



DISTRICT OF COLUMBIA

OFFICE OF THE STATE SUPERINTENDENT OF

**EDUCATION**

**2016-17 SCHOOL YEAR**

## **SCHOOL HEALTH PROFILE FORM**

---

### **Healthy Schools Act of 2010**

---

Under Section 602 of the *Healthy Schools Act of 2010* (L18-0209), each public school and public charter school within the District of Columbia is required to:

- 1.) **Complete and submit** the online School Health Profile (SHP) form to the Office of the State Superintendent of Education (OSSE).
- 2.) **Make the completed profile available to the public** by posting it online, if the school has a website, and making the information available to parents in the school's main office.

---

Any public school or public charter school that fails to complete and submit its SHP form to OSSE **on or before Feb. 15** of each year will be out of compliance with Section 602 of the Healthy Schools Act of 2010.

---

---

## Instructions

The online SHP form must be completed by each school. For example, if your local education agency (LEA) includes five campuses, each campus must complete an SHP.

---

OSSE recommends that one person at each school be responsible for disseminating the SHP form to school staff members (Health Teacher, Nurse, Food Services Director, etc.) and then collecting the data and submitting the form online.

---

Complete all sections of the form with responses for the 2016-2017 school year.

---

For definitions and clarifications, or more information on how to complete the online SHP form, please see our [Frequently Asked Questions \(FAQs\)](#) at the end of this document or in the green menu bar of the online application.

---

## Submission Deadline

The online form must be completed **on or before Feb. 15, 2017**. OSSE will post each completed SHP on the OSSE website within 30 days of receipt for public review. **If your school has not completed the form by Feb. 15, your school will be listed on the OSSE website as out of compliance with Section 602 of the *Healthy Schools Act of 2010*.** OSSE also reports compliance with the SHP to the Mayor, the DC Council, and the Healthy Youth and Schools Commission.

---

Once submitted, OSSE will also e-mail a PDF copy of the completed SHP to the contact you provide us in Section 1 of this form.

**The SHP form must be submitted through <https://octo.quickbase.com>**

- When completing the online form, please do not use commas, quotes, or press “enter” in text boxes.
- Due to skip patterns in the online form, you may not have to answer all the questions. For example, if your school does not have a website, you will move automatically to question 7.

### Need assistance with the online form?

**Call (202) 719-6500 | Email [OSSE.callcenter@dc.gov](mailto:OSSE.callcenter@dc.gov) | See FAQs in this doc**

## Section 1: School Profile

**1. Type of School\***

☒ Public School      ☐ Public Charter School      ☐ Private School

**2. LEA ID:** 1

**3. School Code:** 302

**4. Ward:** 4

**5. LEA Name\*** District of Columbia Public Schools

**5a. School Name\*** Raymond EC

**6. Does your school currently have a website?\***

☒ Yes      ☐ No

**6a. What is your school's website address?** <http://www.dcps.dc.gov>

**7. Current number of students enrolled\*** 611

**8. Grades Served. Select all that apply\***

<input checked="" type="checkbox"/> Pre-K	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> 7	<input type="checkbox"/> 11
<input checked="" type="checkbox"/> K	<input checked="" type="checkbox"/> 4	<input checked="" type="checkbox"/> 8	<input type="checkbox"/> 12
<input checked="" type="checkbox"/> 1	<input checked="" type="checkbox"/> 5	<input type="checkbox"/> 9	<input type="checkbox"/> Adult
<input checked="" type="checkbox"/> 2	<input checked="" type="checkbox"/> 6	<input type="checkbox"/> 10	<input type="checkbox"/> Other

**9. Contact Name\*** Natalie Hubbard

**9a. Contact E-mail\*** natalie.hubbard@dc.gov

**9b. Contact Job Title\*** Principal

*OSSE will contact this person if there are questions about the SHP. This person will automatically be added as a user for the 2017-18 HSA SHP and will receive a PDF copy of the completed HSA SHP via e-mail for posting per section 602(c) of the Healthy Schools Act of 2010.*

## Section 2: Health Services

**Recommended point of contact for this section: School Health Providers**

Helpful definitions: Nursing refers to registered nurses (RN) or licensed practical nurses (LPN). Allied health professional refers to nursing assistants, medical technicians, or anyone who can support a nurse; it does not refer to related service providers for purposes of special education.

**10. Do you have nursing and/or allied health professional coverage in your school?\***

☒

Yes

☐

No

**10a. Please state the coverage of nursing and/or allied health professional coverage in your school:\***

Nurse # full time (0 – 10) **0** # part time (0 – 10) **1**

Allied health professional # full time (0 – 10) **0** # part time (0 – 10) **0**

**10b. For the coverage you indicated in 10a, please state the funding source:\***

**Nurse**

Yes

No

**Allied health professional**

Yes

No

Self-funded

☐
☒

Self-funded

☐
☒

Provided by the Department of Health

☒
☐

Provided by the Department of Health

☐
☒

Other

☐
☒

Other

☐
☒

**11. What type(s) of health services does your school offer to students? *Select all that apply***

☒

Access and/or referrals to medical providers through a systematic process

☒

Prevention materials and resources for infectious diseases (HIV/AIDS, sexually transmitted infections, meningitis, etc.)

