Public reporting burden of this collection of information is estimated to average 30minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX).

#  **Healthy Schools Questionnaire**

**Elementary School**

## **Introduction**

Schools and after-school programs can help students eat healthy, be physically active, and manage chronic health conditions like asthma, diabetes, and food allergies. Adopting these healthy behaviors can help students be successful and make good grades. Schools can also create a healthy environment for staff, teachers, and the surrounding community. As a school principal, you can support efforts to adopt effective health policies, practices, and programs designed to meet these goals.

This questionnaire will help you assess what your school is doing. It has four sections:

* Section 1: School Health Infrastructure
* Section 2: School Physical Education and Physical Activity
* Section 3: School Nutrition Environment and Services
* Section 4: Support for Students with Chronic Health Conditions

## **Instructions**

You (or someone you designate) should complete this questionnaire with input from your school health council, committee, or team. If needed, you (or your designee) can seek input from other school staff—including other administrators, physical education teachers, health education teachers, classroom teachers, after-school program staff, school food service staff, and school nurses. You can also seek input from parents, community partners, and students.

Your responses should reflect the specific practices and activities in your school during the 2023-2024 school year including the summer months prior to the first day of school. All responses will be kept confidential. Your school name will be kept private and will not be associated with your responses in any reports or publications.

**Thank you for helping to make the results of this survey comprehensive, accurate, and timely!**

**School Consent Form**

The [state/tribal nation/university] is receiving funds from the Centers for Disease Control and Prevention (CDC) to help improve student health in school and out-of-school-time settings. Your school is within a school district that is part of this funded program.

The purpose of this survey is to learn how schools are implementing evidence-based physical activity, nutrition, and school health services practices and programs for students and advancing health equity during the current [[insert year range, e.g., 2024-2025]] school year.

This survey should take about 30 minutes to complete. The survey should be completed by the school principal or a school staff member designated by the principal. The person completing the survey should reach out to other school staff and community members as needed to respond accurately to all questions in the survey.

Participation in this survey is voluntary and you may choose not to respond to any question. If you choose not to participate, there will be no penalties of any kind to you, your school, or your district.

Your survey responses will remain confidential throughout the project. Your name and the name of your school will not be associated with the information that you share for the purpose of this evaluation. Taking part in this survey will cause no risk. The results of the evaluation will be used to improve support and implementation of CDC’s support to schools.

If desired, you may complete the survey over multiple sittings. After you begin, you may save, exit, reenter, and continue the survey where you left off. You can exit the survey and return as many times as needed to fully complete it.

If you have questions about this evaluation please contact the evaluation team at 2302evaluation@icf.com. For questions regarding your rights related to this evaluation you can contact ICF Institutional Review Board (IRB) chair at irb@icf.com.

Please choose one of the options below and click “next” to confirm:

☐ I have read the above information, and I agree to participate in this survey.

☐ I have read the above information, and I DO NOT wish to participate in this survey. If you choose this option, you will not be able to continue the survey.

**Questionnaire**

**Please start by providing the following information:**

Grade span

Fall enrollment (number of students enrolled at the beginning of the school year)

Website

Date of first day of school for the [insert year range, e.g., 2024-2025] school year

Date of last day of school for the [insert year range, e.g., 2024-2025] school year

School start time each day

School end time each day

1. What is your role? Mark one response.
	1. Principal
	2. Assistant principal
	3. School nurse
	4. School health coordinator
	5. School physical activity or health education teacher
	6. Other

1a. [Display only if ‘Other’ is selected] Please specify your role.

## **Section 1: School Health Infrastructure**

This section focuses on school health infrastructure practices. The questions address issues related to school health councils, school health policies and practices, local wellness policies, employee health and wellness, comprehensive health education, and family and community engagement.

**The next 4 questions are about having a school health council, committee, or team.**

*School health* refers to the comprehensive efforts to develop, implement, and evaluate services, both within the school and the community, that provide each and every student with the resources needed to thrive within a healthful environment.

1. During the [insert year range, e.g., 2024-2025] school year, did your school have a group or groups—for example, a school health council, committee, or team—to guide the development of health-related policies or coordinate activities?
	1. Yes
	2. No [Skip to Q6 if selected]
2. [Skip if selected No for Q2] During the [insert year range, e.g., 2024-2025] school year, how many times did your school health council, committee, or team meet?
	1. 0 times
	2. 1 time
	3. 2 times
	4. 3 times
	5. 4 or more times
3. [Skip if selected No for Q2] During the [insert year range, e.g., 2024-2025] school year, were the following representatives on your school health council, committee, or team? (Mark Yes or No for each group.)

