

MINUTES OF THE HOUSE EDUCATION COMMITTEE

The meeting was called to order by Chairman Clay Aurand at 9:00 A.M. on February 13, 2007 in Room 313-S of the Capitol.

All members were present except:

Representative Benjamin Hodge- absent
Representative Ted Powers- excused

Committee staff present:

Sharon Wenger, Kansas Legislative Research Department
Michele Alishahi, Kansas Legislative Research Department
Ashley Holm, Kansas Legislative Research Department
Theresa Kiernan, Revisor of Statutes
Janet Henning, Committee Assistant

Conferees appearing before the committee:

Representative Candy Ruff
Representative Anthony Brown
Andy Sanchez, Executive Secretary-Treasurer, Kansas AFL-CIO
Neil Fisher, Kansas Building Systems
Richard Hoffman, Ks Assoc. Technical Schools & Colleges
Corey Peterson, Kansas Association General Contractors of Kansas
Representative Pat Colloton
Ron Hein, Kansas Beverage Association
Dr. Howard Rodenberg, Director, KDHE
Dr. Dennis Cooley, Kansas Chapter American Academy of Pediatrics
Dr. Kim Kimminau, Kansas Health Institute
Diane Gjerstad, Wichita Public Schools
Mark Desetti, KNEA
Jim Edwards, KASB
Gary Brunk, Kansas Action for Children
Kelly Youngken, American Beverage Association
Dr. Gary George, Superintendent, Olathe School District (written only)
Steve Coen, Chairman, Governor's Council on Fitness (written only)
Dr. Doug Illiff, Family Physician & member of Governor's Fitness council (written only)
Carolyn Gaughan, CAE, Executive Director, Ks Academy of Family Physicians (written only)
Val DeFever, Schools for Quality Education (written only)

HB 2343: Early high school graduation incentive program.

Representative Ruff spoke to the Committee as a proponent of **HB 2343**. She told the Committee the bill was a way to offer high school students an incentive to enter the building trades profession. (Attachment #1)

Representative Brown spoke to the Committee as a proponent of **HB 2343**. Representative Brown advised this bill would encourage students to graduate early and only applied to students in public education, they must complete all requirements of the local district, no GED's, and only applied to one full year early May of junior year. He also advised the bill would be for a cash award of \$1000 and a one-time scholarship of up to \$3000. (Attachment #2)

Andy Sanchez spoke to the Committee as a proponent of **HB 2343** and advised the bill would provide needed opportunities for young people to be exposed to the trades and offer incentives to apply themselves in their interests. (Attachment #3)

Neil Fisher stated his industry was short at least 250,000 employees annually to serve the needs of businesses and was in support of **HB 2343**. (Attachment #4)

Richard Hoffman spoke to the Committee as a proponent of **HB 2343**. (Attachment #5)

Corey Peterson told the Committee that developing the future workforce has been a top priority for his group for several years and was in support of **HB 2343**. (Attachment #6)

Written testimony was received from Val DeFever as being neutral on **HB 2343**. (Attachment #7)

CONTINUATION SHEET

MINUTES OF THE House Education Committee at 9:00 A.M. on February 13, 2007 in Room 313-S of the Capitol.

After a brief question and answer session, the Chairman closed the hearing on **HB 2343**.

HB 2090: School districts; physical fitness tests; physical education goals.

Representative Colloton spoke to the Committee in support of **HB 2090**. She told the committee that **HB 2090** seeks to coordinate the taking of data, its analysis and reporting between the Kansas Department of Education and the Department of Health. This legislation seeks state funding for the staff at the Kansas Department of Education that will oversee implementation of the data collection as part of school health programs and for the staff at the Department of Health who will assist in collecting the data and analyzing it. (Attachment #8)

Dr. Howard Rodenberg spoke to the Committee as a proponent of **HB 2090**. KDHE supports the bill which would require collection of height and weight data, development of standards for physical fitness tests and physical education, programs, and the collection of data regarding the amount of teaching time spent by certified physical education teachers in conducting physical education classes. (Attachment #9)

Dr. Kim Kimminau spoke to the Committee as a proponent of **HB 2090**. (Attachments #10, #11, #12)

Ron Hein talked to the Committee as a proponent of **HB 2090**. (Attachment #13)

Diane Gjerstad spoke to the Committee with concerns of **HB 2090**. (Attachment #14)

Mark Desetti spoke to the Committee with concerns of **HB 2090**. (Attachment #15)

Jim Edwards spoke to the Committee as a neutral of **HB 2090**. (Attachment #16)

Val DeFever spoke of concerns of **HB 2090**. (Attachment #17)

Written testimony reference **HB 2090** was also received from Steve Coen (Attachment #18), Dr. Doug Illiff (Attachment #19), and Carolyn Gaughan (Attachment #20).

The Chairman closed the hearing on **HB 2090**.

HB 2275: Schools; vending machines.

Gary Brunk spoke to the Committee and voiced support of **HB 2275**. (Attachment #21)

Dr. Dennis Cooley, who was speaking on behalf of Dr. Sarah Hampl, spoke to the Committee as a proponent of **HB 2275**. (Attachment #22).

Ron Hein testified as an opponent of **HB 2275**. (Attachment #23)

Kelly Youngken spoke as an opponent of **HB 2275**. (Attachment #24)

Jim Edwards spoke to the Committee as an opponent of **HB 2275**. (Attachment #25)

Written testimony was submitted by Karen Bailey as an opponent of **HB 2275**. (Attachment #26)

Dr. Gary George gave written testimony as an opponent of **HB 2275**. (Attachment #27)

Diane Gjerstad spoke to the Committee as a neutral of **HB 2275**. (Attachment #28)

The Chairman closed the hearing on **HB 2275**.

The Chairman adjourned the meeting at 10:30 AM. The next meeting is scheduled for February 14, 2007.

STATE OF KANSAS



TOPEKA

HOUSE OF

REPRESENTATIVES

COMMITTEE ASSIGNMENTS

RANKING MINORITY MEMBER: VETERANS, MILITARY &
HOMELAND SECURITY AFFAIRS
MEMBER: COMMERCE & LABOR
MEMBER: JOINT COMMITTEE ON ARTS AND
CULTURAL RESOURCES

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REPRESENTATIVE FORTIETH DISTRICT
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STATE CAPITOL, ROOM 322-S
TOPEKA, KANSAS 66612
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E-MAIL: Ruff@house.state.ks.us

To: House Education Committee

From: Rep. L. Candy Ruff

Re: HB 2343

Date: Feb. 13, 2007

Wanting to offer high school students an incentive to enter the building trades profession knowing full well they are unlikely to stick it out for four years of high school, HB 2343 is created for a small group of students. No grand, sweeping program designed to touch most high school students, this bill recognizes the few students who may respond at the beginning of high school to this idea:

In your freshman year, the possibility exists to graduate from high school in three years, which will in all likelihood include summer school to insure enough credits are taken.

At the end of that three-year period, two incentives await students interested in entering the building trade's profession.

A \$1,000 bonus applied to the purchase of tools of the trade, given to the vocational/technical trade school in the student's name to be drawn from as the need for tools arise

A \$3,000 scholarship applied to a building trades profession taught in one of the state's vocational/technical institutions.

Identifying the training contained in the building trades profession as the "building trade worker" described in this bill was intentional by the sponsors of this legislation. These building trades' professions have apprentice programs in Kansas awaiting those students who complete their training in the vocational/technical training school. An important final step in this process, attendance in an apprentice program is the final portion of the training that guarantees the move to journeyman status.

The idea for this legislation comes from Rep. Anthony Brown, who is a successful finish carpenter. As an eye witness to the needs of building trades professionals, he has observed over the years a certain group of young people who were not cut out for four years of high school. Realizing they may respond to a program that allows them to graduate in three years, Rep. Brown devised a way to establish this scholarship program as an incentive to graduate from high school knowing this bonus awaits them at the end.

House Education Committee

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Attachment # 1

Our legislative intent for this legislation is clear.

In no way should high school graduation requirements be altered. When this legislation becomes law, school districts continue to have the final say about allowing early high school graduation. Patrons unhappy about their children being denied early graduation have the opportunity to run for the school board and change the policy.

This legislation is not meant to displace nor disrupt existing vocational/technical programs in high school. Rather, the hope is that it will add another incentive to keep students in school with an incentive at the end.

Because the fourth year of high school funding is eliminated, this legislation is intended to have no fiscal note. Keeping with Rep. Anthony's insistence that this bill remain as revenue neutral as possible, the cost of this bill should be minimal.

Rep. Brown and I want to thank Rep. Sue Storm for offering realistic and helpful suggestions in preparing this bill. Understanding any new educational program is a work in process that takes time and patience, we offer HB 2343 in the hope of bringing attention to the building trades industry. Although a small gesture meant to help a limited number of students, this bill begins the process of recognizing that not all high school students must attend college in order to be successful. Becoming a carpenter, plumber or electrician will not only guarantee you a place in the middle class but you could also become the most popular person on your block.

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TOPEKA

HOUSE OF
REPRESENTATIVES

HB 2343

COMMITTEE ASSIGNMENTS

VICE CHAIR: FINANCIAL INSTITUTIONS
MEMBER: FEDERAL AND STATE AFFAIRS
TAXATION

Thank you Chairman Aurand, Vice-Chair Horst and Honorable Education Committee for allowing me to discuss a few issues concerning HB 2343 an early graduation incentive program. Rather than reading my testimony to the committee I will go over a brief outline and stand for questions regarding this legislation.

I. Introduction

- A. Kansas must meet the student at their need.
 - 1. Modifies the System to Student's Need
 - 2. Does not mold the Student to the System's Need
- B. 21st Century provides new challenges
 - 1. Less than 40% of all jobs require a Bachelor's Degree
 - 2. Administrators acknowledge a need for change
 - 3. Over a generation trying to force "Square Pegs in Round Holes"
 - a. Quit Whittling the Peg (Student) to fit into the Hole (System)
 - b. Allow student to pursue interest outside of tradition teaching
- C. Well educated workforce makes Kansas more competitive.
 - 1. Well educated no longer means university educated
 - 2. Market place is changing with less careers demanding traditional education
 - 3. Kansas should lead in this educational opportunity

II. What does the Bill do?

- A. Encourages students to graduate early
 - 1. Only applies to students in public education
 - 2. Must complete all requirements of local district
 - 3. No GED's
 - 4. Only applies to one full year early May of junior year
- B. Cash award of \$1000
- C. One-time scholarship up to \$3000
 - 1. Only in-state vocational or technical college
 - 2. Narrow scope

III. Conclusion

- A. Allows Kansas to meet the needs of the student.
- B. This is a 21st century solution
- C. Makes Kansas more competitive

House Education Committee

Date: 213-07

Attachment # 2

Kansas AFL-CIO

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785/267-0100

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Richard Taylor
Brian Thompson
Dan Woodard*

**TESTIMONY
On HB 2343 Before the
House Education Committee
February 13, 2007**

By Andy Sanchez, Executive Secretary-Treasurer Kansas AFL-CIO

Thank you Chairman Aurand and Members of the Committee. My name is Andy Sanchez, Executive Secretary-Treasurer of the Kansas AFL-CIO. I appreciate the opportunity to appear before you today and offer our comments on HB 2343. In concept, if bridged to a registered apprenticeship training program, success could be guaranteed.

In my other life as I sometimes say, I was an electrician. I devoted 17 years to the trade, with about 4 of those years as Training Director. I was taught well as an apprentice and as a journeyman; I subscribed to the theory of if you take from the circle (knowledge, skills and abilities), you must give back. But prior to my acceptance, I knew I wanted to pursue a trade but received no help from my high school counselor. He had good intentions by trying to steer me towards college, but at that time I knew it was not the career path for me.

HB 2343 could provide badly needed opportunities for young people to be exposed to the trades and offer incentive to apply themselves in their interests. Such a program could allow a young person to set goals early on and gain confidence, knowledge, skills and abilities. However, opportunities are passing by for many young people who could be getting trained in a well paying job. Too often kids are wandering through their young life trying to figure out what they want to do. And too often women and minorities do not get a chance to be exposed to such careers. I believe this could help.

Our affiliated apprenticeship schools are challenging with a combination of on the job training and school. In the electrical field the math is very involved and parts of the curriculum is borderline to engineering. Utilizing a national curriculum (worth college credits), it truly takes a commitment.

As you might have gathered, I take a great deal of pride in the state registered apprenticeship programs. Their standards are also registered with the Federal Department of Labor. To guarantee success this legislation should seek ways to mesh with only union apprenticeship programs. Simply put, they are unmatched in their success. Such programs emphasize safety and are careful not to expose the dangers of a construction site to non-adults. This bill should not be an avenue for student summer jobs. If "early graduation" means getting into a bona-fide state approved apprenticeship program, this could be good legislation. Thank you



House Education Committee

Date: 2-13-07

Attachment # 3

February 15, 2007



I am here today to speak as a proponent for House Bill 2343. My name is Neil Fisher. I am Vice President and Chief Operating Officer of Kansas Building Systems, Inc. I have 42 years experience in the Construction Industry, 25 as a business owner. I serve on the Kansas Advisory Committee on Career and Technical Education, the Chair of the Business Advisory Council for Kaw Area Technical School, a Board Member for our local Area Workforce Investment Board, and am involved in many other education and training committees.

Our industry is short at least 250,000 employees annually to serve the needs of businesses. This trend will continue to grow if we do not come to understand that our schools should be evaluated on the knowledge our students attain, not how many students we head off to 4-year baccalaureate institutions.

By encouraging our students to work hard and accelerate learning, we cannot only help meet manpower shortages, but give them an early start on well paid careers. These careers typically provide compensation packages of over \$25 an hour, including benefits, with great opportunities for advancement.

One of the great advantages of the construction industry is that this work cannot be out-sourced. By giving scholarships to students who wish to continue their learning, we also give incentive to aspire to management as well as entrepreneurship. Programs such as the one at Hutchinson Community College give the opportunity to earn an Associates Degree and a connection to a 4 year degree if desired. It is truly a win/win undertaking.

Our students should be encouraged to follow career choices which they enjoy and for which they have aptitudes, not be pressured by our society into decisions that meet a misguided academia mind set.

House Education Committee

Date: 2-13-07

Attachment # 4



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Office (785) 266-4222 • Fax (785) 266-3313

Hutchinson COMMUNITY COLLEGE

AND AREA VOCATIONAL SCHOOL

**Building Trades Technology-
Commerical Construction**

Associate in Applied Science

Department: Computer and Industrial Technology

Contact: Tim Evans (620) 728-8141 evanst@hutchcc.edu

Dept. Chairperson: Jackie Long (620) 728-8187 longj@hutchcc.edu

This program prepares students to enter the commercial construction industry or, if already in the industry, develop specific skill in the commercial construction crafts, or prepare for such jobs as superintendent, foreman, project manager, estimator/purchaser, field engineer, and subcontractor supervisor. The technical requirements of the program are offered in cooperation with the Associated General Contractors of Kansas. The AGC Training Center is located off of K-96 highway and Rock Road in Wichita.

Technical Program Requirements

	Credit Hours
BT101 Blueprint Reading, Codes and Site Preparation	3
BT131 Carpentry I	3.5
BT132 Carpentry II	3.5
BT133 Carpentry III	4
BT171 Concrete I	3.5
BT172 Concrete II	3.5
BT141 Masonry I	3.5
BT161 Metal Buildings I	3
B1151 Ironworking I	3.5
BT202 Crew Leader	1
WE100 Basic Welding	2
BT105 Mechanical Systems	2

General Education Requirements

EN108 Technical Writing or B0113 Business English	3
TR101 Applied Algebra I	3
PS101 Human Relations	3
S0113 Cultural Diversity	3
SP100 Vocational Spanish	3

Technical Support Requirements

DR107 Construction Drafting	2
MS106 Conflict Resolution	1
IS104 Microcomputer Applications or IS103 Microcomputer Literacy and IS110 Spreadsheets I	3
ED105 Success Seminar/Orientation	1

**Choose Seven Credits from the
Following Courses**

B0120 Job Search and Retention	1
AP120 Commercial Driver License Training Training Course	1
ME108 Occupational Safety	2
BT205 Construction Management (STP)	8
MM204 Small Business Management	3
B0111 Business Communications	3



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**House Committee on Education
February 13, 2007**

TESTIMONY IN SUPPORT OF H.B. 2343

Chair Aurand and members of the committee, I appreciate the opportunity to present testimony in support of HB 2343. My name is Richard Hoffman, President of the Kansas Association of Technical Schools and Colleges (KATSC) and I speak to you today on behalf of all technical education institutions in Kansas to urge your consideration of H.B. 2343 creating an early high school graduation incentive program.

