

WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD
SCHOOL HEALTH NJ PROJECT

WSCC Guidance Document

Revised Oct2021



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Schools strive to help students reach their highest academic potential. The Whole School, Whole Community, Whole Child (WSCC) School Health NJ Project, administered by the NJ Department of Health (NJDOH), has more than 10 years of experience promoting healthy schools. The WSCC model (below) is the project's framework and it utilizes a collaborative approach to learning and health.

New Jersey schools have a unique opportunity to join a national movement to positively influence learning by addressing the health of students. Addiction (alcohol, tobacco and other drugs and technology), bullying and harassment, food insecurity, overweight/obesity, and inactivity have been ongoing concerns. Anxiety, depression and other behavioral health conditions, worsened by the pandemic and social injustice issues over the past year, are presenting additional concerns for students' mental health and learning. By joining a diverse and concerned group of state and national partners, schools can strengthen their voice and have a powerful impact.

Over the years, the WSCC School Health NJ Project has collaborated with various state, local and professional organizations to improve school health to enhance student learning for life success. Our vision is to begin to transform the New Jersey public school landscape by directing resources to build and sustain healthy schools for all students. This grant initiative was developed in response to the National Association of Chronic Disease Directors' (NACDD) recently released document: [The Whole School, Whole Community, Whole Child Model: A Guide to Implementation](#) (hereafter referred to as “Guide”). This Guide is designed to help schools understand, adopt and implement the WSCC model.

- Healthy children learn better.
- Health and academic achievement are inextricably intertwined.
- Schools are an ideal venue for chronic disease prevention.
- Administrative and Board of Education support are critical for creating a culture of health in schools.
- A commitment to systems change is required to sustain healthy schools.



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The NJDOH and its regional agencies will provide programmatic guidance and support throughout the time the school participates in the grant initiative to help develop the school's and district's capacity in creating a holistically healthy school environment for students. Schools can expect to gain knowledge, skills and experience in:

- Accessing state and local resources and creating community partnerships in support of healthy students, healthy staff and healthy environments (Guide, Appendix A). Also visit the project's website at: www.SchoolHealthNJ.org.
- Engaging parents as advocates. Parents will have the opportunity to gain the knowledge, skills and confidence needed to effectively advocate and partner with their child's school and district to create a healthy school environment. By working in partnership with parents, schools will benefit from the valuable contributions that engaged parents bring to support student learning and positive change.
- Developing leadership opportunities for students. Students bring new insights to this work, support change efforts, and provide an understanding of how and what youth think about health. Students engaged in this process will positively impact their schools now, while increasing their skills and confidence to impact positive social change in the future.

Sustainability of the accomplishments achieved during this grant initiative require administrative and BOE support of policies and practices as well as the engagement of youth, parents and the broader school community.

B. Core Capacity and Financial Responsibilities

The successful implementation of the CDC WSCC model requires these foundational core capacity components:

- A WSCC Health and Wellness (H&W) Team Leader and a WSCC H&W Team with members who reflect the WSCC model components and represent school administration and staff, youth, parents and the community. Teams with the greatest success are culturally representative of the school community and have members with various perspectives. Together, the H&W Team Leader and Team will champion this grant initiative in their school with the support of school administration and the local BOE.
- A self-assessment of school health-related policies, programs, curriculum, and services using the CDC's [School Health Index \(SHI\)](#).
- A School Health Improvement Plan (SHIP) based on the results of the SHI and considering the priority health needs of students.
- A health and wellness-related goal and/or objective in the School Health Improvement Plan (also noted in Guide, p13).

This grant initiative has a year-to-year project and budget period. An annually renewed MOA is required between the NJDOH regional agency and the school. The NJDOH will provide up to \$6,000 of grant funding in Year 1. The stipend compensates the WSCC H&W

Team Leader for approximately 100 hours per school year.

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The financial responsibilities are outlined below:

Funding Periods	NJ DOH	School/District
Year 1 (July 1-June 30)	\$6,000 (\$4,000 full Team Leader stipend; \$2,000 for program activities including the completion of these activities: 1) Meet the required Team membership 2) Complete the SHI 3) Develop a SHIP, including two “Signs of Progress” to work toward being partially or fully met 4) Collect baseline school data* results/summary (optional)	\$0.00 *A decrease in: absenteeism, conduct referrals, detentions, suspensions, drop-out rate; An improvement in: school climate and culture/SEL, standardized test scores; high school graduation rate, dropout rate, management of a chronic health condition or other as mutually agreed.
Year 2 (July 1-June 30)	\$4,500 (\$2,500 partial Team Leader stipend + \$2,000 program funds)	\$1,500 partial WSCC Team Leader stipend
Year 3 (July 1-June 30)	\$3,000 (\$1,500 partial Team Leader stipend + \$1,500 program funds)	\$2,500 partial Team Leader stipend
Year 4 (July 1-June 30)	TBD	Full Team Leader stipend