|  |  |  |
| --- | --- | --- |
| Group | Yes | No |
| 1. School administrator
 |  |  |
| 1. Physical education teacher
 |  |  |
| 1. Health education teacher
 |  |  |
| 1. School nutrition staff
 |  |  |
| 1. School nurse
 |  |  |
| 1. Other teachers and school staff
 |  |  |
| 1. Before- or after-school program staff. (Before- or after-school program staff are those employed at supervised programs, such as academic programs, specialty programs, and multipurpose programs, that provide an array of activities. Such programs may be offered by the school, district, or an external organization [e.g., 21st Century Community Learning Centers, Boys & Girls Clubs, YMCAs] and can take place on school grounds or in the community.)
 |  |  |
| 1. Parents or primary caregivers
 |  |  |
| 1. Community partners or community members
 |  |  |
| 1. Students
 |  |  |

1. [Skip if selected No for Q2] During the [insert year range, e.g., 2024-2025] school year, has any school health council, committee, or team at your school done any of the following activities? (Mark Yes or No for each activity.)

|  |  |  |
| --- | --- | --- |
| Activities | Yes | No |
| 1. Identified student health needs based on a review of relevant data
 |  |  |
| 1. Completed a school health assessment to understand and prioritize the school’s health and wellness related needs
 |  |  |
| 1. Used the Whole School, Whole Community, Whole Child (WSCC) framework to guide school health related and wellness activities
 |  |  |
| 1. Recommended new or revised school health policies and activities to school administrators or the school improvement team
 |  |  |
| 1. Sought funding or leveraged resources to support school health priorities for students and staff
 |  |  |
| 1. Communicated the importance of school health policies and activities to district administrators, school administrators, parent-teacher groups, or community members
 |  |  |
| 1. Reviewed health-related curricula or instructional materials
 |  |  |

**The next 3 questions are about assessing school health policies and practices.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school complete the following school health assessment tools to identify school health and wellness-related needs? (Mark Yes or No for each assessment tool.)

|  |  |  |
| --- | --- | --- |
| Assessment tool | Yes | No |
| 1. CDC’s School Health Index (SHI)
 |  |  |
| 1. CDC’s Wellness Policy in Action Tool (WPAT)
 |  |  |
| 1. CDC’s Health Education Curriculum Analysis Tool (HECAT)
 |  |  |
| 1. CDC’s Physical Education Curriculum Analysis Tool (PECAT)
 |  |  |
| 1. Alliance for a Healthier Generation’s Thriving Schools Integrated Assessment
 |  |  |
| 1. The National Afterschool Association’s (NAA) Healthy Eating and Physical Activity (HEPA) Standards 2.0 Self-Assessment tool
 |  |  |
| 1. American Academy of Pediatrics’ (AAP) Health services Assessment Tool for Schools (HATS)
 |  |  |
| 1. Other (please specify): [Add space to write in what is being used]
 |  |  |

1. During the [insert year range, e.g., 2024-2025] school year, did your school develop or update a school health action plan that describes steps to meet the school health and wellness-related needs of all students?
	1. Yes, based on the results of a school health assessment (e.g., CDC assessment tools like the SHI, WPAT, PECAT, and HECAT, or non-CDC assessment tools like Thriving Schools Integrated Assessment, HEPA Standards, or HATS)
	2. Yes, but not based on the results of a school health assessment
	3. No [Skip to Q9 if selected]
2. [Skip if selected No for Q7] During the [insert year range, e.g., 2024-2025] school year, did your school’s school health action plan include an activity focused on the following topics? (Mark Yes or No for each topic.)

|  |  |  |
| --- | --- | --- |
| Topic | Yes | No |
| 1. Physical education
 |  |  |
| 1. Physical activity (i.e., active learning in the classroom, recess, walking clubs, etc.)
 |  |  |
| 1. School meal programs
 |  |  |
| 1. Foods and beverages available at school outside the school meal programs
 |  |  |
| 1. Food and beverage marketing
 |  |  |
| 1. School health services
 |  |  |
| 1. Services and supports for students with chronic health conditions (e.g., asthma, diabetes, and food allergies)
 |  |  |
| 1. Before-school programs
 |  |  |
| 1. After-school programs
 |  |  |
| 1. Summer learning programs
 |  |  |
| 1. Social and emotional climate
 |  |  |
| 1. Family engagement
 |  |  |
| 1. Community involvement
 |  |  |
| 1. Employee wellness
 |  |  |

**The next 3 questions are about providing professional development to school staff.**

1. During the [insert year range, e.g., 2024-2025] school year (including the summer months prior to the first day of school), did school staff receive trainings or professional development opportunities (e.g., in-service trainings, workshops, conferences, and continuing education) on the following topics? (Mark Yes or No for each topic.)

|  |  |  |
| --- | --- | --- |
| Topic | Yes | No |
| 1. Physical education
 |  |  |
| 1. Physical activity (i.e., active learning in the classroom, recess, walking clubs, etc.)
 |  |  |
| 1. School meal programs
 |  |  |
| 1. Foods and beverages available at school outside the school meal programs
 |  |  |
| 1. Foods and beverage marketing
 |  |  |
| 1. School health services
 |  |  |
| 1. Services and supports for students with chronic health conditions (e.g., asthma, diabetes, and food allergies)
 |  |  |
| 1. Social and emotional climate
 |  |  |
| 1. Family engagement
 |  |  |
| 1. Community involvement
 |  |  |
| 1. Employee wellness
 |  |  |
| 1. Other school health topics (please specify) [include space to write in other topics]
 |  |  |

