</li> <li>• Set increased standard for PE hours in schools.</li> <li>• Set standards for wellness centers and food retailers in communities.</li> <li>• Explore "counter-marketing" nutrition messaging.</li> <li>• Implement 851 Regulations.</li> <li>• Address gaps in safe routes to schools to enforce recommendation that students should walk or bike to school if they live within 1 mile (Middle &amp; Elementary) or 2 miles (HS) of school.</li> </ul>
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- Allison: How frequently are wellness committees meeting? That is a simpler win.
- Aimee Beam: Wellness committees and plans are my jurisdiction. Everyone was required to revamp school wellness policies, this year is year 3. Requirement from USDA that each school food provider also must go through own assessment to make sure they are in line with policies.
- Jonathan Kirch: They pulled district wellness policies off internet, but they were dated. Need more external participation in developing them.
- Aimee Beam: There is a requirement that there is a public announcement of policies. Have district standards but can always do more. Going to evaluate that.
- Allison Karpyn: Is there public scoring card for wellness policies?
  - Amy: No there is no standard, we gave suggestions and they create their own.
- Jeanne Chiquoine: Do schoolboards have access to data sets as background for creation of wellness policies?
  - Christine: Internally yes, each district has access to their data. DOE can provide data on statewide system, but we have less data to share. Should try to work from these wellness policies to create more of a comprehensive plan for district rather than doing separate plans.
- Jonathan Kirch: Might be nice to have outside partners (parents, community members) engaged in developing these wellness policies.
- Allison Karpyn: That is what the wellness committees are supposed to do, but this has fallen off. This can be something to bring back up.
- Aimee Beam: For school nutrition program, we have standards for calorie ranges, saturated fats, sodium and whole grain rich requirements. Schools can choose to use these (there are some flexibilities). But most school are still using requirements used in 2013. Consensus has been that schools have already done all this work to get up to 2013 standards that they don't want to roll back. There are a few things (e.g., pasta) that they have standard flexibility. No districts have any requirements that go over and above USDA standards. USDA is also responsible for a la carte, vending, and fundraising standards (food given in school outside of cafeteria). Must meet SmartSnack standards, have no exemptions,

	<ul style="list-style-type: none"> <li>○ David Edgell: Our office must approve new school sites but can do more work that regard.</li> <li>● Jonathan Kirch: Also, should talk about water access, clean drinking water, where do students get hydration.</li> </ul>	
<p><b>Next Steps:</b> Review to-dos and schedule for February meeting</p>	<ul style="list-style-type: none"> <li>● Liddy: Covering next month’s meeting, reading materials were distributed in hard copy. Any additional resources to consider need to be shared by <b>February 10<sup>th</sup></b>. Diana will interview people around workplace wellness. There are going to be 2 webinars in late February and March where you all will talk with national experts on these policies to get feedback. What time works? <ul style="list-style-type: none"> <li>○ Late afternoon: 4-5pm window</li> </ul> </li> <li>● Liddy Garcia-Bunuel: There are going to be two town halls. April 15<sup>th</sup> 6-8pm at Hanover Presbyterian Church in Wilmington. April 21<sup>st</sup> 6-8pm at Milford Wellness Village in Milford.</li> <li>● Dr. Rattay: Opening for public comments</li> <li>● Helen Arthur: Need refreshers on joint user agreements. Eventually we should get to a point on interagency agreement among different departments for ensuring health and wellness for young kids.</li> </ul>	<ul style="list-style-type: none"> <li>● <b>Subcommittee Members:</b> Send any additional resources on Workplace Wellness that you think should be shared with the group to Diana Rodin (<a href="mailto:drodin@healthmanagement.com">drodin@healthmanagement.com</a>) by February 10<sup>th</sup>.</li> <li>● <b>Subcommittee Members:</b> Prepare for and attend February and March Webinars.</li> <li>● <b>Subcommittee Members:</b> Attend town halls on April 15<sup>th</sup> and April 21<sup>st</sup>.</li> </ul>
<p><b>Closing</b></p>	<ul style="list-style-type: none"> <li>● Dr. Rattay: We covered a lot of ground. Not a final product, but a start on developing ideas.</li> </ul>	

goes up to 30 mins after school day. Does not include afterschool (sporting events, etc.).

- Jonathan Kirch: Recommendation that DE should formally adopt school nutrition standards that are equal to nutrition standards before they were relaxed. (Formalize what is already happening).
- Aimee Beam: For CACFP program, still do nutrition education with childcare providers, but don't have standards in place. Can encourage breastfeeding in ECE setting, reimbursement for mothers bringing in milk. Can't serve sweet grains.
- Aimee Beam: New announcement with USDA standards for school meals, to provide flexibility. How we are going to respond to this?
- Jonathan Kirch: Should do all the PE and recess requirements on slide 23.
  - Jeanne Chiquoine: They piloted these programs years ago. Let's look at that again: Senate Bill 289.
- Jonathan Kirch: Also look at safe school routes, look at built environments. Technical assistance as we talked about with nutrition, the same applies to physical activity. 150 hours for HS, 250 hours for elementary and middle school.
- Lt. Governor Hall-Long: This comes to my office.
- Jeanne Chiquoine: Can we investigate doing counter-marketing on social media against unhealthy food/drinks?
- Lt. Governor Hall-Long: Also, should look at healthy food access outside of schools (food deserts). Need to look at role of wellness centers around role of supporting healthy weight and nutrition.
- David Edgell: Food Policy Council just got initial report of GIS data where they mapped socioeconomic characteristics, food resources, retail environment, and where wellness services are located. That is a resource that we can use in the future. Have a retail project kicking off in July where we hired Food Trust to look at food retail environment everywhere except Wilmington (already did a study in Wilmington). Trying to find where is best opportunity to get more healthy food available in more rural communities.
- David Edgell: Safe routes to school is also a great area of opportunity. Policy that if a safe route is available, those who live within 1 mile for elementary and middle and 2 miles for HS are recommended to walk/ride bike to school. Should invest more in infrastructure to make this possible.
- Dr. Rattay: School siting is relevant to safe routes for school.