



DISTRICT OF COLUMBIA

OFFICE OF THE STATE SUPERINTENDENT OF

EDUCATION

2015-16 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 complete and submit the School Health Profile (SHP) form to the Office of the State Superintendent of Education (OSSE) on or before Feb. 15 of each year.

Schools are also required to post the information requested in this SHP form online, if the school has a website, and make the information available to parents in the 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

This SHP form must be completed by each school. For example, if your local education agency (LEA) includes five campuses, each campus must complete a SHP. Complete all sections of the form with responses for the 2015-16 school year, unless otherwise noted. Once submitted, OSSE will e-mail a PDF copy of the completed SHP to the contact listed in Section 1. Each school is required to post the SHP on the school website, if one exists, and make the information available to parents at the main office.

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. For more information on how to complete the SHP form, please see the Frequently Asked Questions (FAQs) at the end of this document. Words and questions with a "^" symbol have been defined and/or clarified in the Definitions and Question Assistance section, also at the end of this document.

Submission Deadlines Forms must be received on or before Feb. 15 of each year. 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.

When completing the online form, please do not use commas, quotes, or press “enter” in text boxes.

- The SHP form must be completed and submitted through <https://octo.quickbase.com>. Contact OSSE.callcenter@dc.gov for more information.
- Due to skip patterns, you may not answer all the questions. For example, if your school does not have a website, you will move automatically to question 7.

For assistance, please call (202) 719-6500 or e-mail OSSE.callcenter@dc.gov.

- For more information, see the FAQs page at the end of this document.

Section 1: School Profile

1. Type of School*

- Public School Public Charter School Private School

2. LEA ID: Pre-filled

3. School Code: Pre-filled

4. Ward: Pre-filled

5. LEA Name* _____

5a. School Name* _____

6. Does your school currently have a website?*

- Yes No

6a. What is your school's website address? _____

7. Current number of students enrolled* _____

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

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

9. Contact Name* _____

9a. Contact E-mail* _____

9b. Contact Job Title* _____

OSSE will contact this person if there are questions about the SHP. This person will automatically be added as a user for the 2016-17 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

10. Do you have nursing support for your students beyond a nurse provided by the Department of Health?*

- Full-time coverage Part-time coverage No additional coverage

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 _____

12. How many of the following clinical staff does your school currently employ?

- Psychiatrist ___ # full time ___ #part time
- Psychologist ___ # full time ___ #part time
- Licensed Independent Clinical Social Worker (LICSW) ___ # full time ___ #part time
- Licensed Professional Counselor (LPC) ___ # full time ___ #part time

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

Staff

- Professional Development (internal)
- Webinars
- Written Materials
- Outside Organizations Which Ones? _____
- Other _____

Students

- Professional Development (internal)
- Webinars
- Written Materials
- Outside Organizations Which Ones? _____
- Other _____

Parents/Community

- Professional Development (internal)
- Webinars
- Written Materials
- Outside Organizations Which Ones? _____
- Other _____

Section 3: Health Education Instruction

Recommended point of contact for this section: Health Education Teacher

Important Definitions for this Section:

Certified Teacher: Certified means a teacher that has credentials from an organization, association, college, or university to teach in a particular subject.

Highly Qualified Teacher: As per the US Department of Education, highly qualified means that a teacher must have 1) a bachelor's degree, 2) full state certification or licensure, and 3) prove that they know each subject they teach.

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 300 minutes of health education that your school provides per grade for every week of the school year.

14. How many certified^ or highly qualified^ health education teachers does your school currently have on staff?*

- None One Two Three or more

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 2 E-mail

15. 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

16. 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: _____

Grades: 6 – 8 Minutes/Week: _____

17. Please indicate the total units of health education instruction that your school offers for high school students: _____ Units

18. For the health topics listed, please specify which health education curriculum (or curricula) your school uses for instruction:

Note: Please state the name of the curriculum. Avoid “Internally created” and “OSSE/DC Standards”

Grades: K – 5

- Communication and Emotional Health Curriculum: _____
- Safety Skills Curriculum: _____
- Human Body, Personal Health, and Hygiene Curriculum: _____
- Human Growth and Development Curriculum: _____
- Disease Prevention Curriculum: _____
- Nutrition Curriculum: _____
- Alcohol, Tobacco and Other Drugs Curriculum: _____
- Healthy Decision Making and Goal-setting Curriculum: _____
- Sexuality and Reproduction Curriculum: _____
- Self-Management Skills Curriculum: _____
- Analyzing Family, Cultural, Media and Technological Influences Curriculum: _____
- Locate Health Information and Assistance Curriculum: _____

