“The urgency to reverse childhood obesity for millions of children and teens drives us to seek innovative solutions. The Alliance’s Healthy Schools Program shows us that school-based interventions work, and that every school can find ways to create healthier environments for students and staff.”

President Bill Clinton,
Co-founder of the Alliance for a Healthier Generation

“We’re proud to work with thousands of schools across the nation that are integrating sustainable, healthy changes into their school days by using our Framework of Best Practices. The impact they are having on student health is positively affecting academic outcomes and life-long success.”

Dr. Howell Wechsler,
CEO of the Alliance for a Healthier Generation
EVERY DAY, 95 PERCENT OF SCHOOL-AGED KIDS AND TEENS ATTEND SCHOOL. ASIDE FROM HOME IT’S THE PLACE WHERE KIDS SPEND MOST OF THEIR TIME.

The Alliance for a Healthier Generation’s (the Alliance) Healthy Schools Program helps to create and sustain healthy environments where students, especially those in greatest need, can learn more and flourish. We are an evidence-based initiative that creates sustainable healthy change in schools and have a proven, positive impact on student health.

The Healthy Schools Program Framework of Best Practices identifies specific criteria that define a healthy school environment. Through an assessment tool and a customized action plan, the Framework helps schools work towards the Alliance’s National Healthy Schools Award. To earn the Award, schools must demonstrate implementation of specific best practices in each of the following modules that address school health:

- School Health and Safety Policies and Environment
- Health Education
- Physical Education and Other Physical Activity Programs
- Nutrition Services
- Health Promotion for Staff
- Family and Community Involvement

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Get Expert Advice Every Step of the Way

Behind the best practices and evidence-based recommendations is a team of national advisors ready to help your school implement a comprehensive wellness plan. Whether you are figuring out how to get started or getting to Gold, our team of experts is available for live technical assistance, professional training, and troubleshooting. Contact one of our national advisors or sign up for an upcoming training session to learn more:

HealthierGeneration.org/experts

SEAN BROCK
National Physical Education & Physical Activity Advisor for Let’s Move! Active Schools

CAROL CHONG
National Nutrition Advisor

STEPHANIE JOYCE
National Nutrition Advisor

MICHELLE OWENS
National Student & Employee Wellness Advisor

LISA PERRY
National Physical Education & Physical Activity Advisor

JILL TURLEY
National Nutrition Advisor

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National Youth Engagement Advisor

DANA ROBERTS
Content Support Manager
Greater Progress through Complementary Approaches

The Alliance for a Healthier Generation believes in the power of working with like-minded national school health organizations, as aligning our work can only multiply opportunities for success. The following pages describe our complementary approaches to helping schools build healthier environments.

**CDC’S SCHOOL HEALTH INDEX**
*Assess your school’s progress with the School Health Index*

After the Centers for Disease Control and Prevention (CDC) and the Alliance offered its users separate, yet similar, assessment tools for more than a decade, the CDC and the Alliance announced a unified assessment tool, the School Health Index (SHI), to guide school-based obesity prevention and health promotion.

The School Health Index was created by the Centers for Disease Control and Prevention and has been adopted by the Alliance for a Healthier Generation. The unified tool benefits its users by:

- Eliminating confusion about which evidence-based assessment tool to use
- Allowing for the monitoring and alignment of school-based health policies and practices with national surveillance systems
- Enabling better coordination of training and technical assistance across and within the CDC and the Alliance
- Increasing access to the Alliance’s Healthy Schools Program six-step process, which addresses additional areas of school need

The CDC retains the full comprehensive School Health Index, continuing to address all six health topics (nutrition, physical activity, unintentional injury and violence prevention, tobacco use prevention, asthma, and sexual health), which can be accessed at cdc.gov/healthyYouth.

The Healthy Schools Program website hosts a version of the School Health Index that includes only the nutrition and physical activity health topics, plus some cross-cutting school health questions, which can be accessed at Schools.HealthierGeneration.org.

**LET’S MOVE! ACTIVE SCHOOLS**
*Let’s Move! Active Schools follows the same Framework as the Alliance’s Healthy Schools Program, with a focus on physical education and activity.*

Schools enrolled in both the Healthy Schools Program and Let’s Move! Active Schools can:

- Use the same log-in information to register and sign in
- Work on both assessments simultaneously
- Import data from one assessment tool to another
- Upon assessment completion, be eligible for dual national recognition

For more information and to sign up, visit letsmoveactiveschools.org
Greater Progress through Complementary Approaches

USDA’S HEALTHIERUS SCHOOL CHALLENGE
The Alliance and the USDA have similar goals when it comes to school wellness: more fruits and vegetables, more whole grains, healthier snacks, more nutrition education, and increased physical activity throughout the day. That’s why the Alliance’s Healthy Schools Program and HealthierUS School Challenge (HUSSC) are now offering a streamlined approach so that schools can more easily earn two awards.

FUEL UP TO PLAY 60
The Alliance’s Healthy Schools Program and Fuel Up to Play 60 work side-by-side to create more opportunities for schools to achieve wellness while engaging students to become a part of the process.

The Alliance’s Healthy Schools Program provides a comprehensive school wellness framework complete with access to national experts, training, and technical assistance to help your school through the process every step of the way.