This legislation would allow any pupil graduating at least one year earlier than the usual graduation time to be eligible for an incentive bonus of \$1,000 to be used for the purchase of tools needed as a building trade worker. The bill also proposes an incentive bonus for a pupil to receive a scholarship up to \$3,000, for completing a building trade program at a technical college or vocational education school.

The students served by this act are in need of a challenge, and let me tell you, technical education has changed from when:

It used to be called "Voc - Ed". It was where we dumped the losers. Truth is, a four - year degree isn't for everyone, nor should it be. But there's still a perception that Career and Technical Education, (CTE) is for entry-level, dead - end jobs. That's just wrong: Engineering technology, business, and health care are consistently at the top of the list of associate's degrees earned by CTE students. And the money's good. A few years back, a worker with a bachelor's degree earned a median salary of \$686 per week, while the average worker with an associate's degree made \$639, only a \$50 difference.¹

Skilled workers listed in the bill are in high demand. At the recent governor's summit on career and technical education, one of the key outcomes identified is the need to reduce the time from traditional graduation to quality employment. Fact is, a student completing a program of study at Kaw Area Technical School, will earn \$2 - \$5 more per hour than those going directly into the workforce. Employers can pay this extra because a trained worker is more productive, wasting less time and supplies, than one they have to train.

Something else to think about, Technical Education is all about high standards. How high are our standards? You tell me. How often would it be acceptable to miss a crack in a furnace that allows carbon monoxide to enter a home? Do elevators really need to go to the top floor? Is it ok to wire a home with double the amperage that an electrical cable was designed to carry?

In conclusion, let me leave you with this thought. According to a variety of statistics and research, the majority of jobs in the future will require advanced training past high school, but only 20% of the jobs will require a four-year degree. What will we do when the 40%+ of employees that represent the baby boomers retire? Where will this next generation of workers come from? With 90% of technical graduates remaining in Kansas, there is not a better return on the dollar than what the state invests in technical training. This concludes my testimony, I would be happy to stand for questions.

¹ Jacob Young, *Reader's Digest*, January 2005, Make Something Happen, p. 89

House Education Committee
Date: 2-13-07
Attachment # 5



Building a Better Kansas Since 1934
200 SW 33rd St. Topeka, KS 66611 785-266-4015

**TESTIMONY OF
ASSOCIATED GENERAL CONTRACTORS OF KANSAS
BEFORE HOUSE COMMITTEE ON EDUCATION
HB 2343**

February 13, 2007

By Corey D Peterson, Associated General Contractors of Kansas, Inc.

Mister Chairman and members of the committee, my name is Corey Peterson. I am the Executive Vice President of the Associated General Contractors of Kansas, Inc. The AGC of Kansas is a trade association representing the commercial building construction industry, including general contractors, subcontractors and suppliers throughout Kansas (with the exception of Johnson and Wyandotte counties).

The AGC of Kansas supports House Bill 2343 and requests that you report it favorably for passage as introduced.

Developing the future workforce has been a top priority for AGC of Kansas for several years. Demographics show that the construction industry will be losing a significant portion of its skilled workforce in the next 5 years due to retirement. While our industry realizes this is looming and is trying desperately to prepare for it, it also recognizes the challenges that lie ahead.

AGC understands it and other construction related groups face an up-hill battle in bringing young people into our industry. There has been a stigma attached to construction that it is not a good place to have a career. While in reality, the construction industry provides good paying jobs, benefits and opportunities for advancement. Often times, compensation in construction is far superior to those careers offered to four year college degree recipients.

In addition, parents, teachers, counselors, and school administrators all tend to focus on getting students prepared for four year colleges and overlook technical education and the rewarding careers industries like construction have to offer. Many times it is only after the system has failed a student, be it several years into college or after arriving on campus and realizing it "is not for them," does the student get steered to technical education and informed of the careers that await. There should be a direct career path that is developed, funded, and promoted.

Workforce development is both an education and economic development issue. The benefits of technical education should be considered, both for the opportunities it can create for the citizens of Kansas, and for our state's ability to grow economically. Kansas must have a trained workforce, including technical professions.

HB 2343 provides awareness to opportunities in technical careers and an incentive to continue education after high school. **The AGC of Kansas respectfully request that you recommend HB 2343 for passage.** Thank you for your consideration.

House Education Committee
Date: 2-13-07
Attachment # 6

Schools for Quality Education

124 Bluemont Hall , 1100 Mid-Campus Dr.
Manhattan, Kansas 66506

Testimony on HB2343
February 13, 2007

Our small rural schools want to provide their students with the best possible educational opportunities. It is common for most of the students to be involved in vocational technical programs within their traditional educational course work. Admittedly their choices may be limited due to the size of the school however it is often a great distance to a post secondary program. There is also likely to be some reluctance to sent a sixteen or seventeen year old away from home to access this training. This is the rural perspective and is express only as that. None the less this approach may well be an appropriate component of redesigning our high school to meet the needs of the twenty-first century.

On a personal note, as a Title I teacher I worked with students who were challenged by traditional education approaches, but they were great in art and anything that required putting things together. All those years ago, I tried to get some of my students access to a vocational technical program, once they reached high school. The lose of ½ student in head count and the fact that there wasn't a vocational technical program in my community hindered serious consideration of this option.

Today I sit on the Workforce Network Kansas Board (WNK) where we focus on the need for more skilled tradesman in our state. I feel confident that this board would be pleased by an initiative to attract more high school students into vocational technical areas. The \$1,000 would be a great incentive for these kids to move into formal training. Many of them would never be able to pay the full cost of the program or buy the necessary tools.

I do have a few reservations.

*One of the goals of high school is to give each student a good cross section of academic experiences that will help them make better decisions and be better citizens. With one less year of high school the student may be short changed.

*Access to advanced vocation programs for rural students is likely require leaving home..

*Rural Schools who are already experiencing declining enrollment may not be eager to lose students earlier.

Val DeFever
SQE Public Relations

House Education Committee
Date 2-13-07
Attachment # 7

STATE OF KANSAS
HOUSE OF REPRESENTATIVES

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PAT COLLOTON
28TH DISTRICT

February 12, 2007

Re: HB 2090

Dear Chairman Aurand and Committee Members:

I appreciate the opportunity to testify on behalf of House Bill 2090. This bill reflects a collaboration between Dr. Howard Rodenberg, Director of Health, Kansas Department of Health, Dr. Kim Kimminau, Senior Vice President for Research and Analysis, Kansas Health Institute and Director Jodi Mackey, Child Nutrition and Wellness, Kansas Department of Education. HB 2090 incorporates the recommendations for data collection from, among others, the Governor's Fitness Council. They have unanimously endorsed HB 2090 and they encompass educational as well as health professionals from across the state.

The Kansas Health Institute under the direction of Dr. Kimminau undertook a comprehensive survey of public schools and reported that Kansas does not have adequate data to assess the severity of the obesity epidemic. "Kansas Public School Health: Nutrition, Physical Education and Physical Activity Policy and Practices" December 2006. There was a high response rate to this survey and over 80% of administrators and school-district staff and almost 100% of physical education professionals supported the taking of Body Mass Index (BMI) at all of our schools. In order to limit the imposition on school districts, the required collection of data will be done anonymously in grades 4, 7, 9 and 12. This will identify the situation that exists in elementary, middle and high school and the changes that are occurring between those grade levels. Additionally, a brief standardized physical fitness test will be administered under the direction of the Department of Health at schools statewide. I want to stress that the data collected will not identify by name the individuals tested.

With this data in hand Dr. Howard Rodenberg, Kansas' Director of Health, tells us that we can really judge the situation for each school district and throughout Kansas. With this statewide data both local and state policymakers will be able to make informed decisions that are tailored to the different needs of different districts.

House Education Committee
Date: 2-13-07
Attachment # 8

STATE OF KANSAS
HOUSE OF REPRESENTATIVES

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PAT COLLOTON
28TH DISTRICT

HB 2090 seeks to coordinate the taking of data, its analysis and reporting between the Kansas Department of Education and the Department of Health. This legislation seeks state funding for the staff at the Kansas Department of Education that will oversee implementation of the data collection as part of school health programs and for the staff at the Department of Health who will assist in collecting the data and analyzing it. This minimal funding for healthy schools could allow access to more federal dollars and additional grants. It is time we collect the necessary data to make good health policy at our schools and it is time that we give this issue sufficient importance to provide funded staff for it. In the short run, as well as the long run, this will save the state many dollars and avoid personal suffering and hardship for many Kansas citizens.

Respectfully submitted,

Pat Colloton

State Representative Pat Colloton



Kathleen Sebelius, Governor
Roderick L. Bremby, Secretary

DEPARTMENT OF HEALTH
AND ENVIRONMENT

www.kdheks.gov

Division of Health

Testimony on HB 2090

**Presented to
House Committee on Education
February 13, 2007**

**Howard Rodenberg MD MPH
Director, Division of Health and State Health Officer
Kansas Department of Health and Environment**

Chairman Aurand and Members of the Committee, I am Dr. Howard Rodenberg, Director of the Division of Health at the Kansas Department of Health and Environment (KDHE) and State Health Officer for Kansas. Thank you for the opportunity to appear before you today to discuss House Bill 2090. KDHE supports this bill, which will require collection of height and weight data, development of standards for physical fitness tests and physical education programs, and the collection of data regarding the amount of teaching time spent by certified physical education teachers in conducting physical education classes. Passage of this bill will promote a healthier school environment and a higher level of physical fitness in Kansas children.

Since 1980 the prevalence of obesity among U.S. children has tripled. Kansas survey results are strikingly similar to national statistics. While Kansas does not provide for an ongoing system to *continuously* monitor weight among children of all ages, the Kansas State Department of Education (KSDE) and KDHE have collectively conducted studies that give us reliable point in time estimates of the status. For example, in 2004-2005 the agencies coordinated the Kansas Child Health Assessment and Monitoring Project (KCHAMP), in which actual physical measures of height and weight were conducted of students K-12. This is the only state wide data available to describe the risk of overweight that includes school aged students younger than 6th grade. Of the 1,009 students measured, 31.6% in grades K-5 were at risk of becoming overweight or were overweight and 28.4% in grades 6-12 were at risk of becoming overweight or were overweight. ("At risk" of overweight is defined as at or above the 85th percentile, but below the 95th percentile for body mass index, by age and sex. Overweight is defined as at or above the 95th percentile for body mass index, by age and sex.)

Obesity is currently the second leading cause of preventable death in the United States. Being overweight or obese leads to diabetes, heart attacks, strokes, and vascular disease, all of which result in disability and premature death. Unfortunately, this epidemic as yet remains unchecked, and obesity may assume the top spot in causes of preventable death within the next decade. The provisions of HB2090 serve as a "call to action" to quantify the current extent of overweight among Kansas children and position the state to reverse this trend. The school setting, within the

House Education Committee

Date: 2-13-07

Attachment # 9

context of the community at large, offers perhaps the best chance to influence and instill positive health behaviors early in life.

Focusing on fitness within the schools also contributes to their primary educational mission. Multiple studies have linked being overweight and poor physical activity to academic performance. For example, in 2004, researchers related physical fitness scores to Academic Performance Index research files and school-level standardized test scores with physical fitness levels of 800,000 California students in grades 7, 9, and 11. The researchers concluded, "Schools seeking to improve student academic performance cannot ignore the role that health, nutrition, and exercise play in their overall efforts". Their report underscores the importance of health behaviors and risk and youth development factors to academic achievement. Policies and practices that focus exclusively on raising test scores, while ignoring the comprehensive health needs of student, are likely to leave many children behind.

Monitoring the status of BMI among children on a population basis is critical to effective public health intervention. BMI has become the gold standard for monitoring the prevalence of obesity in a population and evaluating effectiveness of a broad set of interventions. It is the primary measure used to track obesity in the CDC's "Healthy People 2010: Health Objectives for the Nation," and serves as a foundation for our own Healthy Kansas 2010 goals. Collection of BMI data under this bill will allow us to identify and target school children at highest risk, and permit the development and evaluation of focused, efficacious, and cost-effective pilot programs to address obesity throughout the state. These programs may then serve as model for statewide policy and programming. No coordinated attack on the problems of nutrition and physical activity in our children can occur without this data in hand. As public health officials and as policymakers, we all depend on the measurement of height and weight to know whether efforts to increase physical activity and improve eating practices are making an impact.

The current collaboration between KDHE and KSDE puts us in a favorable position to effectively implement the requirements set out in HB 2090. The two agencies were successful in competing for federal funds to support a jointly administered Coordinated School Health Program (CSHP), a collaborative effort that has been functioning in our state via federal funds for nearly 4 years. The Departments will capitalize on the experience of implementing the CSHP to accomplish the actions outlined in HB 2090.

The way we envision the collection of height and weight data for the BMI calculation in the field is through the KCHAMP model. Through the KCHAMP study, we have already developed and field tested protocols for conducting physical measures of heights and weights. The Chronic Disease Health Promotion Outreach program can be easily expanded to serve as a resource to school level staff to assure standardized methods of conducting measures and to assist with identifying appropriate personnel to conduct the measures.

Data would be entered into the pre-existing Kansas Individual Data on Students (KIDS) reporting system. The KIDS reporting system is a student level record system that has been developed and is operated by KSDE to meet the reporting requirements of the Federal *No Child Left Behind* legislation. The KIDS system maintains student confidentiality while allowing for more accurate data available in multiple formats. The KIDS System assigns a unique randomly generated state identification number for every student attending accredited public or private schools in the state. This ID number will follow the student throughout his/her pre K-12

education in Kansas public schools. The KIDS program includes an Assignment System used to collect a set of core data elements for every student in Kansas and to assign a unique randomly generated state number to each of these students; and a Collection System to acquire additional data elements used for district funding, student assessments, school accountability, and state and federal reporting requirements such as enrollment, graduation, attendance, and truancy information.

Utilizing the KIDS Collection System, for collecting the height and weight data required in HB 2090 would minimize the time of school personnel and assure that standardized methods for calculating BMI is in place. After schools submit their KIDS data to KSDE, identifiers would be stripped from each record prior to transferring to KDHE for analysis of BMI, thereby assuring confidentiality. It is important to reiterate that the purpose of conducting height and weight measurement is not to assess overweight status of an individual child. The data collected will be used only in aggregate form for the purpose of monitoring trends of overweight among the population of children at large. Therefore, no individual BMI calculations will be shared with students, parents or school staff.

HB 2090 also calls for the state Board of Education and KDHE to develop a curriculum, materials and guidelines for use by school authorities in promoting physical fitness and a healthy school environment. We believe this can be accomplished by utilizing members of the Governor's Council on Fitness and the CSHP state Advisory Committee to identify existing materials and develop a recommendation that meets the needs of our state. Through our CSHP partnership, KDHE and KSDE are in a position to develop such recommendations for curriculum, materials and guidelines.

HB 2090 also calls for KDHE and KSDE to work together to develop standards and objectives for physical fitness tests and physical education programs for all grade levels and details a goal for all Kansas schools to provide programs and opportunities for all students to meet the developed standards and objectives. Results of a school health survey conducted by the Kansas Health Institute (KHI) in 2006 indicated a sharp decline in physical education participation as children move from grade school to high school. Almost all Kansas public K-5 schools in this study (98%) start their elementary grade students with weekly physical education. By grades 7-9, less than one in four students are reported by those surveyed to participate in weekly physical education. By sophomore year, fewer than 12% of Kansas public high school students are reported by those surveyed to participate in weekly physical education.