1. <<Display Q only if answered “Yes” to 9a or 9b>> During the [insert year range, e.g., 2024-2025] school year (including the summer months prior to the first day of school), did the following types of staff attend trainings or professional development (e.g., workshops, conferences, continuing education, any other kind of in-service) related to physical education or other strategies for integrating more physical activity opportunities before, during, and after the school day (e.g., recess, classroom physical activity)? (Mark Yes or No for each type of staff.)

|  |  |  |
| --- | --- | --- |
| Type of staff | Yes | No |
| 1. Physical education teachers or specialists
 |  |  |
| 1. Classroom teachers
 |  |  |
| 1. Before- or after-school program staff
 |  |  |
| 1. Other school staff
 |  |  |

1. <<Display Q only if answered “Yes” to 9c, 9d, or 9e >> During the [insert year range, e.g., 2024-2025] school year (including the summer months prior to the first day of school), did the following types of staff attend trainings or professional development (e.g., workshops, conferences, continuing education, any other kind of in-service) related to school nutrition environment and services? (Mark Yes or No for each type of staff.)

*School nutrition environment* includes the foods and beverages that are available to students throughout the school day, and information and messages about food, beverages, and nutrition that students encounter on school grounds.

*School nutrition services* provide meals that meet federal nutrition standards for the National School Lunch and Breakfast Programs, accommodate the health and nutrition needs of all students, and help ensure that foods and beverages sold outside of the school meal programs meet Smart Snacks in School nutrition standards.

|  |  |  |
| --- | --- | --- |
| Type of staff | Yes | No |
| 1. School nutrition program managers
 |  |  |
| 1. Other school nutrition staff (e.g., cooks, lunch line servers)
 |  |  |
| 1. After-school program staff
 |  |  |
| 1. Other school staff
 |  |  |

**The next 3 questions are about implementing local wellness policy.**

1. Are staff at your school aware of the requirements of your district’s local wellness policy?
	1. Yes
	2. No
	3. Not sure
2. Did anyone at your school assess how your school is meeting the district’s local wellness policy requirements during the current and previous years? (Mark Yes or No for each school year.)

|  |  |  |
| --- | --- | --- |
| School Year | Yes | No |
| * 1. [insert year range, e.g., 2024-2025] school year
 |  |  |
| * 1. 2023-2024 school year
 |  |  |
| * 1. 2022-2023 school year
 |  |  |

1. During the [insert year range, e.g., 2024-2025] school year, did someone at your school communicate about the district’s local wellness policy to school staff, after-school program staff, families, and students? Examples of communication methods include school websites, Parent-Teacher Association meetings, and school newsletter.
	1. Yes
	2. No

**The next question is about offering employee health and wellness.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school offer employee health and wellness programming to promote the following areas for teachers and school staff?

|  |  |  |
| --- | --- | --- |
| Topic | Yes | No |
| Physical activity |  |  |
| Healthy Eating |  |  |
| Mental Health |  |  |

**The next question is about providing health education.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school provide formal, structured health education for students? Formal, structured health education consists of any combination of planned learning experiences that provide the opportunity to acquire information and the skills students need to make quality health decisions.
	1. Yes
	2. No

**The next question is about health needs and interests of students.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school assess the needs and interests of students related to healthy eating, physical activity, or health services?
	1. Yes
	2. No

**The next 4 questions are about family engagement.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school assess the needs and interests of parents or primary caregivers related to healthy eating, physical activity, or health services?
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did your school send out a newsletter for parents or primary caregivers that includes information about healthy eating, physical activity, or health services?
	1. Yes
	2. No
3. During the [insert year range, e.g., 2024-2025] school year, did your school host periodic health and wellness events that educate and inform parents or primary caregivers about healthy eating, physical activity, or management of chronic health conditions such as asthma, diabetes, and food allergies?
	1. Yes
	2. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school promote volunteer opportunities for parents or primary caregivers to help with programs and events related to healthy eating, physical activity, or health services?
	1. Yes
	2. No

**The next 3 questions are about community engagement.**

1. During the [insert year range, e.g., 2024-2025] school year, did any community partners contribute resources or expertise to school health activities?
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did your school partner with community organizations to provide students with formal before- or after-school programs? Examples include school-age childcare programs, academic instruction and tutoring programs (e.g., 21st Century Community Learning Centers), and multipurpose programs offered by youth-serving organizations such as the YMCA or the Boys & Girls Clubs of America.
	1. Yes
	2. No
3. During the [insert year range, e.g., 2024-2025] school year, did your school partner with community organizations to help students and families access food when school is not in session? Examples include helping families enroll in programs for which they are eligible, like SNAP and/or Summer EBT, or partnering with food banks to organize backpack programs during weekends and school breaks.
	1. Yes
	2. No

## **Section 2: School Physical Education and Physical Activity**

This section focuses on school physical education and physical activity practices that help schools implement a [Comprehensive School Physical Activity Program](https://www.cdc.gov/healthyschools/physicalactivity/pdf/2019_04_25_PE-PA-Framework_508tagged.pdf) (CSPAP), which is a framework for planning and organizing activities for school physical education and physical activity. The questions address physical education, physical activity during the school day and before and after school, family and community engagement in physical activity, and having a written plan for physical education and physical activity.

