

Local Wellness Policy Implementation Checklist



Thank you for taking the time to complete this Local Wellness Policy Implementation Checklist. Because Local Wellness Policies cross multiple areas within school districts and schools, it is anticipated that multiple individuals will need to provide information to accurately and thoroughly complete this checklist. Please keep track of the individuals who contributed to the responses because, at the end of the checklist, you will be asked to indicate, by job title, who was involved. We suggest that only one person enter the responses, in the web survey, at one time period. All responses must be made using the web form. Please refer to the email message with contains the web address. If you have misplaced the email with the web address, please email websurvey@survey.psu.edu.

Planning Implementation

1. Have written Implementation or Action plans been developed for your Local Wellness Policy?

- No
- Yes, for some goals
- Yes, for all goals
- Don't know

2. Has a person with ultimate responsibility for your Local Wellness Policy implementation been identified?

- Yes
- No
- Don't know

3. Related to responsibility for your Local Wellness Policy implementation, have responsible individuals been assigned at the...

- District/Diocese/Central Administration office level
- School level
- Both district and school level
- Neither
- Don't know

4. Is your Local Wellness Policy part of your school district's strategic plan?

- Yes
- No
- In process
- Don't know

5. Have policy goals been prioritized for implementation?

- Yes
- No
- Don't know

6. Have timelines been developed for your Local Wellness Policy implementation?

- No
- Yes, for some goals
- Yes, for all goals
- Don't know

7. Have consequences been identified for violation of your Local Wellness Policy goals?

- No
- Yes, for some goals
- Yes, for all goals
- Don't know

8. How have students been actively involved in your Local Wellness Policy implementation beyond policy development? (Please check all that apply.)

- Represented on on-going wellness committee
- Student advisory group for school meals program
- Students are involved in school meals menu selections
- Student input regarding other health/wellness/nutrition/physical activity issues is assessed
- Students are involved in annual reviews and reporting about Local Wellness Policy implementation
- Students are provided with nutritional content of school meals
- Students are encouraged to act as role models of healthy behaviors
- Student-led campaigns related to wellness
- Other: Please describe: _____
- Students have not been actively involved in the Local Wellness Policy implementation.
- Don't know

9. Have you partnered with any community agencies/organizations to support implementation of your Local Wellness Policy? (Please check all that apply.)

- YMCA/YWCA
- Other local fitness center
- PANA
- Local hospital
- Penn State Cooperative Extension
- American Cancer Society
- American Heart Association
- STEPS program
- Other: Please describe: _____
- We have not partnered with community agencies/organizations
- Don't know

10. Do you have an identified, dedicated wellness coordinator (formalized in job description) for your district?

- Yes
- No
- Don't know

11. Some school districts have included goals in their policies to represent practices already in place. Others have included new goals. Which statement best describes your situation?

- Our district included only new goals and practices into the Local Wellness Policy.
- Our district included only already existing goals and practices into the Local Wellness Policy.
- Our district included a combination of new and existing goals and practices.
- Don't know

Nutrition Guidelines

12. Have foods and beverages offered in the following areas been assessed for compliance with your Local Wellness Policy?

	Yes	No	In Progress	No foods and/or beverages offered in this area	Don't know
A la carte	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vending machines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student stores	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fundraisers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concession stands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Classroom parties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Has any research been done to identify new foods and beverages that meet the nutrition guidelines established in your Local Wellness Policy?

- Yes
- No
- In progress
- Don't know

14. Has a list of acceptable snacks for classroom parties been developed and distributed to...(Please check all that apply.)

- Teachers
- Parents
- Students
- Administrators
- Other _____
- No one
- Don't know

15. Please describe the changes that have been made to the foods/beverages offered through the following venues compared to the situation prior to establishment of your Local Wellness Policy.

	These items are now much healthier.	These items are now somewhat healthier.	These items have always been healthy, so little change has occurred.	These items are primarily not healthy.	No foods and/or beverages offered in this area.	Don't know
A la carte	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vending machines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student stores	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fundraisers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concession stands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Classroom parties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Do food fundraisers occur during the school day?

- Sometimes
- Often
- Never

17. Are foods sold as fundraisers during the school day required to be approved by a building administrator?

- Yes
- No
- Not applicable (no food fundraisers)
- Don't know

18. Are foods of any kind used as rewards or punishment in classrooms or other school functions? (for example, a pizza party for high grades.)

- Sometimes
- Often
- Never
- Don't know

19. Has information been communicated to teachers regarding the use of foods as reward?

- Yes
- No
- Don't know

Professional Development

20. Has professional development/training been done for or materials distributed to school foodservice staff related to your Local Wellness Policy areas?

- Yes
- No
- Don't know

21. Has professional development/training been done for or materials distributed to teachers who provide nutrition education related to your Local Wellness Policy areas?

- Yes
- No
- Don't know

22. Has professional development/training been done for or materials distributed to Health/PE faculty related to your Local Wellness Policy areas?

- Yes
- No
- Don't know

23. Has professional development/training related to your Local Wellness Policy been done for or materials distributed to those teachers who do not traditionally teach nutrition or Physical Education?

- Yes
- No
- Don't know

Wellness Committee

24. Is there a functioning wellness committee in your school/district?

- Yes
- No
- Don't know

Nutrition Education

29. Are students receiving more minutes of nutrition education now than they were prior to the establishment of your Local Wellness Policy?

- Yes
- No
- Don't know

30. Are students receiving higher quality nutrition education now than they were prior to the establishment of your Local Wellness Policy? (Higher quality might mean more behaviorally oriented, age-appropriate, interactive, etc.)

- Yes
- No, because it was high quality prior to establishment of the Local Wellness Policy.
- No
- Don't know

31. Is nutrition education being integrated into a variety of subject areas (e.g. math, language arts, etc.)?

- Yes, but this was occurring prior to the establishment of the Local Wellness Policy.
- Yes, and this is a new activity.
- No
- Don't know

Physical Activity

32. Do students have more opportunities for physical activity now than they did prior to the establishment of your Local Wellness Policy?

- No
- Yes, in some schools
- Yes, in all schools
- Don't know

33. Are there more opportunities for students to be physically active in classrooms (outside of Physical Education) now than there was prior to the establishment of your Local Wellness Policy?

- No
- Yes, in some schools
- Yes, in all schools
- Don't know

Measurement and Reporting

34. Is there a written plan for measuring implementation of your Local Wellness Policy?

- Yes
- No
- In process
- Don't know

35. Is there a timeline for reporting on implementation of your Local Wellness Policy to the school board or other administrative body?

- Yes
- No
- In process
- Don't know

36. Has measurement of implementation of your Local Wellness Policy begun?

- Yes
- No
- Don't know

37. Have any written or oral reports been presented to the school board or Superintendent or other administrative body describing the progress of your Local Wellness Policy implementation?

- Yes
- No
- In progress
- Don't know

38. Is there a plan for review and possible revision of your Local Wellness Policy?

- Yes
- No
- Don't know

Please indicate who was involved in providing information to complete this checklist (please check all that apply.)

- Business manager
- Curriculum Coordinator
- Family and Consumer Science teacher(s)
- Foodservice director
- Foodservice staff
- Health/Physical Education teacher(s)
- Parent(s)
- Principal(s)
- School nurse(s)
- Student(s)
- Superintendent/Chief Administrative Officer
- Other teacher(s)
- Other: Please specify _____