C. Year One Requirements

Schools and their districts are required to meet the following Year One requirements:

Timeline	Activities	Person(s) Responsible	Outputs or Outcomes
Pre-grant initiative By August	In-person meeting between school/district and, as needed, NJDOH	School: Superintendent or designee, Principal(s) of participating school(s), Business Manager, WSCC H&W Team Leader (if available) DOH: Regional Agency Coordinator, and, as available, NJ DOH Program Management Officer (PMO)	Read NACDD document, <i>The Whole School, Whole Community, Whole Child Model: A Guide to Implementation</i> . Signed MOA by September 30
Baseline By mid- October	1) Consider which two Signs of Progress (SOPs) to include in the School Health Improvement Plan	School Administrator, WSCC H&W Team Leader	By October 29, identify two SOPs to improve or achieve by June

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	<p>(SHIP) to be partially or fully completed. SOPs help schools to identify opportunities for improving and strengthening school health capacity to integrate and sustain the WSCC model in the school system.</p> <p>2) Identify and recruit a WSCC H&W Team</p> <p>3) Collect baseline school data (if this option is chosen).</p> <p>4) Log of Team Leader's time spent on WSCC</p>	<p>WSCC H&W Team Leader, School Administrator</p> <p>School Administrator WSCC H&W Team Leader</p> <p>WSCC H&W Team Leader</p>	<p>By October 29, submit member list with name, position and contact email to meet Team membership requirements for administrator(s), staff, students, parent(s) and community.</p> <p>By October 29, submit baseline-school data (optional).</p> <p>Submit to regional agency prior to November check-in phone call; maintain on ongoing basis.</p>
<p>Check-in phone call By mid-November</p>	<p>NJDOH regional agency Coordinator schedules call to review/discuss:</p> <p>1) F/u on SOPs being identified for SHIP</p> <p>2) Team membership and Team orientation meeting (by mid-Dec). If SHI never done by school, view SHI eLearning</p> <p>3) Needed resources or support</p> <p>4) Team Leader's log</p> <p>5) Reminder: Participate in 2 H&W webinars/grant year</p>	<p>School Administrator and WSCC H&W Team Leader</p>	<p>Participate on Nov. call</p>
<p>Check-in phone call By January</p>	<p>NJDOH regional agency Coordinator schedules call to review/discuss:</p> <p>1) F/u on SOPs being identified</p> <p>2) Needed resources or support</p> <p>3) Schedule to complete SHI by February 28</p>	<p>School Administrator and WSCC H&W Team Leader</p>	<p>Participate on Jan. call</p>

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	4)Team Leader's log 5)Reminder: Participate in 2 H&W webinars/grant year		
Check-in phone call By March	NJDOH regional agency Coordinator schedules call to review/discuss: 1)F/u: SOPs being identified 2)Status of SHI completion 3) Team membership status 4)Needed resources or support 5)Lessons learned/Successes to date 6)SHIP status 7)Team Leader's log 8)Methods - efforts to communicate/ disseminate or otherwise solicit input on the SHIP 9)Reminder: Participate in 2 H&W webinars/grant year	School Administrator and WSCC H&W Leader	Participate on March call By March 31, submit: <ul style="list-style-type: none"> • copy of SHI scoring sheet • Team requirements met: → meeting schedule of 4-6x & agenda/ minutes for SY → Team members reflect diverse representation. Methods include but are not limited to: <ul style="list-style-type: none"> • website posting, • written articles for the district, newsletter, or local press • press announcement • staff meetings, presentations at a PTA/PTO, Board of Education • meeting or a student assembly.
Year-end By June 15	1)Participate in regional vs statewide (TBD) May 18 project meeting 2)Complete Step 6 Team Log	School Administrator and WSCC H&W Team Leader	Attend May 18th, ½ day (e 9:30 am start) TBD: project meeting in central Jersey location vs virtual. Schools to prepare slide(s) with (TBD): Lessons learned, accomplishments achieved, success story. By June 8, submit:

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	<p>3)Follow-up: 2 SOPs identified to improve or achieve in SHIP.</p> <p>4)Complete SHIP; review Sustainable Jersey for Schools actions list for additional evidence-based or best practice actions.</p> <p>5)Team Leader's log</p>		<ul style="list-style-type: none"> ● Year End Summary ● SOPs included in SHIP ● SHIP for upcoming school year (for review and approval) with goals and actions to address the health areas in need of improvement based on the results of the SHI assessment or priority health needs of students ● Team Leader's log
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D. Year 1 Required Conference Calls, Webinars/Training