Again, through the experience gained in administering the CSHP, the two state agencies will use existing mechanisms for accomplishing these steps. Part of this work has already been accomplished. CSHP staff facilitated development of Physical Education Standards using KSDE's standard process for developing state standards. These were approved by the State Board of Education in Spring of 2006, however, there is currently no state law or board policy requiring they are used in schools, thus schools are not assessed for compliance to the standards. A similar process can be used to develop objectives for physical fitness tests and physical education programs. The Governor's Council on Fitness and CSHP Advisory Committee will be engaged to provide expertise in developing the recommendations.

Thank you for your attention to improving the health of Kansas children by considering the provisions of HB 2090. I will be pleased to stand for questions.



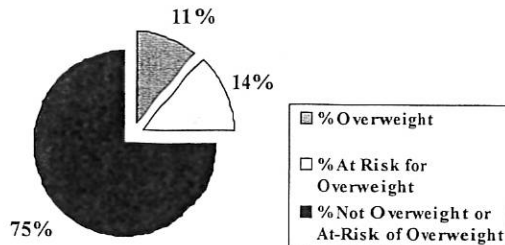
Facts on Childhood Overweight in Kansas



Since 1980, the prevalence of overweight nationwide has doubled in children, aged 6-11 years, and tripled in adolescents, aged 12-19 years.¹ Individuals who become overweight in childhood are more likely to become overweight as adults and are at higher risk for chronic diseases such as Type 2 Diabetes and heart disease. Without lifestyle interventions, one in three US children born today will develop diabetes; if that child is a Hispanic female, her chances of developing diabetes in her lifetime increase to one in two.²

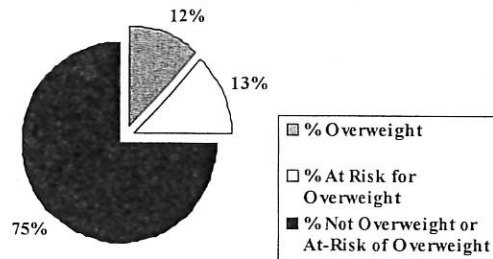
Kansas youth show similar rates of overweight.^{3,4,5} Without positive, health promoting lifestyle changes, prevalence of overweight in our youth will continue to increase along with the chronic diseases associated with excess body weight.

Percentage of Kansas Students, Grades 6-12, Who were Overweight or At-Risk for Overweight*, YTS 2002-03³



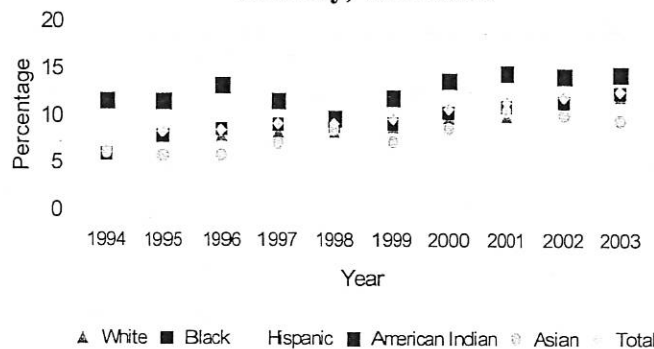
1 in 4 Kansas students, grades 6-12 were either overweight or at risk of overweight. 11% of 6th-12th graders were overweight, and 14% were at risk for overweight.*

Percentage of Kansas Students, Grades 9-12, Who were Overweight or At-Risk for Overweight*, YRBS 2005⁴



1 in 4 Kansas students, grades 9-12 were either overweight or at-risk for overweight. 12% of 9th-12th graders were overweight and 13% were at risk for overweight.*

Trends in prevalence of overweight* among Kansas children aged <5 years, by race and ethnicity, WIC data⁵



* Overweight defined as > 95th percentile; At-risk for overweight defined as ≥ 85th-95th percentile based on weight-for-length or BMI-for-age.

Childhood overweight trends in the Kansas WIC population in children younger than 5 years of age from 1994-2003 show an increase from:

- 6% to 12% among white children,
- 5.8% to 12.3% among African-American children,
- 8.3% to 15.8% among Hispanic children,
- 11.5% to 14.4% among American Indian children, and
- 5.7% to 9.4% in Asian children.

Overall, overweight prevalence from 1994 to 2003 doubled from 6.4% to 12.5%, among the Kansas WIC population.

Race and ethnicity breakdown: 70% white, 13% African-American, 13% Hispanic, 1.3% American Indian, 2.3% Asian American/Pacific Islander



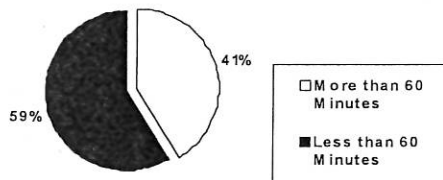
Facts on Childhood Overweight in Kansas



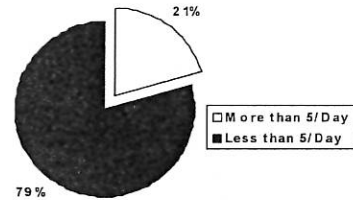
Lifestyle Factors that Affect Weight: Physical Activity, Fruit and Vegetable Consumption, and TV Viewing Habits

In order to reverse current trends of overweight, poor nutrition, and increased sedentary activities, changes must occur in the home, school, and the community. Parents can be role models of an active lifestyle and adequate fruit and vegetable consumption as well as participators of entertainment that does not promote screen time. Schools can eliminate unhealthy snack foods to encourage healthy eating and require physical education everyday. The community can work to make walking and biking safe for our kids. Through partnerships and collaboration, we can change the environment to promote optimal health.

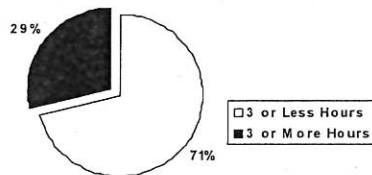
Percentage of Kansas Students, Grades 9-12, Who Were Physically Active for a Total of 60 Minutes or More per Day on 5 or More of the Past 7 Days, YRBS 2005⁴



Percentage of Students, Grades 9-12, Who Ate 5 or More Servings per Day of Fruits and Vegetables in Past 7 Days, YRBS 2005⁴



Percentage of Kansas Students, Grades 9-12, Who Watched 3 or More Hours per Day of TV on an Average School Day, YRBS 2005⁴




Lifestyle Factors that Affect Weight: Physical Activity, Fruit and Vegetable Consumption, and TV Viewing Habits Among Kansas Students, grades 9-12.

- Children and youth need at least 5 servings of fruits & vegetables per day for optimal health⁶.
 - ☆ Currently, only 1 in 5 Kansas students, grades 9-12, get 5 or more fruits and vegetables per day⁴.
- The US Dietary Guidelines⁶ recommends children and youth be physically active for 60+ minutes/day 7 days/week.
 - ☆ Currently, less than half of Kansas students, grades 9-12, get more than 60 minutes/day⁴.
- Total Energy intake increases by 167 calories for every hour increase in TV viewing⁷. Children and youth should limit screen time to 2 hours or less/day.
 - ☆ Currently about 1 in 3 Kansas students, grades 9-12, watch 3 or more hours of TV per day⁴.



1. Ogden et al. JAMA 2002; Hadley et al JAMA 2004; NHES II & IIL NHANES I, II, III, NHANES 1999-2002...
2. United States Department of Health & Human Services. www.dhhs.gov/news/press/2004pres/20040429.html. Accessed February 27, 2006.
3. Kansas Tobacco Program. KDHE Youth Tobacco Survey, 2002-03.
4. Kansas Coordinated School Health, KDHE and KDE. Youth Risk Behavior Survey Results, 2005.
5. Kansas Pediatric Nutrition Surveillance System, table 18C, 2003.
6. Department of Health & Human Services and USDA. Dietary Guidelines for Americans, 2005.
7. Gortmaker S. Television and the Obesity Epidemic. Harvard School of Public Health/Harvard Prevention Research Center, January 19, 2006.






Kansas School Nutrition and Physical Activity Survey


Committee on Education
February 13, 2007

Kim S. Kimminau, Ph.D.
Kansas Health Institute



Policies and Practices

- Project supported by the Sunflower Foundation
- Survey focus areas of interest:
 1. School staff opinions
 2. Nutrition (school meals, a la carte, vending)
 3. Physical education
 4. Physical activity



Who Responded?

Three tailored surveys:

1. School-level nutrition
2. District-level nutrition
3. Physical education and physical activity

- **96%** of school districts represented in at least one of the three surveys
- **1,390** schools responded



Who Responded?

- District-level food service administrators
- School-level food service managers
- Authorized representatives
- Health and physical education teachers
- School administrators and others
ex. Principals, superintendents, nurses



Opinions

(Agree or Strongly agree)	Food Service Professionals	Administrators	PE/Health Teachers
Overweight and obesity is of concern to me	77	70	90
Availability of junk food is a concern to me	55	36	61
Significant cutbacks if no vending	33	16	N/A
Schools have responsibility to promote healthy choices	85	74	93
Students are customers	35	12	N/A



Breakfast

■ +90% KS schools offer breakfast

Breakfast option	Elementary schools	Middle Schools	High Schools	Total
SBP	99.5	98.3	96.7	98.3
A la carte	11.5	22.1	28.7	19.6
Vending	3.2	5.8	6.7	5.0
Upon request	1.4	2.9	2.0	2.0
School store	1.4	1.7	2.7	1.8



A la Carte Offerings

■ Available in:


- 33% elementary schools
- 46% middle/ junior high schools
- 49% high schools





A la Carte Offerings

■ Routinely available:

Milk	81%
Juice	75%
Water	72%
Chips and snack foods	71%
Ice cream	68%
An additional entrée from the school lunch	56%

 <h3 style="margin: 0;">Vending Machines</h3>	
Beverage only	15%
Beverage and snack	59%
Urban schools ~3 snack machines ~5 beverage machines	55%
Rural schools ~1 snack machine ~3 beverage machines	78%

 <h3 style="margin: 0;">Vending Machines</h3>	
<p>■ Top five most commonly available items:</p>	
Carbonated beverages	89%
Water	89%
Juice	77%
Chips and snack foods	74%
Candy	71%

 <h3 style="margin: 0;">Vending Revenue Uses</h3>	
Sports/clubs (uniforms, travel)	57%
Student incentives	46%
Teacher/staff incentives	15%
Facility improvements	11%
Supplemental budget or general fund	7%
Food service program	5%
Supplies (paper, pens, PE equipment)	3%



Recess

- Offered in 84% of elementary schools
- 25% have *decreased* time for recess over past 3 years
 - Most common reason given is time needed for standardized/required testing preparation



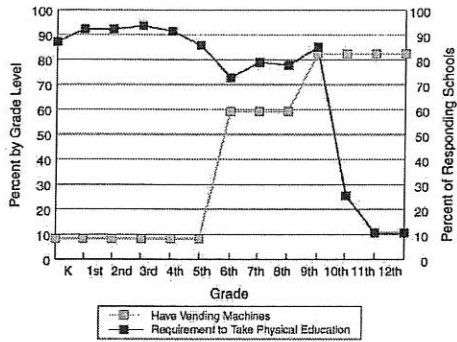
Physical Education

- Offer weekly participation
 - About 98% elementary schools
 - 70% middle schools
 - Less than 10% high schools
 - More days/week, on average in rural schools
 - Concentration of PE teachers in urban schools
- PE class duration
 - 49% report 20-30 minutes; 41% report over 40 minutes
 - 17% of schools have *decreased* amount of time for PE during last 3 years



Intersection of Statewide Nutrition Policies and Physical Education Policy

Requirement for Physical Education by Grade and Presence of Vending Machines by School



 PE Required by Grade

Grade 4	91.5%
Grade 7	79.0%
Grade 9	85.1%
Grade 12	10.6%

 Influences decisions about student wellness, nutrition and PA

Laws & regulations	67%*
No Child Left Behind	60%
Superintendent / principal	59%
Testing	55%
Local board	47%
Students	41%
Community	38%
Budget	17%

*strongly agree/agree among Administrators



KHI Recommendations

1. Comprehensive, statewide strategy
2. Progress and improvement using the school wellness policy guidelines should be required
3. Per IOM, all food and beverages sold or served to students in school should be healthful and meet an accepted nutritional content standard
4. An in-depth review should be conducted of how the school lunch program is financed at the local level
5. State policymakers should institute more comprehensive physical education requirements
6. Kansas lacks basic information— collect height and weight data to calculate BMI and measure fitness



Kansas Health Institute

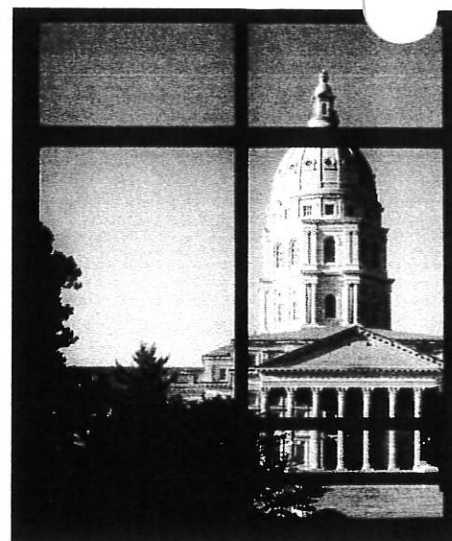


Healthier Kansans through informed decisions

Issue Brief



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One Piece of the Childhood Obesity Puzzle: Kansas Public Schools

Kim S. Kimminau, Ph.D.

Results in Brief

- A drop-off in physical education requirements during middle and high school corresponds with a dramatic increase in student exposure to vending machine items and a la carte foods for Kansas public school students.
- Approximately 58 percent of Kansas K-12 public school students have access to vending machines during the school day. Once public school students reach high school, more than 90 percent are reported to have access to vended foods and beverages.
- More than 80 percent of public school and school-district staffs favor collecting body mass index (BMI) data and sending it to parents to alert them to overweight and underweight children.
- Approximately one-quarter of responding public elementary schools have reduced recess time within the past three years to devote more time to preparing students for required state tests.
- Most Kansas K-12 public school officials recognize they should play a role in combating childhood obesity, but they believe any successful strategy must also involve parents, government and the media.
- Public school physical education professionals and administrators say lack of class time, staff cutbacks and inadequate facilities are hindering their ability to address the problem of overweight and obesity.

More Information

Funding for this project was provided by the Sunflower Foundation: Health Care for Kansans, a Topeka-based philanthropic organization with the mission to serve as a catalyst for improving the health of Kansans.

For more information on this topic, visit www.khi.org.

Background

The United States is in the midst of an obesity crisis. According to the Institute of Medicine, the rate of childhood obesity has more than tripled over the last 30 years for children 6 to 11 years of age and doubled for adolescents aged 12 to 19. Though the alarm has sounded, effective policies and practices to reverse this trend have been slow in developing.

This study examined nutrition, physical education and physical activity policies and practices in Kansas K-12 public schools to determine what they are and are not doing to address the obesity crisis and to gauge their capacity to do more. The results indicate that while school-level and school-district staffs believe they have a role to play in responding to the crisis, they are conflicted about their level of responsibility and what steps to take.

House Education Committee
Date: 2-13-07
Attachment # 11

There were two main reasons for focusing this study on schools. First, most Kansas public school students eat at least one meal during the school day and about one in four eats two meals at school. Second, school physical education and health education provide opportunities to teach students about the health benefits of physical activity and a healthy diet. Research shows that habits developed early in life are likely to persist into adulthood, suggesting that if children are encouraged to be active they are more likely to maintain a healthy level of physical activity as they age.