Fuel Up to Play 60 empowers youth to make a difference in their school nutrition and physical activity environment through grants, events, and a student-centric approach to youth engagement and leadership.

Learn more at HealthierGeneration.org/FUTP60

THE ALLIANCE’S HEALTHY SCHOOLS PROGRAM AND HUSSC ALIGNMENT
NEW FOR THE 2014-15 SCHOOL YEAR:
• National Healthy Schools Bronze Award schools automatically qualify for HUSSC Bronze certification
• HUSSC certified schools automatically qualify for National Healthy Schools Bronze Award in the following categories:
  • School Nutrition Services
  • Smart Snacks in School
  • Health/Nutrition Education
• Let’s Move! Active Schools schools automatically qualify for HUSSC Bronze in the following categories:
  • Physical Education
  • Physical Activity

No additional paperwork is required during the application process.

More information about our complementary work can be found at HealthierGeneration.org/HUSSC
Expert Panel Members

PEGGY AGRON
National Director, Healthy Schools
Kaiser Permanente

JULIA BAUSCHER
President
School Nutrition Association

JESSICA DONZE BLACK
Director
Kids’ Safe and Healthful Foods Project
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Directors of Health Promotion and Education

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SHELLIE PFHOL
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President’s Council on Fitness, Sport & Nutrition

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Superintendent
Norris School District, Nebraska

KIM STITZEL
Vice President, Preventive Health Markets
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TONY SWAN
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National Food Service Management Institute

ANNETTE WILSON
Coordinated School Health Administrator
Jackson-Madison County School System, Tennessee

FRAN ZAVACKY
Senior Program Manager
SHAPE America,
Society of Health and Physical Educators
BRONZE

- **Representative school health committee or team**: School has a representative committee or team that meets at least four times a year and oversees school health and safety policies and programs.

- **Local wellness policies**: School has implemented all of the following components of the district’s local wellness policy:
  - Nutrition education and promotion activities
  - Physical activity opportunities
  - Nutrition standards for all foods and beverages available on each school campus during the school day that meet or exceed the USDA’s requirements for school meals and competitive foods and beverages
  - Marketing and advertising of only those foods and beverages that meet the USDA Smart Snacks in School nutrition standards on school campus
  - Other school-based activities that promote student wellness
  - Permit parents, students, representatives of the school food authority, teachers of physical education, school health professionals, the school board, school administrators, and the general public to participate in the development, implementation, and review and update of the local wellness policy; regular reporting on content and implementation to the public (including parents, students, and community members)
  - Periodic measurement of school compliance with the local wellness policy and progress updates made available to the public

- **Designation of a lead school official to ensure compliance with local wellness policy**: By the start of the 2006-2007 school year, every school district participating in the federal meal program was required to establish a local school wellness policy. This requirement was updated in 2010 placing greater emphasis on evaluation and sharing progress of local wellness policy implementation with the public. Your school health team should review your district’s policy before completing this question.

- **Recess (Elementary only)**: Students are provided at least 20 minutes of recess during each school day, and teachers or recess monitors encourage students to be active. (This criteria is also required for Let’s Move! Active Schools recognition.)
  - **Recess should complement physical education class, not substitute for it.**

- **Access to free drinking water**: Safe, unflavored, drinking water is available throughout the school day at no cost to students. For example, students are allowed to bring filled water containers to class.
SMART SNACKS IN SCHOOL – NUTRITION STANDARDS FOR FOODS

Any food sold in schools must:
- Be a grain product that contains 50% or more whole grains by weight or have whole grains as the first ingredient; or
- Have as the first ingredient a fruit, a vegetable, a dairy product, or a protein food; or
- Be a combination food that contains at least ¼ cup of fruit and/or vegetable; or
- Contain 10% of the Daily Value (DV) of one of the nutrients of public health concern in the 2010 Dietary Guidelines for Americans (calcium, potassium, vitamin D, or dietary fiber).*
- If water is the first ingredient, the second ingredient must be one of the food items above.

Foods must also meet several nutrient requirements:
- Calorie limits:
  - Snack items: ≤ 200 calories
  - Entrée items: ≤ 350 calories
- Sodium limits:
  - Snack items: ≤ 230 mg**
  - Entrée items: ≤ 480 mg
- Fat limits:
  - Total fat: ≤ 35% of calories
  - Saturated fat: < 10% of calories
  - Trans fat: zero grams
- Sugar limit:
  - ≤ 35% of weight from total sugars in foods

*Beginning July 1, 2016, foods may not qualify using the 10% DV criteria.
**Beginning July 1, 2016, snack items must contain ≤ 200 mg sodium per item.

SMART SNACKS IN SCHOOL – NUTRITION STANDARDS FOR BEVERAGES

All schools may sell:
- Plain water (with or without carbonation)
- Unflavored low-fat milk
- Unflavored or flavored fat-free milk and milk alternatives permitted by National School Lunch Program/School Breakfast Program
- 100% fruit or vegetable juice
- 100% fruit or vegetable juice diluted with water (with or without carbonation), and no added sweeteners

There is no portion size limit for plain water.
Elementary schools may sell up to 8-ounce portions of milk and juice.
Middle schools and high schools may sell up to 12-ounce portions of milk and juice.