Grades: 6 – 8

- Communication and Emotional Health Curriculum: _____
- Safety Skills Curriculum: _____
- Human Body, Personal Health, and Hygiene Curriculum: _____
- Human Growth and Development Curriculum: _____
- Disease Prevention Curriculum: _____
- Nutrition Curriculum: _____

- Alcohol, Tobacco and Other Drugs Curriculum: _____
- Healthy Decision Making and Goal-setting Curriculum: _____
- Sexuality and Reproduction Curriculum: _____
- Self-Management Skills Curriculum: _____
- Analyzing Family, Cultural, Media and Technological Influences Curriculum: _____
- Locate Health Information and Assistance Curriculum: _____

Grades: 9 – 12

- Communication and Emotional Health Curriculum _____
- Safety Skills Curriculum: _____
- Human Body, Personal Health, and Hygiene Curriculum: _____
- Human Growth and Development Curriculum: _____
- Disease Prevention Curriculum: _____
- Nutrition Curriculum: _____
- Alcohol, Tobacco and Other Drugs Curriculum: _____
- Healthy Decision Making and Goal-setting Curriculum: _____
- Sexuality and Reproduction Curriculum: _____
- Self-Management Skills Curriculum: _____
- Analyzing Family, Cultural, Media and Technological Influences Curriculum: _____
- Locate Health Information and Assistance Curriculum: _____

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 400 minutes.

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. This number should not exceed minutes reported in Questions 41, 44a, or 44b. For this question, please indicate an average between 0 and 400 minutes.

19. How many certified^ or highly qualified^ physical education teachers does your school have on staff?*

None One Two Three or more

19a. Name of Physical Education Instructor 1

19ai. Physical Education Instructor 1 E-mail

19b. Name of Physical Education Instructor 2

19bi. Physical Education Instructor 2 E-mail

19c. Name of Physical Education Instructor 3

19ci. Physical Education Instructor 2 E-mail

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

- Active Recess
- Movement in the Classroom
- Walk to School
- After-School Activities
- Athletic Programs
- Safe Routes to School
- None
- Bike to School
- Other: _____

21. 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: _____

Grades: 6 – 8 Minutes/Week: _____

22. 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: _____

Grades: 6 – 8 Minutes/Week: _____

23. Please indicate the units of physical education instruction that your school offers for high school students: _____ Units

24. Please indicate the average number of minutes devoted to actual physical activity within the high school physical education course: _____ Minutes of physical activity/Physical education course

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

Note: Please state the name of the curriculum. Avoid “Internally created” and “OSSE/DC Standards”

Grades: K – 5 Curriculum: _____

Grades: 6 – 8 Curriculum: _____

Grades: 9 – 12 Curriculum: _____

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

Note: Please state the name of the curriculum. Avoid “Internally created” and “OSSE/DC Standards”

Grades: K – 5 Curriculum: _____

Grades: 6 – 8 Curriculum: _____

Grades: 9 – 12 Curriculum: _____

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

Grades: K – 5 Minutes/Week: _____

Grades: 6 – 8 Minutes/Week: _____

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

Foods and/or beverages provided through vending machines, fundraisers, or school stores must meet following requirements of the United States Department of Agriculture's Healthier US School Challenge Program at the Gold Award Level: Calories from total fat must be $\leq 35\%$ (excluding nuts, seeds, nut butters, and reduced-fat cheese); trans-fat must $< 0.5g$; calories from saturated fat must be $< 10\%$ (reduced-fat cheese is exempt); total sugar must $\leq 35\%$ by weight (including naturally occurring and added sugars); sodium must be $\leq 200mg$ per side dish and $\leq 480mg$ per main dish/entrée; and portion sizes must not exceed the serving size of foods served in the National School Lunch/School Breakfast Programs and/or exceed 200 calories.

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

- Yes No

29. Where fruits and/or vegetables available for students in the service line?* *Select all that apply*

- Near the cash register By the entrée selections
 At the beginning of the lunch line Other _____

30. How many vending machines are available to students?*

- 0 1 2 3 4 or more

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

- Before and/or after school
 During school hours
 During school hours, excluding meal times

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

- 100% fruit and/or vegetable juice Regular chips, pretzels and snack mixes
 Baked chips, lower calorie and/or fat snacks Sodas and/or fruit drinks
 Fresh fruits and/or non-fried vegetables Whole grain products
 Milk and dairy products Water

Other: _____

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

- Before and/or after school
- During school hours
- During school hours, excluding meal times
- N/A

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

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

32. From which of the following locations are students able to purchase fruits and/or non-fried vegetables? *Select all that apply*

- A La Carte in cafeteria
- Near the cafeteria cashier
- Elsewhere on school grounds Where? _____
- No fruits and/or non-fried vegetables available for student purchase

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

- Yes No

Section 6: Distributing Information

Recommended point of contact for this section: Principal

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.