☒

Prevention materials and resources for chronic diseases (diabetes, obesity, asthma, etc.)

☐

Screening, testing, and/or treatment for infectious diseases (HIV/AIDS, sexually transmitted infections, meningitis, etc.)

☐

Screening, testing, and/or treatment for chronic diseases (diabetes, obesity, asthma, etc.)

☐

Other Specify

**12. How many of the following clinical staff are currently employed, work as a contractor, or volunteer at your school?\***

Psychiatrist	# full time(0 – 10):	<b>0</b>	#part time (0 – 10):	
Psychologist	# full time (0 – 10):	<b>1</b>	#part time (0 – 10):	<b>0</b>
Licensed Independent Clinical Social Worker (LICSW)	# full time (0 – 10):	<b>1</b>	#part time (0 – 10):	<b>0</b>
Licensed Professional Counselor (LPC)	# full time (0 – 10):	<b>3</b>	#part time (0 – 10):	<b>0</b>

**13. What type of training do you provide for each audience on your anti-bullying policy? *Select all that apply***

Staff	Yes	No
Professional Development (internal)	<input checked="" type="radio"/>	<input type="radio"/>
Webinars	<input checked="" type="radio"/>	<input type="radio"/>
Written Materials	<input checked="" type="radio"/>	<input type="radio"/>
Outside Organizations: Which one(s)?	<input type="radio"/>	<input checked="" type="radio"/>
Other	<input type="radio"/>	<input checked="" type="radio"/>

**Students**

Professional Development (internal)

Yes

☒

No

☐

Webinars

☐☒

Written Materials

☒☐Outside Organizations: Which one(s)? Federal Bureau of Investigation, MPD, and Georgia Avenue Collaborative☒☐

Other

☐☒**Parents/Community**

Professional Development (internal)

Yes

☒

No

☐

Webinars

☐☒

Written Materials

☒☐

Outside Organizations: Which one(s)?

☐☒

Other

☐☒

### Section 3: Health Education Instruction

***Recommended point of contact for this section: Health Education Teacher, Physical Education teacher***

#### **Important Definitions for this Section:**

**Health Education:** Health education is defined by the Centers for Disease Control and Prevention as education that consists of any combination of planned learning experiences that provide the opportunity to acquire information and the skills students need to make quality health decisions.

**Physical Education:** Physical education (PE) provides students with a structured, sequential, standards-based program of instruction designed to: develop knowledge on motor skills, health-related benefits of active living, and physical activity; increase self-esteem and social responsibility; build a foundation of practices that promote and facilitate the attainment of movement skills, fitness, and physical activities that can be maintained throughout life.

**Health Education Minutes:** This number should represent the average number of minutes over the course of the year. If a student only receives health education for one semester or one quarter, please average the minutes for the whole year. Do **NOT** include physical education instruction time in this figure. This average should only include time that a particular student in each grade would receive health education instruction taught with a curriculum specifically designed for health education. For this question, please indicate an average between 0 and 125 minutes of health education that your school provides per grade for every week of the school year.

**14. How many teachers instruct *only* health education in your school?\*(0 – 10):**      **0**

*Note: Please make sure teachers reported in questions 14, 15, and 16 are not counted for more than one time.*

**14a. Name of Health Education Instructor 1**

**14ai. Health Education Instructor 1 E-mail**

**14b. Name of Health Education Instructor 2**

**14bi. Health Education Instructor 2 E-mail**

**14c. Name of Health Education Instructor 3**

**14ci. Health Education Instructor 3 E-mail**

**15. How many teachers instruct *only* physical education in you school?\*(0 – 10):**      **0**

**15a. Name of Physical Education Instructor 1**

**15ai. Physical Education Instructor 1 E-mail**

**15b. Name of Physical Education Instructor 2**

**15bi. Physical Education Instructor 2 E-mail**

**15c. Name of Physical Education Instructor 3**

**15ci. Physical Education Instructor 3 E-mail**

**16. How many teachers instruct *both* health and physical education in your school?\*(0 – 10):** 1

**16a. Name of Dual Instructor 1**

**16ai. Dual Instructor 1 E-mail**

David Petersen

David.Petersen@dc.gov

**16b. Name of Dual Instructor 2**

**16bi. Dual Instructor 2 E-mail**

**16c. Name of Dual Instructor 3**

**16ci. Dual Instructor 3 E-mail**

**17. If your school partners with any outside programs or organizations to satisfy the health education requirements (including nutrition, alcohol, tobacco and other drugs, sexual health, oral health, etc.), please specify their name below.\***

☐ Name of agency or organization:

☒ No current partnership(s)

**18. For each grade span in your school, please indicate the average number of minutes per week during the regular instructional school week that students receive health education instruction:.\*^**

