

Coordinated School Health (CSH) Initiative in Nebraska

Julane Hill, Coordinated School Health Director, NDE



Program Description

Coordinated School Health (CSH) is an evidence-based strategy and systems-building process by which schools, school districts, and communities develop capacity and create an infrastructure that supports continuous improvement in health-promoting environments for students and staff. It is a vehicle for school improvement—improving students’ academic performance and overall physical well-being by promoting health in a systematic way.

In Nebraska, with the passing of the CSH Policy by the State Board of Education in 2010, the Nebraska Department of Education (NDE), in partnership with Nebraska Health and Human Services (NHHS), has worked systematically to implement a CSH Initiative in the state. The CSH Nebraska Initiative was designed as a series of in-depth Institute-based trainings focused on both the structure and the process of CSH. The **structure** outlines eight components needed to address a student’s holistic health needs: health education, physical education, health services, nutrition services, counseling and psychological services, healthy school environment, health promotion for staff, and family and community involvement. The **process** integrates the efforts and resources of education and the health community to provide a full set of programs and policies without duplication or fragmentation by emphasizing needs assessment, planning based on data and sound science, analysis of gaps and redundancies, and evaluation.

During its first iteration, the four Institute series, led by NDE trained 5 pilot sites on CSH by utilizing USDA Team Nutrition grant funding. Subsequently, during the 2011-2012 school year, 8 additional schools/districts, 1 Educational Service Unit (ESU) and 1 district health department participated in the CSH Institutes. In the 2012-2013 school year, NDE conducted their third CSH Institute with 10 schools/districts, 1 district health department, and 1 ESU in participation.

2010-2011 CSH Institute Participants	Location
Ansley Public Schools	Ansley
Hartington Public Schools	Hartington
Elliot Elementary School	Lincoln
Norris School District	Firth
Centura Public Schools	Cairo
Loup Basin Public Health Department	Burwell
UNL-Extension	Broken Bow



2011-2012 CSH Institute Participants	Location
Cross County Community Schools	Stromsburg
David City Public Schools	David City
High Plains Community Schools	Polk
Lincoln Elementary, North Platte Public School District	North Platte
Pawnee City Public Schools	Pawnee City
St. Paul Public School	St. Paul
Thayer Central Community Schools	Hebron
Educational Service Unit # 4	Auburn
Four Corners District Health Department	York

2012-2013 CSH Institute Participants	Location
Brady Public Schools	Brady
Garden County Community Schools	Oshkosh
Maxwell Public School	Maxwell
Sutherland Public Schools	Sutherland
Buffalo Elementary, North Platte Public School District	North Platte
Hall Elementary, North Platte Public School District	North Platte
Jefferson Elementary, North Platte Public School District	North Platte
Lake Elementary, North Platte Public School District	North Platte
Lincoln Elementary, North Platte Public School District	North Platte
Osgood Elementary, North Platte Public School District	North Platte
West Central District Health Department	North Platte
Educational Service Unit 13	Scottsbluff

Coordinated School Health Institute Description

To begin the CSH Institute process, each site applied for funding via an RFA provided by NDE which required each site to identify a CSH team to attend the planning Institutes. These four CSH Institute trainings, conducted across seven days during the school year, provided the information, tools and skills necessary to build the local capacity of schools and communities to implement a CSH framework and to address healthy eating, physical activity, tobacco, and other identified health related needs. With the new knowledge, the teams returned to their home districts where they worked with a larger school-community group, including the School Health Advisory Council (district level) and the School Health Team (building level), to implement the steps highlighted in the CSH Planning and Implementation process. The teams focused on guiding the development and implementation of the school's CSH action plans (which were created during the Institute trainings) and implementation of updated/revised school health policies. Technical assistance was available to schools from staff from NDE and NHHS via on-site visits, professional development, phone calls and electronic communication upon request.



Main topics for the Coordinated School Health Institutes include:

- Research-based link between health and learning
- Overview and role of CSH in health prevention and academic achievement
- Purpose, key functions, and role of School Health Advisory Councils/Teams in health prevention and academic achievement
- Effective physical activity, nutrition, tobacco, and mental health practices and resources in the CSH framework
- Role of school wellness policies, bullying policies, dating violence policies, and school safety policies in relation to CSH
- Implementation of CDC's School Health Index Tool and NDE's Wellness Policy Builders
- Development of action plans utilizing results from their School Health Index
- Promotion of and planning for staff health promotion
- Creating sustainable programs through policy development and revision
- Sharing schools' programs and successes via CSH success stories
- Sustainability of CSH and funding supports: School Lunch and Breakfast Program, Breakfast Challenge/Healthier US School Challenge, Fuel Up To Play 60; PEP and numerous other grants



Evaluation

Process evaluations were conducted with a paper/pencil survey after each training session to assess both participant satisfaction with the Institutes and implementation of the CSH steps. Additionally, outcome evaluations were conducted with each participating school/district via submission of a yearly report specifically outlining policy, systems, and environmental changes that were implemented within the year-long Institute process. Participants were also required to submit a "success story" which focused on one or more major accomplishments in regards to policy, systems, and environmental changes achieved within their individual settings.

The process evaluation results indicated that overall, schools were very satisfied with the content provided during the Institutes, delivery method, the speakers, and the organization. Most participants provided a score of four or five (on a scale where five represented the highest rating possible) on each of the topics covered during the Institutes.



