

Policy Component: Nutrition Education

Sample Goals and Activities

Goal # 1 **Students in kindergarten through grade 12 will receive a comprehensive program in health education focused on the skills needed to adopt healthy eating behaviors and lifelong wellness practices.**

Activities:

- 1.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 1.2 Skills-based nutrition education, as a part of a dedicated, stand-alone, term-long comprehensive health education program, is provided to every student at every grade level PreK-8.
- 1.3 Skills-based nutrition education, as a part of a dedicated, stand-alone, term-long comprehensive health education program, is provided to every student at the high school level annually (1/2 credit per year).
- 1.4 Planned instruction is aligned to the national and state health education standards.
- 1.5 Nutrition education is culturally relevant and teaches students about cross-cultural nutrition.
- 1.6 Instruction is aligned to the Centers for Disease Control and Prevention’s *Characteristics of Effective Health Education Curricula*.

Goal # 2 **All schools will have highly-qualified teachers who are adequately prepared and who participate in regular professional development activities to effectively deliver nutrition education in the context of comprehensive school health education.**

Activities:

- 2.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 2.2 All teachers who teach health education receive annual professional development on health education, current nutrition information, and best educational practices.
- 2.3 All schools will have highly-qualified teachers who are adequately prepared and who participate in regular professional development activities to effectively deliver nutrition education in the context of comprehensive school health education.

Goal # 3 **Schools will collaborate with community agencies to enhance nutrition education efforts.**

Activities:

- 3.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 3.2 Food and Nutrition Services and other community agencies collaborate with teachers to reinforce nutrition education lessons taught in classroom.
- 3.3 Healthy eating is promoted to families and the surrounding community.
- 3.4 The cafeteria is used as a “learning laboratory” and includes enjoyable, developmentally-appropriate, participatory activities such as taste tests, promotions, and visits to farms.

Goal # 4 Nutrition education is integrated into other subject areas besides health education.

Activities:

- 4.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 4.2 The nutrition content of health education and physical education curricula is aligned.
- 4.3 Curricular connections for nutrition education are made in core subject areas; e.g., science, social studies, math, and language arts.

Sample Goals and Activities

GOAL #1

Students in kindergarten through grade 12 will receive a comprehensive program in health education focused on the skills needed to adopt healthy eating behaviors and lifelong wellness practices.

Activities:

- 1.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 1.2 Skills-based nutrition education, as a part of a dedicated, stand-alone, term-long comprehensive health education program, is provided to every student at every grade level PreK-8.
- 1.3 Skills-based nutrition education, as a part of a dedicated, stand-alone, term-long comprehensive health education program, is provided to every student at the high school level annually (1/2 credit per year).
- 1.4 Planned instruction is aligned to the national and state health education standards.
- 1.5 Nutrition education is culturally relevant and teaches students about cross-cultural nutrition.
- 1.6 Instruction is aligned to the Centers for Disease Control and Prevention's *Characteristics of Effective Health Education Curricula*.

GOAL#1 Students in kindergarten through grade 12 will receive a comprehensive program in health education focused on the acquisition of skills needed to adopt healthy eating behaviors and lifelong wellness practices.

Activity 1.1 Inform appropriate constituencies about this key element of the Wellness Policy.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Present goals and activities to central office curriculum and instruction personnel. 2. Meet with school principals to share goals and activities. 3. Meet with health education teachers to share goals and activities. 4. Present goals and activities to the PTA/PTO. 5. Share goals and activities with the local school health council. 	<ul style="list-style-type: none"> • Provide better understanding of policy requirements. • Increase involvement of stakeholders. • Develop school action plans and goals to implement and monitor policy. 	<ul style="list-style-type: none"> • Agenda, attendance sheet, and evaluation. • Pre and post tests. • Number of plans developed. 	

GOAL#1 Students in kindergarten through grade twelve will receive a comprehensive program in health education focused on the acquisition of skills needed to adopt healthy eating behaviors and lifelong wellness practices.