Still, if changes are to be made in public school policies and practices to address the childhood obesity crisis, barriers to success must be understood. This study does that in part by surveying school staffs about expanding and competing demands for time and resources

among school nutrition, physical activity and physical education programs and academic curricula and programs aimed at preparing students for state standardized tests.

The Study

KHI worked with the Kansas State Department of Education to design a set of three complementary and comprehensive surveys. Three topic areas were included in the study: 1) nutrition, including school meals, a la carte foods and vending machines; 2) physical education and 3) physical activity. KSDE sent the surveys early in 2006 to K-12 school food service administrators and managers, health and physical education teachers, and others with direct knowledge of their school or district policies and practices. Ninety-six percent of the 304 public school districts participated by completing at least one of the three surveys. The respondents are representative of the state by grade level, student body size, various levels of student eligibility for the free and reduced price lunch program and urban or rural location of their districts or schools.

Survey Respondents Report of Current Public School Nutrition and Physical Activity Policies

Policy (Grades K-12 unless otherwise noted)	Percent of responding schools/districts
School has a policy that requires a minimum amount of time for eating breakfast and/or lunch once they are seated	45.2
District has an "open campus" where secondary students are able to leave the school premises during their lunch period	11.6
School food service program offers a la carte items	44.8
School has vending machines available for use by students	58.8
School allows advertising for vended beverages or foods on school grounds	15.0
School offers a physical education class that provides students with at least 25 percent of the class time for physical activity	93.4
School permits recess to be considered equivalent to a physical education class (K-5 only)	6.4
Students enrolled in physical education receive age-appropriate fitness testing at least once a year	85.7
Physical education program has a written, sequential curriculum that has been updated in the last five years	88.5
Physical education curriculum is based on national and/or state education standards	96.8
School provides students with regularly scheduled recess (K-5 only)	96.0
Students are provided with supervised, structured physical activities during recess (K-5 only)	14.7
School offers structured physical activities during the before-school or after-school program (among schools that have before- or after-school programs)	58.5
School provides an after-school intramural athletic program	24.0

Findings: Current Policies

● Respondents were asked to provide information concerning 14 different nutrition, physical education and physical activity policies currently in place in their schools and districts. The results presented in the table to the left offer a baseline from which to view public school health environments and a way for Kansas to review and monitor change going forward.

Findings: Vending Machines and a la Carte Foods

- Physical education requirements decrease in middle and high school at the same time that students' access to vending machine snacks and a la carte foods increases. The confluence of these trends, as illustrated in the graph on the next page, occurs between grades 6 to 9.
- The five most common items available to students from vending machines are carbonated beverages (89 percent), water (89 percent), juice (77 percent), chips and snack foods (74 percent) and candy (71 percent).
- A la carte foods are most commonly available to students during lunch periods. In addition to milk, juice and water, the most frequently offered items include chips and snack foods (71 percent), ice cream (68 percent) and an additional entrée (56 percent) from the school lunch.

- Approximately 58 percent of Kansas K-12 public school students — about 269,000 children and adolescents — are reported to have access to vending machines during the school day. Once public school students reach high school, more than 90 percent of them are reported to have access to vended foods and beverages.

- Vending machines are more common in rural (78 percent) than urban (55 percent) schools. A la carte foods are more common in urban schools (65 percent) than rural schools (30 percent).

- Among schools that have vending machines, each school has an average of about 5 machines — 3.7 provide beverages and 1.6 provide food and snacks.

- Money collected from vending machines is most often used for sports teams or clubs to pay for things such as travel and uniforms (57 percent). Vending machine revenue also is used for student incentives that may include proms, parties or special events (46 percent). Urban schools more commonly report using these funds for teacher/staff incentives (21 percent) and facility improvements (16 percent) than do rural schools.

Findings: Physical Education and Physical Activity

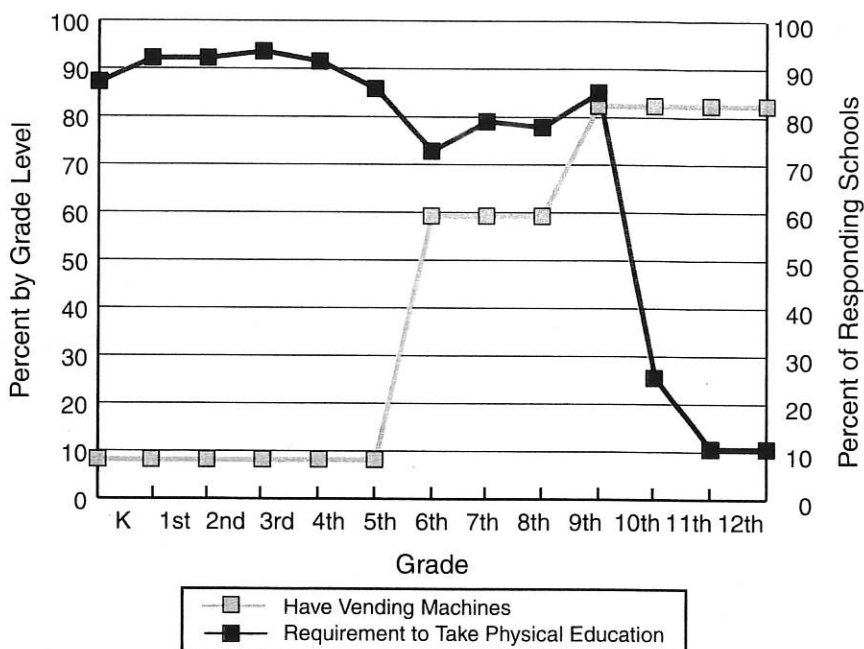
- Though physical education is offered at 93 percent of responding Kansas public K-12 schools, some middle and even fewer high schools in our sample require students to participate (see the graph on this page).

- Approximately one-quarter of Kansas public elementary schools have reduced recess in the past three years to devote more time to preparing students for required state tests, according to survey respondents.

- Fewer than one in four respondents report that their schools or districts have implemented nationally recommended strategies to increase the physical activity of students. Recommendations include encouraging students to walk or bike to school, increasing physical education class time or increasing the frequency or duration of recess.

- Almost all Kansas public K-5 schools in this study (98 percent) start their elementary grade students with weekly physical education (PE). By grades 7 – 9, less than one in four students are reported by those surveyed to participate in weekly PE. By sophomore year, fewer than 12 percent of Kansas public

Requirement for Physical Education by Grade and Presence of Vending Machines by School



high school students are reported by those surveyed to participate in weekly PE.

Findings: Attitudes of School Staff

- Most school staffs (ranging from 83 percent of responding administrators to 93 percent of responding physical education teachers) support collecting body mass index (BMI) data on students and sending it to their parents.

- Food service professionals are conflicted about providing students the foods they want and dealing with the financial pressures placed on their programs by competition from vending machine sales, school stores and open campus policies, which allow students to leave school for lunch. Thirty-five percent of food service professionals agree or strongly agree that students should be considered customers and given the food choices they want. By contrast, 12 percent of school administrators agree or strongly agree with this statement.

- Physical education professionals (92 percent) who responded to the survey say the lack of a state requirement for a minimum number of physical education minutes per week is hindering their ability to teach healthy patterns of physical activity. School administrators add that staff cutbacks and inadequate facilities are also barriers to dealing with providing physical education to students.

DEFINITIONS

a la carte:

food and beverage items sold by the school food service program in addition to the school breakfast and lunch meals

body mass index (BMI):

a number, calculated from a person's weight and height, that provides a reliable indicator of body fatness for most people and is used to screen for weight categories that may lead to health problems



KANSAS
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The Kansas Health Institute is an independent, nonprofit health policy and research organization based in Topeka, Kansas. Established in 1995 with a multi-year grant from the Kansas Health Foundation, the Kansas Health Institute conducts research and policy analysis on issues that affect the health of Kansans.

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NUMBER 20 • NOVEMBER 2006

Recommendations

● Kansas needs to develop a comprehensive, statewide strategy for addressing student health, including childhood and adolescent overweight.

State policymakers should develop a comprehensive, statewide strategy for addressing childhood obesity. The best research available says only a comprehensive effort — one that involves schools, government at all levels, public health, the business community, providers and families — can be successful. Evidence-based interventions that are evaluated for their effectiveness coupled with partnerships that stretch across the entire community must be encouraged if Kansas is going to address the current crisis and help its children lead healthier lives.

● Progress and improvement using the school wellness policy guidelines should be required in all Kansas public K-12 schools.

The school wellness policy model guidelines were established by KSDE and were used by local wellness committees in all of the state's 304 school districts to comply by July 2006 with federal requirements. The model guidelines were developed for nutrition, nutrition education and physical activity, and each includes specific goals, from "basic" (minimum requirements) to "advanced" and "exemplary" levels.

Currently, schools are only required to review their wellness guidelines annually. Schools and school districts should be required to demonstrate improvement using the school wellness policy model guidelines, and state resources should be committed to ensure that progress is tracked at the state level.

● As recommended by the Institute of Medicine, all food and beverages sold or served to students in school should be healthful and meet an accepted nutritional content standard.

Vending machine items and other foods available to students in public school should be reviewed for nutritional content. Wherever appropriate, an explicit effort consistent with the school wellness policy guidelines should be made to increase healthy food and beverage options.

● This study suggests that an in-depth review be conducted of how the school lunch program is financed at the local level.

The results of this study indicate that in some Kansas public K-12 schools, the school lunch program is in direct competition for student purchase with vended products and/or a la carte offerings. This puts the nutritionally balanced school lunch at odds with foods that don't contain the recommended amounts of protein, vitamins and other essential nutrients for children. Food and beverage items that are sold primarily to support student activities need to be reviewed in terms of their financial impact on schools and, specifically, the lunch program.

● State policymakers should institute more comprehensive physical education requirements in Kansas public middle and high schools.

Currently, there is an emphasis on physical activity in Kansas public schools from kindergarten through grade 5. To encourage a lifelong pursuit of physical activity and health, this emphasis should be extended through grade 12.

● Kansas lacks basic information on the level of overweight and obesity among children. A place to begin to address this problem is to collect height and weight data to calculate the body mass index (BMI) of public school students.

Prevention and intervention efforts to improve student health by reducing the risks associated with overweight and obesity depend on knowing the prevalence of these conditions in the population. Currently, there is no reliable, routinely available source of information concerning the levels of overweight among school-age children. To know if interventions we introduce are improving the health of children, we need to be able to monitor BMI as an indicator over time. A logical place to collect that information and to share it with respect for privacy is through the public school system.



Kansas School Nutrition and Physical Activity Survey

House Education Committee

Date

2-13-07

Attachment #

12

Committee on Education
February 13, 2007

Kim S. Kimminau, Ph.D.
Kansas Health Institute



Policies and Practices

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- School-level food service managers
- Authorized representatives
- Health and physical education teachers
- School administrators and others
ex. Principals, superintendents, nurses



Opinions

12-5

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Availability of junk food is a concern to me	55	36	61
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SBP	99.5	98.3	96.7	98.3
A la carte	11.5	22.1	28.7	19.6
Vending	3.2	5.8	6.7	5.0
Upon request	1.4	2.9	2.0	2.0
School store	1.4	1.7	2.7	1.8



A la Carte Offerings

■ Available in:

- 33% elementary schools
- 46% middle/ junior high schools
- 49% high schools



A la Carte Offerings

■ Routinely available:

Milk	81%
Juice	75%
Water	72%
Chips and snack foods	71%
Ice cream	68%
An additional entrée from the school lunch	56%



Vending Machines

Beverage only	15%
Beverage and snack	59%
Urban schools ~3 snack machines ~5 beverage machines	55%
Rural schools ~1 snack machine ~3 beverage machines	78%



Vending Machines

■ **Top five most commonly available items:**

Carbonated beverages	89%
Water	89%
Juice	77%
Chips and snack foods	74%
Candy	71%



Vending Revenue Uses

Sports/clubs (uniforms, travel)	57%
Student incentives	46%
Teacher/staff incentives	15%
Facility improvements	11%
Supplemental budget or general fund	7%
Food service program	5%
Supplies (paper, pens, PE equipment)	3%



Recess

- Offered in 84% of elementary schools

- 25% have *decreased* time for recess over past 3 years
 - Most common reason given is time needed for standardized/required testing preparation



Physical Education

■ Offer weekly participation

- About 98% elementary schools
- 70% middle schools
- Less than 10% high schools
- More days/week, on average in rural schools
- Concentration of PE teachers in urban schools

■ PE class duration

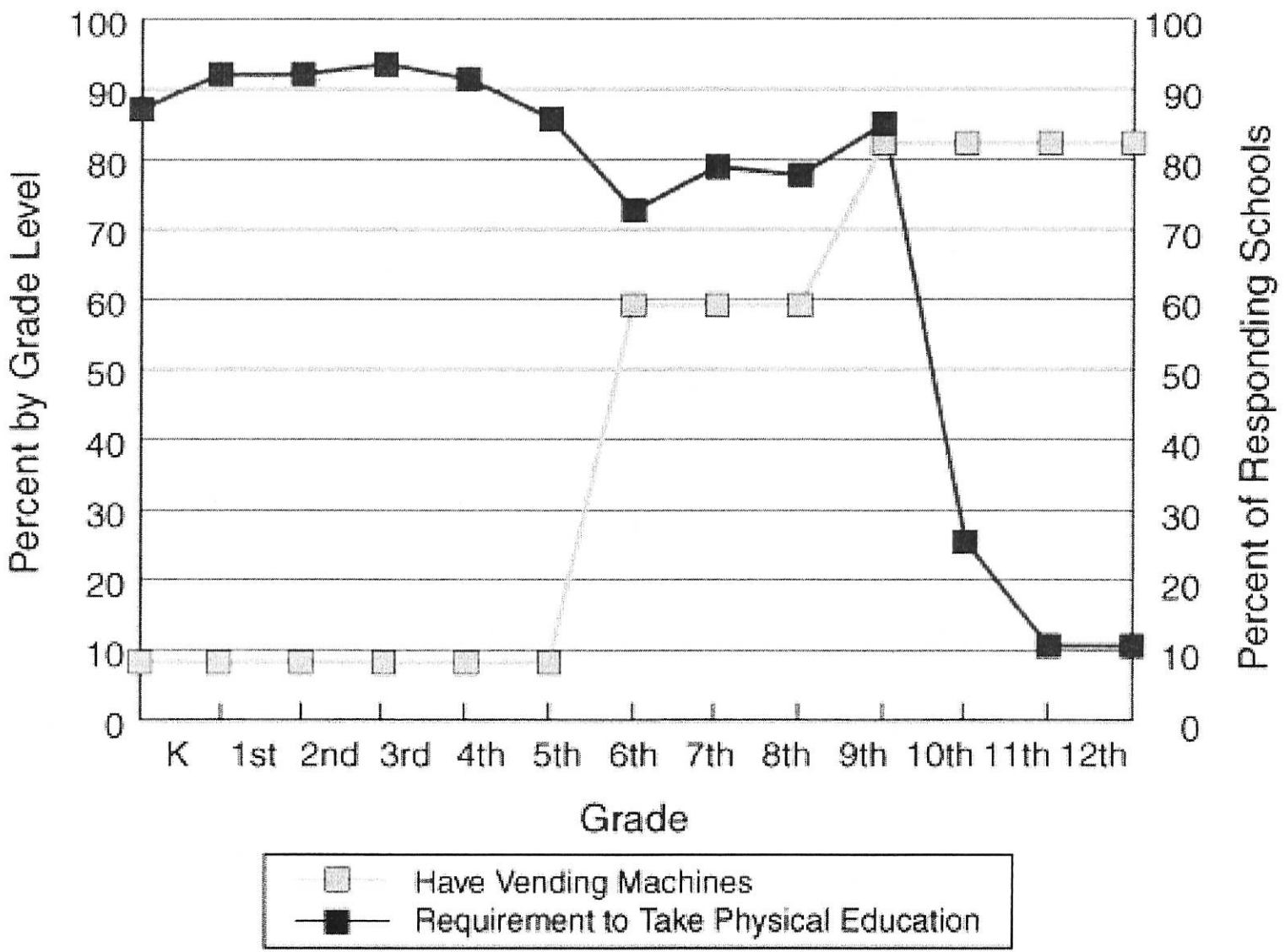
- 49% report 20-30 minutes; 41% report over 40 minutes
- 17% of schools have decreased amount of time for PE during last 3 years