The outcome evaluation results indicated that, as a result of the CSH Institutes, sustainable changes have been implemented in all participating schools. Below is a list of notable sustainable changes achieved around various components of the Coordinated School Health approach.

Infrastructure Achievements:

- Established a coordinator for CSH
- Established a functioning School Health Advisory/School Health Team
- Conducted a school health assessment utilizing CDC's School Health Index
- Created action plans based on the Nebraska Department of Education's Wellness Policy Builders and the CDC School Health Index
- Revised/updated School Wellness Policy, Tobacco Policy, Bullying Policy
- Enrolled staff in the Educator's Health Alliance Employee Wellness program
- Engaged community partners on the local, state and national levels
- Engaged parents and students in their efforts
- Accessed grants to continue sustainability of program and policy efforts
- Received recognition on the local, state, and national levels for creating healthy school environments (NDE, AFHK, AHG, HUSSC)



Nutritional Achievements:

- Started and/or expanded school breakfast programs
- Improved food offerings by revising and upgrading the lunch menus
- Provided salad bar with more fruit and vegetable options
- Aligned vending and a la carte options with the Alliance for a Healthier Generation Guidelines and/or HUSSC
- Eliminated pop machines and purchased 100% fruit slushy machines; eliminated a la carte (elementary)
- Implemented fruit and veggie programs
- Changed holiday and celebration snack policies towards healthier choices
- Conducted student/staff surveys regarding food offerings and used results to modify menus
- Initiated Back Pack programs
- Implemented school snack, healthy celebrations, school concessions, and school fund-raising policies
- Implemented healthy vending policies
- Created policies to limit advertising messages that promote foods of minimal nutritional value



Physical Activity Achievements:

- Started before-school walking programs
- Integrated physical activity throughout the school day
- Conducted Wellness Days for elementary/middle schools
- Started after-school exercise group for staff and all interested students
- Offered physical education classes and recess on a regular basis
- Conducted professional development for staff to further assist with integrating physical activity in the classroom
- Implemented Recess Before Lunch
- Created policies to provide a minimum of 20 minutes of recess per day
- Increased physical education time and staff in their schools
- Created policies that eliminate the use of physical activity and the withholding of physical activity as punishment
- Implemented policies to integrate physical activity into the classroom
- Created policies to provide for professional development for staff on physical activity/physical education
- Updated physical education curriculum and aligned curriculum to the standards
- Implemented SPARK and FitnessGram



Tobacco Achievements

- Updated and/or revised tobacco policies
- Provided “Tobacco-Free Zone” signage in “hot” tobacco areas
- Implemented smoking cessation programs for students and staff
- Provided tobacco prevention education

Mental Health Achievements:

- Professional development on Trauma Informed Care
- Implemented “Zones of Regulation” (fosters self-regulation and emotional control)
- Implemented Sensory Integration
- Updated and/or revised bullying policies
- Provided parent training in Interactive Parent/Child Play Therapy
- Partnered with NE Children and Families Foundation to access funding for mental health programs/services for 5 years



Other Health Achievements:

- Updated health education curriculum and aligned curriculum to the standards
- Updated and/or revised HIV/AIDS and Bloodborne Pathogens policies
- Administrators provided presentations on CSH achievements at the Nebraska Council of School Administrators Conference and at national conferences



- Worked with Senators to create and introduce legislative bills around school health and wellness
- Hired school wellness coordinators
- Conducted staff wellness programs, specifically Educators Health Alliance Program

Partnerships

The effectiveness of the Coordinated School Health Initiative in Nebraska is due to the strong partnerships formed between the Nebraska Department of Education, local school districts, and local, state and national stakeholders. The stakeholders are too numerous to list, however, below are the names of a few who have been deeply committed to moving the CSH Initiative forward:

- Nebraska Department of Education, CSH and Nutrition Services Divisions
- Nebraska Department of Health and Human Services (Nutrition and Activity for Health Program, Tobacco Free NE Program, Department of Public Health)
- Alliance for a Healthier Generation
- West Central District Health Department
- Four Corners District Health Department
- Loup Basin District Health Department
- Nebraska Association of Local Health Departments
- Nebraska Children and Families Foundation
- Nebraska Medical Association
- Nebraska School Education Association
- Building Bright Futures
- Educational Service Units 4 and 13
- Action For Healthy Kids
- Teach A Kid To Fish
- Live Well Omaha Kids
- Numerous schools and school districts
- Numerous community health coalitions and district health departments

Conclusion

When it comes to making changes in the school environment, results are rarely quick. However, by utilizing the CSH Institute process, key policy and environmental changes were seen within a year. The work is strenuous and requires strong commitment from a variety of stakeholders including school administration and staff, parents, children, local communities and local and state agencies. The successes reported in this brief represent the result of effective collaboration, strong partnerships and high commitment from all these players. By participating in the Institute series, school teams were able to acquire new skills and knowledge to help them get buy-in from essential stakeholders, form partnerships and pursue environmental changes within their specific settings. In addition, participation in the CSH Institutes helped schools secure additional funds to support healthy eating and active living changes through applications for various awards and grants including the Healthier US School Challenge, the Healthy Schools Program Award, Fuel Up to Play 60 and the Fresh Fruits and Vegetables Program.

For additional information, please contact: [Julane Hill](mailto:Julane.hill@nebraska.gov), Coordinated School Health Director, 402-471-4352 or Julane.hill@nebraska.gov