First Half of the Year

November - NJDOH regional agency Coordinator schedules check-in call with School Team
By December - Attend 1st Health and Wellness webinar and/or training

Second Half of the Year

January - NJDOH regional agency Coordinator schedules call with School Team
March - NJDOH regional agency Coordinator schedules call with School Team
By May 18 - Estimated 9:30 am start - half day project meeting (School Administrator, Team Leader and up to 2 Team members)
By May 31 - Attend 2nd Health and Wellness webinar and/or training

ESTABLISHING A WSCC HEALTH & WELLNESS (H&W) TEAM – YR. 1

One of the activities for this first year is to establish an active Health and Wellness (H&W) Team (hereafter referred to as “Team”) that proactively works for healthy students, healthy staff and a healthy school environment. Accomplishing this activity involves these tasks:

- 1) Recruit and establish a Team that has engaged a diverse group of individuals. The Team, comprised of school administration and staff, students, parents and community members, works together as partners to promote and advocate for a healthy school (students, staff and the environment).
- 2) Complete the Centers for Disease Control and Prevention’s (CDC) self-assessment and planning tool, the [School Health Index \(SHI\)](#) and collect school specific data.
- 3) Based on the SHI results, the Team will develop a School Health Improvement Plan (SHIP). The SHIP determines the actions to be taken to address the identified health priorities. Your Team can check [Sustainable Jersey for Schools](#) and other resources for evidence-based or best- and promising practice ideas.
- 4) Communicate and disseminate the SHIP to school administration, staff, students and families to educate them, solicit their input and engage their support.

Why is it important?

A fundamental mission of schools is to provide students with the knowledge and skills needed to become healthy and productive adults. Schools play a critical role in establishing a supportive environment where students can develop positive health behaviors. Research shows that healthy schools enhance student learning by positively impacting students’ attention span, class participation, classroom behavior, self-esteem, and reducing absenteeism.

A Team is an effective best practice for schools to identify health priorities that need to be addressed and to work together with the greater school community to implement programs, services or policies that effectively improve school health. The Team is an action-oriented group that helps ensure the implementation of the wellness policy and makes needed improvements to address other health priorities. Depending on school administration, Teams get involved in a variety of activities including, but not limited to those listed on the Team member activities handout that will be provided to your school by the regional agency Coordinator.



Timeframe

The suggested time lines for the successful completion of these activities:

- By October 31: Team members recruited
- Mid-December: Team orientation meeting convened
- January and February: Team meetings to complete the SHI
- March and April: Team meetings to develop the SHIP and identify methods for communicating about and disseminating the SHIP to the administration, school staff, students and families to solicit input and engage their support
- April and May: Communicate about and disseminate the SHIP

Project costs and resource needs



The start-up cost to establish a Team is nominal. The primary cost is the value of people's **time**: time to recruit members to create the Team; time needed to meet and complete the SHI and develop the SHIP; time to communicate and disseminate the SHIP. Additional costs of sustaining the Team arise with implementing the actions to address the identified health priorities and needed improvements.

What to do and “how to” do it

A school does not need to strictly follow this guidance as long as the school meets the required outputs or outcomes. The CDC and the [Alliance for a Healthier Generation \(AHG\)](#) have resources to help schools establish a successful Team.

The first step for establishing an effective Team is to have school administration that is engaged and supportive. Administrative support is critical, not only for the Team's success but also for the Team to sustain the work of this pilot after the funding ends. School administration is responsible for providing an identified time and meeting location for the Team. When school administration is “on-board”, the **next steps** are to:

1. Recruit Team Members.

The recommended Team size ranges from five or six to up to 12 members. The Team should be diverse in its make-up, as varied perspectives contribute toward uncovering potential health issues. Diversity in Team composition also ensures that the needs of all groups within the school are identified so effective solutions are implemented. Recruit a diverse representation of Team members from the groups below:

- District and/or School Administration - Principal, Assistant or Vice Principal, Board of Education member, NJEA member, school secretary

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- School Staff - Health and PE teachers, other classroom teachers with an interest in health, school nurse, nutrition/food service staff, counselor, psychologist or social worker, custodial staff, school security personnel, bus driver
- Students
- Parents or other family representatives
- Representatives of the greater school community such as the local health department, non-profits working on health-related issues, other healthcare professionals or health-related organizations, parks and recreation departments, civic organizations and local business.

Use an invitation for prospective Team members. Once the Team is up and functioning, members may decide that new member recommendations come from within the current Team membership. The Team needs to be recruited no later than October 31st.

2. Convene an Orientation Meeting.

Orient the Team to the link of health to learning and academic performance, the WSCC model, the CDC's Assessment and Planning Tool - the School Health Index (SHI) and grant expectations and timelines. Before the orientation meeting, create a log-in account and distribute the log-in information to Team members at the meeting. Team members can complete the online SHI at any time using the log-in account information. Use the SHI version for middle and high schools. The [CDC School Health Index](#) is available to help guide you in this process or you can contact your regional School Health Coordinator for assistance.