12-15

Intersection of Statewide Nutrition Policies and Physical Education Policy

Requirement for Physical Education by Grade and Presence of Vending Machines by School





PE Required by Grade

Grade 4	91.5%
Grade 7	79.0%
Grade 9	85.1%
Grade 12	10.6%



Influences decisions about student wellness, nutrition and PA

Laws & regulations	67%*
No Child Left Behind	60%
Superintendent / principal	59%
Testing	55%
Local board	47%
Students	41%
Community	38%
Budget	17%

*strongly agree/agree among Administrators

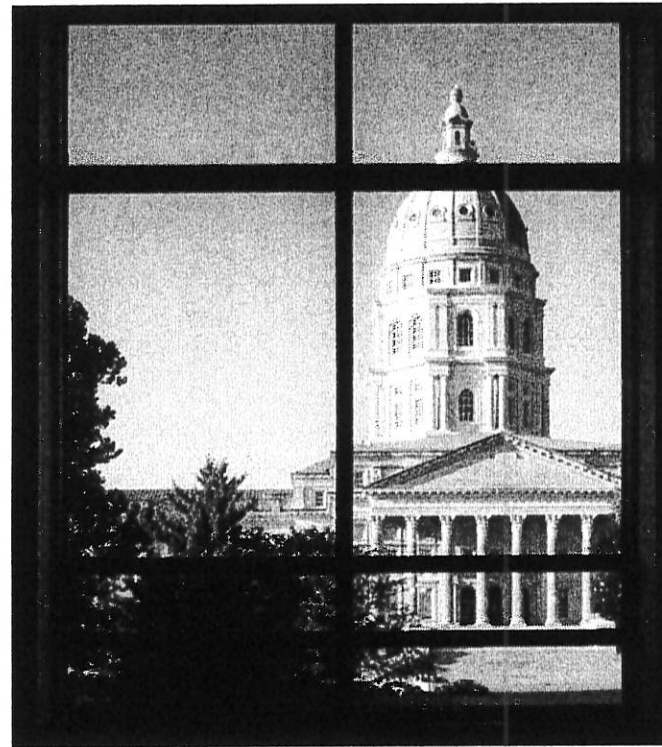


KHI Recommendations

1. Comprehensive, statewide strategy
2. Progress and improvement using the school wellness policy guidelines should be required
3. Per IOM, all food and beverages sold or served to students in school should be healthful and meet an accepted nutritional content standard
4. An in-depth review should be conducted of how the school lunch program is financed at the local level
5. State policymakers should institute more comprehensive physical education requirements
6. Kansas lacks basic information— collect height and weight data to calculate BMI and measure fitness



Kansas Health Institute



Healthier Kansans through informed decisions

HEIN LAW FIRM, CHARTERED

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Phone: (785) 273-1441

Fax: (785) 273-9243

Ronald R. Hein

Attorney-at-Law

Email: rhein@heinlaw.com

House Education Committee

Testimony Re: HB 2090

Presented by Ronald R. Hein

on behalf of

Kansas Beverage Association

February 13, 2007

Mr. Chairman, Members of the Committee:

My name is Ron Hein, and I am legislative counsel for the Kansas Beverage Association (KBA) (formerly the Kansas Soft Drink Association), which is the state trade association for beverage bottling companies operating in Kansas. Products manufactured and distributed by members of the KBA include carbonated diet and regular soft drinks, bottled waters, isotonic drinks, juice, juice drinks, sports drinks, dairy-based beverages, teas, and other beverages.

The Kansas Beverage Association supports the concept of collecting data on physical activity related data, and supports the concept of physical fitness testing in our schools. With that said, we have some questions, and concerns about BMI utilization, especially if it is permitted to be used in conjunction with private information, as opposed to data collecting purposes only. We also have concerns about the extent to which the state is imposing requirements on the local school boards, although arguably physical education falls under school curricula, which has, historically, been the purview of the state, and not the local school boards.

Therefore with the limitations of our concerns regarding details in the bill, we do stand in support of efforts to try to instill more physical education awareness in our schools, and to promote physical fitness activity with our school age children.

Thank you very much for permitting me to testify, and I will be happy to yield to questions.

House Education Committee

Date 2-13-07

Attachment # 13



**House Education Committee
Representative Aurand, Chair**

H.B. 2090 Physical fitness testing

February 13, 2007

*Submitted by: Diane Gjerstad
Wichita Public Schools*

Mr. Chairman,

We agree with the goal of H.B. 2090 to promote healthier Kansas school children. The Wichita Public Schools has Board policies promoting the wellness and physical activity of our students. We have several concerns about the bill.

Section 1 (b) requires the Department of Education collaborate with KDHE to develop a curriculum, materials and guidelines; and in (d) the state board shall collaborate with KDHE to develop standards and objectives for physical fitness tests and programs. This appears to be duplication of work already done to develop physical education standards. The Kansas State Physical Education Standards has in place standards and benchmarks for grades K, 2, 5, 8 and 12.

Wichita administers a fitness test. We have concerns of mandating a state fitness test which may require different equipment, training, software or other additional support. We have concerns over mandating a physical fitness test for every student. For students not enrolled in PE there are logistical issues getting students out of class for another test. And there are concerns about testing severely physically disabled students. We are concerned over testing seniors who are busy in other classes and who are, quite frankly, tired over having lots of tests.

Section 2 requires the reporting of the number of certified PE teachers and the number of minutes taught. This information is compiled by KSDE and then submitted to KDHE. While writing this testimony I was not clear as to the purpose of sending this information to KDHE. But as with any data set there are reasons why data might not be as straight forward as one might expect. Many teachers change their focus during their career. Teachers who started in PE may not finish their career in the same area.

Mr. Chairman, this bill has a admirable goal but takes a difficult route to achieve it.

House Education Committee
Date: 2-13-07
Attachment # 14



**Mark Desetti, Testimony
House Education Committee
February 13, 2007**

House Bill 2090

Mr. Chairman, members of the committee, thank you for the opportunity to come before you today to discuss House Bill 2090.

This bill, though well-intentioned, is an inappropriate and unfunded mandate. We all can appreciate the seriousness of the obesity issue in American society. We have also heard much about how test anxiety and the so-called No Child Left Behind Act have sometimes caused reductions in the amount of physical activity children get at school through recess.

Arkansas led the way with parental notification on body mass index calculations via the public schools in 2004. Since then they have seen a slight drop in childhood obesity. Today, Arkansas is considering abandoning the requirement.

Here in Kansas are looking at a bill which requires children at several grade levels in public schools to have their BMI calculated and reported to the state. (Arkansas reports to parents as a sort of "wake up call.") What we don't know in this bill is the **who**.

Who is going to conduct a physical fitness test of all the students in grades 4, 7, 9, and 12?

Who is going to weigh, measure, and calculate the BMI of each of these students?

Who is going to prepare and submit the findings to the state?

Who is going to pay the ongoing costs of this program?

Finally, there are a lot of reasons for the obesity epidemic in our nation. There is a fast food outlet on every corner; there are hundreds of television stations. There are video games; there are internet cafes.

There is only so much you can ask the schools to accomplish. We have PE taught by licensed professionals today. We have controlled school meal programs. You have recently required our schools to develop wellness programs.

What we don't need is yet another unfunded mandate.

House Education Committee
Date: 2-13-07
Attachment # 15

KANSAS
ASSOCIATION



OF
SCHOOL
BOARDS

1420 SW Arrowhead Road • Topeka, Kansas 66604-4024
785-273-3600

Testimony on **HB 2090**
before the
House Education Committee
by

Jim Edwards, Governmental Relations Specialist
Kansas Association of School Boards

February 13, 2007

Chairman Aurand and Members of the House Education Committee:

KASB supports the goal of increasing student health, in part because it impacts other student academic issues. However, **HB 2090** as written raises several concerns:

Sec. 1(a) states a goal of promoting healthier school environment and children, including an “appropriate amount of physical education,” (b) directs the State Board to collaborate with KDHE to develop curriculum, materials and guidelines to reach that goal, and (d) requires the Board and KDHE to develop standards and objectives for physical education programs for all grade levels that each district should meet.

KASB supports state goals and allowing local districts to determine how to meet those goals. We believe the bill should also require assessment of the financial impact of proposed standards, objectives and guidelines, such as the impact on and availability of staff, and the impact of more physical education requirements on other academic requirements. If the school day and year remain the same and we do more PE, what should we do less of? How will the state ensure that “suitable funding” is provided for this additional outcome?

Sec. 1(c) requires a physical fitness test for every student in grades 4, 7, 9, and 12. Who must conduct the test? If the school does, who is responsible? Many schools do not have nurses. If other health providers, who pays and how is this enforced?

Finally, note that health services are NOT included in the definition of the “65% to the classroom” policy goal. Which goal is now supposed to be the most important?

Thank you for the opportunity to provide these thoughts and I would stand for questions.

House Education Committee
Date: 2-13-07
Attachment # 16

Schools for Quality Education

124 Bluemont Hall, 1100 Mid-Campus Dr.
Manhattan, Kansas 66506

Testimony HB2090

February 13, 2007

Good morning Mr. Chairman and members of the committee. Thank you for allowing me to share with you my written remarks concerning HB 2090. Schools For Quality Education is a group of 134 rural school districts, who stand in support of having the healthiest children possible. The following are thoughts I received from some of my members regarding this bill.

- * Could these requirements be aligned with the testing component in State Boards exiting standards which test students in 4th, 6th, 8th and once in high school (testing in 12th grade would be too late to significantly alter health habits).
- * Is this an unfunded mandate?
- * The districts I heard from are not yet having difficulty finding p.e. teachers, but a number of my small district do have trouble filling a school nurse position. The level of sophistication and time required to administer the testing could be a factor in how the students are tested.
- * At this time all districts must have a wellness policy that may be the curriculum, materials and guideline required in line 20.
- * With the exception of the body mass index and the involvement of the Kansas Dept of Health and Environment our districts are already addressing wellness standards.
- * Due to ever increasing accountability requirements and pressure to reach AYP, finding additional physical education time could be challenging.

I appreciate you allowing me to share these concerns with you today.

Val DeFever
SQE public relations

House Education Committee
Date: 2-13-07
Attachment # 17



Kansas Health Foundation Dedicated to Improving the Health of All Kansans

February 9, 2007

Representative Clay Aurand
Chairman of the House Education Committee
Room 143 North, Statehouse
Topeka, KS 66612

Dear Representative Aurand and Members of the House Education Committee:

The Governor's Council on Fitness, established as part of the *HealthyKansas* initiative in June 2006, has voted to unanimously support both the ideas and intent of House Bill 2090. One of the actions that the Council is very committed to is assisting educators in developing quality school health and physical education programs. The Council feels that the objective of House Bill 2090 is directly correlated to these goals involving the health of children in the State of Kansas.

The Council includes a subcommittee tasked specifically with researching the collection of data to determine the current health status of the school-aged population in Kansas. This subcommittee recently made a policy recommendation that was substantially the same in content as House Bill 2090. The Council approved this policy recommendation and sent it to Governor to ask for her assistance in moving it forward for adoption. The passage of HB 2090 would bring this to fruition and is essential to furthering the Council's charge of improving the quality of life of children in Kansas schools.

The Governor's Council on Fitness urges the legislature to vote in favor of House Bill 2090 and recommends taking this crucial next step to ensure the health of Kansans.

Sincerely,

Steve Coen
Chair
Governor's Council on Fitness

Enclosure: Governor's Council on Fitness members list

House Education Committee
Date 2-13-07
Attachment # 18



Governor's Council on Fitness

Members

Steve Coen, Chair
Vice President for Administration at Kansas Health Foundation
scoen@khf.org

Wayne Osness, Vice-Chair
Emeritus Professor of Health, Sport, and Exercise Science at University of Kansas
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Secretary Rod Bremby
Kansas Department of Health and Environment
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William Bruning
President of Mid-America Coalition on Health Care
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Dean of the University of Kansas School of Medicine - Wichita
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David Dzewaltowski
Kansas Health Foundation Professor and Director of Community Health Institute at Kansas State University
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Virginia Elliott
Vice President for Programs at Unity Methodist Health Ministry Fund
velliott@healthfund.org

Kathy Ermler
Chair of the Department of Health, Physical Education and Recreation at Emporia State University
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Donna Fleischacker
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Dolores Furtado
Fourth District Commissioner and Professor Emeritus at the University of Kansas Medical School's Department of Microbiology, Molecular Genetics and Immunology
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Secretary Kathy Greenlee
Kansas Department on Aging
KathyGreenlee@aging.state.ks.us

Mary Jo Hafliager
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Rhonda Holt
Physical Education Teaching Specialist and Elementary Physical Education Teacher at Wichita Public Schools
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Douglas Iliff
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Kim Kimminau
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Members, continued

Sherry Lundry
Executive Director of Sunflower State Games, Inc.
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and Recreation at Pittsburg State University
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Stewart Trost
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Health Institute at Kansas State University
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Marty Turner
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Claudia Welch
Health and physical education teacher at Seaman
High School, USD 345
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Douglas Wood
County Commissioner and attorney
doug.wood@jocogov.org

Council Staff and KDHE Representatives

Tara Gillum
Governor's Liaison to Healthy Kansas
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Paula Marmet
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Howard Rodenberg
Director of the Division of Health and State Health
Officer, KDHE
hrodenberg@kdhe.state.ks.us

From: <douglasiliff@cox.net>
To: <colloton@house.state.ks.us>
Date: 2/7/2007 7:01 PM
Subject: HB 2090

As a family physician and a member of the Governor's Fitness Council, I would encourage you to look favorably on HB 2090. The data it would collect would prove extremely useful in assessing interventions relating to fitness and obesity-- which, from my perspective, are the leading public health problems in Kansas.

--

Doug Iliff, MD

1119 SW Gage Boulevard
Topeka, Kansas 66604

Work Phone: 785-271-6161
(rolls to answering service 24/7)
Home Phone: 785-357-1854
(answering machine 24/7)
Cell Phone 785-845-3792
(usually off; I don't check messages)
Office Fax: 785-271-6414

House Education Committee
Date 2-13-07
Attachment # 19

Kansas Academy Of Family Physicians



7570 W. 21st St. N. Bldg. 1046, Suite C • Wichita, KS 67205 • 316-721-9005
1-800-658-1749 • Fax 316-721-9044 • kafp@kafponline.org
<http://www.kafponline.org>

Brian L. Holmes, MD
President

Michael L. Kennedy, MD
President-Elect

Terry L. Mills, MD
Vice President

Michael L. Munger, MD
Secretary

Todd A. Miller, MD
Treasurer

Joe D. Davison, MD
*Immediate Past-President
& Board Chair*

Joel E. Hornung, MD
Robert P. Moser, Jr., MD
AAFP Delegates

Charles T. Allred, MD
Carol A. Johnson, MD
Alternate Delegates

Ronald C. Brown, MD
Karen E. Bruce, MD
Jennifer L. Brull, MD
Gene Cannata, MD
Merrill R. Conant, MD
Susan L. Lee, MD
LaDona M. Schmidt, MD
Jon O. Sides, MD
Board of Directors

Marty Turner, MD
KAFP-Foundation President

Joe Parra, MD
Resident Representative

Caleb Bowers
Student Representative

Carolyn N. Gaughan, CAE
Executive Director

*The largest medical
specialty group in
Kansas.*

February 8, 2007

To: House Education Committee
From: Carolyn Gaughan, CAE, Executive Director
Re: HB 2090

Dear Chairman Aurand and Committee Members,

Thank you for this opportunity to provide testimony on behalf of the Kansas Academy of Family Physicians (KAFP). Our organization has over 1,500 members across the state, of which more than 890 are practicing physicians, 155 are resident-physician members, and the others are medical students and retired members. Family physicians provide the backbone of primary care in the state, and we are concerned about childhood obesity.