Additional beverage options for high school:
- No more than 20-ounce portions of:
  - Calorie-free, flavored water (with or without carbonation)
  - Other flavored and/or carbonated beverages that are labeled to contain < 5 calories per 8 fluid ounces or ≤ 10 calories per 20 fluid ounces
- No more than 12-ounce portions of:
  - Beverages with ≤ 40 calories per 8 fluid ounces, or ≤ 60 calories per 12 fluid ounces
SILVER

- Meets Bronze

- **Prohibit using physical activity as punishment:** School prohibits using physical activity and withholding physical education class as punishment. This prohibition is consistently followed.

- **Prohibit withholding recess as punishment (Elementary only):** School prohibits withholding recess as punishment. This prohibition is consistently followed.

- **Prohibit using food as reward or punishment:** School prohibits giving students food as a reward and withholding food as punishment. This prohibition is consistently followed.

- **USDA’s Smart Snacks in School nutrition standards* (parties and celebrations):** All foods and beverages served and offered to students during the school day meet or exceed the USDA’s Smart Snacks in School nutrition standards. This includes snacks that are not part of a federally reimbursed child nutrition program, birthday parties, holiday parties, and school-wide celebrations.

- **USDA’s Smart Snacks in School nutrition standards* (sold during the extended school day):** All foods and beverages sold to students during the extended school day meet or exceed the USDA’s Smart Snacks in School nutrition standards. This includes vending machines, school stores, and snack or food carts.

- **USDA’s Smart Snacks in School nutrition standards* (served and offered during the extended school day):** All foods and beverages served and offered to students during the extended school day meet or exceed the USDA’s Smart Snacks in School nutrition standards. This includes snacks that are not part of a federally reimbursed child nutrition program, birthday parties, holiday parties, and school-wide celebrations.

GOLD

- Meets Silver

- **Access to physical activity facilities outside school hours:** Indoor and outdoor physical activity facilities are open to students, their families, and the community outside school hours.

- **Making facilities open and available to students, their families, and the community outside of school hours can be conducted as a regular practice or through a formal, written joint or shared-use agreement. A joint-use or shared-use agreement is a formal agreement between a school or school district and another public or private entity to jointly use either school facilities or community facilities to share costs and responsibilities.

- **USDA’s Smart Snacks in School nutrition standards* (fundraising):** Fundraising efforts during and outside school hours sell only non-food items or only foods and beverages that meet or exceed the USDA’s Smart Snacks in School nutrition standards. This may include, but is not limited to, donation nights; cookie dough, candy, and pizza sales; market days; etc.

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“We talk with students about food and physical activity. And we have such a good rapport with kids here. We are like family.”

Terry Roberts,
Nurse Practitioner at a School-Based Health Clinic
Cabell-Midland High School, West Virginia
**BEST PRACTICES FOR**

**Health Education**

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**BRONZE**

- **Health education taught in all grades (Elementary only):** Students receive health education instruction in all grades.

- **Required health education course (Middle and High only):** School or district requires all students to take at least one health education course.

  - If school has more than four grade levels (e.g. 7-12) in same building answer this question instead: “Does the school require all students to take at least two health education courses?”

- **Essential topics on physical activity:** Health education curriculum addresses most of the following topics on physical activity:
  - The physical, psychological, or social benefits of physical activity
  - How physical activity can contribute to a healthy weight
  - How physical activity can contribute to the academic learning process
  - How an inactive lifestyle contributes to chronic disease
  - Health-related fitness, that is, cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition
  - Differences between physical activity, exercise, and fitness
  - Phases of an exercise session, that is, warm up, workout, and cool down
  - Overcoming barriers to physical activity
  - Decreasing sedentary activities, such as TV watching
  - Opportunities for physical activity in the community
  - Preventing injury during physical activity
  - Weather-related safety, for example, avoiding heat stroke, hypothermia, and sunburn while being physically active
  - How much physical activity is enough, that is, determining frequency, intensity, time, and type of physical activity
  - Developing an individualized physical activity and fitness plan

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"The nutrition education that our students receive through the Alliance’s Healthy Schools Program has helped prepare our students for the required menu pattern changes. We began making the required changes earlier than what was required and our student lunch participation has remained stable.

Susan Johnson,  
School Nutrition Director,  
Jackson-Madison County School System, Tennessee"

- Monitoring progress toward reaching goals in an individualized physical activity plan
- Dangers of using performance-enhancing drugs, such as steroids
- Social influences on physical activity, including media, family, peers, and culture
- How to find valid information or services related to physical activity and fitness
- How to influence, support, or advocate for others to engage in physical activity
- How to resist peer pressure that discourages physical activity

"Consider using CDC’s Health Education Curriculum Analysis Tool (HECAT), which is designed to help school districts and schools conduct a clear, complete, and consistent analysis of written health education curriculum. HECAT results can help districts and schools enhance, develop, or select appropriate and effective health education curricula. The HECAT assesses how consistent curricula are with national standards and can assist users in determining if the curriculum being analyzed is sequential."
Essential topics on healthy eating: Health education curriculum addresses most of these essential topics on healthy eating:

- The relationship between healthy eating and personal health and disease prevention
- Food guidance from MyPlate
- Reading and using USDA's food labels
- Eating a variety of foods every day
- Balancing food intake and physical activity
- Eating more fruits, vegetables, and whole grain products
- Choosing foods that are low in fat, saturated fat, and cholesterol and do not contain trans fat
- Choosing foods and beverages with little added sugars
- Eating more calcium-rich foods
- Preparing healthy meals and snacks
- Risks of unhealthy weight control practices
- Accepting body size differences
- Food safety
- Importance of water consumption
- Importance of eating breakfast
- Making healthy choices when eating at restaurants
- Eating disorders
- The Dietary Guidelines for Americans
- Reducing sodium intake
- Social influences on healthy eating, including media, family, peers, and culture
- How to find valid information or services related to nutrition and dietary behavior
- How to develop a plan and track progress toward achieving a personal goal to eat healthfully
- Resisting peer pressure related to unhealthy dietary behavior
- Influencing, supporting, or advocating for others’ healthy dietary behavior

For me, that’s an achievement and a success that our students are eating healthier and understand the importance of eating healthier—and so do the parents and our staff.

Sharon Foster,
Physical Education Teacher,
James Bowie Elementary School, Texas
BEST PRACTICES FOR
Health Education

SILVER/GOLD

- Meets Bronze/Silver

- **Sequential health education curriculum consistent with standards:** All teachers of health education use an age-appropriate sequential health education curriculum that is consistent with state or national standards for health education (see National Standards).

  ! Consider using CDC’s Health Education Curriculum Analysis Tool (HECAT), which is designed to help school districts and schools conduct a clear, complete, and consistent analysis of written health education curriculum. HECAT results can help districts and schools enhance, develop, or select appropriate and effective health education curricula. The HECAT assesses how consistent curricula are with national standards and can assist users in determining if the curriculum being analyzed is sequential.

- **Opportunities to practice skills:** All teachers of health education provide opportunities for students to practice or rehearse the skills needed to maintain and improve their health.

- **Professional development:** All teachers of health education participate at least once a year in professional development in health education.

NATIONAL STANDARDS FOR HEALTH EDUCATION

1. Students will comprehend concepts related to health promotion and disease prevention to enhance health.

2. Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

3. Students will demonstrate the ability to access valid information and products and services to enhance health.

4. Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

5. Students will demonstrate the ability to use decision-making skills to enhance health.

6. Students will demonstrate the ability to use goal-setting skills to enhance health.

7. Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

8. Students will demonstrate the ability to advocate for personal, family, and community health.
BRONZE & LET'S MOVE! ACTIVE SCHOOLS

- Minutes of physical education per week (Elementary only): All students in each grade receive physical education for at least 60-89 minutes per week throughout the school year.

- Years of physical education (Middle and High only): Students are required to take the equivalent to one academic year of physical education.

- Sequential physical education curriculum consistent with standards: All teachers of physical education use an age-appropriate, sequential physical education curriculum that is consistent with national or state standards for physical education (see National Standards).

- Health-related physical fitness: The school’s physical education program integrates all of the following components of the Presidential Youth Fitness Program:
  - Fitness assessment using Fitnessgram®
  - Professional development for physical education teachers on proper use and integration of fitness education, fitness assessment, and recognition
  - Recognition of students meeting Healthy Fitness Zones or their physical activity goals

- Promotes community physical activities: The school’s physical education program uses three or more methods to promote student participation in a variety of community physical activity options.

- Addresses special health care needs: The school’s physical education program consistently uses all or most of the following practices as appropriate to include students with special health care needs:
  - Encouraging active participation; modifying type, intensity, and length of activity if indicated in Individualized Education Plans, asthma action plans, or 504 plans
  - Offering adapted physical education classes
  - Using modified equipment and facilities
  - Ensuring that students with chronic health conditions are fully participating in physical activity as appropriate and when able

NATIONAL STANDARDS FOR PHYSICAL EDUCATION

A PHYSICALLY LITERATE INDIVIDUAL:

1. Demonstrates competency in a variety of motor skills and movement patterns.

2. Applies knowledge of concepts, principles, strategies, and tactics related to movement and performance.

3. Demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness.

4. Exhibits responsible personal and social behavior that respects self and others.

5. Recognizes the value of physical activity for health, enjoyment, challenge, self-expression, and/or social interaction.

- Monitoring signs and symptoms of chronic health conditions
- Encouraging students to carry and self-administer their medications (including pre-medicating and/or responding to asthma symptoms) in the gym and on playing fields; assisting students who do not self-carry
- Encouraging students to actively engage in self-monitoring (e.g., using a peak flow meter, recognizing triggers) in the gym and on playing fields (if the parent/guardian, health care provider, and school nurse so advise)
- Using a second teacher, aide, physical therapist, or occupational therapist to assist students, as needed
- Using peer teaching (e.g., teaming students without special health care needs with students who have such needs)
BEST PRACTICES FOR
Physical Education & Other Physical Activity Programs

Promotion or support of walking and bicycling to school: School promotes or supports walking and bicycling to school in six or more of the following ways:

• Designation of safe or preferred routes to school
• Promotional activities such as participation in International Walk to School Week, National Walk and Bike to School Week
• Secure storage facilities for bicycles and helmets (e.g., shed, cage, fenced area)
• Instruction on walking/bicycling safety provided to students
• Promotion of safe routes program to students, staff, and parents via newsletters, websites, local newspaper
• Crossing guards are used
• Crosswalks exist on streets leading to schools
• Walking school buses are used
• Documentation of number of children walking and/or biking to and from school
• Creation and distribution of maps of school environment (e.g., sidewalks, crosswalks, roads, pathways, bike racks, etc.)