The SHI uses a process that brings people together to improve a school's health programs, practices and policies in ten health components:

- | | |
|--|---------------------------------|
| 1) health education | 6) social and emotional climate |
| 2) physical education and activity | 7) physical environment |
| 3) nutrition environment and services | 8) employee wellness |
| 4) health services | 9) family engagement |
| 5) counseling, psychological & social services | 10) community involvement |

Convene the orientation meeting no later than mid-December.



3. Complete the comprehensive SHI assessment.

Some schools have all the Team members meet to complete the entire assessment in a series of meetings. Other schools form smaller sub-groups of three or more people to work on each of the 10 modules. What's most important is having a meaningful assessment completed by a diverse group of Team members working on each module. This increases the accuracy of what really exists within the school and elicits the various perspectives and insights needed for improving school health. Answer all the discussion questions.

At least one Team member needs professional expertise in the health module being assessed. For example, the food/nutrition services Director should be one of the Team members answering the questions in the nutrition environment and services module. A PE teacher should be one of the Team members answering the questions in the physical education and activity module. Read the questions carefully and select the answer that best describes your school. In the online version, clicking on words or phrases that are underlined and bolded will take you directly to their definition in the SHI glossary. If a question does not apply to your school, indicate "not applicable." If you are unsure or need more information, skip and return to it later. Before taking on the next step, be sure the Team reviews and approves the results of the SHI. Complete the SHI by February 28th.

4. Develop a School Health Improvement Plan (SHIP).

The SHIP is being developed during Yr. 1 for implementation in Yr. 2. The planning process is integral to a Team's long-term effectiveness and success. Again, a diverse Team membership contributes more varied ideas for potential improvements and effective solutions, and thus, the more successful the planning and implementation will be. The first step in making improvements is to identify the issues, so be sure to include all areas in need of improvement, whether or not the Team knows how to resolve them and whether or not there is available funding. Solutions may arise or become more feasible at a later time. Since the SHIP is based on the SHI results, it describes the action steps for making improvements and thus, justifies the work of the Team and what it wants to achieve. The SHIP is ideally developed for a 3 to 5- year period and is reviewed annually for progress made. The CDC has resources to help you or you can contact your regional School Health Coordinator for assistance. Complete the SHIP and identify the methods for communicating about and disseminating the SHIP to the school community to solicit input and engage their support by April 30th.



5. Communicate and Disseminate the SHIP.

Use the SHI results to support the decisions being made for the actions being taken in the SHIP. Also be thinking about information and/or data that needs to be collected to measure the impact of improvements being made. Broadly communicate the SHIP to administrators, school staff, students and families to educate them, solicit their input and to engage their support in the SHIP activities for the coming school year. Methods include but are not limited to: presentations (staff meeting, Board of Education or PTO/PTA meeting, school assembly), small group meetings (parents or students) and surveys. If justified by the input received, the SHIP is revised and submitted to the regional agency Coordinator before the school year ends.

6. Take Action, Document Results and Track Progress.

The Team is most effective when there is consensus among all Team members on the health priorities to address, the steps that need to be taken, who is responsible for doing what, the timeframe for completing each step and the measures against which to evaluate progress. Match Team member's responsibilities to their interests and strengths. Involve all members in accomplishing the work. It is important to have accountability for what the Team does and the impact on the health of the school. Document Team activities, including meeting agendas and minutes, participation numbers for implemented activities and most importantly, the results and/or impact of the actions that were taken to improve school health.

Spotlight: What New Jersey schools are doing

School Health NJ is looking to highlight schools that have successfully established a Team and other health and wellness actions. Contact your regional agency Coordinator to showcase your school's accomplishments.



HEALTH & WELLNESS (H&W) TEAM MEMBERS

A Team member can be any individual from school administration, staff, students, parents or a member of the community. A “good fit” for someone interested in being a H&W Team member is an individual who:



- Feels passionate about having a healthy school culture
- Is enthusiastic about health and wellness
- Has an interest in engaging various groups of the school community
- Realizes the importance of bringing community resources into the school that benefit the health of students and staff

WSCC H&W Team Member Activities

Teams are involved in a variety of activities including, but not limited to:

- Promoting the importance of health to learning and academic performance
- Attending at least 4 to 6 meetings during the school year
- Participating in Team meetings and activities
- Completing the School Health Index (SHI) assessment
- Developing a School Health Improvement Plan (SHIP)

Once the Team is up and running, members will be involved in these types of activities:

- Helping to implement the SHIP
- Assisting to track and monitor progress in completing SHIP activities
- Using surveys to determine the interests and health needs of students and staff
- Collecting relevant, school-specific health data, as needed
- Promoting SHIP activities to students, parents and the greater school community, and recruiting these individuals to participate
- Reviewing and strengthening the school wellness policy
- Presenting success stories on the benefits/outcomes of SHIP activities completed or conducted to administration and the local school board of education
- Exploring funding sources or ideas to raise money for health activities and programs.



