



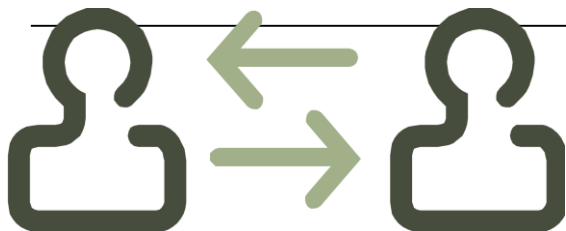
# Acronym Soup: Translating ESSA, LWP, ETC. for Health Champions

March 3, 2017

# Welcome

## Guess the Acronym!

- CDE
- CDPHE
- HCPF
- ESEA
- CASB
- CASE
- BOCES
- WSCC
- SHIP
- SIP
- UIP
- IEP



# CEI's Health and Wellness Initiative



**Strategically Align H&W Efforts To Boost Academic Performance For All Students**

# ESSA 101

- Bi-partisan bill passed in December 2015
- Replaces No Child Left Behind (NCLB)
- Governs all aspects of the education system
- Major changes:
  - “Equity”
  - Point of Control
  - “Well-rounded Education”



# Underlying Impact on Public Health

- Education laws help shape the social and economical environment
- ESSA includes provisions aimed directly at:
  - Health, mental health, safety
- ESSA has equitable education opportunities for all:
  - Economical disadvantages, racial and ethnic groups, disabilities, ELLs, genders, migrant, rural and homeless



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# Colorado ESSA State Plan Timeline



**COLORADO**  
Department of Education

Timeline updated 11/30/16



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# Listening and Feedback Opportunities:

- Listening Tours
- Hub/Spoke Committees
- ESSA Summits (June 2016 and January 2017)
- Public Comment Period
  - **Open now on CDE's website!**
  - <https://www.cde.state.co.us/fedprograms/essa/stateplanfeedback>





# Colorado Hub and Spoke Committees



ESSA  
LISTENING  
TOUR  
INPUT

## APPROVAL\*

- Colorado Department of Education
- Governor's Office
- State Board of Education
- ESSA Committee of Practitioners

\* List of approvers is dictated in the federal law.

## CRITICAL PARTNERSHIPS FOR INPUT THROUGHOUT THE PROCESS

- General Assembly
- School Districts
- Education organizations
- Advocacy Groups
- Parents, students & community



# ESSA Opportunities for School Health

## Title I

- School-wide programs & targeted assistance (40%+ FRL)
- Well-rounded education (replaces “core”)
  - Definition includes health education and PE

## Title II

- Applies to ALL school staff
- Broader definition for professional development



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# ESSA Opportunities for School Health

## State Accountability Systems

- Current Colorado System:
  - Academics
  - Academic Growth
  - Academic Growth Gaps
  - Post-Secondary or Workforce Readiness
- MUST ADD A 5<sup>th</sup> INDICATOR
  - Non-Academic (measure of school quality or success)
    - Chronic Absenteeism
    - Post-Secondary and Workforce Readiness (PWR)



# ESSA Opportunities for School Health

## Title IV

- Part A, Student Support and Academic Enhancement
  - Well-rounded Education – 20%
  - Safe and Healthy Students – 20%
  - Effective Use of Technology – 15%
- Part B, 21<sup>st</sup> Century Community Learning Centers
  - School-community Partnerships
  - Funds afterschool programs – includes nutrition education and physical activity
- Needs Assessment and Implementation Plan



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# HEALTHY KIDS COLORADO SURVEY

## Survey Topic Areas

### Protective Factors

- Trusted Adults
- School/Community Involvement
- Access to health care

### Risk Behaviors

- Alcohol, marijuana, tobacco, substance abuse
- Driving while texting/under the influence

### Mental Health

- Depression
- Suicide
- Bullying

### Health Behaviors

- Nutrition and Physical Activity
- Sexual Health (High School Only)

