Committee Co-Chairs: James Hurley and Jamie Grimm-Rice
Committee Members present: Finessa Ferrell, Andrea McCranie, Desiree Crocker, Brad Wiidakas, Cynthia Hazel, Deanne Romero, Jaime Brenner, Katrina Ruggles, Shawn St. Sauveur, Kathy Kopp, Kelli Sisson, Rebecca Bundick

Day One: May 19, 2017
AM Focus: The Comprehensive Health committee discussed the overall purpose and context of the standards review and revision work, such as processes, timelines, and guidelines. The committee:

- Shared goals, member roles, processes, and agreements for working together, and
- Discussed structural elements of the standards, such as Prepared Graduate Competencies (PGCs), Grade Level Expectations (GLEs), and Evidence Outcomes (EOs).

PM Focus: Comprehensive Health committee members shared their individual reviews of the Comprehensive Health standards and their review of public feedback and comments. The committee:

- Worked in grade-band groups (PreK-2, 3-5, 6-8, and 9-12) to share and develop understandings of committee members’ findings,
- Shared findings in a whole group setting, with much of the discussion focused on the structure and organization of the CAS, and
- Turned comments and feedback into actionable statements for further consideration on Day Two.

Broad prioritized revisions to the comprehensive health education standards
- Clarification
- Alignment GLE and Evidence Outcomes
- Vertical Alignment (across grade levels)
- Rigor
- Examine verb choices

Day Two: May 20, 2017
AM Focus: The Comprehensive Health committee shared their reviews of the benchmarking report and of the CDE specialist’s review of the Comprehensive Health standards. The committee:
• Worked in grade-band groups (PreK-2, 3-5, 6-8, and high school) to share and discuss potential Evidence Outcome-level content edits, and
• Turned content edit suggestions into actionable statements and added them to the statements generated on Day One.

PM Focus: The Comprehensive Health committee developed an action plan for the committee’s work, including content, prioritization, and individual work assignments. The committee:
• Evaluated each actionable statement for clarity and common understanding,
• Assessed each actionable statement for demand (how much support there is for change) and impact (to what degree the statement would affect users of the standards), and made consensus decisions about work to be done for the next meeting in June.
• Finalized language for identified PGCs
  1. Healthy Eating PGC
  2. Disease Prevention PGC
  3. Discuss the right Side of Document

Primary outcomes:
• Group agrees to leave PGCs the same
• Keep Inquiry Questions
• Potentially change the title of Relevance & Application
• Focus on the why and application
• Health Skills
• Discuss process for tracking changes
• Revise Healthy Eating PGC and Disease Prevention PGC.

June Meeting Next Steps
For the next meeting of the Comprehensive Health committee on June 16th, committee members will:
• Draft sample documents that show how structural issues and organization of the Comprehensive Health standards (such as organization of Evidence Outcomes under the Grade Level Expectations) might be addressed with a focus on improved usability, and use the benchmark report and other feedback to evaluate the size and scope of Evidence Outcomes, with the intent of representing the content with fewer EOs and without footnotes.
• Complete revision of GLEs and EOs for healthy eating
• Complete revision GLEs and EOs for disease prevention
• Complete revision of GLEs and EOs for injury prevention
• Small group work.