Activity 1.2 Skills-based nutrition education, as a part of a dedicated, stand-alone, term-long comprehensive health education program, is provided to every student at every grade level PreK-8.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Examine school schedules for dedicated time for health education. 2. Examine data from system-wide end-of-course assessment. 	<ul style="list-style-type: none"> • All students in PreK-8 receive comprehensive health education. 	<ul style="list-style-type: none"> • Master list of schools with dedicated health education classes. • Collect school end-of-course assessment data. 	
Activity 1.3 Skills-based nutrition education, as a part of a dedicated, stand-alone, term-long comprehensive health education program, is provided to every student at the high school level annually (1/2 credit per year).		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Examine course file for high school requirements. 2. Examine data from system wide end-of-course assessment. 	<ul style="list-style-type: none"> • Health education courses are available annually. 	<ul style="list-style-type: none"> • Course file records. • Collect school end-of-course assessment data. 	
Activity 1.4 Planned instruction is aligned to the national/state health education standards.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Provide time and funds for curriculum review and revision. 2. Conduct a review of the curriculum. 3. Revise local curriculum to align with Voluntary State Curriculum (VSC). 4. Provide staff development. 5. Implement curriculum. 6. Nutrition Education is culturally relevant and teaches students about cross-cultural nutrition. 	<ul style="list-style-type: none"> • Time and funds available. • Identify congruence between local curriculum and national and state health education standards. • Local curriculum meets or exceeds VSC standards. • Train staff in revised curriculum. • Students receive aligned curriculum. 	<ul style="list-style-type: none"> • Dates are identified in master calendar. • Scope and sequence chart. • Agenda, attendance sheet, and evaluation. • Annual system-wide end-of-course assessments. 	

GOAL #1 Students in kindergarten through grade twelve will receive a comprehensive program in health education focused on the acquisition of skills needed to adopt healthy eating behaviors and lifelong wellness practices.

Activity 1.5 Instruction is aligned to the <i>Characteristics of Effective Health Education Curricula</i> .		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Provide time and funds for curriculum review and revision. 2. Conduct a review of the curriculum. 3. Revise local curriculum. 4. Provide staff development. 5. Implement curriculum. 	<ul style="list-style-type: none"> • Time and funds available. • Identify congruence between local curriculum and <i>Characteristics of Effective Health Education Curricula</i>. • Local curriculum contains <i>Characteristics of Effective Health Education Curricula</i>. • Train staff in revised curriculum. • Students receive aligned curriculum. 	<ul style="list-style-type: none"> • Dates are identified in master calendar. • Scope and sequence charts. • Agendas, attendance sheets, and evaluations. • Annual system-wide end-of-course assessments. 	
Activity 1.6 Nutrition education is culturally relevant and teaches students about cross-cultural nutrition.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Provide time and funds for curriculum review and revision. 2. Conduct a review of the curriculum. 3. Revise local curriculum. 4. Provide staff development. 5. Implement curriculum. 	<ul style="list-style-type: none"> • Time and funds available. • Identify relevant segments of the curriculum in which cross-cultural nutrition connections can be made. • Local curriculum contains cross-cultural nutrition connections. • Train staff in revised curriculum. • Students receive aligned curriculum. 	<ul style="list-style-type: none"> • Dates are identified in master calendar. • Scope and sequence chart. • Agendas, attendance sheets, and evaluations. • Annual system-wide end-of-course assessments. 	

Sample Goals and Activities

GOAL # 2

All schools will have highly-qualified teachers who are adequately prepared and who participate in regular professional development activities to effectively deliver nutrition education in the context of comprehensive school health education.

Activities:

- 2.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 2.2 All teachers who teach health education receive annual professional development on health education, current nutrition information, and best educational practices.
- 2.3 All schools will have highly-qualified teachers who are adequately prepared and who participate in regular professional development activities to effectively deliver nutrition education in the context of comprehensive school health education.

GOAL #2 All schools will have highly-qualified teachers who are adequately prepared and who participate in regular professional development activities to effectively deliver nutrition education in the context of comprehensive school health education.