**The next 3 questions are about physical education.**

1. During the [insert year range, e.g., 2024-2025] school year, how many weeks were students required to attend physical education? If requirements varied by grade level, select the answer that best represents most students at your school.
	1. Physical education is not required
	2. One quarter of the year (or ~9 weeks)
	3. Two quarters of the year (or ~18 weeks)
	4. Three quarters of the year (or ~27 weeks)
	5. All year (or ~36 weeks)
2. During the [insert year range, e.g., 2024-2025] school year, how many days per week were students scheduled to take physical education during a typical school week? Select the number of days of scheduled physical education per week when it is offered. If this differed by grade level, select the answer that represents most students at your school.
	1. 0 days
	2. 1 day
	3. 2 days
	4. 3 days
	5. 4 days
	6. 5 days
	7. Varied each week (e.g., 2 days one week, 3 the next week; 0 days one week, 2 the next week)
3. During the [insert year range, e.g., 2024-2025] school year, did your physical education program use a curriculum that aligns with state or national standards for physical education?
	1. Yes
	2. No
4. During the [insert year range, e.g., 2024-2025] school year, did students complete fitness or physical activity assessments at least once?
	1. Yes
	2. No

**The next 3 questions are about physical activity during school.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school offer 20 minutes or more of daily recess for all students to be physically active during the school day?
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did students participate in daily physical activity breaks or active lessons in classrooms during the school day outside of physical education and recess?

a. Yes

b. No

1. During the [insert year range, e.g., 2024-2025] school year, did your school regularly promote or provide school-wide physical activity opportunities outside of physical education classes, recess, and classroom physical activity—for example, during morning announcements, school-wide fitness challenges, school-wide structured walking programs?
	1. Yes
	2. No

**The next 2 questions are about physical activity before and after school.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school offer before-school physical activity programs to students? Examples include walking clubs, early access to gyms or other school grounds and facilities, and initiatives that promote walking, biking, or rolling (in a wheelchair or on a scooter or skateboard) to school.
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did your school offer after-school physical activity programs to students? Examples include walking clubs, early access to gyms or other school grounds and facilities, and initiatives that promote walking, biking, or rolling (in a wheelchair or on a scooter or skateboard) from school.
	1. Yes
	2. No

**The next 3 questions are about family and community engagement.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school ask parents or primary caregivers to help with any activity, event, or program related to physical activity? Examples include volunteering during physical education, serving on planning committees, donating equipment and supplies, and attending school physical activity events.
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did your school ask community partners or community members to help with any activity, event, or program related to physical activity? Examples include providing grant funding for physical activity programming, volunteering to lead physical activity programs, and providing equipment or supplies for physical activity programs.
	1. Yes
	2. No
3. During the [insert year range, e.g., 2024-2025] school year, did your school, either directly or through the school district, have a joint use agreement for shared use of physical activity or sports facilities? A joint use agreement is a formal agreement between a school or school district and another public or private entity to jointly use either school facilities or community facilities to share costs and responsibilities.
	1. Yes
	2. No

**The next question is about having a plan for physical education and physical activity.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school have a written plan for providing opportunities for students to be physically active before, during, and after school? This might be called a Comprehensive School Physical Activity Program (CSPAP) plan.
	1. Yes
	2. No

## **Section 3: School Nutrition Environment and Services**

This section focuses on the school nutrition environment and services. The questions address school meal programs, Smart Snacks in School nutrition standards, clean and safe drinking water, food and drink marketing, nutrition education opportunities, and the use of foods and drinks for celebrations and rewards. They also address access to nutritious foods in Out of School Time (OST) programs.

*School nutrition environment* includes the foods and beverages that are available to students throughout the school day, and information and messages about food, beverages, and nutrition that students encounter on school grounds.

*School nutrition services* provide meals that meet federal nutrition standards for the National School Lunch and Breakfast Programs, accommodate the health and nutrition needs of all students, and help ensure that foods and beverages sold outside of the school meal programs meet Smart Snacks in School nutrition standards.