- Identify an Administrator (superintendent, principal, or dept director) with oversight to:
 - ⇒ integrate WSCC into district and/or school accountability measures such as the district or school improvement plan and incorporate into the mission, vision and goal statements, strategies, activities and best practices, policies.
 - ⇒ conduct an inventory of existing health-focused school committees, clubs, programs, activities, services and other resources in the school to ensure that health programming and practices are coordinated, efficient and effective.
- Become informed with research linking health to learning and academic performance to garner WSCC support from school staff, administrators, students, families and community partners
 - ⇒ develop a communications strategy.
 - ⇒ create concise talking points to communicate the health and learning linkage.
 - ⇒ identify and engage community partners and local health departments for in-kind resources (services or supplies).
- Establish WSCC District Coordinator and WSCC Health and Wellness (H&W) Team Leader positions; create job descriptions; advocate for and secure funding for WSCC health and wellness programs and activities; identify options for substitute and/or stipend pay.
- Approve time and location for the team to meet; attend and/or co-lead Team meetings; approve Team decisions; secure a team budget from the district/school.
- Schedule time at school or district staff meetings for Team updates including; objectives, progress, and accomplishments.
- Oversee, conduct, monitor, assist or otherwise provide guidance to Team Leader(s) on the completion of SHI or other assessments and/or surveys.
- Provide or collect and analyze baseline academic and student health data (develop a “snapshot”); review and use relevant academic, national, state, and local health data, survey and assessment results to prioritize goals, objectives and activities related to WSCC.
- Role model by participating in wellness events.
- Support employee wellness.



- Serve as liaison between school administration and school teams.
- Create a WSCC district team and facilitate meetings including representation of all components as well as representation from student specialty groups.
- Review individual SHIPs and provide feedback; make modifications as indicated.
- Responsibilities stated above as delegated by Administrator.

POTENTIAL WSCC PARTNERS FOR WSCC IMPLEMENTATION

The reality of providing the range of resources needed to meet students' physical, mental, emotional, and social health needs, extends well beyond the capacity of any single school district. The WSCC School Health NJ regional grantee works to establish and maintain strategic collaborative partnerships amongst State partners, the school community and local and county-based health and social service agencies. The goal of these relationships is to help provide needed resources for healthy students, healthy staff and a healthy school environment. The contribution of resources and/or services can take the form of, but is not limited to:



- ⇒ in-kind staff expertise to conduct educational presentations or trainings
- ⇒ contributing expertise in areas as such marketing, public relations, technology
- ⇒ assisting with data collection, analysis, grant-writing or evaluation services
- ⇒ providing student incentives, educational materials, office supplies or equipment
- ⇒ offering facility space
- ⇒ fund raising and/or cash contributions

The groups and organizations listed below have expertise in the various WSCC components and provide a range of perspectives on health. Partners are needed to help the schools sustain a focus on student and staff health and wellness. This list is neither exhaustive or definitive. Partners vary depending on the school district's health priorities and the needs of their schools.

Administrative Decision Makers & Influencers

- ⇒ Superintendents and other central office administrators
- ⇒ Principals and assistant principals
- ⇒ School board members
- ⇒ Equity coordinators

Health Education

- ⇒ Health education teachers
- ⇒ Community-based health educators
- ⇒ Health educators at local or county health departments
- ⇒ Health educators at local hospitals or health care systems
- ⇒ Members of the NJ Association for Health, Physical Education, Recreation & Dance (AHPERD)
- ⇒ Members of the NJ Society for Public Health Education (SOPHE)
- ⇒ Faculty at universities with WSCC-related departments to WSCC components

Physical Education & Activity

- ⇒ Members of the NJ Association for Health, Physical Education, Recreation & Dance (AHPERD)
- ⇒ Before- and after-school staff involved in physical activity
- ⇒ Community-based organizations supporting out-of-school time physical activity (e.g., YMCA, Boys & Girls Clubs, Special Olympics)
- ⇒ PE teachers
- ⇒ Athletic coaches

Nutrition Environment & Services

- ⇒ School nutrition/food service directors and staff
- ⇒ School food vendors
- ⇒ Farmers and local food producers
- ⇒ Before- and after-school staff involved in food/nutrition activities
- ⇒ Community food bank staff



Health Services

- ⇒ School health services directors
- ⇒ School nurses
- ⇒ School-based youth service program (SBYSP) staff
- ⇒ Community-based health care providers (e.g., physicians, nurse practitioners) and dentists
- ⇒ Staff from local or county health departments



Counseling, Psychological, & Social Services

- ⇒ School counselors, Student Assistance Counselors (SACs), psychologists, social workers, and school nurses
- ⇒ Community-based counselors, therapists, psychologists and social workers

Social & Emotional Climate

- ⇒ School counselors, Student Assistance Counselors (SACs), psychologists, social workers
- ⇒ Culture and climate specialists, Antibullying (HIB) Specialist
- ⇒ Trained school staff including classroom teachers, aides, assistants, school bus drivers, etc.

