*CONFIDENTIAL ADVICE TO JCSH MEMBERS*

BRIEFING NOTE

February, 2019

**AGENDA ITEM:**  *Outcomes from 2015-2020 JCSH Operating Plan: to current date*

*PAN-CANADIAN JOINT CONSORTIUM FOR SCHOOL HEALTH (JCSH)*

**LEAD JURISDICTION**: **PRINCE EDWARD ISLAND**

**DECISIONS REQUESTED:**

**Decision**   **Information**  **Discussion**

Discussion re: JCSH

* Goal 4: Monitoring, Evaluation and Accountability

**BACKGROUND:**

* The Pan-Canadian Joint Consortium for School Health (JCSH) was established in 2005 by the Council of Ministers of Education, Canada (CMEC) and the Conference of Ministers of Health to facilitate a comprehensive and coordinated approach to health promotion in the school setting.
* Its purpose is to facilitate the collaboration of the health and education sectors to better accomplish mutual goals and support shared mandates for the promotion of wellness and achievement in children and youth in Canadian schools.
* JCSH comprises the Ministries of Education and the Ministries of Health from all provinces and territories with the exception of Québec. While Québec is not a member of the Consortium, it contributes to the work of the Consortium through sharing information and best practices.
* The work of the JCSH promotes comprehensive school health, an internationally recognized framework for supporting improvements in students’ educational outcomes while addressing school health in a planned, integrated, holistic, and sustainable way.
* The JCSH works through three bodies: the Management Committee, the School Health Coordinators’ Committee, and the Secretariat.
* JCSH works with nationally-recognized research teams to develop evidence-based resources in collaboration with PT policy makers and practitioners. The resources benefit all provinces and territories through the resource itself and as the basis for PT-specific resources.

**JCSH 2015-2020 Operating Plan:**

* To achieve the goals of the 2015-2020 Mandate, JCSH developed a detailed Operating Plan, with strategies and actions built from the four goals: (1) Leadership, (2) Knowledge Development and Exchange, (3) Capacity Building, and (4) Monitoring, Evaluation and Accountability.
* In total, over the four goals, there are 40 actions.
  + The actions range from broad ones, such as ‘Seek opportunities to align JCSH and federal, provincial, and territorial (FPT) work (1B.2) to specific ones, such as ‘Disseminate and explore further research opportunities for the core indicators and measures work on comprehensive school health and student achievement’ (2A.1.5).
  + The actions also range from ones that would continue on an ongoing basis, such as ‘Build knowledge, monitor, and share emerging trends in research that relate to priorities of JCSH’ (2A.1.2) to time sensitive ones, such as ‘Develop an Evaluation working Group’ (4A.1).
* A general review of Operating Plan outcomes is published in the JCSH Annual Report, which has been released annually since 2007.

**CURRENT SITUATION**

* The current mandate ends March 31 2020.
* Results of progress on Operating Plan actions are an important part of evaluating the gains made in this current mandate by JCSH.
* The outcomes to date in the 2015-2020 Operation Plan show clearly that JCSH has done well in committing to moving forward and making gains in actions towards its 4 goals; but there are gaps and new challenges. More work remains.

**PREDOMINANT GROWTH AND GAPS**

* A major focus of JCSH (Leadership Goal) are the efforts to ‘work towards ensuring both health and education voices are present at JCSH tables (1A.3). In the current mandate, although individual provinces and territories have been exclusively represented by one sector, the collective result is an almost 50-50 split of Health and Education representation.
* As the result of the Truth and Reconciliation Commission’s 2015 Report and 94 Calls to Action, JCSH has been active in advancing Indigenous perspectives in its work, beginning with increase in learning and knowledge of Indigenous ways of knowing and being and also the consequences of colonialism and residential schools’ legacy. Beginning in 2016, JCSH has steadily increased its introduction to Indigenous Elders and knowledge keepers and researchers to begin the work of improving its tools and resources for Indigenous school communities.
* JCSH committed to developing an Equity Working Group and applying an equity lens to tools revisions. While the Equity Working Group was active in the first three years, and an equity lens was applied to tools revisions, that group has not been active in the past 18 months.
* While JCSH has been active in increasing collaborations with nationally- and internationally-respected school health researchers, it has only just begun to seek opportunities to influence funding organizations, such as Canadian Institutes of Health Research (CIHR), or Social Sciences and Humanities Research Council (SSHRC) (2A.1.3).

Prepared by: JCSH Secretariat February 2019