Availability of before and/or after school physical activity opportunities: School offers opportunities for students to participate in physical activity either before and/or after the school day (or both), for example, through organized physical activities (such as interscholastic sports, physical activity clubs, intramural sports, before school physical activities) or access to facilities or equipment for physical activity.

Availability of physical activity breaks in classrooms: All students are provided opportunities to participate in physical activity breaks in classrooms—outside of physical education, recess, and class transition periods—on all or most days during a typical school week.

Physical activity breaks are actual breaks that occur in academic classrooms allowing students to take a mental and physical break from current academic tasks. These breaks can occur at any time during the school day, last for 5–30 minutes, and occur all at once or several times during school day.

Principal Mickey Komins at Anne Frank Elementary School in Philadelphia, PA instituted a before-school walking club in the schoolyard and after-school yoga and kickboxing classes for parents, students, and teachers.

SILVER

Meets Bronze

Minutes of physical education per week (Elementary only): All students in each grade receive physical education for at least 90–149 minutes per week throughout the school year.

Years of physical education (Middle and High only): Students are required to take more than one academic year of physical education.

Students active at least 50% of class time: Teachers keep students moderately to vigorously active for at least 50% of the time during most or all physical education class sessions.

Professional development for teachers: All teachers of physical education are required to participate at least once a year in professional development in physical education.

GOLD

Meets Silver

Minutes of physical education per week (Elementary only): All students in each grade receive physical education for at least 150 minutes per week throughout the school year.

Years of physical education (Middle and High only): Students are required to take physical education all years.

Licensed physical education teachers: All physical education classes are taught by licensed teachers who are certified or endorsed to teach physical education.
BEST PRACTICES FOR Nutrition Services

BRONZE

- Breakfast and lunch programs: School offers school meals (both breakfast and lunch) programs that are fully accessible to all students.

- Variety of foods in school meals: School meals include a variety of foods that meet six to eight of the following criteria:

  **LUNCH**
  - Go beyond the National School Lunch Program requirements to offer one additional serving per week from any of the three vegetable subgroups (e.g., dark green, red and orange, dry beans and peas)
  - Offer a different fruit every day of the week during lunch (100% fruit juice can be counted as a fruit only once per week)
  - Offer fresh fruit at least one day per week
  - Offer foods that address the cultural practices of the student population
  - Offer an alternative entrée option at least one time per week that is legume-based, reduced-fat dairy or fish-based (including tuna)
  - Offer at least three different types of whole grain-rich food items each week

  **BREAKFAST**
  - Offer at least three different fruits and vegetables each week (100% fruit juice can be counted as a fruit only once per week)
  - Offer fresh fruit at least one day per week

  A school meal is a set of foods that meets school meal program regulations. This does not include à la carte offerings.

- Promote healthy food and beverage choices using Smarter Lunchroom techniques: Healthy food and beverage choices are promoted through ten or more of the following techniques:
  - Whole fruit options are displayed in attractive bowls or baskets (instead of chaffing dishes or hotel pans)
  - Sliced or cut fruit is available daily
  - Daily fruit options are displayed in a location in the line of sight and reach of students
  - All available vegetable options have been given creative or descriptive names

- Daily vegetable options are bundled into all grab and go meals available to students
- All staff members, especially those serving, have been trained to politely prompt students to select and consume the daily vegetable options with their meal
- White milk is placed in front of other beverages in all coolers
- Alternative entrée options (e.g., salad bar, yogurt parfaits, etc.) are highlighted on posters or signs within all service and dining areas
- A reimbursable meal can be created in any service area available to students (e.g., salad bars, snack rooms, etc.)
- Student surveys and taste testing opportunities are used to inform menu development, dining space decor, and promotional ideas
- Student artwork is displayed in the service and/or dining areas
- Daily announcements are used to promote and market menu options

"After they liked something [in a focus group sampling new foods for the school menu], their only “homework” was to be an ambassador for that item. We hung up [a sign] in the cafeteria and said: This has the student health council’s stamp of approval. Give it a try!"

Jessica Johnson, District Leader and Food Service Director Sycamore Community Schools, Ohio
Annual continuing education and training requirements for school nutrition services staff:
All school nutrition program managers and staff meet or exceed the annual continuing education/training hours required by the USDA’s Professional Standards requirements. (Topics covered may include, but are not limited to, food safety and HACCP, nutrition standards updates in school meals, food sensitivities and allergies, customer service, or food production techniques.)

Silver

Meets Bronze

Venues outside the cafeteria offer fruits and vegetables: Most or all venues outside the cafeteria (e.g., vending machines, school stores, canteens, snack bars, or snack or food carts) where food is available offer fruits and non-fried vegetables.