I am writing to urge your support for HB 2090, an act concerning schools, relating to physical education. Childhood obesity is a leading public health threat in the United States. More than 9 million children over the age of six are affected by the obesity epidemic, with minorities and children living in low-income communities facing the greatest risk. If the epidemic grows unchecked, obesity-related illnesses may cause today's young people to become the first generation in U.S. history to have a lower life expectancy than their parents.

Members of our organization see and treat the children of Kansas who are part of this apparent epidemic of childhood obesity. Nationally, the childhood obesity rate has tripled over the last 30 years among children ages 6 to 11 and doubled among adolescents, ages 12 to 19, according to the Institute of Medicine. These children face an increased risk of developing hypertension, diabetes, heart disease, and other life-threatening illnesses as they age.

One of our legislative priorities adopted this year is to support public health efforts, including comprehensive smoking prevention, cessation and control; immunizations; and childhood obesity in Kansas.

We believe HB 2090 proposes simple, effective measures to assess the scope of the childhood obesity problem in our state. It requires schools to pass the assessment results to KDHE. The BMI calculations would be done by KDHE, not school personnel.

*The mission of the Kansas Academy of Family Physicians is to promote access to and excellence in health care
for all Kansans through education and advocacy for family physicians and their patients.*

House Education Committee

Date 2-13-07

Attachment # 20

Kansas Academy Of Family Physicians



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1-800-658-1749 • Fax 316-721-9044 • kafp@kafponline.org
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*The largest medical
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Kansas.*

In addition, only aggregate information would be used. No individual students would be identified, and no BMI report cards, like those used in other states' programs, would be issued to parents.

This assessment will allow and provide the knowledge basis for the development of standards and objectives for physical fitness tests and physical education programs for all grade levels. It is the goal of the state of Kansas that each school district provide physical education programs and opportunities for physical activity necessary to meet the standards and objectives for physical fitness established by the state board of education and the Kansas department of health and environment.

For all these reasons we urge you to take positive action on HB 2090. Please feel free to contact me if you have any questions. Thanks for your consideration of this important initiative.

Sincerely,

Carolyn Gaughan, CAE
Executive Director

The mission of the Kansas Academy of Family Physicians is to promote access to and excellence in health care for all Kansans through education and advocacy for family physicians and their patients.

USD #	USD Name	County	2006-07	2006-07
			Certified/Licensed Personnel - Nurses FTE	Non-Certified Personnel - Nurses FTE
D0101	Erie	Neosho	0.0	0.0
D0102	Cimarron-Ensign	Gray	1.0	1.0
D0103	Cheylin	Cheyenne	0.0	0.4
D0104	White Rock	Jewell	0.0	0.0
D0105	Rawlins County	Rawlins	0.0	0.0
D0106	Western Plains	Ness	0.0	0.0
D0107	Rock Hills	Jewell	0.0	0.0
D0108	Washington Co. Schools	Washington	0.5	0.0
D0109	Republic County	Republic	0.0	0.0
D0200	Greeley County Schools	Greeley	1.0	0.0
D0202	Turner-Kansas City	Wyandotte	7.0	0.0
D0203	Piper-Kansas City	Wyandotte	2.0	3.0
D0204	Bonner Springs	Wyandotte	4.0	0.0
D0205	Bluestem	Butler	0.0	1.0
D0206	Remington-Whitewater	Butler	1.0	0.0
D0207	Ft Leavenworth	Leavenworth	0.0	2.5
D0208	Wakeeney	Trego	0.0	0.7
D0209	Moscow Public Schools	Stevens	0.0	0.0
D0210	Hugoton Public Schools	Stevens	1.0	0.6
D0211	Norton Community Schools	Norton	0.5	0.0
D0212	Northern Valley	Norton	0.3	0.0
D0213	West Solomon Valley Sch	Norton	0.2	0.0
D0214	Ulysses	Grant	0.0	1.6
D0215	Lakin	Kearny	0.3	2.0
D0216	Deerfield	Kearny	1.0	0.0
D0217	Rolla	Morton	0.3	0.0
D0218	Elkhart	Morton	0.0	0.0
D0219	Minneola	Clark	0.0	0.0
D0220	Ashland	Clark	0.0	0.0
D0223	Barnes	Washington	0.0	0.4
D0224	Clifton-Clyde	Washington	0.4	0.4
D0225	Fowler	Meade	0.0	0.0
D0226	Meade	Meade	0.0	0.0
D0227	Jetmore	Hodgeman	0.0	0.0
D0228	Hanston	Hodgeman	0.0	0.0
D0229	Blue Valley	Johnson	31.5	0.0
D0230	Spring Hill	Johnson	2.5	0.7
D0231	Gardner Edgerton	Johnson	0.0	1.0
D0232	De Soto	Johnson	1.0	5.2
D0233	Olathe	Johnson	46.8	0.0
D0234	Fort Scott	Bourbon	1.0	0.7
D0235	Uniontown	Bourbon	0.0	1.0
D0237	Smith Center	Smith	0.0	0.0
D0238	West Smith County	Smith	0.2	0.0
D0239	North Ottawa County	Ottawa	1.0	1.0
D0240	Twin Valley	Ottawa	0.0	0.0
D0241	Wallace County Schools	Wallace	0.5	0.0
D0242	Weskan	Wallace	0.2	0.0

USD #	USD Name	County	2006-07	2006-07
			Certified/Licensed Personnel - Nurses FTE	Non-Certified Personnel - Nurses FTE
D0243	Lebo-Waverly	Coffey	0.0	0.0
D0244	Burlington	Coffey	1.0	0.7
D0245	LeRoy-Gridley	Coffey	0.0	0.0
D0246	Northeast	Crawford	0.5	0.7
D0247	Cherokee	Crawford	1.0	0.0
D0248	Girard	Crawford	1.0	0.0
D0249	Frontenac Public Schools	Crawford	0.0	0.7
D0250	Pittsburg	Crawford	3.0	0.0
D0251	North Lyon County	Lyon	0.0	0.0
D0252	Southern Lyon County	Lyon	0.0	0.0
D0253	Emporia	Lyon	0.0	0.0
D0254	Barber County North	Barber	1.0	0.0
D0255	South Barber	Barber	0.0	0.0
D0256	Marmaton Valley	Allen	0.0	0.1
D0257	Iola	Allen	0.0	1.0
D0258	Humboldt	Allen	0.0	0.0
D0259	Wichita	Sedgwick	76.7	0.0
D0260	Derby	Sedgwick	7.4	0.0
D0261	Haysville	Sedgwick	0.0	8.5
D0262	Valley Center Pub Sch	Sedgwick	0.0	3.6
D0263	Mulvane	Sedgwick	3.0	4.0
D0264	Clearwater	Sedgwick	2.0	2.0
D0265	Goddard	Sedgwick	0.0	6.7
D0266	Maize	Sedgwick	7.0	0.0
D0267	Renwick	Sedgwick	2.2	0.0
D0268	Cheney	Sedgwick	1.0	0.0
D0269	Palco	Rooks	0.0	0.0
D0270	Plainville	Rooks	0.0	0.4
D0271	Stockton	Rooks	0.0	0.0
D0272	Waconda	Mitchell	1.0	0.0
D0273	Beloit	Mitchell	2.0	0.0
D0274	Oakley	Logan	0.0	1.0
D0275	Triplains	Logan	0.0	0.0
D0279	Jewell	Jewell	0.0	0.0
D0281	Hill City	Graham	0.0	0.2
D0282	West Elk	Elk	0.0	0.0
D0283	Elk Valley	Elk	0.0	0.0
D0284	Chase County	Chase	1.0	0.0
D0285	Cedar Vale	Chautauqua	0.0	0.0
D0286	Chautauqua Co Community	Chautauqua	0.0	0.0
D0287	West Franklin	Franklin	0.0	0.3
D0288	Central Heights	Franklin	1.0	1.0
D0289	Wellsville	Franklin	0.0	0.0
D0290	Ottawa	Franklin	2.0	2.0
D0291	Grinnell Public Schools	Gove	0.0	0.0
D0292	Wheatland	Gove	0.7	0.0
D0293	Quinter Public Schools	Gove	1.0	0.0
D0294	Oberlin	Decatur	0.0	0.5

USD #	USD Name	County	2006-07	2006-07
			Certified/Licensed Personnel - Nurses FTE	Non-Certified Personnel - Nurses FTE
D0297	St Francis Comm Sch	Cheyenne	0.0	0.0
D0298	Lincoln	Lincoln	0.0	0.3
D0299	Sylvan Grove	Lincoln	0.0	0.0
D0300	Comanche County	Comanche	0.0	0.0
D0303	Ness City	Ness	0.0	0.1
D0305	Salina	Saline	0.0	13.0
D0306	Southeast Of Saline	Saline	1.0	0.0
D0307	Ell-Saline	Saline	0.0	0.1
D0308	Hutchinson Public Schools	Reno	0.0	8.2
D0309	Nickerson	Reno	1.0	1.0
D0310	Fairfield	Reno	0.0	0.1
D0311	Pretty Prairie	Reno	0.0	0.0
D0312	Haven Public Schools	Reno	0.0	0.0
D0313	Buhler	Reno	2.6	0.0
D0314	Brewster	Thomas	0.0	0.0
D0315	Colby Public Schools	Thomas	1.0	0.0
D0316	Golden Plains	Thomas	0.0	0.0
D0317	Herndon	Rawlins	0.0	0.0
D0320	Wamego	Pottawatomie	1.0	0.0
D0321	Kaw Valley	Pottawatomie	1.0	1.0
D0322	Onaga-Havensville-Wheaton	Pottawatomie	1.0	0.0
D0323	Rock Creek	Pottawatomie	0.8	0.0
D0324	Eastern Heights	Phillips	0.0	0.0
D0325	Phillipsburg	Phillips	0.0	0.0
D0326	Logan	Phillips	0.0	0.2
D0327	Ellsworth	Ellsworth	1.0	0.0
D0328	Lorraine	Ellsworth	0.0	0.0
D0329	Mill Creek Valley	Wabaunsee	0.0	0.0
D0330	Mission Valley	Wabaunsee	1.0	0.0
D0331	Kingman - Norwich	Kingman	0.0	1.4
D0332	Cunningham	Kingman	0.0	0.0
D0333	Concordia	Cloud	0.0	0.8
D0334	Southern Cloud	Cloud	0.0	0.0
D0335	North Jackson	Jackson	0.0	0.2
D0336	Holton	Jackson	1.0	0.0
D0337	Royal Valley	Jackson	0.0	0.5
D0338	Valley Falls	Jefferson	0.0	0.0
D0339	Jefferson County North	Jefferson	0.0	0.0
D0340	Jefferson West	Jefferson	0.0	0.0
D0341	Oskaloosa Public Schools	Jefferson	0.0	0.0
D0342	McLouth	Jefferson	0.0	0.0
D0343	Perry Public Schools	Jefferson	0.0	0.0
D0344	Pleasanton	Linn	0.0	0.5
D0345	Seaman	Shawnee	6.5	0.6
D0346	Jayhawk	Linn	1.0	0.0
D0347	Kinsley-Offerle	Edwards	0.0	0.6
D0348	Baldwin City	Douglas	2.0	0.0
D0349	Stafford	Stafford	1.0	0.0

USD #	USD Name	County	2006-07	2006-07
			Certified/Licensed Personnel - Nurses FTE	Non-Certified Personnel - Nurses FTE
D0350	St John-Hudson	Stafford	1.0	0.0
D0351	Macksville	Stafford	0.5	0.0
D0352	Goodland	Sherman	0.0	1.0
D0353	Wellington	Sumner	3.0	3.0
D0354	Clafin	Barton	0.8	0.0
D0355	Ellinwood Public Schools	Barton	0.0	0.6
D0356	Conway Springs	Sumner	1.0	0.0
D0357	Belle Plaine	Sumner	2.0	0.0
D0358	Oxford	Sumner	0.0	0.7
D0359	Argonia Public Schools	Sumner	0.0	0.0
D0360	Caldwell	Sumner	0.0	0.8
D0361	Anthony-Harper	Harper	0.5	1.0
D0362	Prairie View	Linn	1.0	0.0
D0363	Holcomb	Finney	0.0	1.0
D0364	Marysville	Marshall	1.0	0.0
D0365	Garnett	Anderson	0.0	0.9
D0366	Woodson	Woodson	0.0	0.0
D0367	Osawatomie	Miami	1.0	1.0
D0368	Paola	Miami	0.0	3.0
D0369	Burrton	Harvey	0.0	0.0
D0371	Montezuma	Gray	0.0	0.0
D0372	Silver Lake	Shawnee	1.0	0.0
D0373	Newton	Harvey	3.3	0.0
D0374	Sublette	Haskell	1.0	0.0
D0375	Circle	Butler	0.0	1.9
D0376	Sterling	Rice	0.0	0.6
D0377	Atchison Co Comm Schools	Atchison	0.0	0.0
D0378	Riley County	Riley	0.0	1.0
D0379	Clay Center	Clay	0.0	2.0
D0380	Vermillion	Marshall	1.0	0.0
D0381	Spearville	Ford	0.0	0.0
D0382	Pratt	Pratt	0.0	1.1
D0383	Manhattan-Ogden	Riley	6.3	2.0
D0384	Blue Valley	Riley	0.3	0.0
D0385	Andover	Butler	7.0	0.0
D0386	Madison-Virgil	Greenwood	0.2	0.0
D0387	Altoona-Midway	Wilson	0.4	0.0
D0388	Ellis	Ellis	1.0	0.0
D0389	Eureka	Greenwood	1.0	0.0
D0390	Hamilton	Greenwood	0.0	0.0
D0392	Osborne County	Osborne	0.0	0.6
D0393	Solomon	Dickinson	0.0	0.0
D0394	Rose Hill Public Schools	Butler	2.0	0.0
D0395	LaCrosse	Rush	0.0	0.1
D0396	Douglass Public Schools	Butler	0.0	0.7
D0397	Centre	Marion	0.0	0.0
D0398	Peabody-Burns	Marion	0.0	0.0
D0399	Paradise	Russell	0.0	0.1

USD #	USD Name	County	2006-07	2006-07
			Certified/Licensed Personnel - Nurses FTE	Non-Certified Personnel - Nurses FTE
D0400	Smoky Valley	McPherson	0.0	0.0
D0401	Chase-Raymond	Rice	0.0	0.0
D0402	Augusta	Butler	3.0	0.0
D0403	Otis-Bison	Rush	0.0	0.0
D0404	Riverton	Cherokee	1.0	0.0
D0405	Lyons	Rice	0.0	1.2
D0406	Wathena	Doniphan	0.0	0.7
D0407	Russell County	Russell	1.0	1.0
D0408	Marion-Florence	Marion	0.0	0.6
D0409	Atchison Public Schools	Atchison	1.5	0.0
D0410	Durham-Hillsboro-Lehigh	Marion	0.0	0.4
D0411	Goessel	Marion	0.0	0.0
D0412	Hoxie Community Schools	Sheridan	0.0	0.0
D0413	Chanute Public Schools	Neosho	0.0	0.0
D0415	Hiawatha	Brown	2.0	0.0
D0416	Louisburg	Miami	2.0	1.3
D0417	Morris County	Morris	0.0	0.9
D0418	McPherson	McPherson	3.0	1.8
D0419	Canton-Galva	McPherson	0.0	0.0
D0420	Osage City	Osage	0.0	0.7
D0421	Lyndon	Osage	0.2	0.2
D0422	Greensburg	Kiowa	0.0	0.0
D0423	Moundridge	McPherson	0.0	0.0
D0424	Mullinville	Kiowa	0.0	0.0
D0425	Highland	Doniphan	0.0	0.0
D0426	Pike Valley	Republic	0.0	0.0
D0428	Great Bend	Barton	0.0	3.3
D0429	Troy Public Schools	Doniphan	0.0	1.0
D0430	South Brown County	Brown	0.0	2.0
D0431	Hoisington	Barton	1.0	0.0
D0432	Victoria	Ellis	1.0	0.0
D0433	Midway Schools	Doniphan	1.0	0.0
D0434	Santa Fe Trail	Osage	1.0	2.3
D0435	Abilene	Dickinson	1.0	0.0
D0436	Caney Valley	Montgomery	1.0	0.0
D0437	Auburn Washburn	Shawnee	0.0	10.1
D0438	Skyline Schools	Pratt	0.0	0.7
D0439	Sedgwick Public Schools	Harvey	0.0	0.4
D0440	Halstead	Harvey	0.0	0.7
D0441	Sabetha	Nemaha	0.0	1.3
D0442	Nemaha Valley Schools	Nemaha	0.0	0.0
D0443	Dodge City	Ford	0.0	8.2
D0444	Little River	Rice	0.0	0.0
D0445	Coffeyville	Montgomery	0.0	2.2
D0446	Independence	Montgomery	1.0	0.0
D0447	Cherryvale	Montgomery	0.0	1.0
D0448	Inman	McPherson	0.0	0.0
D0449	Easton	Leavenworth	0.0	0.5

