

MSAD #22 Five-year Review Coordinated School Health Program Narrative 2001-2006

The mission of the Coordinated School Health Program is to provide a coordinated approach to school health that strives to improve our student's knowledge and behavior about health, as well as their capacity to learn through the support of families, communities and schools working together. This program is overseen by a School Health Advisory Council (since 2001) and supported by the Wellness Team for MSAD 22. Both groups report to the MSAD 22 School Board throughout each calendar year. The MSAD 22 School Health Advisory Council is made up of administrators, healthcare professionals, community members, food service personnel, nurses, students, staff and parents. There are 22 members.

The Wellness Team has been effective since 1991. The team has solidified over the years with members who are administrators, faculty, support staff and community members. Members regularly attend the Annual Wellness Conference supported by the Maine Department of Education. The development of a CSHP has married the function of these two groups and solidified their effort.

Chris Greenier, our food service director and wellness team co-leader, along with a very active District Wellness Team, works on planning nutrition activities, education and policy (nutrition and wellness). Nurses and administration help monitor accountability. Consulting community members raise awareness in the public and provide parent input. The CSHP structure has solidified over time through the original eight-component model and through the School Health Coordinator connecting people, providing resources and advocating for programs in the classroom and at the administrative level. Various personnel have taken over leadership. For example, our assistant superintendent and school resource officer oversee school climate and physical school environment issues through a district wide safety committee. Nurses help oversee the school counseling and behavior and mental health service programs such as Suicide Prevention and the Hampden Academy Response Team (HART program) which collaborates with Acadia Hospital.

Senior level support has been an integral part of the wellness success in MSAD 22. Richard Lyons, Superintendent of Schools, has been a public advocate for wellness by serving on a number of health related boards including the Acadia Hospital Board of Trustees, The Maine School Health Leadership Network, The Key Advisory Committee for Coordinated School Health Programs, The Maine State Legislature Committee to Study Public Health and the American Cancer Society State Advisory Cancer Control Task Force. Work on these boards has opened doors for opportunities for MSAD 22 to increase mental health services, promote cancer awareness and capitalize leadership in health promotion.

1. What are MSAD 22's major accomplishments regarding physical activity, nutrition and tobacco prevention? Describe one accomplishment related to another school health issue if possible.

The MSAD 22 School Board of Directors adopted wellness in their "Essential Behaviors and Outcomes" statement for all students. This statement reads in the MSAD 22 student handbook as "Effective learners monitor and balance their physical and emotional well-being." MSAD 22 Board of Directors has accomplished this for students by adopting a new comprehensive K-12 Health and Physical Education curriculum in the spring of 2004, increasing nursing time by 33% (since 2001) and implementing the middle level health curriculum at both middle schools (starting in 2002) with one certified health instructor and

another currently in the 2005-06 budget proposal. The Board of Directors has also embedded the wellness philosophy in the writing of their annual goals and objectives and has adopted Nutrition and Tobacco Policies. The High School graduation requirement for Health/PE has also increased to 2 full credits for the graduating class of 2008.

Nutrition Policy (adopted February 2004)

The Nutrition Policy was created to promote healthy eating throughout the school district. The policy regulates food and beverages sold or offered in all menus and student vending within the school district (adopted by the Board of Directors in February of 2004). MSAD 22 has a very involved Food Service Director, Chris Greenier, who is also a registered dietitian. She recently attended a national conference focused on treating overweight children and obesity prevention. She led a committee in writing the policy and the regulations. The MSAD 22 food service program is committed to offering appealing healthy choices that demonstrate the school district's commitment to health and wellness before, during and after the school workday.

Tobacco Policy (revision adopted January 2005)

MSAD 22 intends to provide a safe and hazard free work place that allows employees and students to be productive and protected. In order to reduce the high incidence of tobacco use, promote health and safety of all students and employees, and promote the cleanliness of all facilities, the Directors of MSAD 22 prohibit the use, distribution and sale of tobacco products in school buildings, on school grounds, on school buses and at school sponsored functions at all times by all persons.