Or, the school does not have any food venues outside the cafeteria (e.g., vending machines, school stores, canteens, snack bars, or snack or food carts)

Collaboration between nutrition services staff members and teachers: Nutrition services staff members use three or more of the following methods to collaborate with teachers to reinforce nutrition education lessons taught in the classroom:
• Participate in design and implementation of nutrition education programs

Gold

Meets Silver

Adequate time to eat school meals: Students have at least 10 minutes to eat breakfast and at least 20 minutes to eat lunch, counting from the time they are seated.

Farm to School activities: School is implementing four to five of the following Farm to School activities:
• Local and/or regional products are incorporated into the school meal program
• Messages about agriculture and nutrition are reinforced throughout the learning environment
• School hosts a school garden
• School hosts field trips to local farms
• School utilizes promotions or special events, such as tastings, that highlight the local/regional products

USDA’S HEALTHIER US SCHOOL CHALLENGE (HUSSC)
The Alliance and the USDA both have similar goals when it comes to school wellness: more fruits and vegetables, more whole grains, healthier snacks, more nutrition education and increased physical activity throughout the day. That’s why the Alliance’s Healthy Schools Program and HUSSC are working together to help you earn two awards with a streamlined approach.

NEW for the 2014-15 school year:
• National Healthy Schools Bronze Award schools automatically qualify for HUSSC Bronze certification.
• HUSSC certified schools automatically qualify for HSP Bronze in the following categories:
  • School Nutrition Services
  • Smart Snacks in School
  • Health/Nutrition Education
  • Let’s Move! Active Schools schools automatically qualify for HUSSC Bronze schools in the following categories:
    • Physical Education
    • Physical Activity
BEST PRACTICES FOR
Health Promotion for Staff

BRONZE

- Health assessments for staff members: School or district offers all staff members accessible and free or low-cost health assessments at least once a year.

- Programs for staff members on physical activity/fitness: School or district offers staff members accessible and free or low-cost physical activity/fitness programs.

- Modeling healthy eating and physical activity behaviors (this is also required for Let’s Move! Active Schools recognition): School uses 5 or more of the following strategies to support staff to model healthy eating and physical activity behaviors:
  - Provide staff with information about the importance of modeling healthy eating behaviors
  - Provide staff with information about the importance of engaging in physical activities with students
  - Encourage staff not to bring in or consume unhealthy foods and beverages in front of students, in classrooms, or areas common to both staff and students
  - Provide staff with examples of healthy foods and beverages to bring in or consume during the regular or extended school day
  - Provide staff with information or strategies on how to incorporate physical activity into classrooms
  - Encourage staff to use non-food items, activities, and opportunities for physical activity to recognize students for their achievements or good behavior

SILVER

- Meets Bronze

- Promote staff member participation: School or districts use three or more methods to promote and encourage staff member participation in its health promotion programs.

- Programs for staff members on healthy eating/weight management: School or district offers staff members healthy eating/weight management programs that are accessible and free or low-cost.

GOLD

- Meets Silver

- USDA’s Smart Snacks in School nutrition standards (foods and beverages served and sold to staff): All foods and beverages served and sold at staff meetings, school-sponsored staff events, and in the staff lounge meet USDA Smart Snacks in School nutrition standards.

“We’ve given them the tools they need, and they share ideas with each other. Now, everyone’s on board! I just walked down the hall and saw a teacher doing Zumba with her students.”

Susanne Carpenter,
Principal at Atherton Elementary School, Michigan
The focus on health and wellness at Northeast has been embraced by the community. It has been amazing to see the many partnerships from our families and local businesses. The investments in our kids through time and being active role models is a making a positive difference in the lives of our students.

Kimberly Norton,
Principal at Northeast Elementary Magnet School, Danville Community Consolidated School District No. 118, Illinois
Glossary

The following terms appear in the Healthy Schools Program Framework of Best Practices and the School Health Index assessment. The definitions are intended to clarify these terms and assist schools in effectively interpreting criteria.

**504 plans**: written descriptions of educational, health, and other related services or modifications needed to assist students with special needs who are in a regular educational setting

**À la carte**: a set of foods from which students can choose individual items that are not usually counted as part of a reimbursable meal

**Afterschool Snack Program**: a program offered by the USDA that offers cash reimbursement to help schools serve snacks to children after their regular school day ends

**All beverages offered/offered for sale**: drinks served or offered for sale to students at school outside of the school (reimbursable) meals program including in vending machines, à la carte lines, school stores, snack and other food carts and fundraisers

**All beverages served**: beverages served to students outside of the school (reimbursable) meals program at events such as school parties and classroom celebrations where students do not actively purchase the products but do consume them

**All competitive foods (and/or beverages) offered for sale**: items available at schools outside of the school (reimbursable) meals program including vending machines, à la carte lines, school stores, snack and other food carts, and fundraisers; any item that is offered for individual sale (even if the item is part of a school meal) is considered “competitive”; includes, for example, milk, juice, water, and side items

**At least 50% of class time**: at least half of the total time scheduled for a physical education class session

**Benefits of physical activity**: in health education, knowledge and skills that promote physical activity; not movement skills that are taught in physical education

**Branding and marketing of competitive foods and beverages**: the practice of using a company’s name or logo to create product brand recognition and influence purchasing; marketing includes product and brand placement (such as exposing students to advertising and actual products), promotions, and incentives used to encourage purchasing