WSCC COMPONENTS & OUTCOMES ON ACADEMIC SUCCESS

A symbiotic relationship exists between health and academic performance. Research shows that by improving health, there are positive outcomes that enhance learning to achieve academic success.

Health Education

Students learn about and practice the skills needed to make informed health decisions and to develop their communication, decision-making, and social skills:

Increased Grades, Test Scores, Improved Student Behavior

Decreased School Absences and Reduced School Dropout

Physical Education and Physical Activity

The research on physical activity and academic achievement spans almost 50 years. There are consistent and positive correlations that physical activity is associated with:



Cognitive Performance
Attention and Concentration
Grades, GPA, Test Scores
Classroom and Pro-Social Behavior



Disciplinary Problems
Drop-out Rates
Absenteeism

Nutrition Environment and Services

Students learn about and practice healthy eating. Research shows that participating in School Breakfast and Lunch Programs can result in:

- ⇒ Better cognitive functioning due to increased nutrient consumption
- ⇒ Increased academic grades and standardized test scores
- ⇒ Reduced absenteeism

Access to healthy drinking water helps students maintain adequate hydration, which improves cognitive functioning.

Counseling, Psychological, and Social Services

Students have the mental and behavioral supports that they may need with **positive** outcomes on:

- ⇒ Improved attendance, student behavior, test scores, and GPA
- ⇒ Increased positive classroom behaviors
- ⇒ Decreased suspension rates

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Health Services

Students have improved attendance and subsequently do better in school when nurses are available to address their health needs. Unaddressed health needs **negatively** affect academic success:

Health Behavior or Condition	Adverse Effects
Lack of sleep	Reduced cognitive performance Impaired emotional & physical health
Vision Problems	Poor literacy and reading test scores
Drug Use	Lower educational attainment
Smoking, early sexual activity & engaging in violence	Lower grades
Obese or overweight	Increased absenteeism Decreased test scores
Diabetes	Decreased attention and test scores
Poor oral health	Increased absenteeism
Asthma	Lower cognitive performance Increased school absenteeism
Pregnancy	Higher drop-out rates

Social and Emotional Climate

Efforts within a school to create a **positive** school culture and climate and a focus on social and emotional learning is linked to student gains and reduced risk:

Student Gains	Reduced Risks
Social & emotional skills	Conduct/disciplinary problems
Improved attitudes about self, others, & school	Aggression
Positive classroom behavior	Violent behavior
11 percentile-point gains on standardized achievement tests	Emotional distress
Sense of belonging, connection & engagement w/the school	

Physical Environment

A healthy and safe physical school environment (school building, the land, and surrounding area) promotes a student's ability to learn:

- ⇒ Increased attendance and academic achievement
in schools with full spectrum-light or full-spectrum with ultraviolet enhancement
- ⇒ Decreased absenteeism and increased academic achievement
when students feel safe
- ⇒ Decreased absenteeism
when indoor air quality is not a trigger for asthma or allergies

SIGNS OF PROGRESS (SOP) “FULLY MET” CRITERIA

(TO BE USED WITH IMPROVEMENT LOG: BASELINE & PROJECT COMPLETION)

STEP 1. Focus on Administrative Buy-in & Support to Develop School Capacity

1a. SOP: The SD’s vision/mission includes a statement affirming that the health and well-being of students and school staff is fundamental to student learning and academic achievement.

Evidence: Copy of vision/mission statement includes the intention of the above statement.

1b. SOP: WSCC responsibilities for school administration exist.

Evidence: Copy of job description, performance agreement, Local Wellness Policy (LWP) or signed School Health Involvement Agreement (SHIA) identifies WSCC responsibilities.

1c. SOP: School administration communicates regularly with the WSCC H&W Team.

Evidence: List methods and/or types of communication at least three times per school year.

1d. SOP: School administration participates in WSCC H&W programs and activities.

Evidence: List types of participation in H&W programs and activities.

1e. SOP: The LWP requires a H&W Team Leader and an active, functioning Team.

Evidence: LWP states the SOP requirement.