**The next 6 questions are about school meal programs.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school coordinate class schedules with bus transportation schedules to allow all students the opportunity to obtain breakfast at school?
	1. Yes
	2. No
	3. Not applicable: Our school offers breakfast in the classroom or during morning break
2. During the [insert year range, e.g., 2024-2025] school year, did your school offer breakfast meals during morning breaks or in the classroom?
	1. Yes
	2. No
3. During the [insert year range, e.g., 2024-2025] school year, did your school offer free and reduced-price meals for students who meet income requirements?
	1. Yes
	2. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school use the following practices to increase consumption of school meals? (Mark yes or no for each practice.)

|  |  |  |
| --- | --- | --- |
| Practice | Yes | No |
| 1. Offered taste tests of menu items
 |  |  |
| 1. Pre-sliced fruit
 |  |  |
| 1. Provided recess before lunch
 |  |  |
| 1. Added new menu items
 |  |  |
| 1. Revised recipes to improve taste
 |  |  |
| 1. Other practices used [Add space to write in practices]
 |  |

1. During the [insert year range, e.g., 2024-2025] school year, how many minutes did students have to eat breakfast, counting from the time they are seated? \_\_\_\_\_\_\_\_.
2. During the [insert year range, e.g., 2024-2025] school year, how many minutes did students have to eat lunch, counting from the time they are seated? \_\_\_\_\_\_\_\_.

**The next question is about foods sold in addition to school meal programs.**

1. During the [insert year range, e.g., 2024-2025] school year, could students at your school buy the following items from vending machines or at a school store, canteen, or snack bar? (Mark Yes or No for each item.)

|  |  |  |
| --- | --- | --- |
| Item | Yes | No |
| 1. Chocolate candy or other kinds of candy
 |  |  |
| 1. Salty snacks that are not low in fat (e.g., regular potato chips)
 |  |  |
| 1. Cookies, crackers, cakes, pastries, or other baked goods that are not low in fat
 |  |  |
| 1. Ice cream or frozen yogurt that is not low in fat
 |  |  |
| 1. Soda pop or fruit drinks that are not 100% juice
 |  |  |
| 1. Sports drinks (e.g., Gatorade)
 |  |  |

**The next 2 questions are about clean and safe drinking water.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school make safe, unflavored, drinking water available throughout the school day at no cost to students?
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did your school conduct periodic testing of drinking water sources for lead and other contaminants?
	1. Yes
	2. No

**The next question is about food and beverage marketing.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school allow food and beverage marketing (such as contests, coupons, signage) on school campus for foods and beverages that do not meet the USDA’s Smart Snacks in School nutrition standards (such as soda, candy)?
	1. Yes
	2. No

**The next 2 questions are about nutrition education opportunities.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school provide nutrition education to students?
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did your school use the following strategies to expose students to different fruits and vegetables? (Mark Yes or No for each strategy.)

|  |  |  |
| --- | --- | --- |
| Strategy | Yes | No |
| 1. Fruit and vegetable tastings
 |  |  |
| 1. Hosted a local farmer at the school for students to learn about farming
 |  |  |
| 1. Planted or used a school garden
 |  |  |
| 1. Took students on a field trip to a farm
 |  |  |
| 1. Other [Add space to write in a strategy]
 |  |

**The next 2 questions are about foods and beverages for celebrations and rewards.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school have nutrition standards in place for foods and beverages given for celebrations?
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did your school have nutrition standards in place for foods and beverages given as rewards?
	1. Yes
	2. No

**The next 3 questions are about Out of School Time (OST) nutrition and food security policies and practices.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school offer snacks or meals to students in after-school programs through USDA’s Child and Adult Care Food Program (CACFP)?
	1. Yes
	2. No
2. During the [insert year range, e.g., 2024-2025] school year, did all foods and beverages served in after-school programs meet or exceed the USDA Smart Snacks in School nutrition standards or Child and Adult Care Food Program standards?
	1. Yes
	2. No
3. During the [insert year range, e.g., 2024-2025] school year, did your school offer meals or snacks to children, either as part of a summer school program or as a site for the USDA Summer Food Service Program?
	1. Yes
	2. No

## **Section 4: Support for Students with Chronic Health Conditions**

This section focuses on the delivery of school health services and supports for students with chronic health conditions. The questions address school nurses, medication, and efforts to help students and their families manage chronic health conditions.