Grades: K – 5    Minutes/Week (0 – 125): 45

Grades: 6 – 8    Minutes/Week (0 – 125): 55

**19. Please indicate the average minutes per week of health education instruction that your school offers for high school students: Minutes/Week:**

**20. For the health topics listed, please specify which health education curriculum (or curricula) your school uses for instruction: *Select all that apply***

*Note: Please state the curriculum's full name. If teachers in your school create their own curricula/lesson plans, please include the resources, standards, and/or websites used to create the curriculum.*

**Grades: K – 5**

**No curriculum is used**

Mental and Emotional Health  
Curriculum: SPARK PE

☒☐

Safety Skills  
Curriculum: SPARK PE

☒☐

Human Body and Personal Health  
Curriculum: SPARK PE

☒☐

Disease Prevention  
Curriculum: SPARK PE

☒☐

Nutrition  
Curriculum: SPARK PE

☒☐

Alcohol, Tobacco and Other Drugs  
Curriculum:

☐☒

**Grades: 6 – 8**

**No curriculum is used**

Mental and Emotional Health  
Curriculum: SPARK PE

☒☐

Safety Skills  
Curriculum: SPARK PE

☒☐

Human Body and Personal Health  
Curriculum: SPARK PE

☒☐

Disease Prevention Curriculum: SPARK PE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nutrition Curriculum: SPARK PE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alcohol, Tobacco and Other Drugs Curriculum: SPARK PE	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Grades: 9 – 12**

**No curriculum is used**

Mental and Emotional Health Curriculum:	<input type="checkbox"/>	<input type="checkbox"/>
Safety Skills Curriculum:	<input type="checkbox"/>	<input type="checkbox"/>
Human Body and Personal Health Curriculum:	<input type="checkbox"/>	<input type="checkbox"/>
Disease Prevention Curriculum:	<input type="checkbox"/>	<input type="checkbox"/>
Nutrition Curriculum:	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol, Tobacco and Other Drugs Curriculum:	<input type="checkbox"/>	<input type="checkbox"/>

## Section 4: Physical Education Instruction

***Recommended point of contact for this section: Physical Education Teacher***

### **Important Definitions for this Section:**

**Physical Education:** Physical education provides students with a structured, sequential, standards-based program of instruction designed to: develop knowledge on motor skills, health-related benefits of active living, and physical activity; increase self-esteem and social responsibility; build a foundation of practices that promote and facilitate the attainment of movement skills, fitness, and physical activities that can be maintained throughout life.

**Physical Education Minutes:** This number should represent the average number of minutes over the course of the year. If a student only receives physical education for one semester or one quarter, please average the minutes for the whole year. Do **NOT** include health education instruction time in this figure. This average should only include time that students receive physical education instruction with a curriculum specifically designed for physical education. For this question, please indicate an average between 0 and 225 for grades K – 5 and between 0 and 300 for grades 6 – 8.

**Physical Activity:** Any bodily movement produced by the contraction of skeletal muscle that increases energy expenditure above a resting level. Physical activity can be repetitive, structured, and planned movement; leisurely; sports-focused; work-related; or transportation-related.

**Physical Activity Minutes:** This number should include the time that students are participating in moderate to vigorous physical activity. It should **NOT** include time devoted to administrative tasks, transitions, or breaks. The number reported in question 22 cannot exceed the number in question 22a. For this question, please indicate an average between 0 and 225 for grades K – 5 and between 0 and 300 for grades 6 – 8.

**21. What strategies does your school use, during or outside of regular school hours, to promote physical activity? Select all that apply**

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Active Recess           | <input checked="" type="checkbox"/> Movement in the Classroom | <input type="checkbox"/> Walk to School                   |
| <input checked="" type="checkbox"/> After-School Activities | <input checked="" type="checkbox"/> Athletic Programs         | <input checked="" type="checkbox"/> Safe Routes to School |
| <input type="checkbox"/> None                               | <input type="checkbox"/> Bike to School                       |   |
| <input type="checkbox"/> Other:                             |   |   |

**22. For each grade span in your school, please indicate the average number of minutes per week during the regular instructional school week that a student receives physical education instruction. This does NOT include recess or after school activities.\*^**

Grades: K – 5    Minutes/Week (0 – 225): **45**

Grades: 6 – 8    Minutes/Week (0 – 300): **55**

**22a. For each grade span that receives physical education instruction, please indicate the average number of minutes per week during the regular instructional school week devoted to actual physical activity within the physical education course. This does NOT include recess or after school activities.\*^**

Grades: K – 5      Minutes/Week (0 – 225):      **45**

Grades: 6 – 8      Minutes/Week (0 – 300):      **55**

**23. Please indicate the average minutes per week of physical education instruction that your school offers for high school students; average mins/week:**

**23a. Please indicate the average number of minutes per week during the regular instructional school week devoted to actual physical activity within the physical education course. This does NOT include recess or after school activities.\***

