

Newsletter Spring 2012

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HEALTHY KIDS BETTER STUDENTS

**MASSACHUSETTS
COORDINATED
SCHOOL HEALTH PROGRAM**

Hello and welcome to the spring edition of the Coordinated School Health (CSH) newsletter. In each issue of our seasonal newsletters, we focus on one topic relating to school health concerns—including the latest research, success stories, and action steps for schools. This issue highlights the importance of school wellness committees and the new state regulations that will require them starting in August, 2012.

If you have any questions about our program or need assistance implementing Coordinated School Health or Wellness Policies, please contact us.

Thanks, and have a healthy day!

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*A partnership of
the Massachusetts
Department of
Elementary and
Secondary Education
and Massachusetts
Department of Public
Health.*

Massachusetts Success Stories: School Wellness Committees

Chili Champs Highlight Health Hudson, MA

In February 2011, the Hudson Public Schools and the Hudson Board of Health presented their first annual Cook-Off at Hudson High School. The competition was for the best tasting and healthiest chili. The Director of Food Services; the Director of Health, Nursing and Safety; and the local Board of Health Agent organized this fun event for the Hudson community in order to promote healthy eating and physical activity. These three administrators are members of the Hudson School Health and Safety Advisory Council, which includes about 30 school staff and town officials as well as parents and high school students. This council, which meets four times a year to discuss health and safety issues that impact learning, joined the event planning in recognition of the need to raise awareness of the importance of healthy eating and physical activity.

Five teams of teachers, parents, and students represented the high school, middle school, and three elementary schools. The teams cooked chili with ingredients donated by Hannaford Supermarket in each school's cafeteria and transported the chili to the Hudson High School cafeteria—all under the careful watch of Serv-Safe personnel. A panel of seven judges—including teachers, administrators, police, and school committee members—awarded a trophy for Best Overall Chili to Mulready Elementary School. This award was based on taste, as rated by the attendees, and nutritional facts calculated according to ingredients and portion sizes provided by the teams.

The community response was outstanding for a first-time event: More than 300 people attended, voted on the best chili, and visited booths set up for the event. These booths not only featured chili tastings, but also offered smoothie and salad tastings, demonstrations on portion size, heart rate monitoring, blood-pressure measurements,



sun safety education, and information on school bullying prevention efforts. Booths were staffed by school nurses, physical education teachers, counselors, students, and local businesses who volunteered their time and expertise for this important outreach event. Admission was free and attendees were encouraged to bring non-perishable food items that were donated to the Hudson Food Pantry.

Having generated great interest in this competitive event focusing on healthy eating, Hudson will host the 2nd Annual Cook-Off in February 2012 featuring pizza! New this year will be circuit training stations and stress-reduction breathing exercises. With a district goal to increase student achievement, the council hopes to support families in their efforts to embrace healthy lifestyles and to illustrate the link between wellness and learning.

Joining Forces to Fight for Wellness, Boston, MA

Last September, the Boston Public Schools (BPS) created the Health and Wellness Department and released *Healthy Connections*, the district's strategic plan to improve the health and wellness

of students. Taking a coordinated school health approach, the overarching, district-wide goal of *Healthy Connections* is to actively promote the health and wellness of all BPS students to advance both their healthy development and readiness to learn. "Student health and wellness is priority for us because it is clear that healthy children learn better," said Jill Carter, executive director of the Health and Wellness Department.

Since 2006, Boston Public Schools have followed a district-wide Wellness Policy that requires each school to create a wellness council. School staff, parents, administrators, and other members of the community form wellness councils that carry out an annual assessment of health and wellness in their school building. The assessment helps wellness councils identify a plan for wellness, called the Wellness Action Plan. To ensure accountability and better allow for the delivery of relevant technical assistance, wellness councils submit Wellness Action Plans to the Health and Wellness Department as a part of their Whole School Improvement Plan. The department, in turn, provides feedback, and highlights technical assistance and resources to help schools carry out that plan.