**Chronic health conditions**: include asthma, diabetes, overweight/obesity, food allergies, anemia, eating disorders, epilepsy, and oral/dental conditions

**Competitive foods and beverages**: foods and beverages outside the school (reimbursable) meals program, including those offered in vending machines, à la carte, school stores, snack bars, canteens, classroom parties, classroom snacks, school celebrations, fundraisers, or school meeting

**Cultural practices**: shared, habitual activities of a community or group; culturally appropriate activities and examples may include:

- highlighting the contributions and skills of diverse groups of people (e.g., diversity in race, ethnicity, sex, gender identity, sexual orientation, religion, physical or mental ability, appearance, other personal characteristics)
- acknowledging, respecting, and appreciating student diversity
- validating and building students’ self-esteem and sense of culture and national background
- strengthening students’ skills to engage in intercultural interactions
- not stigmatizing or stereotyping individuals or groups
- building on the cultural resources of families
- featuring diverse groups of people in materials and presentations
Environment: the physical and aesthetic surroundings and the psychosocial climate and culture of the school; factors that influence the physical environment include the school building and the area surrounding it, any biological or chemical agents that are detrimental to health, and physical conditions such as temperature, noise, and lighting; the psychological environment includes the physical, emotional, and social conditions that affect the well-being of students and staff.

Extended school day: time during before and afterschool activities that includes clubs, intramural sports, band and choir practice, drama rehearsals, etc.

Farm to School: programs that bring locally or regionally grown produce into school cafeterias and that may include activities related to gardening, cooking, and agriculture and integration of food and nutrition education into the regular, standards-based curriculum.

Fitness assessment: includes a variety of health-related physical fitness tests that assess aerobic capacity; muscular strength, muscular endurance, flexibility, and body composition; scores from these assessments determine students’ overall physical fitness and suggest areas for improvement when appropriate, and aggregate data is used to modify instruction to meet the needs of the students.

Fitness education: instructional and learning process of acquiring values, knowledge, and skills; experiencing regular participation in physical activity; and promoting healthy nutritional choices to achieve life-enhancing health-related fitness.

FITNESSGRAM®: the assessment used by the Presidential Youth Fitness Program that measures aerobic capacity; muscular strength, endurance, and flexibility; and body composition and provides a report that gives a picture of a student’s overall fitness level that can be communicated with students and parents.

Fully accessible: the school (1) offers free and reduced-price meals for students who meet income requirements in a way that ensures these students are not identified by other students as recipients of these programs and (2) coordinates class and bus transportation schedules so that all students can eat breakfast and lunch at school.

Health assessments: might include:
- height and weight
- blood pressure
- cholesterol level
- blood sugar level
- physical activity participation
- dietary habits
- tobacco use
- alcohol and substance use
- safety (e.g., seat belts, helmets, smoke alarms, drinking and driving, coercive or abusive relationships)
- mental health
- confidential HIV counseling, testing, or referral for treatment and care
- sexual health, including testing and treatment for other STDs.
Glossary

Health education: a planned, sequential, K-12 curriculum that addresses the physical, mental, emotional, and social dimensions of health; designed to motivate and assist students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors; allows students to develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices; comprehensive curriculum includes a variety of topics such as personal health, family health, community health, consumer health, environmental health, sexuality education, mental and emotional health, injury prevention and safety, nutrition, prevention and control of disease, and substance use and abuse; provided by qualified, trained teachers

Health Education Curriculum Analysis Tool (HECAT): a curriculum analysis tool from the Centers for Disease Control and Prevention to help school districts and schools conduct a clear, complete, and consistent analysis of written health education curricula, based upon the national health education standards

Health promotion for staff: refers to activities that enable school staff to improve their health status, such as health assessments, health education, and health-related fitness activities; these activities encourage school staff to pursue a healthy lifestyle that contributes to their improved health status, improved morale, and a greater personal commitment to the school’s overall coordinated health efforts; this personal commitment often transfers into greater commitment to the health of students and creates positive role modeling

Health-related physical fitness: cardiovascular endurance, flexibility, muscular strength, muscular endurance, and body composition

Implementation: execution or accomplishment of a plan or policy; ensure actual fulfillment by concrete measures

Individualized physical activity and fitness plan: a written plan that contains:
  • assessment of fitness level (before beginning a new physical activity and fitness plan, individuals should assess their current level of fitness to help avoid injury)
  • long-term and short-term personal goals for participating regularly in physical activity and maintaining or improving health-related fitness
  • specific actions to achieve those goals
  • timeline for taking specific actions, assessing progress, and achieving goals
  • methods that will be used to record actions taken and assess progress
  • rewards for achieving goals

Interscholastic sports: refer to sports that a school sponsors and are competitive in nature

Licensed physical education teachers: educators who meet a state’s department of education requirements to hold a teaching license, certificate or endorsement

Marketing of food and beverages: marketing that includes product and brand placement (such as exposing students to advertising and actual products) and promotions and incentives used to entice purchasing

Moderate to vigorous physical activity: activities that cause an increase in heart rate, breathing, and body temperature
Glossary

**MyPlate**: a USDA initiative that illustrates the five food groups in a plate-shaped visual to help consumers make better food choices