USD #	USD Name	County	2006-07	2006-07
			Certified/Licensed Personnel - Nurses FTE	Non-Certified Personnel - Nurses FTE
D0450	Shawnee Heights	Shawnee	2.1	3.2
D0451	B & B	Nemaha	0.0	0.0
D0452	Stanton County	Stanton	0.5	0.0
D0453	Leavenworth	Leavenworth	0.0	5.6
D0454	Burlingame Public School	Osage	0.0	0.0
D0456	Marais Des Cygnes Valley	Osage	0.0	0.0
D0457	Garden City	Finney	12.5	0.0
D0458	Basehor-Linwood	Leavenworth	0.0	2.8
D0459	Bucklin	Ford	0.0	0.0
D0460	Hesston	Harvey	0.0	0.4
D0461	Neodesha	Wilson	1.0	0.0
D0462	Central	Cowley	0.5	0.0
D0463	Udall	Cowley	0.0	0.5
D0464	Tonganoxie	Leavenworth	2.0	2.0
D0465	Winfield	Cowley	5.0	0.0
D0466	Scott County	Scott	1.0	0.0
D0467	Leoti	Wichita	0.0	1.2
D0468	Healy Public Schools	Lane	0.0	0.0
D0469	Lansing	Leavenworth	0.0	2.0
D0470	Arkansas City	Cowley	0.0	1.9
D0471	Dexter	Cowley	0.0	0.0
D0473	Chapman	Dickinson	0.0	0.0
D0474	Haviland	Kiowa	0.0	0.0
D0475	Geary County Schools	Geary	8.0	0.0
D0476	Copeland	Gray	0.0	0.0
D0477	Ingalls	Gray	0.0	0.0
D0479	Crest	Anderson	0.0	0.0
D0480	Liberal	Seward	5.0	0.0
D0481	Rural Vista	Dickinson	0.0	0.0
D0482	Dighton	Lane	0.0	0.0
D0483	Kismet-Plains	Seward	1.0	0.0
D0484	Fredonia	Wilson	1.0	0.0
D0486	Elwood	Doniphan	0.0	1.0
D0487	Herington	Dickinson	1.0	0.0
D0488	Axtell	Marshall	0.0	0.0
D0489	Hays	Ellis	8.5	0.0
D0490	El Dorado	Butler	3.2	0.0
D0491	Eudora	Douglas	2.0	0.0
D0492	Flinthills	Butler	0.0	0.0
D0493	Columbus	Cherokee	1.0	0.0
D0494	Syracuse	Hamilton	1.0	0.0
D0495	Ft Larned	Pawnee	2.0	0.0
D0496	Pawnee Heights	Pawnee	0.0	0.1
D0497	Lawrence	Douglas	11.5	0.0
D0498	Valley Heights	Marshall	0.0	0.5
D0499	Galena	Cherokee	1.0	0.0
D0500	Kansas City	Wyandotte	22.3	14.0
D0501	Topeka Public Schools	Shawnee	4.0	21.2

USD #	USD Name	County	2006-07	2006-07
			Certified/Licensed Personnel - Nurses FTE	Non-Certified Personnel - Nurses FTE
D0502	Lewis	Edwards	0.0	0.1
D0503	Parsons	Labette	0.3	0.8
D0504	Oswego	Labette	0.0	0.7
D0505	Chetopa-St. Paul	Labette	0.0	1.0
D0506	Labette County	Labette	1.7	0.0
D0507	Satanta	Haskell	0.0	0.4
D0508	Baxter Springs	Cherokee	0.0	1.0
D0509	South Haven	Sumner	0.6	0.0
D0511	Attica	Harper	0.0	0.0
D0512	Shawnee Mission Pub Sch	Johnson	51.0	0.0
TOTALS			451.3	211.2

February 13, 2007

To: House Education Committee
From: Gary Brunk, Kansas Action for Children
Re: House Bill No. 2275

Kansas Action for Children Inc.
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Topeka, KS 66603

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Celebrating 25 years
of child advocacy

Kansas Action for Children supports enactment of House Bill No. 2275.

We send children to school because a good education is the foundation for full and successful participation in the nation's economic and civic life.

While in school we expect them to learn to read and write, to learn about math, algebra, science, history, and literature. We also expect that schools will teach and reinforce principles and practices we hope will last a lifetime, including honesty, hard work, the value of contributing to our community, and healthy nutrition and exercise habits.

Here's the rub: when schools allow children to purchase unhealthy snacks and beverages from vending machines they are very much like the parent who smokes while telling his children not to. When schools send mixed messages about their expectations, children get the wrong message.

We need to act to stop what is now a growing childhood obesity epidemic. One place for action is our schools, where children spend a significant part of their day. The least we can expect of schools is that they provide an environment that promotes learning and healthy habits. Passing this legislation, which requires that vending machines be turned off during school hours, is one concrete step you can take to stop the obesity epidemic. Many more steps are needed, but this is one you can take now.

These are the reasons we need to act:

Childhood obesity is a growing epidemic. In Kansas, 30% of 10-17 year-olds are overweight or obese.¹ These children are at increase risk for developing serious health complications, such as high blood pressure, high cholesterol, and type II diabetes. Research done by the Kansas Health Institute showed that as children's activity level decreases in middle and high school their exposure to vending machines dramatically increases.²

Competitive foods compromise the school nutrition environment. The school lunch program, administered by the USDA, is designed to provide well-balanced meals for school children. Unfortunately, the school lunch program is being

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¹ Annie E. Casey Foundation, KIDS Count.

² "Kansas Public School Health: Nutrition, Physical Education and Physical Activities Practices." Kansas Health Institute, December 2006.

House Education Committee

Date: 2-13-07

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undermined by “competitive foods” from vending machines and a la carte items. It is estimated that children consume 35-50% of their daily calories at school³, making it essential that the school nutrition environment promote well-balanced and healthy diets.

Vending machines benefit vendors, not schools. A national study done by The Center for Science in the Public Interest found that “Beverage companies are not giving money to schools – they are taking it.” The study found that on average, “67% of revenue generated from school beverage sales goes to beverage companies rather than to the schools.”³ A recent article in the Topeka Capital-Journal found that in Topeka area schools, vending companies receive 60% - 88% of the revenues from machines in schools.⁴ Additionally, when school administrators in Kansas were asked whether their school would experience significant cutbacks if there was no vending, only 16% said yes.⁵

HB 2275 supports the wellness guidelines and recommendations by the Child Health Advisory Committee. HB 2275 provides a context in which schools can make progress achieving the “exemplary” level of the school wellness guidelines. Much work has been put into the wellness guidelines and HB 2275 will support the guidelines and simplify measuring compliance. This legislation also supports the recommendations of the Child Health Advisory Council who specifically recommended turning off vending machines during the school day.

Kansas schools play an important role in children’s health and HB 2275 helps them ensure that they are playing a proactive role to combat childhood obesity and improve children’s nutrition. When it comes to children’s health, schools need to be more like strict parents and less like permissive parents. Kansas Action for Children urges you to support this legislation.

³ “Raw Deal: School Beverage Contracts Less Lucrative Than They Seem.” The Center for Science in the Public Interest, December 2006. <http://www.cspinet.org/beveragecontracts.pdf>

⁴ “Beverage Contracts: Schools Getting a Fair Shake?” The Topeka Capital-Journal, Tuesday, February 6, 2007.

⁵ “Kansas Public School Health: Nutrition, Physical Education and Physical Activities Policies and Practices.” Kansas Health Institute, December 2006.

HOUSE BILL No. 2275

By Committee on Education

1-29

9 AN ACT concerning school districts; relating to vending machines in
10 schools.

11

12 *Be it enacted by the Legislature of the State of Kansas:*

13 Section 1. (a) As used in this section:

14 (1) "School hours" means that time during a school day between the
15 beginning of the first class and ending at the end of the last class.

16 (2) "Vending machine" means any self-service device which, upon
17 insertion of a coin, coins or tokens, or by other similar means, dispenses
18 any food, gum or drink, either in bulk or in packages without the necessity
19 of replenishing the device between each vending operation.

20 (3) "School building" means any building or structure operated or
21 maintained by the board of education of a school district which is used
22 to provide instruction.

23 (b) All vending machines in school buildings shall be inoperable dur-
24 ing school hours.

25 (c) The provisions of this section shall not apply to any vending ma-
26 chine which solely dispenses water.

27 Sec. 2. This act shall take effect and be in force from and after its
28 publication in the statute book.

or those machines that are located in areas
not accessible to students during school
hours.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



Kansas Chapter

TESTIMONY ON HOUSE BILL 2275

House Committee on Education

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Thank you Chairman Aurand and Members of the Committee:

My name is Sarah Hampl and I am a general pediatrician from Bonner Springs, Kansas here today representing the Kansas Chapter of the American Academy of Pediatrics. The KAAP represents over 90% of the practicing pediatricians in the state. The KAAP is committed to the health and well-being of all children in Kansas and as a result I am testifying in support of House Bill 2275.

Childhood obesity is one of the focus areas for our chapter. Overweight and obesity in children and adolescents has tripled in the past 20 years. Nationwide, 34% of children and adolescents are overweight or obese as defined by body mass index criteria. Data from the 2002-03 Kansas Youth Tobacco Survey and the 2005 Kansas Youth Risk Behavior Survey indicate that 25%, or 1 in 4 Kansas students in grades 6-12 report themselves as overweight or obese. This figure is alarming, but what is even more concerning is that 25% is likely to be an underestimation of the true prevalence of overweight and obesity in Kansas middle and high school students.

This is not a "baby fat" issue. Today's children do not usually "outgrow" their overweight status. The likelihood that a child, especially an adolescent, will remain overweight into adulthood is as high as 80% according to longitudinal studies. Furthermore, overweight children experience adult-type illnesses. Sixty percent of obese children have at least 1 cardiovascular complication, and an additional 25% have 2 or more complications. It is estimated that 1 in 3 children born in the year 2000 will develop Type 2 Diabetes, a well-known complication of obesity, in their lifetime. The cost of obesity to the state of Kansas is significant; treating obesity and its related illnesses costs our state approximately \$657 million dollars a year, according to the most recent estimates. These findings mandate that significant effort should be undertaken to prevent obesity. This prevention effort must begin in our children.

Energy balance refers to the state when the number of calories that we burn off, our energy output, equals the number of calories that we eat and drink, our energy intake. Obesity can result when more calories are taken in than are burned off. It is estimated that students take in 35 to 50% of their daily calories while at school. While school meal programs must meet the recommendations of the Dietary Guidelines for Americans, including limits on calories from fat, saturated fat,

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cholesterol, sugar and salt, foods and drinks sold outside the school meal program. So-called "competitive foods", do not have to follow these or other guidelines. A 2001 report by the US Department of Agriculture found that foods sold in competition with school meal programs were low in nutrient quality and relatively high in fat, added sugars and calories. These are the very foods and drinks that are found in school vending machines across our state. Soft drinks are a commonly found item in vending machines. Another USDA study found that children begin drinking soft drinks early and that by age 14 and older, 1/3 of teen girls and 1/2 of teen boys are drinking 3 or more servings of soda a day. Soda and fruit drinks combined are the leading source of calories and added sugars in the diets of adolescents. Together, these drinks account for 75% of the drinks sold in schools. The Harvard School of Public Health found that for each additional soda or juice drink a child consumes per day, the child's chance of becoming overweight increases by 60%. In addition, as children consume more sugared drinks, their consumption of milk goes down. Teenage girls lay down 40% of their bone mass during adolescence. If their diets are inadequate in calcium, weak bones and osteoporosis can result in an increased risk of fractures in their adult years.

Kansas schools represent an important environment in which healthy habits can be taught and reinforced. Students eat 1 and often 2 meals per day at school, so what is offered in the lunchroom is an area of impact. But what is available outside the cafeteria is just as influential in the shaping of students' food and drink preferences and practices. Limiting access to vending machines during school hours is a step in the right direction. Encouraging students to eat school meals will result in higher intake of fruits and vegetables and milk, less soda and fruit drinks and fewer calories from fat and saturated fat. Limiting vending machine access will make it easier for students to make the right choices.

In summary, multiple efforts are occurring across the state of Kansas to limit the increase of obesity in our children. The passage of House Bill 2275 would further this effort by allowing Kansas students the chance to adopt and practice healthy nutrition habits during the school day, will make school a healthier place for Kansas children, and will give our children a better chance to become healthier adults.

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Attorney-at-Law

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**House Education Committee
Testimony Re: HB 2275
Presented by Ronald R. Hein
on behalf of
Kansas Beverage Association
February 13, 2007**

Mr. Chairman, Members of the Committee:

My name is Ron Hein, and I am legislative counsel for the Kansas Beverage Association (KBA) (formerly the Kansas Soft Drink Association), which is the state trade association for beverage bottling companies operating in Kansas. Products manufactured and distributed by members of the KBA include carbonated diet and regular soft drinks, bottled waters, isotonic drinks, juice, juice drinks, sports drinks, dairy-based beverages, teas, and other beverages.

The Kansas Beverage Association strongly opposes HB 2275. To give the committee a brief history of the issue revolving around soft drinks in schools, several years ago concerns were raised in the media, in the public, and, to some extent through state legislation regarding vending of soft drinks in schools. In response to those concerns, the American Beverage Association came forward with a dramatic response, the establishment of guidelines voluntarily imposed on our member businesses which would insure that healthier beverage choices were made available to school children.

Subsequent to that action, the American Beverage Association entered into an agreement with the William J. Clinton foundation and the American Heart Association, establishing the Alliance for a Healthier Generation (hereinafter "Alliance") which established an even more comprehensive program regarding beverages in school settings, and which fully met the concerns raised by parents and others to address the issues of soft drinks in schools.

At the state level, Rep. Jason Watkins had introduced legislation which was heard before the House Health and Human Services Committee two years ago, which was designed to insure that 50% of the beverages in school vending machines constituted healthy choices. Our industry worked very actively with Rep. Watkins to insure that this was accomplished in a voluntary method, without the need for government intervention, or specifically, legislation. The original guidelines issued by the American Beverage Association went beyond what Rep. Jason Watkins had sought in his legislation, and the new standards established by the Alliance goes even further than those original

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guidelines.

During this entire process, the Kansas Beverage Association worked with, communicated with, and coordinated with other groups interested in this issue and concerned about healthy beverages in schools. Our association understood that we had met and exceeded the expectations of such groups.

During this entire process, the Kansas Beverage Association was also vitally aware and supportive of the concept that decisions regarding non-curricula actions of our school districts should be made at the most local level possible, which under our state's educational system, is the local school board, because the school boards are most logistically responsible to the concerns of the parents and patrons of the school district.