Grades: 9 – 12      Minutes/Week (0 – 300):

**24. Which physical education curriculum (or curricula) is your school currently using for instruction?**

*Note: Please state the curriculum's full name. If teachers in your school create their own curricula/lesson plans, please include the resources, standards, and/or websites used to create the curriculum.*

Grades: K – 5      Curriculum: SPARK PE

Grades: 6 – 8      Curriculum: SPARK PE

Grades: 9 – 12      Curriculum:

**25. Which physical activity curriculum (or curricula) is your school currently using for instruction?**

*Note: Please state the curriculum's full name. If teachers in your school create their own curricula/lesson plans, please include the resources, standards, and/or websites used to create the curriculum.*

Grades: K – 5      Curriculum: SPARK PE

Grades: 6 – 8      Curriculum: SPARK PE

Grades: 9 – 12      Curriculum:

**26. How many minutes per week do students get recess on average?\***

Grades: K – 5      Minutes/Week: **150**

Grades: 6 – 8      Minutes/Week: **100**

Grades: 9 – 12      Minutes/Week:

## Section 5: School Nutrition and Local Wellness Policy

**Recommended points of contact for this section: Food Services Director or Manager, Principal, Chair of School Wellness Council/Committee**

**27. Is cold, filtered water available to students during meal times?\***

☒

Yes

☐

No

**28. Where are fruits and/or non-fried vegetables available for students on school grounds?\*** *Select all that apply*

	Available free/at no cost	Available for purchase	Not available
A La Carte in cafeteria	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Near the cash register in the service line	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
By the entrée selections in the service line	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At the beginning of the lunch line in the service line	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Elsewhere on school grounds – where?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**29. When foods and/or beverages are offered at school celebrations, are fruits and/or non-fried vegetables provided?**

☒

Yes

☐

No

**30. How many vending machines are available to students?\*** (0 – 10): **0**

**30a. What hours are student vending machines available? *Select all that apply***

	Yes	No
Before and/or after school	<input type="radio"/>	<input type="radio"/>
During school hours	<input type="radio"/>	<input type="radio"/>
During school hours, excluding meal times	<input type="radio"/>	<input type="radio"/>
During school hours, only at meal times	<input type="radio"/>	<input type="radio"/>

**30b. What items are sold from student vending machines? *Select all that apply***

- |   |  |
|---|--|
| <input type="checkbox"/> 100% fruit and/or vegetable juice            | <input type="checkbox"/> Regular chips, pretzels and snack mixes |
| <input type="checkbox"/> Baked chips, lower calorie and/or fat snacks | <input type="checkbox"/> Sodas and/or fruit drinks               |
| <input type="checkbox"/> Fresh fruits and/or non-fried vegetables     | <input type="checkbox"/> Whole grain products                    |
| <input type="checkbox"/> Milk and dairy products                      | <input type="checkbox"/> Water                                   |
| <input type="checkbox"/> Other:                                       |  |

**31. If you have a school store, what are the hours of operation? *Select all that apply\****

- |   | Yes                   | No                    | N/A                              |
|---|-----------------------|-----------------------|----------------------------------|
| Before and/or after school                | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| During school hours                       | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| During school hours, excluding meal times | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| During school hours, only at meal times   | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

**31a. What food and/or beverages are sold in the school store? *Select all that apply***

- |   |  |
|---|--|
| <input type="checkbox"/> 100% fruit and/or vegetable juice            | <input type="checkbox"/> Regular chips, pretzels and snack mixes |
| <input type="checkbox"/> Baked chips, lower calorie and/or fat snacks | <input type="checkbox"/> Sodas and/or fruit flavored drinks      |
| <input type="checkbox"/> Fresh fruits and/or non-fried vegetables     | <input type="checkbox"/> Whole grain products                    |
| <input type="checkbox"/> Milk and dairy products                      | <input type="checkbox"/> Water                                   |
| <input type="checkbox"/> Other:                                       |  |

## Section 6: Distributing Information

***Recommended point of contact for this section: Principal, Business Manager, Director of Operations***

### **Important Definitions for this Section:**

Sustainable Agriculture: An integrated system of plant and animal production practices having a site-specific application that will, over the long-term: (a) Satisfy human food and fiber needs; (b) Enhance environmental quality and the natural resources base upon which the agriculture economy depends; (c) Make the most efficient use of nonrenewable resources and on-farm resources and integrate, where appropriate, natural biological cycles and controls; (d) Sustain the economic viability of farm operations and (e) Enhance the quality of life for farmers and society as a whole.