1f. SOP: The School Health Improvement Plan’s (SHIP) goal(s), objectives(s) and/or priorities are incorporated into the district’s or school’s improvement plan.

Evidence: The district’s or school’s improvement plan incorporates the SOP requirement.

1g. SOP: School and/or district administration identifies and secures funding for health programs, activities and services.

Evidence: List funded activities within the current or prior school year (SY) totaling at least \$5,000 (actual cost or in-kind value).

1h. SOP: School and/or district administration and the local BOE garner diverse community resources for WSCC H&W programs and activities that include but are not limited to: data collection and analysis, communication, supplies, space and professional development.

Evidence: List outreach to at least five (5) different community-based organizations (CBOs) to conduct on-site WSCC H&W programs and activities within the current or prior SY.

1i. SOP: There is a line item in the school budget for the costs (full or partial) of a WSCC H&W Team Leader to financially compensate this individual for their dedicated time and responsibilities.

Evidence: The H&W Team Leader receives an approved stipend for WSCC H&W responsibilities.

STEP 2. Identify a WSCC Coordinator, H&W Team Leader(s) & Develop Partnerships

2a. SOP: WSCC H&W Team Leader(s) and their tasks are identified.

Evidence: Copy of job description, performance agreement, LWP or signed SHIA that identifies WSCC responsibilities.

2b. SOP: The school promotes and recruits interested parents to participate in health education or training such as: *Parents as Champions (PAC) for Healthy Schools, Teen Speak*, SHIP activities (planning, implementation or evaluation); or, other health and wellness strategies as approved by the regional agency.

Evidence: *PAC* or *Teen Speak* training dates, # parents trained. If DOH grant applied for, focus of grant; identify SHIP activity(ies) and # of participating parents; or, identify other strategies of active engagement and # of parents engaged.

2c. SOP: The school promotes and recruits interested students to participate in: a Youth Advisory Board (YAB); SHIP activities (planning, implementation or evaluation); or, other youth-led health and wellness activities.

Evidence: YAB meeting dates, # participating youth, YAB activities; identify SHIP activity(ies) and # of participating youth; or, identify other strategies of active engagement and # youth engaged.

2d. SOP: Diverse community organizations participate in school health activities, programs and services.

Evidence: List school health activities, programs, and services conducted, on-site, by at least five (5) different CBOs within the current or prior SY.

STEP 3. Establish a District and/or School Health & Wellness (H&W) Teams

3a. SOP: The H&W Team is established and represented by administration, school staff, students, family and the community.

Evidence: Health and wellness team membership form lists member; group represented and contact information.

3b. SOP: The H&W Team represents all 10 WSCC components. (NACDD, p36)

Evidence: Health and wellness team membership form lists member, WSCC component represented and contact information.

3c. SOP: The H&W Team member activities are identified. See: Team Member Qualities and Activities.

Evidence: Signed SHIA by team members identifying H&W responsibilities.

3d. SOP: The H&W Team meets 4-6 times during the SY.

Evidence: Meeting dates/schedule for the SY, attendance sheet, meeting agenda and/or minutes from each meeting are disseminated to all Team members.

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3e. SOP: The H&W Team disseminates and communicates the SHIP to school administration and staff. See: Establish a H&W Team, Step 5.

Evidence: Methods include but are not limited to: print in school newsletter; e-mail blast; administration and staff meeting with SHIP agenda item and documentation of comments received; post SHIP on school website (provide URL for posting location); or, other school identified method.

3f. SOP: The H&W Team disseminates and communicates the SHIP to students and families. See: Establish a H&W Team, Step 5

Evidence: Methods include but are not limited to: print in school newsletter, e-mail blast; student council or other student group and PTO/PTA meeting with SHIP agenda item and documentation of comments received; post SHIP on school website (provide URL for posting location); send home hard copy with students; or, other school identified method.

STEP 4. Assess & Plan WSCC Efforts

4a. SOP: H & W Team completes CDC's School Health Index (SHI) assessment tool and the results are reviewed and approved by Team members.

Evidence: Copy of SHI Scorecard; Meeting minutes indicates date results reviewed, key discussion points and Team approval.

4b. SOP: Using results of the SHI assessment and/or other school identified health priorities, a SHIP is developed to address the identified health priorities.

Evidence: Copy of SHIP submitted to regional agency.

4c. SOP: Best practices and evidenced-based strategies are utilized in the SHIP.

Evidence: School identifies best practices and evidenced-based strategies used in SHIP with asterisk (*) and documents source.

4d. SOP: Local-level health and education data are used to document the health needs of students and/or school staff.

Evidence: School and/or district level data, CDC's Youth Risk Behavior Survey (YRBS) or NJ's Student Health Survey (SHS) results (high school only) or County Health Rankings data is used to support objective(s) in the SHIP.