1. During the [insert year range, e.g., 2024-2025] school year, did your school have a full-time registered nurse who provides health services to students? A full-time nurse means that a nurse is at the school during all school hours, 5 days a week.
	1. Yes, the school had a full-time nurse
	2. No, but the school had a part-time nurse
	3. No, the school did not have a nurse
2. During the [insert year range, e.g., 2024-2025] school year, did your school have a school-based health center that offers health services to students? *School-based health centers* are places on school campuses where enrolled students can receive primary care, including diagnostic and treatment services. These services are usually provided by a nurse practitioner or a physician’s assistant.
	1. Yes
	2. No
3. Approximately what percentage of your student body receives direct care from school nurses or other qualified school health services staff?
	1. 0-24%
	2. 25%-50%
	3. 51%-74%
	4. 75%-100%
4. Approximately what percentage of your student body receives care from school nurses or other qualified school health services staff that is reimbursable under Medicaid expansion?
	1. 0-24%
	2. 25%-50%
	3. 51%-74%
	4. 75%-100%
5. During the [insert year range, e.g., 2024-2025] school year, did your school provide daily medication administration for students with chronic health conditions such as asthma, diabetes, or food allergies?
	1. Yes
	2. No
6. During the [insert year range, e.g., 2024-2025] school year, did your school provide stock rescue or “as needed” medication for any student experiencing a health emergency (such as an asthma episode or severe allergic reaction)?
	1. Yes
	2. No
7. During the [insert year range, e.g., 2024-2025] school year, did your school provide case management for students with chronic health conditions (such as asthma, diabetes, or food allergies)?
	1. Yes
	2. No
8. During the [insert year range, e.g., 2024-2025] school year, did your school offer disease-specific education to students with chronic health conditions and their families to support self-management?
	1. Yes
	2. No
9. During the [insert year range, e.g., 2024-2025] school year, did your school help students with chronic health conditions develop disease-specific management or action plans?
	1. Yes
	2. No
10. During the [insert year range, e.g., 2024-2025] school year, did your school help students with chronic health conditions to be physically active at school? Examples include collaborating with students’ families and health-care providers to maximize student participation in structured and unstructured physical activity, modifying intensity and duration of physical activity as needed, including relevant physical activity information in students’ Individualized Health Care Plan, 504 Plan, and Individualized Education Plan (IEP), and ensuring access to preventive and quick-relief medications.
	1. Yes
	2. No
11. During the [insert year range, e.g., 2024-2025] school year, did your school help students with chronic health conditions to make healthy food choices at school? Examples include knowing students’ dietary restrictions or modifications, asking parents or caregivers to provide schedules for meals and snacks, collaborating with students’ primary health-care providers to ensure monitoring of vital signs and compliance with treatment program, including relevant nutrition information in students’ Individualized Health Care Plan, 504 Plan, and Individualized Education Plan (IEP), and ensuring access to preventive and quick-relief medications.
	1. Yes
	2. No
12. During the [insert year range, e.g., 2024-2025] school year, did your school refer students with chronic health conditions, as needed, to school- or community-based health services that can help with their chronic health condition?
	1. Yes
	2. No
13. During the [insert year range, e.g., 2024-2025] school year, did your school communicate with parents or primary caregivers about after-school protocols and practices for students with chronic health conditions (e.g., asthma, diabetes, food allergies), including if they differ from those used during school hours?
	1. Yes
	2. No

Public reporting burden of this collection of information is estimated to average 30minutes per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX).

# **Healthy Schools Questionnaire**

# **Middle and High School**

# **Introduction**

Schools and after-school programs can help students eat healthy, be physically active, and manage chronic health conditions like asthma, diabetes, and food allergies. Adopting these healthy behaviors can help students be successful and make good grades. Schools can also create a healthy environment for staff, teachers, and the surrounding community. As a school principal, you can support efforts to adopt effective health policies, practices, and programs designed to meet these goals. This questionnaire will help you assess what your school is doing. It has four sections:

* Section 1: School Health Infrastructure
* Section 2: School Physical Education and Physical Activity
* Section 3: School Nutrition Environment and Services
* Section 4: Support for Students with Chronic Health Conditions

You (or someone you designate) should complete this questionnaire with input from your school health council, committee, or team. If needed, you (or your designee) can seek input from other school staff—including other administrators, physical education teachers, health education teachers, classroom teachers, after-school program staff, school food service staff, and school nurses. You can also seek input from parents, community partners, and students.

Your responses should reflect the specific practices and activities in your school during the [insert year range, e.g., 2024-2025] school year including the summer months prior to the first day of school. All responses will be kept confidential. Your school name will be kept private and will not be associated with your responses in any reports or publications.

**Thank you for helping to make the results of this survey comprehensive, accurate, and timely!**

**School Consent Form**

The [state/tribal nation/university] is receiving funds from the Centers for Disease Control and Prevention (CDC) to help improve student health in school and out-of-school-time settings. Your school is within a school district that is part of this funded program.

The purpose of this survey is to learn how schools are implementing evidence-based physical activity, nutrition, and school health services practices and programs for students and advancing health equity during the current [[insert year range, e.g., 2024-2025]] school year.

This survey should take about 30 minutes to complete. The survey should be completed by the school principal or a school staff member designated by the principal. The person completing the survey should reach out to other school staff as needed to respond accurately to all questions in the survey.

Participation in this survey is voluntary and you may choose not to respond to any question. If you choose not to participate, there will be no penalties of any kind to you, your school, or district.

Your survey responses will remain confidential throughout the project. Your name and the name of your school will not be associated with the information that you share for the purpose of this evaluation. Taking part in this survey will cause no risk. The results of the evaluation will be used to improve support and implementation of CDC’s support to schools.