**32. Does your school have a wellness committee, school health council, or team?\***

☒

Yes

☐

No

**33. How are following items distributed at your school? *Select all that apply***

#### ***LEA's Local Wellness Policy***

☐

School Website

☐

School Cafeteria or Eating Areas

☒

To foodservice staff

☐

To students

☐

Other:

☒

School Main Office

☐

To parent/teacher organization

☐

To administrators

☐

This information is not available for distribution

☐

School does not have a Local Wellness Policy

#### ***School Menu for Breakfast and Lunch***

☒

School Website

☒

School Cafeteria or Eating Areas

☒

To foodservice staff

☒

To students

☐

Other:

☒

School Main Office

☒

To parent/teacher organization

☒

To administrators

☐

This information is not available for distribution

☐

School does not offer school menu

***Nutritional Content of Each Menu Item***

- |  |   |
|--|---|
| <input type="checkbox"/> School Website                              | <input checked="" type="checkbox"/> School Main Office                          |
| <input checked="" type="checkbox"/> School Cafeteria or Eating Areas | <input checked="" type="checkbox"/> To parent/teacher organization              |
| <input checked="" type="checkbox"/> To foodservice staff             | <input checked="" type="checkbox"/> To administrators                           |
| <input checked="" type="checkbox"/> To students                      | <input type="checkbox"/> This information is not available for distribution     |
| <input type="checkbox"/> Other:                                      | <input type="checkbox"/> School does not have nutritional content of menu items |

***Ingredients of Each Menu Item***

- |  |   |
|--|---|
| <input type="checkbox"/> School Website                              | <input checked="" type="checkbox"/> School Main Office                      |
| <input checked="" type="checkbox"/> School Cafeteria or Eating Areas | <input checked="" type="checkbox"/> To parent/teacher organization          |
| <input checked="" type="checkbox"/> To foodservice staff             | <input checked="" type="checkbox"/> To administrators                       |
| <input checked="" type="checkbox"/> To students                      | <input type="checkbox"/> This information is not available for distribution |
| <input type="checkbox"/> Other:                                      | <input type="checkbox"/> School does not have the ingredients of menu items |

***Information on where fruits and vegetables served in school are grown and whether growers are engaged in sustainable agriculture^ practices***

- |  |   |
|--|---|
| <input type="checkbox"/> School Website                              | <input checked="" type="checkbox"/> School Main Office                      |
| <input checked="" type="checkbox"/> School Cafeteria or Eating Areas | <input checked="" type="checkbox"/> To parent/teacher organization          |
| <input checked="" type="checkbox"/> To foodservice staff             | <input checked="" type="checkbox"/> To administrators                       |
| <input checked="" type="checkbox"/> To students                      | <input type="checkbox"/> This information is not available for distribution |
| <input type="checkbox"/> Other:                                      | <input type="checkbox"/> School does not have this information              |

**34. Are students and parents informed about the availability of vegetarian food options at your school?\***

- ☒ Yes      ☐ No      ☐ Vegetarian food options are not available

**35. Are students and parents informed about the availability of milk alternatives, such as soy milk, lactose free milk, etc., at your school?\***

- ☒ Yes      ☐ No      ☐ Milk alternatives are not available

## Section 7: Environment

***Recommended point of contact for this section: Principal, Lead Science Teacher***

Data from the School Health Profile will be used to complete the Environmental Literacy Indicator Tool, a biennial survey used to determine progress on environmental literacy goals in the Chesapeake Bay Watershed Agreement. In the future, compiled results will be available on the [chesapeakebayprogress.com](http://chesapeakebayprogress.com) website.

### **Important Definitions for this Section:**

School Gardens: outdoor spaces that engage students through hands-on lessons that enhance learning.

Meaningful Watershed Educational Experience (MWEE's): Provide students with a better understanding of the natural environment by connecting classroom learning with outdoor field investigations. MWEE's encourage students to define an environmental issue, investigate the issue by collecting data through outdoor field experiences, take action to address the environmental issue at the personal or societal level, and then analyze and evaluate the results of the investigation to communicate findings to an audience. More information about MWEE's can be found at [http://www.chesapeakebay.net/publications/title/meaningful\\_watershed\\_educational\\_experience](http://www.chesapeakebay.net/publications/title/meaningful_watershed_educational_experience).

**36. Does your school currently have a School Garden?\***<sup>^</sup>

☐

Yes

☒

No

**36a. Name of Garden Contact\*** FALSE

**36b. Garden Contact E-mail\*** FALSE

**37. Did any of your classes or student groups attend a farm field trip this year?\***

☒

Yes

☐

No

**37a. How many students attended a farm field trip?** 150

**37b. What farm(s) did the students visit? *Select all that apply***

☐

Alice Ferguson Foundation's Hard Bargain Farm

☐

Common Good City Farm

☐

Arcadia Center for Sustainable Food and Agriculture

☐

Red Wiggler Farm

☐

Calleva Farm

☐

Rocklands Farm

☐

City Blossoms Community Green Spaces

☐

Washington Youth Garden

☒

Other: Cox Farm

**37c. Was this trip funded through an OSSE Farm Field Trip grant?**

☐

Yes

☒

No

**38. Does your school offer an Environmental Science Class?\***

☐

Yes

☒

No

**38a. How many students are enrolled in this course in the 2016-17 school year?**

**39. Name of Lead Science Teacher/Environmental Literacy Instructor\***

**39a. Lead Science Teacher/Environmental Literacy Instructor E-mail\***

**40. Please select the environmental literacy topics currently addressed in your school. For each selection, indicate the course in which the topic is taught and the curriculum (or curricula) that your school is currently using for instruction:**