Activity 2.1 Inform appropriate constituencies about this key element of the Wellness Policy.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Present goals and activities to central office curriculum and instruction personnel. 2. Meet with school principals to share goals and activities. 3. Meet with health education teachers to share goals and activities. 4. Present goals and activities to the PTA/PTO. 5. Share goals and activities with the local school health council. 	<ul style="list-style-type: none"> • Provide better understanding of policy requirements. • Increase involvement of stakeholders. • Develop school action plans and goals to implement and monitor policy. 	<ul style="list-style-type: none"> • Agenda, attendance sheet, and evaluation. • Number of plans developed. • Pre and post tests. 	
Activity 2.2 All teachers who teach health education receive annual professional development on health education, current nutrition information, and best educational practices.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Identify student needs. 2. Identify training needs of staff. 3. Schedule annual professional development opportunities for all teachers of health education. 4. Collaborate with Maryland School Nutrition Association (MSNA), Department of Health and Mental Hygiene (DHMH), MD Cooperative Extension (MDCE) and local agencies to provide training to staff. 5. Provide additional ongoing staff development based on teacher and student needs. 	<ul style="list-style-type: none"> • Understand current student needs. • Understand staff training needs. • Professional development is scheduled. • Comprehensive nutrition information is presented to staff. • Provide frequent communications related to initial staff development. 	<ul style="list-style-type: none"> • Review results from: Youth Risk Behavior Survey, Maryland Adolescent Survey, Youth Tobacco Survey. • Review results from <i>Profiles Survey</i>. • Master Calendar. • Agendas, attendance sheets, and evaluations. • Monthly newsletters. 	

Sample Goals and Activities

GOAL #3

Schools will collaborate with community agencies to enhance nutrition education efforts.

Activities:

- 3.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 3.2 Food and Nutrition Services and other community agencies collaborate with teachers to reinforce nutrition education lessons taught in classroom.
- 3.3 Healthy eating is promoted to families and the surrounding community.
- 3.4 The cafeteria is used as a “learning laboratory” and includes enjoyable, developmentally-appropriate, participatory activities such as taste tests, promotions, and visits to farms.

GOAL #3 Schools will collaborate with community agencies to enhance nutrition education efforts.

Activity 3.1 Inform appropriate constituencies about this key element of the Wellness Policy.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Present goals and activities to central office curriculum and instruction personnel. 2. Meet with school principals to share goals and activities. 3. Meet with health education teachers to share goals and activities. 4. Present goals and activities to the PTA/PTO. 5. Share goals and activities with the local school health council. 	<ul style="list-style-type: none"> • Provide better understanding of policy requirements. • Increase involvement of stakeholders. • Develop school action plans and goals to implement and monitor policy. 	<ul style="list-style-type: none"> • Agendas, attendance sheets, and evaluations. • Number of plans developed. • Pre and post tests. 	
Activity 3.2 Food and Nutrition Services and other community agencies collaborate with teachers to reinforce nutrition education lessons taught in the classroom.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Survey needs and interests of schools, teachers, parents, etc. 2. Contact MSNA, MSDE, DHMH, MDCE and local agencies to gain their support. 3. Schedule programs in schools. 	<ul style="list-style-type: none"> • Identify gaps in collaboration between teachers and school with community agencies through a survey. • Increase percentage of schools collaborating with community agencies related to nutrition education efforts. • Convene a meeting with representatives from local agencies and the schools to develop a comprehensive plan of collaboration between schools and community agencies. (Timeline by end of year 2 of a 4 year plan, for example.) • By the end of year 4, all schools will have an identified collaborator from a community agency for nutrition education. • All schools will report collaborative nutrition education activities annually. 	<ul style="list-style-type: none"> • Return of surveys by the stakeholders. • Meeting attendance sheets. • Collaboration Plan document. • Database of collaborating schools and events. 	

GOAL #3 Schools will collaborate with community agencies to enhance nutrition education efforts.

Activity 3.3 Healthy eating is promoted to families and the surrounding community.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Identify community needs. 2. Collaborate with PTA/PTO to plan promotion. 3. Collaborate with Maryland SNA, MSDE, DHMH, MD Cooperative Extension and local agencies assist in promotion. 4. Schedule activities throughout schools and the community. 	<ul style="list-style-type: none"> • A community healthy eating assessment is conducted. • Healthy Eating Promotion to families becomes a priority for the PTA/PTO council and a standing committee is established at the PTA/PTO. • Convene a meeting with representatives from Maryland SNA, MSDE, DHMH, MDCE and local agencies and the schools to share and collaborate on family and community healthy eating promotion activities. (Timeline by end of year 3 of a 4 year plan, for example.) • Creation of a website and community calendar of planned healthy eating promotion activities. 	<ul style="list-style-type: none"> • Survey of community agencies, media, and Nutrition Environmental Measures Survey. • PTA/PTO committee formation. • Meeting attendance. • Meeting agendas. • Plan for distribution of promotion materials to community. • Community calendar. 	

GOAL #3 Schools will collaborate with community agencies to enhance nutrition education efforts.