If desired, you may complete the survey over multiple sittings. After you begin, you may save, exit, reenter, and continue the survey where you left off. You can exit the survey and return as many times as needed to fully complete it.

If you have questions about this evaluation please contact the evaluation team at 2302evaluation@icf.com. For questions regarding your rights related to this evaluation you can contact ICF Institutional Review Board (IRB) at irb@icf.com.

Please choose one of the options below and click “next” to confirm:

☐ I have read the above information, and I agree to participate in this survey.

☐ I have read the above information, and I DO NOT wish to participate in this survey. If you choose this option, you will not be allowed to continue the survey.

**Questionnaire**

**Please start by providing the following school information:**

Grade span

Fall enrollment (number of students enrolled at the beginning of the school year)

Website

Date of first day of school for the [insert year range, e.g., 2024-2025] school year

Date of last day of school for the [insert year range, e.g., 2024-2025] school year

School start time each day

School end time each day

1. What is your role? Mark one response.
	1. Principal
	2. Assistant principal
	3. School nurse
	4. School health coordinator
	5. School physical activity or health education teacher
	6. Other

1a. [Display only if ‘Other’ is selected] XXXlease specify your role.

# Section 1: School Health Infrastructure

This section focuses on school health infrastructure practices. The questions address issues related to school health councils, school health policies and practices, local wellness policies, employee health and wellness, comprehensive health education, and family and community engagement.

**The next 4 questions are about having a school health council, committee, or team.**

*School health* refers to the comprehensive efforts to develop, implement, and evaluate services, both within the school and the community, that provide each and every student with the resources needed to thrive within a healthful environment.

1. During the [insert year range, e.g., 2024-2025] school year, did your school have a group or groups—for example, a school health council, committee, or team—to guide the development of health-related policies or coordinate activities?
	1. Yes
	2. No [Skip to Q6 if selected]
2. [Skip if selected No for Q2] During the [insert year range, e.g., 2024-2025] school year, how many times did your school health council, committee, or team meet?
3. 0 times
4. 1 time
5. 2 times
6. 3 times
7. 4 or more times
8. [Skip if selected No for Q2] During the [insert year range, e.g., 2024-2025] school year, were the following representatives on your school health council, committee, or team? (Mark Yes or No for each group.)

|  |  |  |
| --- | --- | --- |
| Group | Yes | No |
| 1. School administrator
 |  |  |
| 1. Physical education teacher
 |  |  |
| 1. Health education teacher
 |  |  |
| 1. School nutrition staff
 |  |  |
| 1. School nurse
 |  |  |
| 1. Other teachers and school staff
 |  |  |
| 1. Before- or after-school program staff. (Before- or after-school program staff are those employed at supervised programs, such as academic programs [e.g., reading or math focused programs], specialty programs [e.g., sports teams, arts enrichment], and multipurpose programs that provide an array of activities. Such programs may be offered by the school, district, or an external organization [e.g., 21st Century Community Learning Centers, Boys & Girls Clubs, YMCAs] and can take place on school grounds or in the community.)
 |  |  |
| 1. Parents or primary caregivers
 |  |  |
| 1. Community partners or community members
 |  |  |
| 1. Students
 |  |  |

1. [Skip if selected No for Q2] During the [insert year range, e.g., 2024-2025] school year, has any school health council, committee, or team at your school done any of the following activities? (Mark Yes or No for each activity.)

|  |  |  |
| --- | --- | --- |
| Activities | Yes | No |
| 1. Identified student health needs based on a review of relevant data
 |  |  |
| 1. Completed a school health assessment to understand and prioritize the school’s health and wellness related needs
 |  |  |
| 1. Used the Whole School, Whole Community, Whole Child (WSCC) framework to guide school health related and wellness activities
 |  |  |
| 1. Recommended new or revised school health policies and activities to school administrators or the school improvement team
 |  |  |
| 1. Sought funding or leveraged resources to support school health priorities for students and staff
 |  |  |
| 1. Communicated the importance of school health policies and activities to district administrators, school administrators, parent-teacher groups, or community members
 |  |  |
| 1. Reviewed health-related curricula or instructional materials
 |  |  |

**The next 3 questions are about assessing school health policies and practices.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school complete the following school health assessment tools to identify school health and wellness-related needs? (Mark Yes or No for each assessment tool.)

|  |  |  |
| --- | --- | --- |
| Assessment tool | Yes | No |
| 1. CDC’s School Health Index (SHI)
 |  |  |
| 1. CDC’s Wellness Policy in Action Tool (WPAT)
 |  |  |
| 1. CDC’s Health Education Curriculum Analysis Tool (HECAT)
 |  |  |
| 1. CDC’s Physical Education Curriculum Analysis Tool (PECAT)
 |  |  |
| 1. Alliance for a Healthier Generation’s Thriving Schools Integrated Assessment
 |  |  |
| 1. The National Afterschool Association’s (NAA) Healthy Eating and Physical Activity (HEPA) Standards 2.0 Self-Assessment tool
 |  |  |
| 1. American Academy of Pediatrics’ (AAP) Health services Assessment Tool for Schools (HATS)
 |  |  |
| 1. Other (please specify): [Add space to write in what is being used]
 |  |  |