Therefore, the KBA has consistently advocated that state mandates for the local school districts is not the appropriate mechanism to deal with vending machine issues or other such non-curricula issues involving our local school districts. In addition, the KBA has strongly advocated that mandatory legislation or government intervention is not the most appropriate remedy when the industry is working in conjunction with the public and other interested groups to solve these problems in a voluntary, private sector driven manner.

Kelly Youngken, from the American Beverage Association (ABA), will elaborate on further details of the ABA guidelines and the subsequent ABA standards established in conjunction with the Alliance. She will be available for questions regarding the rationale for such guidelines, and the response from the public and specifically parents of school aged children regarding those guidelines and standards.

Therefore, the KBA is of the opinion that this issue has been fully settled by the dramatic move made by the Alliance, which clearly insures that the beverages available to all students in K-12, and specifically in elementary school and middle schools, whose students are the least capable of making decisions for themselves, will only have available healthy choices in the vending machines in the schools. Again, we believe that the latest actions by the ABA, and all our member companies, has, indeed, been a revolutionary action which has met and exceeded the expectations of parents and healthcare groups which are interested in insuring that our children are exposed only to healthy food choices in beverage vending machines in schools.

Therefore, we were surprised by the introduction of HB 2275. We have talked to Rep. Sue Storm, who requested this legislation, and we understand that this legislation was introduced at the request of another group. Especially when we thought we had met and exceeded the expectations of that and every other group, when we discussed this issue with Rep. Storm, she wondered if there was any way we could compromise with the requesting group on this issue. Our response to Rep. Storm was that we thought we had already not only compromised with them, but had met and exceeded anything they could

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possibly request regarding insuring that all beverages available in schools are safe and healthy choices for our young people.

It is somewhat ironic to us, that now that the schools will only be having healthy beverage choices available in the vending machines, that this bill would actually remove these healthy products from the schools, so that the healthy products will not be available to our young people.

I believe that, after you hear the ABA representative's testimony about what our industry has done, which I shared with all the members of the 2006 Legislature during the fall of 2006, I think you will agree that our industry has more than responded to any concerns that might have been warranted prior to our revolutionary guidelines and subsequent alliance standards.

I would also like to point out that if the Legislature were to pass HB 2275, that action would send a message to the public and to businesses or industries such as ours, that if you legitimately respond to issues of public concern, and voluntarily try to solve these problems on your own, that the actions will be punished by enactment of legislation which is punitive in nature, not only for the industry but for the very citizens that the voluntary action was designed to benefit. We believe that will be will be the wrong message to send.

Passage of this legislation will have a chilling effect on cooperation, communication, and responsiveness to public issues in the future.

I would ask that you send a message supporting the efforts of our industry, and that you report HB 2275 adversely. Although in recent years, it has been common to simply refuse to pass legislation which is deemed to be inappropriate, and to let the bills lay in your bill books, I would call to your attention that when I served in the legislature from 1975 until 1984, it was quite common to adversely report legislation which the legislature felt should not be enacted.

Although, when the issue of soft drinks in schools first arose, I must admit that I believe that soft drinks in schools was not the highest priority regarding issues currently confronting school aged children. I believe that drug use in schools, alcohol abuse in schools, teen age pregnancies, violence in schools, and a cadre of other issues are probably the priorities that this legislature should address regarding schools and school children.

Therefore, I would urge that you report HB 2275 with the recommendation that it not be passed.

Thank you very much for permitting me to testify, and I will be happy to yield to questions.



**Testimony of Kelly Youngken
on behalf of the American Beverage Association
Before the House Committee on Education**

**House Bill 2275
February 13, 2007**

Representative Clay Aurand, Chairperson
Representative Deena L. Horst, Vice Chairperson
Members of the House Committee on Education

Good morning, members of the House Committee on Education. Thank you very much for the opportunity to appear before the committee to provide comments on H.B. 2275.

I am Kelly Youngken, Director of State and Local Affairs at the American Beverage Association (ABA) in Washington, D.C. The American Beverage Association has been the trade association for America's non-alcoholic refreshment beverage industry for more than 85 years. Formerly the National Soft Drink Association, ABA today represents hundreds of beverage producers, distributors, franchise companies and support industries in Kansas and across the country.

For years, the American beverage industry has provided a responsible voice in the effort to strengthen the health and wellness of our nation's children. We have consistently advocated teaching our children the importance of consuming a balanced diet and being physically active. We believe the best way to keep our children healthy is to teach the importance of the concept of "calories in and calories out."

Last year, we were contacted by an organization that shares our desire to teach our children how to live healthier lives. The Alliance for a Healthier Generation is a joint initiative of the American Heart Association and the William J. Clinton Foundation. It features former Arkansas Governor Mike Huckabee and former President Bill Clinton as its co-chairmen.

The Alliance sought our participation in its comprehensive effort to develop model school wellness programs -- an approach that teaches healthier diets and more exercise. Funded with an initial \$8 million grant from the Robert Wood Johnson Foundation, the Alliance has identified a pilot group of almost 300 schools which will participate in a comprehensive fitness, health and nutrition program designed to teach children how to live a healthy lifestyle. It plans to be actively working with 3,000 schools by the end of the 2007-08 school year and 7,100 schools by the end of the 2009-10 school year.

The American Beverage Association's Board of Directors accepted the invitation to join with the Alliance for a Healthier Generation on a new groundbreaking nation-wide school beverage policy which is part of the Alliance's comprehensive school wellness initiative. This new

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policy was announced by former President Clinton and former Governor Huckabee at a press conference on May 3, 2006

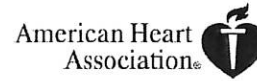
The new policy makes available bottled water, 100% juice with no added caloric sweeteners, and fat-free and low-fat milk in elementary and middle schools; in high schools, certain no- or low-calorie beverages such as diet drinks, bottled water, sports drinks, fitness waters and flavored waters will be allowed. Also available are certain juices, some juice drinks, and fat-free and low-fat milk. The policy would no longer allow full-calorie soft drinks, juice drinks or teas for sale in America's K-12 schools. In addition, the policy limits the calories and portion sizes of other beverages, including sports drinks and juices.

This new policy puts the focus on the school setting, not on the products. Limiting calories in schools is a sensible practice which acknowledges the American beverage industry's long-standing belief that solutions to obesity must focus on teaching kids to consume a balanced diet with more physical activity.

Our industry is proud of our products and proud of our participation in the Alliance for a Healthier Generation's Healthy Schools Program. With our bottlers, we are working hard to implement the beverage policy in schools in Kansas and across the country.

Thank you for the opportunity to comment today and I am happy to answer any questions that you may have.

Enclosure



Alliance for a Healthier Generation School Beverage Guidelines

Background

The Alliance for a Healthier Generation, a joint initiative of the American Heart Association and the William J. Clinton Foundation, is committed to fighting childhood obesity by facilitating change in the environments that contribute to the quality of nutrition and access to physical activity for our nation's youth.

In conjunction with its Healthy Schools Program, the Alliance met with representatives from beverage companies PepsiCo, Coca-Cola, and Cadbury Schweppes as well as representatives from the American Beverage Association to develop a set of voluntary guidelines related to the sale of beverages in our nation's schools. The guidelines will also serve as the beverage standard for the Healthy Schools Program recognition criteria. The standards encourage the availability of nutritious and lower calorie beverages and will both reduce the calories and limit portion sizes for caloric drinks available to students in schools.

There is no one solution to solve the issue of childhood obesity, but the core of the problem lies with the fact that young people consume more calories than they burn. These guidelines are just one part of an overall strategy to decrease calories consumed while increasing calories burned. Along with the Alliance's other strategies – improving snack foods and meals available to students and increasing physical activity and physical education – these guidelines could make a significant contribution to reducing childhood obesity.

In addition, this agreement provides clear, science-based guidance to help participants in the Healthy Schools Program, and other schools across the country working to create a healthier environment, identify lower-calorie and nutritious beverage offerings for their students.

The Alliance launched its Healthy Schools Program in February of this year. The program takes a comprehensive approach by recognizing schools that improve nutrition in the foods and beverages sold in schools; that increase both physical education and physical activity before, during and after the school day; that provide nutrition education; and that establish staff wellness programs

The Guidelines

Elementary School

- Bottled water
- Up to 8 ounce servings of milk and 100% juice
 - Low fat and non fat regular and flavored milk and nutritionally equivalent (per USDA) milk alternatives with up to 150 calories / 8 ounces
 - 100% juice with no added sweeteners, up to 120 calories / 8 ounces, and with at least 10% daily value of three or more vitamins and minerals

Middle School

- Same as elementary school except juice and milk can be sold in 10 ounce servings
- As a practical matter, if middle school and high school students have shared access to areas on a common campus or in common buildings, then the school community has the option to adopt the high school standard

High School

- Bottled water
- No or low calorie beverages with up to 10 calories / 8 ounces (e.g. diet sodas, diet and unsweetened teas, fitness waters, low calorie sports drinks, flavored waters, seltzers)
- Up to 12 ounce servings of milk, light juice, 100% juice and sports drinks
 - Low fat and non fat regular and flavored milk and nutritionally equivalent (per USDA) milk alternatives with up to 150 calories / 8 ounces
 - 100% juice with no added sweeteners, up to 120 calories / eight ounces, and at least 10% daily value of three or more vitamins and minerals
 - Light juices and sports drinks with no more than 66 calories / 8 ounces
- At least 50 percent of beverages must be water and no or low calorie options

These guidelines apply to beverages sold on school grounds during the regular and extended school day, including activities such as clubs, yearbook, band and choir practice, student government, drama, and childcare / latchkey programs. These guidelines do not apply to school-related events where parents and other adults are part of an audience or are selling beverages as boosters during intermissions, as well as immediately before or after an event. Examples of these events include school plays, and band concerts.

This is a ground breaking development for the health of our nation's students. The guidelines set a high standard for portion control, nutrition quality, and calorie limits in grades K-12. The Alliance commends the leadership of the beverage industry for working to address health and wellness issues in schools. The Alliance also commends the efforts of the advocates and leaders who have worked to improve the nutrition in their districts, states, and the nation as a whole. This agreement will not undo those efforts.

Implementation and Reporting

It is the goal of the parties to achieve implementation of these standards in 75% of schools under contract prior to the beginning of the 2008-2009 school year. Parties will strive to achieve implementation for all schools prior to the beginning of the 2009-2010 school year, provided schools and school districts are willing to amend existing school contracts.

Beginning in 2007, the American Beverage Association along with Cadbury-Schweppes, Coca-Cola, and PepsiCo will support an annual analysis of the impact and status of these guidelines. This analysis will include beverage sales to students in all venues in schools, as well as contract compliance broken down by school level and by new vs. existing/amended contracts. Reports will further attempt to distinguish between beverages supplied directly to schools by bottlers and those supplied indirectly through other channels, such as food and beverage distributors and contract operators. The American Beverage Association will annually present this data on its website and/or a press release.

NEW SCHOOL BEVERAGE GUIDELINES

(For more information, please visit www.ameribev.org)

ELEMENTARY SCHOOLS

- Bottled water
- Up to 8 ounce servings of milk and 100% juice
 - Low fat and non fat regular and flavored milk and nutritionally equivalent (per USDA) milk alternatives with up to 150 calories / 8 ounces
 - 100% juice with no added sweeteners, up to 120 calories / 8 ounces, and with at least 10% daily value of three or more vitamins and minerals

MIDDLE SCHOOLS

- Same as elementary school except juice and milk can be sold in 10 ounce servings
- As a practical matter, if middle school and high school students have shared access to areas on a common campus or in common buildings, then the school community has the option to adopt the high school standard

HIGH SCHOOLS

- Bottled water
- No or low calorie beverages with up to 10 calories / 8 ounces (e.g. diet sodas, diet and unsweetened teas, fitness waters, low calorie sports drinks, flavored waters, seltzers)
- Up to 12 ounce servings of milk, light juice, 100% juice and sports drinks
 - Low fat and non fat regular and flavored milk and nutritionally equivalent (per USDA) milk alternatives with up to 150 calories / 8 ounces
 - 100% juice with no added sweeteners, up to 120 calories / eight ounces, and at least 10% daily value of three or more vitamins and minerals
 - Light juices and sports drinks with no more than 66 calories / 8 ounces
- At least 50 percent of beverages must be water and no or low calorie options

**KANSAS
ASSOCIATION**



**OF
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Testimony on **HB 2275**
before the
House Education Committee
by

Jim Edwards, Governmental Relations Specialist
Kansas Association of School Boards

February 13, 2007

Chairman Aurand and Members of the House Education Committee:

Thank you for allowing me the opportunity to appear before you today to express KASB's opposition to **HB 2275**.

KASB believes all decisions on the operation of vending machines in public schools should be made by the board of education of that district, in consultation with the district's administration.

I appreciate the opportunity to present our views on this issue and would be happy to answer questions that you might have.

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Jim [redacted] ards - vending machines

From: "Karen Bailey" <baileyk@mclouth.org>
To: <legislative@kasb.org>
Date: 2/9/2007 6:25 PM
Subject: vending machines

Something to consider:

It is difficult for rural schools to raise money for activities and events. In our school, Entrepreneurship class runs a vending business within the school. This is a learning experience for our students as they learn about starting and running a small business. They order, inventory, stock, and keep track of income and expenses. Money earned from the business is then used for a business trip for the class; a trip that is totally planned by students. The trip itself is an experience for most of our students. Each year the class must leave a balance of \$300 (the original amount of a loan to start the class) for the next class.

Our high school student council uses the money from their vending machines to host school dances, pay for Homecoming and King and Queen of Courts, and donations to our Safe Prom and After Graduation events.

Please think about rural schools in small towns before voting on this issue. Karen Bailey

House Education Committee

Date 2-13-07

Attachment # 26



**Olathe School District
Testimony provided by Dr. Gary George
February 13, 2007**

Regarding House Bill 2275

My name is Gary George and I am an assistant superintendent in the Olathe School District. Thank you for considering my testimony on House Bill 2275, a bill regarding vending machines in schools.

While the Olathe School District shares your concern for the health and safety of students, we believe this is a matter better left to the local board of education. Our board has taken a position in opposition to the continual erosion of local control. We believe this proposal goes too far.

Further, we believe there may be a place for vending machines in faculty planning areas. Under House Bill 2275, vending machines would not be allowed even in these areas of the school. We believe House Bill 2275 should be killed.

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Attachment # 27



House Education Committee Representative Aurand, Chair

February 13, 2007
Submitted by: Diane Gjerstad
Wichita Public Schools

Mr. Chairman,

H.B. 2275 would restrict access to any vending machines during the school day with the exception of water. We assume the intent of the authors is to restrict student access within the confines of the school building to force students to make better choices. While well intended, we oppose this blanket ban on vending access during the school day.

Wichita Public Schools, like all Kansas schools, have adopted student wellness and vending policies which are in compliance with KSDE guidelines. In our high schools the vending machines carry at least 50% healthy snacks as identified in the "Student Wellness Guidelines Manual". Students have choices available in controlled portions.

East High has about 2300 students. Students arrive at all hours of the day. The dietary needs of 2300 people in one building are widely varied – students with high/low blood sugar, students arriving late without breakfast, students arriving after doctors' appointments requiring fasting. Hundreds of students and hundreds of reasons they need access to a snack or drink. The same practical issues would arise if the vending was turned off here in the Capitol.

The purpose of the Student Wellness Policy, in part, is to offer practical and appropriate choices for students. If we are in compliance with the Student Wellness Policy then having access to vending during the day is not harmful to students. If machines are off students will go to the nearest convenience store and buy unhealthy snacks in "biggie" sizes or go without eating. As a result students will not be able to concentrate or end up in the nurses' office with symptoms of headaches, stomachaches or fatigue.

Mr. Chairman, student health and wellness is an issue which schools take seriously. Kansas schools are limiting access, portion size and caloric intake. These decisions made at the local level address the needs of the students in the local district.

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