ASSESSING

> Handout Packet

Handout Packet for
Assessing School Health Needs

Handout #1: Key Points and Notes

Handout #2: School Health Assessment Resource Guide

Handout #3: Additional Resources

"Priorities never stay put. Priorities continually shift and demand attention."

— JOHN C. MAXWELL

Handout #1: Key Points and Notes

Warm-Up Activity

What are the top two school health concerns/needs for the student population you serve?

How do you know it is an issue? What data or evidence do you have?

Purpose

The purpose of conducting an assessment is to determine needs and focus the work on the highest priority needs of the students and school.

School Health Index — Priority Health Topics

- Physical activity and physical education
- Nutrition
- Tobacco use prevention
- Alcohol, tobacco, and other drug prevention
- Chronic health conditions (asthma, food allergies, etc.)
- Unintentional injury and violence prevention
- Sexual health

School Health Index Modules and Whole School, Whole Community, Whole Child (WSCC) Components

- Health Education
- Physical Education
- Counseling, Psychological and Social Services
- Health Services
- Nutritional Services
- Employee Wellness
- Social and Emotional Climate
- Physical Environment
- Family Engagement
- Community Involvement

NOTES:

Handout #2: School Health Assessment Resource Guide

Recommended Resources		
Resource	**Overview of Resource**	**Benefits of Resource**
Local School Wellness Policy: *Refer to school district website for wellness policy information.*	A local school wellness policy is a written document that guides a local educational agency or school district's efforts to create supportive school nutrition and physical activity environments. Each local education agency participating in federal child nutrition programs, including the National School Lunch Program or the School Breakfast Program, is required by law to develop and implement a wellness policy as established by the Child Nutrition and WIC Reauthorization Act of 2004, and enhanced by the Healthy, Hunger-Free Kids Act of 2010 (HHFKA). Wellness policies can be integrated into the Whole School, Whole Community, Whole Child (WSCC) model for school health, and can help put into action several provisions of the Every Student Succeeds Act, including Title I and Title IV. Local wellness policies can address policies and practices for before, during, and after school. For more information, see https://www.cdc.gov/healthyschools/npao/wellness.htm. This website provides many resources to help school districts develop a wellness policy.	Notes:
Wellness School Assessment Tool (WellSAT 3.0) http://www.wellsat.org/about_the_WellSAT.aspx	WellSAT 3.0 is a free resource that helps to evaluate and improve local school wellness policy. This tool focuses on nutrition and physical activity. WellSAT 3.0 helps to evaluate and improve local school wellness policy in the following areas: 1. Nutrition education 2. Standards for USDA child nutrition programs and school meals 3. Nutrition standards for competitive and other foods and beverages 4. Physical education and physical activity 5. Wellness promotion and marketing 6. Implementation, evaluation, and communication This tool helps identify strengths and areas needing improvement within existing local school wellness policies. It reflects federal law and best practices.	Notes:

Handout #2: School Health Assessment Resource Guide - continued

Recommended Resources		
Resource	**Overview of Resource**	**Benefits of Resource**
CDC – School Health Index https://www.cdc.gov/ healthyschools/shi/ index.htm Training Tools available for this resource: https://www.cdc. gov/healthyschools/ professional_ development/e-learning/ shi.html Other national organizations using the School Health Index as their school health assessment include: The Alliance for a Healthier Generation and Action for Healthy Schools.	The CDC School Health Index (SHI) is a self-assessment planning tool that: • Helps schools identify strengths and areas for improvement • Utilizes a school and community organizing process • Results in an action plan • Is comprehensive and structured around the 10 components of the WSCC model The SHI describes two activities that are to be completed by teams from your school: a **self-assessment process** and a **planning for improvement process.** • The **self-assessment process** involves members of your school community coming together as a school health team to discuss what your school is already doing to promote good health and to identify strengths and weaknesses. The SHI allows the team to assess and score the extent to which your school implements the types of policies and practices recommended by the CDC in its research-based guidelines for school health and safety policies and programs. • The **planning for improvement process** enables the school health team to identify recommended actions the school can take to improve its performance in areas that received low scores. This process guides the team through a simple process for prioritizing the various recommendations and will help the school health team to decide on a handful of actions to implement this year. Finally, members of the school health team will complete a School Health Improvement Plan to list the steps they will take to implement the actions.	Notes:

Handout #2: School Health Assessment Resource Guide - continued

Recommended Resources		
Resource	**Overview of Resource**	**Benefits of Resource**
	There are 11 School Health Index modules aligned with the Whole School, Whole Community, Whole Child (WSCC) model: See module table below. The SHI includes an eleventh module that focuses on school health and safety policies.	
YRBS Data https://www.cdc.gov/healthyyouth/data/yrbs/index.htm https://www.cdc.gov/healthyyouth/health_and_academics/	The Youth Risk Behavior Surveillance System (YRBS) is a national school-based survey conducted by the CDC to monitor a variety of health behaviors. There are six categories of health-related behaviors that contribute to the leading causes of death and disability among youth and adults, including: • Behaviors that contribute to unintentional injuries and violence • Sexual behaviors related to unintended pregnancy and sexually transmitted diseases, including HIV infection • Alcohol and other drug use • Tobacco use • Unhealthy dietary behaviors • Inadequate physical activity This data also informed a better understanding of the associations between school grades and these risk behaviors. Fact sheets are available.	Notes:

SHI Modules	WSCC 10 Components
1. Health education	1. Health education
2. Physical education and physical activity programs	2. Physical education and physical activity
3. Nutrition environment and services	3. Nutrition environment and services
4. Health services	4. Health services
5. Counseling, psychological, and social services	5. Counseling, psychological, and social services
6. Social and emotional climate	6. Social and emotional climate
7. Physical environment	7. Physical environment
8. Employee wellness and health promotion	8. Employee wellness
9. Family engagement	9. Family engagement
10. Community involvement	10. Community involvement
11. School health and safety policies and environment	

Handout #3: Additional Resources

Supplemental Resources		
Child Trends https://www.childtrends.org/publications/using-policy-to-create-healthy-schools	Child Trends is a credible resource for research and data on children. Their work helps set the national agenda on child well-being, shapes policies that affect children and their families, and elevates important issues for vulnerable groups of children and youth. As their website states, Child Trends provides information that includes: • A description of the states' overall coverage of the WSCC (Whole School, Whole Community, Whole Child) and the comprehensiveness of each WSCC domain • A series of cross-domain briefs that explore common policy approaches that bridge the WSCC framework (i.e., partnerships, student supports, and professional development) • State-by-state profiles detailing each state's overall comprehensiveness, as well as details on how each state approaches selected topic areas from each WSCC domain	Notes:
State Data Resources 1. https://www.healthiergeneration.org/our-work/in-your-state 2. http://statepolicies.nasbe.org/about 3. http://www.bridgingthegapresearch.org/research/index.html 4. Behavioral Risk Factor Surveillance System (BRFSS)	1. The Alliance for a Healthier Generation takes a look at what is being done to support the health and wellness of children in each state. 2. The NASBE State Policy Database collects regulations and practices governing state education systems in all states and U.S. territories. The database covers a broad range of topics that fall under the authority of state boards of education with varying specificity, depending on the governance model each state has adopted. 3. Bridging the Gap is a nationally recognized research program dedicated to improving the understanding of how policies and environmental factors influence diet, physical activity, and obesity among youth, as well as youth tobacco use. The website includes research that is specific to district wellness policies. 4. The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based national health survey that collects data from U.S. residents regarding their health risk behaviors, chronic health conditions, and use of preventative services. It is a powerful tool for identifying and developing health promotion programs.	Notes:

Handout #3: Additional Resources - continued

Supplemental Resources		
Community Toolbox https://ctb.ku.edu/en/toolkits See in particular Chapter 3 ("Assessing Community Needs and Resources"): https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources	Community Toolbox provides resources and tools to help people work together to build healthier communities. There are 46 chapters containing practical, step-by-step guidance in community-building skills. There are also related toolkits that offer short outlines for key tasks. The toolkits offer guidance on core competencies, as well as the Troubleshooting Guide to help groups assess situations and get support for addressing common problems in community work. This resource also has databases of best practices for community health and development and online courses to learn more about community health assessment and community health improvement planning.	Notes:

U.S. Department of Education School Climate Surveys
 	
https://safesupportivelearning.ed.gov/edscls/administration
	The U.S. Department of Education School Climate Surveys (EDSCLS) measures school climate and provides data to better understand the perceptions of the students, staff, and parents in the school or district; to monitor progress; to make data-driven decisions; to involve stakeholders; and to adapt to shifting needs related to school climate.
	
	The EDSCLS measure a total of 13 school climate subtopics across three domains in each of its surveys.
	1. Engagement
	  • Cultural and linguistic competence
	  • Relationships
	  • School participation
	2. Safety
	  • Emotional safety
	  • Physical safety
	  • Bullying/cyberbullying
	  • Substance abuse
	  • Emergency readiness/management
	3. Environment
	  • Physical environment
	  • Instructional environment
	  • Physical health
	  • Mental health
	  • Discipline
		Notes:

ASCD School Improvement Tool* http://sitool.ascd.org/Default.aspx?ReturnUrl=%2fSchools%2fSurveyManagement.aspx *Log-in is required for this tool*	The ASCD Improvement Tool is a needs assessment survey based on a whole child approach to education. It includes indicators across the ASCD Whole Child Tenets (healthy, safe, engaged, supported, and challenged); indicators of sustainability; and indicators of the school improvement components of school climate and culture, curriculum and instruction, leadership, family and community engagement, professional development and staff capacity, and assessment.	Notes:

Handout #3: Additional Resources - continued

ASCD. (2011). The healthy school communities model: Aligning health and education in the school setting [PDF]. Retrieved from http://www.ascd.org/ASCD/pdf/siteASCD/publications/Aligning-Health-Education.pdf

ChildStats.gov. (2018). America's children: Key national indicators of well-being. Retrieved from http://www.childstats.gov/americaschildren/glance.asp

Data Resource Center for Child & Adolescent Health. (2018). Child and family health measures: 2016 and 2017 national survey of children's health [PDF]. Retrieved from https://www.childhealthdata.org/App_Themes/Main/Contents/nsch/content-map/2016_2017_NCSH_Content_Map_Child_and_Family_Health_Measures.pdf

McGeary, K.A. (Jan. 9, 2019). Data maps the impact of where a child grows up. Retrieved from https://www.rwjf.org/en/library/collections/better-data-for-better-health.html

National Association of Chronic Disease Directors. (2016). A guide for incorporating health & wellness into school improvement plans [PDF]. Retrieved from https://healthyschoolscampaign.org/wp-content/uploads/2017/07/NACDD_SIP_Guide_2016.pdf

Robert Wood Johnson Foundation. (2018). Better data for better health. Retrieved from https://www.rwjf.org/en/library/collections/better-data-for-better-health.html

Robert Wood Johnson Foundation. (March 2019). The power of data for healthy communities. Retrieved from https://www.rwjf.org/en/library/research/2018/04/the-power-of-data-for-healthy-communities.html

USDA Food and Nutrition Services. (July 29, 2016). Local school wellness policy. Retrieved from https://www.fns.usda.gov/tn/local-school-wellness-policy.

ASSESSING SCHOOL HEALTH NEEDS
Society for Public Health Education (SOPHE) • https://www.sophe.org/focus-areas/school-health/