This policy is enforced for community members, employees and students. Tobacco Free signage is posted on school buildings and posted on the grounds of our school campuses to reinforce this message to workers, students and the public. The Board of Directors adopted the revised policy and regulations in January of 2005. MSAD 22 also has a NOT program which is enforced in our alternative to suspension program for substances on campus.

Physical Activity

MSAD 22 collaborates with both Hampden Recreation Department and Newburgh and Winterport Recreation Departments to provide activities before and after school to the students and community. We have had exercise instruction in the middle school gymnasiums, volleyball, weightlifting, basketball, and walking programs at the High School, arts and crafts, and before and afterschool recreation programs at the elementary schools. The Sport Dome in Hampden is also used for soccer, baseball and other recreational pursuits by the schools and community. The Laura Hoyt Hampden Pool Facility is used for adapted physical education instruction for the school district program and adult and children free swim for the community. We have incorporated Maine in Motion, Move and Improve, CATCH programming, a Walking School Bus and TAKE TIME physical activities in our classrooms.

In 2001, A Wellness Day was created for the middle schools. The Wellness Team and the School Health Advisory Council utilized community healthcare agencies, teachers, administrators, support staff, high school students and community members to bring a full day of wellness with topics/activities that included healthy nutrition, substance abuse, mental health, fitness and recreation for all 6-8 students.

2. What did MSAD #22 accomplish regarding CSHE curriculum, professional development, and student assessment? Describe the process used to incorporate PANT concepts into your SAU aligned health curriculum.

The School Health Council has rallied for comprehensive k-12 health education for the last four years. As a result of trainings from the State Department of Education and lobbying with the curriculum coordinator to school board committees, health instruction has increased k-12. The process of assessing the last curriculum and instruction and revising the new one took three years of work from the School Health Council. Family Life education and Life Skills have been added.

In February of 2004, the School Board adopted a newly revised k-12 Health and PE curriculum that aligned with the Maine Learning Results. Included in this curriculum is middle level health instruction and as a result we have implemented health in both middle schools. One certified health teacher is employed for the middle level and another is on the budget proposal for this year. We have promoted professional development opportunities for health for all grade levels and enhanced supplies and instructional materials for health teachers, k-12. We have also completed a double scoring round for all k-12 assessments.

PANT is interlinked to youth, parent and community involvement in a variety of ways. Parent input and community input from the school board enhanced the importance of the new health and PE curriculum for k-12. Move and Improve is a community exercise program through Eastern Maine Medical Center and is facilitated for students and staff. The recreation departments collaborate with both teams to offer and promote services for afterschool programs. We are currently working on outdoor leadership programs that will be used in the schools and the community by sharing equipment and an 11 element ropes course located at the Wagner Middle School.

Health education reaches k-12 students and parents by promoting daily good health practice in our schools. We demonstrate to the community that we value the importance of health and physical education and the health and well-being of our youth. Many parents have been involved in health curriculum events such as the middle school Wellness Day, Family Life parent nights and plan with the School Health Advisory Council for physical activity events such as hiking trips and bike safety for the elementary schools. MSAD 22 also created and implemented a logic model for increasing nutrition education and physical activity.

3. What are the key factors that have contributed to your accomplishments?

The CSHP has increased collaboration amongst school employees, councils, students, administration and community partners. The staff wellness is carrying over to the classroom and networking has increased. Wellness is at the forefront of what we do and expect.

The position of school health coordinator is necessary to pull programs together. The Health Education program has improved tremendously k-12 with support in positions, credit increase and quality of programming (family life, concepts aligned with MLR). We have also been able to deliver Wellness days at the middle schools, supplemental community presentations and health curriculum materials k-12 that have enhanced delivery of material and the scope of what we are teaching.