## School Health Assessment of Policies and Practices

Comprehensive  
of all school  
health  
components

Streamlines  
how data are  
collected and  
reported

Developed and  
informed by  
multiple  
stakeholders

Administered  
statewide to all  
school-levels

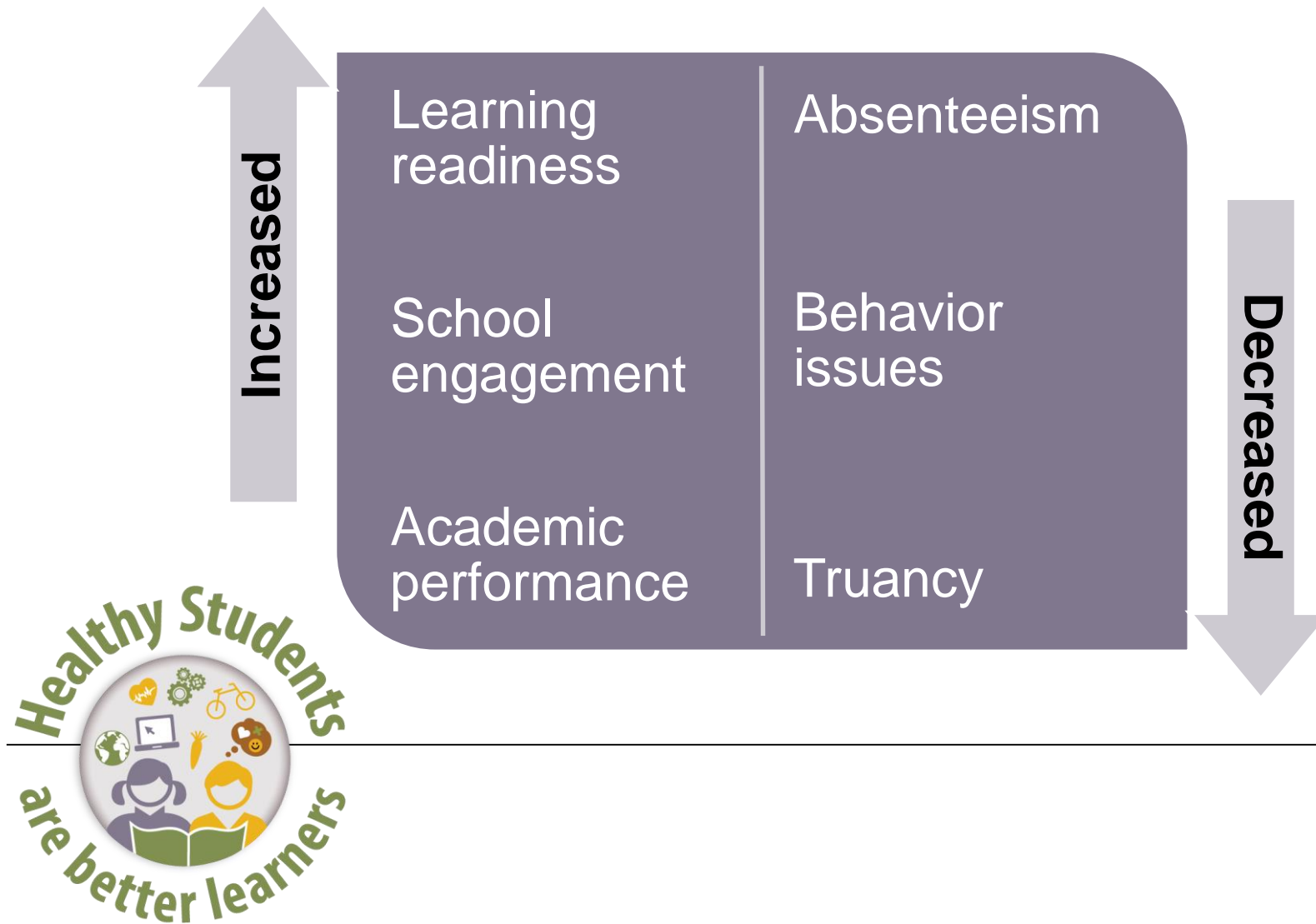
Used to inform  
improvements  
to school health  
efforts