The Boston Public School District, in partnership with the Alliance for a Healthier Generation, provides technical assistance, professional development, and grants to support wellness councils. A number of BPS initiatives provide further support. The Wellness Champion Program allows volunteer members of each wellness council to receive an annual stipend to learn best practices for incorporating physical activity into the school day. Tobacco mini-grants help schools implement various tobacco prevention initiatives. The Health and Wellness Department mapped school community partnerships to identify schools that need community partnerships. District departments have also formed a Wellness Action Team to

provide schools with resources and services.

Members of school wellness councils share best practices with each other and are recognized annually for exceptional efforts at the Boston Public Schools Wellness Summit. For example, during the 2010-2011 school year the Tynan Elementary School's wellness council decided to prioritize physical activity in its annual plan. Through the wellness action planning process, the council chose to promote staff wellness through a monthly health and wellness breakfast and to promote student physical activity through a partnership with local bike and performing arts programs. In addition, the school invited a certified yoga instructor to teach students and staff yoga fundamentals. During the 2010-2011 school year, 112 out of 125 (90%) of Boston Public Schools' wellness councils used this systems approach to create and implement Wellness Action Plans as part of their Whole School Improvement Plan. What's more, 100% of the district's schools received feedback and technical assistance.

Working closely with the Boston Public Health Commission through funding from the Centers for Disease Control and Prevention and the U.S. Department of Education, the Boston Public School District takes a policy, systems and environment approach to actively promote the health and wellness of all BPS students. Over the past two years, BPS schools have made extensive and aggressive efforts to improve the health and wellness of all students by bringing more health education, physical education, and physical activity to schools; improving the quality of physical education, school meals and snacks, school-based health care, and health education; and increasing equity of health and wellness resources across schools. Through policy change, schools in Boston are creating healthy school environments where the healthy choice is the easy choice.

National Efforts

In 2004, the federal *Child Nutrition and Women, Infants and Children Reauthorization Act* required all local education agencies participating in the National School Lunch Program to create a wellness policy with input from parents, students, school food authority, school board members, and school administrators. Although all districts created wellness policies after this legislation was passed, implementation and evaluation efforts were not monitored or conducted regularly. In 2010, the *Healthy, Hunger-Free Kids Act (HHFK)* expanded upon this wellness policy requirement. *HHFK Act* strengthens local school wellness policies by emphasizing ongoing implementation and assessment; bringing in additional stakeholders in its development, implementation and review; and requiring public updates (for parents, students, and others in the community) on the content and implementation of the policies. The new regulations are anticipated to have a proposed rule in the fall of 2012. The public will then have an opportunity to comment on the rule. Additionally, the U.S. Department of Agriculture (USDA), Centers for Disease Control and Prevention (CDC), and U.S. Department of Education are working on a fluid plan (www.fns.usda.gov/tn/Healthy/lwp5yrplan.pdf) for providing training and technical assistance to help schools meet these new requirements. For more information, please see the USDA Food and Nutrition Service website www.fns.usda.gov/tn/healthy/wellnesspolicy.html.

State Legislation

Legislation passed in Massachusetts complements the *Healthy, Hunger-Free Kids Act (HHFK)*. In response to growing concerns about childhood obesity, Massachusetts in 2010 passed *An Act Relative to School Nutrition* (M.G.L.c.111, s.222), which included a provision requiring “regulations facilitating the establishment of school wellness advisory committees.” These committees are intended to ensure that each public school district has an established group of school staff and concerned community representatives to recommend, review, and help implement school district policies addressing school nutrition, nutrition education, physical activity, and related issues that affect student health. To optimize the effectiveness of these committees, the regulations stipulated several guidelines on how the committees should operate, including:

- The school wellness advisory committee should include representatives from a wide range of school health-related disciplines. The group must include school nurses, school physical activity/physical education staff, school nutrition staff, parents, students, school committee representatives, and representatives from community youth-serving agencies. The *HHFK Act* also requires school administrators take part in reviewing school wellness policies. Other useful members may include school physicians, school mental health or social services staff, and maintenance and transportation staff. As students’ health impacts the entire community, representatives from the local board of health, health services providers, and members of the public should be invited to join the committee. All members are to be appointed by the school district superintendent and one of these members should serve as a liaison between the committee and the superintendent.
- The committee should meet at least four times per year, record attendance, and keep minutes of the meetings.