*Note: Please state the curriculum's full name. If teachers in your school create their own curricula/lesson plans, please include the resources, standards, and/or websites used to create the curriculum.*

**Grades: K – 5**

☐

**NONE**

**No curriculum is used**

Air (quality, climate change)

Course:

Curriculum:

☐

Water (stormwater, rivers, aquatic wildlife)

Course:

Curriculum:

☐

Land (plants, soil, urban planning, terrestrial wildlife)

Course:

Curriculum:

☐

Resource Conservation (energy, waste, recycling)

Course:

Curriculum:

☐

Health (nutrition, gardens, food)

Course:

Curriculum:

☐

Other: ( )  
Course:  
Curriculum:

☐

**Grades: 6 – 8**

☐ **NONE**

**No curriculum is used**

Air (quality, climate change)  
Course:  
Curriculum:

☐

Water (stormwater, rivers, aquatic wildlife)  
Course:  
Curriculum:

☐

Land (plants, soil, urban planning, terrestrial wildlife)  
Course:  
Curriculum:

☐

Resource Conservation (energy, waste, recycling)  
Course:  
Curriculum:

☐

Health (nutrition, gardens, food)  
Course:  
Curriculum:

☐

Other: ( )  
Course:  
Curriculum:

☐

**Grades: 9 – 12**

☐ **NONE**

**No curriculum is used**

Air (quality, climate change)  
Course:  
Curriculum:

☐

Water (stormwater, rivers, aquatic wildlife)  
Course:  
Curriculum:

☐

Land (plants, soil, urban planning, terrestrial wildlife)  
Course:  
Curriculum:

☐

Resource Conservation (energy, waste, recycling)  
Course:  
Curriculum:

☐

Health (nutrition, gardens, food)

Course:

Curriculum:

☐

Other: ( )

Course:

Curriculum:

☐

**Which of the following groups in your school participated in environmental education (EE) learning experiences provided by outside organizations or agencies?**

**41. Teachers of Grades K – 5**

☐ Yes ☒ No

**41a. Who was the provider?**

- ☐ Informal EE organization (e.g., Anacostia Watershed Society)
- ☐ Higher Education (e.g., University of the District of Columbia)
- ☐ Local Education Agency (e.g., DC Public Schools)
- ☐ State Education Agency (OSSE)
- ☐ Other District Agency (e.g., DC Department of Energy & Environment)
- ☐ Federal Program (e.g., Smithsonian Institution)
- ☐ Other, please list:

**42. Teachers of Grades 6 – 8**

☒ Yes ☐ No

**42a. Who was the provider?**

- ☒ Informal EE organization (e.g., Anacostia Watershed Society)
- ☐ Higher Education (e.g., University of the District of Columbia)
- ☐ Local Education Agency (e.g., DC Public Schools)
- ☐ State Education Agency (OSSE)
- ☐ Other District Agency (e.g., DC Department of Energy & Environment)
- ☐ Federal Program (e.g., Smithsonian Institution)
- ☐ Other, please list:

**43. Teachers of Grades 9 – 12**

☐ Yes ☐ No

**43a. Who was the provider?**

- ☐ Informal EE organization (e.g., Anacostia Watershed Society)
- ☐ Higher Education (e.g., University of the District of Columbia)
- ☐ Local Education Agency (e.g., DC Public Schools)
- ☐ State Education Agency (OSSE)
- ☐ Other District Agency (e.g., DC Department of Energy & Environment)
- ☐ Federal Program (e.g., Smithsonian Institution)
- ☐ Other, please list:

44. Administrators ☐ Yes ☐ No

44a. Who was the provider?

- ☐ Informal EE organization (e.g., Anacostia Watershed Society)
- ☐ Higher Education (e.g., University of the District of Columbia)
- ☐ Local Education Agency (e.g., DC Public Schools)
- ☐ State Education Agency (OSSE)
- ☐ Other District Agency (e.g., DC Department of Energy & Environment)
- ☐ Federal Program (e.g., Smithsonian Institution)
- ☐ Other, please list:

45. For each grade at your school, please indicate the level of participation in Meaningful Watershed Educational Experiences (MWEE) ^.

Grades: K – 5

- ☐ A system wide Meaningful Watershed Educational Experience is in place. Please describe (i.e., grade, description of unit, partnerships, etc.):
- ☐ Some classes participated in a Meaningful Watershed Educational Experience. Please describe (i.e., grade, description of unit, partnerships, etc.):
- ☐ No evidence that students in this grade participated in a Meaningful Watershed Educational Experience.