**National/state standards for physical education**: content standards that define what a student should know and be able to do as result of a quality health education or physical education program and that provide a framework for developing realistic and achievable expectations for student performance at every grade level

**Non-fried food products**: food products that have not been pre-fried, flash fried, or par-fried during the manufacturing process, nor fried on-site before serving

**Opportunities for physical activity in the community**: activities such as organized sports, dance, yoga, martial arts, fun walk/run, community health fairs, and other special events that are provided by members or organizations in the school community

**Outside school hours**: the time before and after school and during evenings, weekends, and school vacations

**Physical activity**: bodily movement of any type that may include recreational, fitness and sport activities such as jumping rope, playing soccer, lifting weights, as well as daily activities such as walking to the store, taking the stairs, or raking the leaves

**Physical activity breaks**: planned, structured intervals throughout the school day when students are out of their seats and moving; does not include passing periods or recess

**Physical education**: structured physical education classes or lessons, not physical activity breaks or recess and not substitution of participation in a sport team, Reserve Officers’ Training Corps (ROTC), marching band, etc., for physical education course credit; is a planned, sequential, K-12 curriculum that provides cognitive content and learning experiences in a variety of activity areas, such as basic movement skills; physical fitness; rhythm and dance; games; team, dual, and individual sports; tumbling and gymnastics; and aquatics; quality physical education should promote each student’s optimum physical, mental, emotional, and social development, including sports that all students enjoy and can pursue throughout their lives

**Professional development**: specialized training designed to increase or enhance a teacher’s knowledge, skills, and effectiveness in a specific content area

**Reimbursable meals**: a combination of food items served to students at breakfast and/or lunch that meets both nutrition standards and calorie levels for the meal pattern specified in federal regulations and that are priced as a unit

**Representative**: may include school administrators, health education teachers, physical education teachers, mental health or social services staff members, nutrition services staff members, health services staff members, maintenance and transportation staff members, students, parents, community members, local health departments or organizations, faith-based organizations, businesses, and local government representatives
Representative school health committee or team: a working group of school staff, families, students, and community members convened to address pressing student health issues; members are representative of all segments of the community and school

Saturated fat: consists of triglycerides containing only saturated fatty acids, which have the maximum number of hydrogen atoms; mostly found in animal products such as meat, whole milk, butter, and lard

School meals: school-sponsored or district-sponsored programs that are designed to meet the current U.S. Department of Agriculture (USDA) School Meal Nutrition Standards; as mandated in the Healthy Hunger-Free Kids Act of 2010, the USDA established new meal patterns and nutrition standards for all school meals served in the National School Lunch Program and School Breakfast Program, key changes include:

- ensuring students are offered both fruits and vegetables every day of the week
- requiring that whole grain-rich foods be offered each week
- offering only fat-free or low-fat milk varieties
- establishing age-appropriate calorie limits for meals
- limiting the amounts of saturated fat, trans fats, and sodium

School parties: includes all celebrations held in the school during the regular and extended school day, including classroom parties and all school celebrations such as holiday parties

Sequential: a curriculum that builds on concepts taught in preceding years and provides opportunities to reinforce skills across topics and grade levels

Skills needed to maintain and improve health: a skill set that may include the following:
- critical thinking and problem solving skills
- decision-making and assessing consequences of decisions
- communication skills
- refusal skills
- expressing feelings in a healthy way
- articulating goals to be healthy
- accessing valid and reliable health information
- identifying and countering health-compromising marketing strategies (e.g., tobacco or coping with difficult personal situations such as negative peer pressure and family changes)
- managing anger
- building positive relationships
- reading food labels
- planning healthy snacks
- developing a safe, individualized physical activity plan
- wearing and correctly using protective equipment (e.g., bicycle helmet, seat belt, eye protection)
Glossary

**Smarter Lunchrooms**: The Smarter Lunchrooms Movement was started in 2009 with the goal of creating sustainable research-based lunchrooms that guide smarter choices. It is a grassroots movement of those concerned with the way children eat and wish to change these behaviors through the application of evidence-based lunchroom focused principles that promote healthful eating. The Smarter Lunchrooms Movement was created by the Cornell Center for Behavioral Economics in Child Nutrition Program and is funded by the USDA Economic Research Service/Food and Nutrition Service. The Alliance for a Healthier Generation is a partner in the movement.

**Special health care needs**: include learning disabilities, developmental disabilities, behavioral disorders, physical disabilities, temporary physical limitations, and chronic medical conditions such as diabetes, asthma, and scoliosis

**Trans fat**: byproduct of partial hydrogenation, a process in which hydrogen is added back into vegetable oil (polyunsaturated) to turn the oil into a more saturated fat source may be found in commercially prepared baked goods, snack foods, fried foods, and salad dressings

**Walking school bus**: when one or more adults walks a group of children to and from school; designed to increase physical activity and promote safety

**Wellness policy**: a district policy that addresses student health and wellness and a healthy school environment in accordance with federal and state regulations

**Whole grain-rich**: foods that contain 100% whole grain or contain a blend of whole grain meal and/or flour and enriched meal and/or flour of which at least 50% is whole grain; products must contain at least 50% whole-grains and the remaining grain, if any, must be enriched
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