The MSAD 22 school health council concluded that we could not disassociate the school health coordinator position with the changes that have occurred over the last 5 years. The position and the council have provided focus and time to put elements together. The council has also collected data and used the data as a benchmark to what we have advocated to put in place. We have also been able to put groups together to work on grants and awards totaling \$120,000.00. These include suicide prevention, worksite wellness, skin cancer prevention, homeland security, safe routes to school, Title IV safe and drug free schools and a monetary award from the Department of Education for Health Promotion and

Wellness.

Acadia Hospital has been a huge asset to MSAD 22. They help run our HART program at Hampden Academy provide a substance abuse counselor, staff for the drop-in center, and contribute to PAP. The University of Maine has assisted with data collection and some program administration at a reduced cost. The Maine Nutrition Network has provided resources, mini-grants and teacher trainings to staff and food service. The recreation departments have collaborated for before/after school programming and ideas. Public Safety and the municipalities have assisted with grants, classroom presentations and safety initiatives.

Policy is creating environmental change. We have a new Nutrition Policy in place and all of our food service staff received Healthy Edge training (10 hours) that focused on meal planning, nutrition education, the CSHP model and the role of food service in wellness. Our vending machines have been changed to healthy options and our wellness team has strengthened and grown. Other policy work includes a revision of our tobacco policy and we have increased nursing time by 33% and hired a certified health instructor at the middle level.

4. What barriers did you encounter? Describe overcoming barriers.

It has taken the full 5 years for the Coordinated School Health Program to become imbedded into the infrastructure of MSAD 22. We cannot be faced with dissolving funds and state support or we will lose a significant part of the work we have created. We have developed a sustainability plan but unfortunately without financial support our most impacting programs such as HART and our student wellness programs that include physical education and health curriculum will be minimized.

The evaluation procedure has been challenging at best. The original needs assessment that MSAD 22 faithfully completed for the state is now not being used for state information and advocacy. We have completed a 5-year post-assessment for our local use. The monitoring tool was challenging to navigate and in addition to completing that tool on a regular basis we were asked consistently by the state to fill out duplicate type information in paper surveys and portfolios. This has taken up a considerable amount of time. Many SAU's do not know how the state is going to use the material. One consistent evaluation tool would have been more efficient and regular summaries from the state would have been useful at the local level.

5. What are some lessons you learned about coordinating school health in MSAD 22? What key advise would you lend?

There is an expectation of excellence within the climate and culture of MSAD 22. Therefore, we started a CSHP under the precedent of a "can-do" attitude with a drive to succeed and to create the highest quality work possible. We feel our communication skills, initiative, focus, follow-through, creativity and our collaboration are our best assets. Administrative support is essential to success. The SAU has to have administrative back up.

6. What program decisions were made as a result of the CSHP needs assessment administration in MSAD 22? Describe changes in attitude and behavior over 5 years.

Our health team used a needs assessment in 2001 to survey teachers, students, parents and administrators in order to get an understanding of the prevalence and influence of health education and school climate. The results indicated that health was viewed as important but that it was not being delivered consistently k-12 and that climate changes could be

enhanced to promote healthy behaviors and attitudes. Since that survey, we have revised our health curriculum, implemented new resources for health curriculum instruction K-12, created a nutrition policy with district wide healthy snack days and promoted wellness activities for physical activity, tobacco prevention, substance abuse awareness, bike safety, and community service.

Also, community health professionals have assisted with adult education services, employee exercise groups and employee health risk appraisals. We are currently adding to our obesity prevention model with the help of healthcare professionals, parent and youth input. Our nutrition services are solidified with our nutrition policy that was written with community members and faculty and students. School counseling services have increased with the assistance of Acadia Hospital substance abuse counselors who work in our drop-in center for students and staff. Our safety committee is enhancing school climate by increasing school building safety and by working on grants for safety equipment like lighting and surveillance and utilizing a chemical safety program to clean up hazardous materials. The promotion of health and wellness penetrates every school building through policy, programs or the health and physical education curriculum. This creates a healthy environment for students, staff and community that MSAD 22 is very proud to offer. All of these components were indicated as needed in our 2001 assessment.