Activity 3.4 Cafeteria is used as a “learning laboratory” and includes enjoyable, developmentally-appropriate, participatory activities such as taste tests, promotions, and visits to farms.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Survey needs and interests of schools, teachers, parents, food service staff, etc., and the school nutrition environment. 2. Contact the school system’s Food and Nutrition Services department as well as Maryland SNA, FSNE, MSDE, DHMH, MD Cooperative Extension and local agencies to plan activities. 3. Schedule programs in schools. 	<ul style="list-style-type: none"> • Identify interests and attitudes of teachers, principals, food service staff and parents towards cafeteria-based learning through a survey. • Assess the school nutrition environment of the school cafeteria to identify barriers and enablers to carry out these activities at each school. • Convene a meeting with representatives of local agencies and the schools to identify existing activities. (Timeline by end of year 2 of a 4 year plan, for example.) • Plan a professional development day with teams from each school (teachers, food service workers, and principals) to create a cafeteria learning laboratory at their school. • By the end of year 4, all schools participating in the professional development will have created a learning laboratory in their cafeteria. All schools will report cafeteria-based nutrition activities. 	<ul style="list-style-type: none"> • Completed surveys by teachers, principals, food service staff and parents. • School nutrition environment assessment of all school cafeterias. (FSNE Protocol used in Walk the Line project). • Meeting attendance. • Professional development program attendance. • Database of cafeteria-based nutrition activities. 	

Sample Goals and Activities

GOAL # 4

Nutrition education is integrated into other subject areas besides health education.

Activities:

- 4.1 Inform appropriate constituencies about this key element of the Wellness Policy.
- 4.2 The nutrition content of health education and physical education curricula is aligned.
- 4.3 Curricular connections for nutrition education are made in core subject areas; e.g., science, social studies, math, and language arts.

GOAL #4 Nutrition education is integrated into other subject areas besides health education.

Activity 4.1 Inform appropriate constituencies about this key element of the Wellness Policy.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Present goals and activities to central office curriculum and instruction personnel. 2. Meet with school principals to share goals and activities. 3. Meet with health education teachers to share goals and activities. 4. Present goals and activities to the PTA/PTO. 5. Share goals and activities with the local school health council. 	<ul style="list-style-type: none"> • Provide better understanding of policy requirements. • Increase involvement of stakeholders. • Develop school action plans and goals to implement and monitor policy. 	<ul style="list-style-type: none"> • Agendas, attendance sheets, and evaluations. • Number of plans developed. • Pre-post test. 	
Activity 4.2 The nutrition content of health education and physical education curricula is aligned.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Meet with central office physical education administrators to examine and adjust scope and sequence and make cross-curricular connections. 2. Meet with health education and physical education teachers to share cross-curricular connections. 	<ul style="list-style-type: none"> • Identify congruence between health education and physical education curricula. • Teacher will use cross-curricular activities to enhance students' wellness. 	<ul style="list-style-type: none"> • Scope and sequence charts. • Agendas, attendance sheets, and evaluations. 	
Activity 4.3 Curricular connections for nutrition education are made in core subject areas; e.g., science, social studies, math, and language arts.		In place by	Responsibility
Steps	Expected Outcomes	Monitoring	
<ol style="list-style-type: none"> 1. Meet with central office curriculum administrators to identify and/or plan cross-curricular connections. 2. Present nutrition education connections and classroom activities to teachers in the other content areas. 	<ul style="list-style-type: none"> • Identify congruence between health education and other curricula. • Teacher will use cross-curricular activities to enhance students' wellness. 	<ul style="list-style-type: none"> • Scope and sequence charts. • Agendas, attendance sheets, and evaluations. • Collect sample lesson plans. 	

Goals and Activities

WORKSHEET

GOAL: #1

Activity

- 1.1
- 1.2
- 1.3
- 1.4

GOAL: #2

Activity

- 2.1
- 2.2
- 2.3
- 2.4

GOAL: #3

Activity

- 3.1
- 3.2
- 3.3
- 3.4

GOAL: #4

Activity

- 4.1
- 4.2
- 4.3
- 4.4

Steps - Outcomes - Monitoring

WORKSHEET

<u>GOAL:</u>				
<u>Activity</u>			In place by	Responsibility
Steps		Expected Outcomes	Monitoring	
1.		•	•	
2.		•	•	
3.		•	•	
4.		•	•	
5.				
6.				