Grades: 6 – 8

- ☐ A system wide Meaningful Watershed Educational Experience is in place. Please describe (i.e., grade, description of unit, partnerships, etc.):
- ☐ Some classes participated in a Meaningful Watershed Educational Experience. Please describe (i.e., grade, description of unit, partnerships, etc.):
- ☐ No evidence that students in this grade participated in a Meaningful Watershed Educational Experience.

Grades: 9 – 12

- ☐ A system wide Meaningful Watershed Educational Experience is in place. Please describe (i.e., grade, description of unit, partnerships, etc.):
- ☐ Some classes participated in a Meaningful Watershed Educational Experience. Please describe (i.e., grade, description of unit, partnerships, etc.):
- ☐ No evidence that students in this grade participated in a Meaningful Watershed Educational Experience.

46. What practices is your LEA implementing related to sustainable, green schools? *Select all that apply*

- ☐ School-wide Recycling Program

- ☐ Lead testing of water
- ☐ On-site Composting
- LEED Certification Type: ☐ Silver ☐ Gold ☐ Platinum
- ☐ Project Learning Tree Green Schools
- ☐ National Wildlife Federation Eco-Schools
- ☐ Environmentally-friendly cleaning products
- ☐ Landscaping with native plants
- ☐ Stormwater reduction efforts (i.e., rain barrels, cisterns, rain gardens)
- ☐ Sprint to Savings/Green Schools Energy Challenge
- ☒ Other In progress

**47. What type of recycling hauling services does your school receive? *Select all that apply***

- ☐ Cardboard only
- ☐ Paper and cardboard only
- ☐ Mixed recyclables (plastic, metals, glass) only
- ☐ Co-mingled paper, cardboard, and mixed recyclables together ("single-stream")
- ☐ Organics
- ☐ Other
- ☒ None of these

**48. Does your school compost? *Select all that apply***

- ☐ Yes, we participate in an organics recycling (off-site composting) program
- ☐ Yes, on-site outdoors (e.g. in garden)
- ☐ Yes, on-site indoors (e.g. worm bin in classroom)
- ☐ Other method
- ☒ Don't Compost

**49. Does your school promote the Environmental Protection Agency's Indoor Air Quality Tools for Schools Program to reduce exposure to environmental factors that impact asthma among children and adults in public schools?**

- ☐ Yes
 ☒ No
 ☐ Don't know

**50. Does your school purchase environmentally-friendly cleaning supplies?**

- ☒ Yes
 ☐ No
 ☐ Don't know

**51. Does your school cleaning/maintenance staff follow green cleaning procedures?**

- ☐ Yes
 ☐ No
 ☒ Don't know



## Healthy Schools Act School Health Profile Frequently Asked Questions

1. **What is the Healthy Schools Act School Health Profile?** The School Health Profile (SHP) is an online questionnaire that must be completed by each District of Columbia public school and public charter school according to Section 602 of the *Healthy Schools Act of 2010* (HSA). The contact person listed in the SHP will receive a PDF copy of the Profile that is required to be made available online if the school has a website and available to parents or guardians in the main office. The Office of the State Superintendent of Education (OSSE) will post completed profiles on our website within 30 days of submission.
2. **How is the information in the SHP used?** Information collected in the SHP is used to inform OSSE, the Mayor, City Council, and the Healthy Youth and Schools Commission on the extent to which the Districts schools are achieving the goals of the HSA. A report is required by Section 405 of the HSA and is submitted by OSSE to the Mayor and City Council. Reports on the HSA may be found at: <http://osse.dc.gov/service/healthy-schools-act>.
3. **When is the SHP due?** The SHP is due by Feb. 15 of each year. The SHP should be submitted electronically no later than 5 p.m. on Monday, Feb. 15, 2017.
4. **Who should complete the SHP?** The Principal and contact person from the 2015-16 HSA SHP are automatically given access to the SHP; however, the SHP asks for information pertinent to the entire school. OSSE recommends that the Principal serve as the lead and distribute the printable SHP form to school staff who are most knowledgeable about each section (see chart below for suggestions). The Principal will then collect the information and enter the responses into the SHP online form. If the Principal wishes to designate another staff member as the lead, he/she must send an email to OSSE.callcenter@dc.gov and include the designee's name, title, and email address along with the local education agency and school name. Login information will then be sent directly to the designee.

Section	Recommended to be completed by
1: School Profile	Principal, Administrative Assistant
2: Health Services	School Health Providers
3: Health Education Instruction	Health Education Teacher
4: Physical Education Instruction	Physical Education Teacher
5: School Nutrition and Local Wellness Policy	Principal, Food Services Director or Manager, Chair of School Wellness Council/Committee
6: Distributing Information	Principal
7: Environment	Principal, Lead Science Teacher