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

LEA's Local Wellness Policy*

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

School Menu for Breakfast and Lunch*

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

Nutritional Content of Each Menu Item*

- | | |
|---|--|
| <input type="checkbox"/> School Website | <input type="checkbox"/> School Main Office |
| <input type="checkbox"/> School Cafeteria or Eating Areas | <input type="checkbox"/> To parent/teacher organization |
| <input type="checkbox"/> To foodservice staff | <input type="checkbox"/> To administrators |
| <input type="checkbox"/> To students | <input type="checkbox"/> This information is not available |

Other: _____

Ingredients of Each Menu Item*

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

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 type="checkbox"/> School Main Office |
| <input type="checkbox"/> School Cafeteria or Eating Areas | <input type="checkbox"/> To parent/teacher organization |
| <input type="checkbox"/> To foodservice staff | <input type="checkbox"/> To administrators |
| <input type="checkbox"/> To students | <input type="checkbox"/> This information is not available |
| <input type="checkbox"/> Other: _____ | |

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

- Yes No Vegetarian food options are not available

36. 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

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.

37. Does your school currently have a School Garden?*[^]

Yes No

37a. Name of Garden Contact* _____

37b. Garden Contact E-mail* _____

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

Yes No

38a. How many students attended a farm field trip? _____

38b. What farm(s) did the students visit? _____

38c. Was this trip funded through an OSSE Farm Field Trip grant? Yes No

39. Does your school offer an Environmental Science Class?*

Yes No

39a. How many students are enrolled in this course in the 2015-16 school year? _____

40. Name of Lead Science Teacher/Environmental Literacy Instructor

40a. Lead Science Teacher/Environmental Literacy Instructor E-mail

41. 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 name of the curriculum. Avoid "Internally created" and "OSSE/DC Standards"

Grades: K – 5

- 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: _____
- None

Grades: 6 – 8

- 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: _____
- None

Grades: 9 – 12

- 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: _____
- None

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

42. Teachers of Grades K – 5 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 6 – 8 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. Teachers of Grades 9 – 12 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. Administrators Yes No

45a. 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: _____

46. 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.

47. 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 _____

48. Has lead ever been found in the drinking water at your school?

- Yes
- No
- Never tested
- Don't know

48a. What was done to remediate the lead situation? _____

49. Which of these materials does your school recycle? *Select all that apply*

- Aluminum
- Cardboard
- Food waste
- Glass
- Paper
- Plastics
- None

50. Where does your school compost? *Select all that apply*

- Outside on school grounds
- Inside in classroom worm bins
- Other method Please Describe _____
- Don't Compost

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, 2016.

4. **Who should complete the SHP?** The Principal and contact person from the 2014-15 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' 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 “2015-16 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, and how to request access for new users, navigate through the application, and answer certain questions. Click the link below to register:

Wednesday, Jan. 13, 2016 10 a.m. – 11 a.m.

Register: <https://attendee.gotowebinar.com/register/5616289273412942338>

A recording of the webinar will be made available at: <http://osse.dc.gov/node/985562>

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.

Definitions and Question Assistance

Q14. Certified Teacher: Certified means a teacher that has credentials from an organization, association, college, or university to teach in a particular subject.

Q14. Highly Qualified Teacher: As per the US Department of Education, highly qualified means that a teacher must have 1) a bachelor's degree, 2) full state certification or licensure, and 3) prove that they know each subject they teach.

Q16, 17. 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 300 minutes of health education that your school provides per grade for every week of the school year.

Q19. Certified Teacher: Certified means a teacher that has credentials from an organization, association, college, or university to teach in a particular subject.

Q19. Highly Qualified Teacher: As per the US Department of Education, highly qualified means that a teacher must have 1) a bachelor's degree, 2) full state certification or licensure, and 3) prove that they know each subject they teach.

Q21, 23, 25. 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.

Q21. 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 400 minutes.

Q20, 22, 24, 26. 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.

Q22, 24. 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. This number should not exceed minutes reported in Questions 41, 44a, or 44b. For this question, please indicate an average between 0 and 400 minutes.

Q34. 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.

Q37. School Gardens: outdoor spaces that engage students through hands-on lessons that enhance learning.

Q46. 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.