State Legislation



- On an annual basis, the committee should review and/or recommend district-wide policies to promote student health and wellness. Addressing the federally-required local school wellness policy is clearly the first order of business. In addition to the wellness policy objectives required in 2004—objectives relating to foods available on school campus, nutrition education, and physical activity—the *HHFK Act* added a new requirement for at least one objective related to nutrition promotion. Local wellness policies should have goals and measurable objectives for the coming year, a process for evaluating progress, and recommendations on the functioning of school building based wellness teams and/or initiatives.
- In setting goals and objectives for the policies, the committee should consider:
 - Suggestions from school administrators, food service staff, nutrition and physical education staff, school nurses, students, parents, teachers, and other community members.
 - Public health data, such as student health needs assessments, indicators of student health status—including attendance records and the Youth Risk Behavior Survey (www.cdc.gov/HealthyYouth/yrbs/index.htm), information from health providers and public health officials, and data indicating the effect of health status on academic performance.
 - Information about school district programs and practices such as BMI screening data; fitness assessment data; school breakfast, lunch and snack programs; competitive foods available on campus; nutrition and health education; and opportunities for physical activity, including physical education, recess/activity breaks, and travel to and from school.
- Every year, the committee should provide the superintendent and school committee with a report on the policies developed, goals and objectives for the upcoming year, an action plan including how activities will be evaluated, strategies for developing community support and coordinating school and community initiatives, an assessment of the accomplishments and/or work still needed to accomplish the goals and objectives of the previous year, and a review of the committee’s membership and participation.

To give schools time to implement the new regulations, the law does not take effect until August 1, 2012. Implementation guidelines and training programs are currently in development by the Coordinated School Health and Nutrition, Health and Safety Programs, and will be rolled out to schools during the 2011-2012 school year. In the meantime, on the back panel are several useful resources for school wellness committees.

Resources

The American Cancer Society’s document, *A Guide to Community School Health Councils*, provides excellent step-by-step guidance in setting up and maintaining a high-functioning school wellness committee. www.cancer.org/Healthy/MoreWaysACSHelpsYouStayWell/SchoolHealth/SchoolHealthCouncils/a-guide-to-community-school-health-councils

CDC’s *School Health Index* (SHI) is a useful tool to help school groups assess their school health environment. www.cdc.gov/healthyouth/shi/index.htm

Students Taking Charge, a version of the SHI adapted for student use, engages youth in assessing school health programs. www.studentstakingcharge.org

CDC’s *HECAT* (*Health Education Curriculum Assessment Tool*) and *PECAT* (*Physical Education Curriculum Assessment Tool*) are useful for school groups wishing to review and evaluate their curricula in health education and physical education, respectively. www.cdc.gov/healthyouth/tools/index.htm

The Alliance for a Healthier Generation’s *School Wellness Council Toolkit* provides information, tips, and templates to create a successful wellness committee. www.healthiergeneration.org/uploadedFiles/For_Schools/Helpful_Tools/08Toolkit_SWC.pdf

CDC recently released the *School Health Guidelines to Promote Healthy Eating and Physical Activity Among Youth*, which presents evidence-based guidance for schools on how to promote healthy eating and physical activity in schools. The guidelines serve as the foundation for developing, implementing, and evaluating school-based healthy eating and physical activity policies and practices for students. www.cdc.gov/healthyouth/npao/strategies.htm

Coordinated School Health (CSH)

CSH is a joint initiative between the Massachusetts Department of Elementary and Secondary Education and Massachusetts Department of Public Health funded by the Centers for Disease Control and Prevention’s Division of Adolescent and School Health (CDC/DASH). Our team’s primary goal is to improve school policies, environment, and instruction relating to physical activity, nutrition, and tobacco. CSH staff provides training and resources to schools to promote the healthy development of Massachusetts youth. Staff members also provide technical assistance, such as curriculum guidance or implementation of school physical activity, nutrition, and tobacco policies. To learn more about CSH, please visit: www.cdc.gov/HealthyYouth/CSHP.



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