**5. How do I complete the SHP online form?**

- a. Log in to Quickbase (<http://octo.quickbase.com>):
  - DC.gov Users: sign in with your network email and password.
  - If you do not have a dc.gov email but have used Quickbase before, use your previous login and password (usually your school email address and password).
  - If you have not used Quickbase before but have been granted access via an email notification from Quickbase, click the link in the email and follow the instructions.
- b. Click on the application “2016-17 OSSE HSA School Health Profile”.
- c. Select “Click to Complete” to be taken to your school’s profile.
- d. Once you start a page, you must complete the entire page to be able to save it; partially completed pages will not be saved.
- e. Click the pencil icon to edit your Profile and the eye icon to view the form as it will be submitted.
- f. Complete the questions on page 1. At the end of the page, click the “completed” box and then “save” to save the form.
- g. After clicking “save,” you will be taken to the top of page 1. Click “go to page 2” to move on. Once you are on page 2, click “edit” at the top right of the screen. Repeat for page 3.
- h. Many questions are required and you cannot save the form until all required questions on any one page are completed.
- i. Your Profile cannot be submitted unless all three “completed” boxes are checked.
- j. Do not use commas, quotes, or press “enter” in text boxes.
- k. Due to skip patterns, you may not answer all the questions. For example, if you do not have a school nurse, you will move automatically to question 12.

6. **Can I see all of the SHP questions in one document?** Yes, a printable version of the SHP is available in the Quickbase application and our webpage: <http://osse.dc.gov/node/722242>. We suggest that you share this with members of staff that are helping complete the Profile.

7. **What if I have other questions?** Please consult with other school staff if you are not sure of an answer on the profile. OSSE will hold a webinar to review the login process, how to request access for new users, navigate through the application, and answer certain questions.

A recording of the webinar will be made available at: <http://osse.dc.gov/node/722242>.

If this FAQ page does not answer your question, please call OSSE Customer Service Center at (202) 719-6500 Monday-Friday 8 a.m. – 5:30 p.m. or email [OSSE.callcenter@dc.gov](mailto:OSSE.callcenter@dc.gov).

## Definitions and Question Assistance

Q18, 19. Health Education: Health education is defined by the Centers for Disease Control and Prevention as education that consists of any combination of planned learning experiences that provide the opportunity to acquire information and the skills students need to make quality health decisions.

Q18, 19. Health Education Minutes: This number should represent the average number of minutes over the course of the year. If a student only receives health education for one semester or one quarter, please average the minutes for the whole year. Do **NOT** include physical education instruction time in this figure. This average should only include time that a particular student in each grade would receive health education instruction taught with a curriculum specifically designed for health education. For this question, please indicate an average between 0 and 125 minutes of health education that your school provides per grade for every week of the school year.

Q15, 22, 22a, 23, 23a, 24. Physical Education: Physical education provides students with a structured, sequential, standards-based program of instruction designed to: develop knowledge on motor skills, health-related benefits of active living, and physical activity; increase self-esteem and social responsibility; build a foundation of practices that promote and facilitate the attainment of movement skills, fitness, and physical activities that can be maintained throughout life.

Q22, 23. Physical Education Minutes: This number should represent the average number of minutes over the course of the year. If a student only receives physical education for one semester or one quarter, please average the minutes for the whole year. Do **NOT** include health education instruction time in this figure. This average should only include time that students receive physical education instruction with a curriculum specifically designed for physical education. For this question, please indicate an average between 0 and 225 for grades K – 5 and between 0 and 300 for grades 6 – 8.

Q21, 22a, 23a, 25. Physical Activity: Any bodily movement produced by the contraction of skeletal muscle that increases energy expenditure above a resting level. Physical activity can be repetitive, structured, and planned movement; leisurely; sports-focused; work-related; or transportation-related.

Q22a, 23a. Physical Activity Minutes: This number should include the time that students are participating in moderate to vigorous physical activity. It should **NOT** include time devoted to administrative tasks, transitions, or breaks. The number reported in question 21 cannot exceed the number in question 21a. The number reported in question 22 cannot exceed the number in question 22a. For this question, please indicate an average between 0 and 225 for grades K – 5 and between 0 and 300 for grades 6 – 8.

Q33. Sustainable Agriculture: An integrated system of plant and animal production practices having a site-specific application that will, over the long-term: (a) Satisfy human food and fiber needs; (b) Enhance environmental quality and the natural resources base upon which the agriculture economy depends; (c) Make the most efficient use of nonrenewable resources and on-farm resources and integrate, where appropriate, natural biological cycles and controls; (d) Sustain the economic viability of farm operations and (e) Enhance the quality of life for farmers and society as a whole.

Q36. School Gardens: Outdoor spaces that engage students through hands-on lessons that enhance learning.

Q45. Meaningful Watershed Educational Experience (MWEE's): Provide students with a better understanding of the natural environment by connecting classroom learning with outdoor field investigations. MWEE's encourage students to define an environmental issue, investigate the issue by collecting data through outdoor field experiences, take action to address the environmental issue at the personal or societal level, and then analyze and evaluate the results of the investigation to communicate findings to an audience. More information about MWEE's can be found at [http://www.chesapeakebay.net/publications/title/meaningful\\_watershed\\_educational\\_experience](http://www.chesapeakebay.net/publications/title/meaningful_watershed_educational_experience).