# Unified Improvement Planning (UIP)

<b>Alignment</b>	A system to align improvement planning requirements for state and federal accountability into a “single” plan.
<b>Documentation</b>	A common format for schools and for districts to document improvement planning efforts. Schools/districts on accountability clock must demonstrate a coherent plan for dramatic change and adjustments over time. Reviews conducted by CDE and the State Review Panel.
<b>Transparency</b>	A process for including multiple voices, including staff, families and community representatives. Plans are also posted publicly.
<b>Best Practice</b>	A statewide strategy to promote improvement planning based on best-practice, including use of state and local data and engagement in a continuous improvement cycle.
<b>Support</b>	A mechanism for triggering additional supports through CDE (especially for schools/districts on accountability clock).



# Why incorporate Health and Wellness?





# Why incorporate Health and Wellness?

- ➡ ESSA State Plan will drive school- and district-level priorities and funding allocation.
- ➡ What is included in this plan is what gets measured and accomplished on an ongoing basis.
- ➡ Health is foundational to a student's ability to learn and this lends the clout for integration.



# Next Steps and Implementation

- **Help shape what next school year will look like for you...**
  - Call for continued collaboration and ensure work is informed by the field
  - Create awareness around new opportunities
  - Implementation will occur at district and school-building level
    - Local policies are vital to this process



# LOCAL SCHOOL WELLNESS POLICY

Final 2016 Rules



➔ #COHealthySchools

# WHAT IS A LOCAL WELLNESS POLICY (LWP) AND WHY?

- Written document that guides LEA's efforts to establish a school environment that promotes student health, well being, and ability to learn
- Established by Women Infant and Children's Act of 2004
- Further strengthened by reauthorization of Healthy Hunger Free Kids Act of 2010
- Responsibility of LEA's so unique needs can be addressed



# LWP Final Rule

- Published in the Federal Register on July 21<sup>st</sup>, 2016
- During 2016-17 school year, LEA's must begin developing a revised local school wellness policy
- LEA's must fully comply with requirements of the final rule by **June 30<sup>th</sup>, 2017**



# Major Changes

- Stakeholders\* must be permitted to participate in the development, implementation, review, and update of the local wellness policy.
- Identify one or more LEA and/or school official(s) that will ensure each school complies with the policy.
- Inform and updating the public about the content and implementation of the local wellness policy.

\***Stakeholders** = parents, students, representatives of the school food authority, teachers of physical education, school health professionals, the school board, school administrators, and the general public



# Major Changes Cont'd

## The LWP must include:

### 1. Goals for:

- a) Nutrition promotion and education
- b) Physical activity
- c) Other school-based activities that promote student wellness

### 2. **Nutrition guidelines** for all foods/beverages **sold** on the school campus during the school day.





# Major Changes Cont'd

## The LWP must include:

3. Policies for foods/beverages **available** on the school campus during the school day.
4. Policies for food and beverage **marketing**.
5. Description of:
  - a) **Public involvement**
  - b) **Public updates**
  - c) **Policy leadership**
  - d) **Evaluation plan**



# Major Changes cont'd

- Evaluation
  - All LEAs must assess their wellness policy at least once every three years on -
    - The extent to which schools are in compliance with the district policy;
    - The extent to which the local wellness policy compares to model local school wellness policies; and,
    - The progress made in attaining the goals of the local wellness policy.
  - LEAs must make this assessment available to the public.



# Resources and More Information

- [CDE's Office of School Nutrition](#)
- [CASB](#)
- [USDA](#)
- [Federal Register](#)
- [CEI's Health and Wellness Resources](#)
- [Poudre School District LWP and Implementation Plan](#)



# Thank you!

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