4e. SOP: Health attitudes and behaviors of students and staff are considered using questionnaires or other tools.

Evidence: Date administered, copy of survey, questionnaire, in-person discussion questions or other tool used and the results; completed within the current or prior SY.

4f. SOP: Students' input on health and wellness issues is obtained using surveys, focus groups or other methods.

Evidence: Provide copy of tool used, and results completed within the current or prior SY.

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4g.SOP: Parents and families input on health and wellness issues is obtained using surveys, focus groups or other methods.

Evidence: Provide copy of tool used and results completed within the current or prior SY.

4h. SOP: A survey of school climate and culture is conducted with students, staff and families.

Evidence: Copy of survey and results conducted within the current or prior SY; list survey participants (students, staff, parents); identify external consultant, if appropriate; state action(s) identified or taken to address concerns.

4i. SOP: The H & W Team reviews the LWP and makes recommendations for updates and/or revisions.

Evidence: Meeting minutes indicate discussion points, proposed revisions and next steps. (e.g.: date to present at local BOE meeting)

4j. SOP: The H & W Team completes the *Inventory* and works to facilitate the coordination of all health-related committees in the school.

Evidence: A completed *Inventory* is submitted for review by regional agency; propose a structure that facilitates coordination amongst committees to improve efficiency, increase effectiveness, eliminate gaps and duplication of services.

4k. SOP: The district and/or school is assessing and planning a comprehensive staff wellness program.

Evidence: Utilizes CDCs Workplace Health Model and provides documentation of actions implemented in each of the following 5 categories:

- ⇒ Health related programs
- ⇒ Health related policies
- ⇒ Health benefits
- ⇒ Environmental supports
- ⇒ Comprehensive workplace health programs with community linkages

Step 5. Implement, Evaluate & Revise the SHIP

5a. SOP: Evaluation measures (process and outcome) are identified in the SHIP.

Evidence: SHIP identifies process and outcome evaluation measures. Process measures include the # of events, activities, programs and services conducted and the # of participants impacted. Process measures also includes any proof/evidence that an activity is completed. Outcome measures include changes in knowledge, attitudes, behaviors, skills, or other improvements in a health or a health condition such as absenteeism or student discipline.

5b. SOP: Evaluation measures (process and outcome) are reported.

Evidence: Results (process and outcomes evaluation measures) are reported annually to regional agency.

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5c. SOP: The H&W Team accomplishes the action steps in the SHIP, meeting timeline and budget requirements.

Evidence: Identify and list challenges to accomplishing timelines and budget and discuss potential action(s) to resolve with regional agency.

5d. SOP: The H&W Team continuously improves the SHIP by making annual revisions based on participant feedback and input from staff, administration, students and families.

Evidence: List and review comments, suggestions and other input collected with H&W Team; identify Team's response to each comment (eg: incorporated into SHIP or if not, why not?) Submit modified SHIP at least annually before end of SY.

Step 6. Reflect, Celebrate and Communicate Success/Impact

6a. SOP: Complete the Year End Summary (Step 6 Team Log, see Guide p58).

Evidence: Copy of Step 6 Log submitted to regional agency.

6b. SOP: H&W success stories are communicated via newsletter announcement, website posting, press release, presentation, infographic.

Evidence: Copy of at least one H&W success story submitted to regional agency.

6c. SOP: H&W Team accomplishments are celebrated.

Evidence: Meeting agenda or other documentation indicates celebration of accomplishments and/or certificates acknowledging achievements.

WEBSITES/RESOURCES

Click the names to be redirected to the resource website:

[Advocates for Children of New Jersey](#)

[Action for Healthy Kids](#)

[Alliance for a Healthier Generation](#)

[ASCD's Whole Child Approach and the Five Tenets:
Engaged, Challenged, Supported, Safe, and Healthy](#)

[CDC Parents for Healthy Schools](#)

[CDC School Health](#)

[CDC School Health Index](#)

[CDC SHI e-learning site](#)

[CDC WSCC 10 components](#)

[NACDD's The WSCC Model: A Guide to Implementation](#)

[National PTA: Healthier Lifestyles](#)

[School Health NJ](#)

[SPAN: Parents as Champions](#)

[Sustainable Jersey Schools](#)

[United Way of Northern New Jersey](#)

[WholeLife NJ; Eat, Play, Parent](#) app is your perfect healthy living, one stop shop, app. This app is an accumulation of resources in the areas of healthy meals, active living, important health topics and parenting tips and tools presented to you on one user-friendly platform. The [WholeLife NJ app](#) uses videos, articles, and interactive tools to deliver information in a multitude of ways. By personalizing the notification settings, users are able to stay alert and up to date on new material posted in the categories of their choice. The WholeLife NJ app is updated weekly providing users access to the most current and useful information right at their fingertips.