1. During the [insert year range, e.g., 2024-2025] school year, did your school develop or update a school health action plan that describes steps to meet the school health and wellness-related needs of all students?
2. Yes, based on the results of a school health assessment (e.g., CDC assessment tools like the SHI, WPAT, PECAT, and HECAT, or non-CDC assessment tools like Thriving Schools Integrated Assessment, HEPA Standards, or HATS)
3. Yes, but not based on the results of a school health assessment
4. No [Skip to Q9 if selected]
5. [Skip if selected No for Q7] During the [insert year range, e.g., 2024-2025] school year, did your school’s school health action plan include an activity focused on the following topics? (Mark Yes or No for each topic.)

|  |  |  |
| --- | --- | --- |
| Topic | Yes | No |
| 1. Physical education
 |  |  |
| 1. Physical activity (i.e., active learning in the classroom, recess, walking clubs, etc.)
 |  |  |
| 1. School meal programs
 |  |  |
| 1. Foods and beverages available at school outside the school meal programs
 |  |  |
| 1. Food and beverage marketing
 |  |  |
| 1. School health services
 |  |  |
| 1. Services and supports for students with chronic health conditions (e.g., asthma, diabetes, and food allergies)
 |  |  |
| 1. Social and emotional climate
 |  |  |
| 1. Family engagement
 |  |  |
| 1. Community involvement
 |  |  |
| 1. Employee wellness
 |  |  |

**The next 3 questions are about providing professional development to school staff.**

1. During the [insert year range, e.g., 2024-2025] school year (including the summer months prior to the first day of school), did school staff receive trainings or professional development opportunities (e.g., in-service trainings, workshops, conferences, and continuing education) on the following topics? (Mark Yes or No for each topic.)

|  |  |  |
| --- | --- | --- |
| Topic | Yes | No |
| 1. Physical education
 |  |  |
| 1. Physical activity (i.e., active learning in the classroom, recess, walking clubs, etc.)
 |  |  |
| 1. School meal programs
 |  |  |
| 1. Foods and beverages available at school outside the school meal programs
 |  |  |
| 1. Food and beverage marketing
 |  |  |
| 1. School health services
 |  |  |
| 1. Services and supports for students with chronic health conditions (e.g., asthma, diabetes, and food allergies)
 |  |  |
| 1. Social and emotional climate
 |  |  |
| 1. Family engagement
 |  |  |
| 1. Community involvement
 |  |  |
| 1. Employee wellness
 |  |  |
| 1. Other school health topics (please specify) [include space to write in other topics]
 |  |  |

1. <<Display Q only if answered “Yes” to 9a or 9b>> During the [insert year range, e.g., 2024-2025] school year (including the summer months prior to the first day of school), did the following types of staff attend trainings or professional development (e.g., workshops, conferences, continuing education, any other kind of in-service) related to physical education or other strategies for integrating more physical activity opportunities before, during, and after the school day (e.g., recess, classroom physical activity)? (Mark Yes or No for each type of staff.)

|  |  |  |
| --- | --- | --- |
| Type of staff | Yes | No |
| 1. Physical education teachers or specialists
 |  |  |
| 1. Classroom teachers
 |  |  |
| 1. Before- or after-school program staff
 |  |  |
| 1. Other school staff
 |  |  |

1. <<Display Q only if answered “Yes” to 9c, 9d, or 9e >> During the [insert year range, e.g., 2024-2025] school year (including the summer months prior to the first day of school), did the following types of staff attend trainings or professional development (e.g., workshops, conferences, continuing education, any other kind of in-service) related to school nutrition environment and services? (Mark Yes or No for each type of staff.)

*School nutrition environment* includes the foods and beverages that are available to students throughout the school day, and information and messages about food, beverages, and nutrition that students encounter on school grounds.

*School nutrition services* provide meals that meet federal nutrition standards for the National School Lunch and Breakfast Programs, accommodate the health and nutrition needs of all students, and help ensure that foods and beverages sold outside of the school meal programs meet Smart Snacks in School nutrition standards.

|  |  |  |
| --- | --- | --- |
| Type of staff | Yes | No |
| 1. School nutrition program managers
 |  |  |
| 1. Other school nutrition staff (e.g., cooks, lunch line servers)
 |  |  |
| 1. After-school program staff
 |  |  |
| 1. Other school staff
 |  |  |

**The next 3 questions are about implementing local wellness policy.**

1. Are staff at your school aware of the requirements of your district’s local wellness policy?
2. Yes
3. No
4. Not sure
5. Did anyone at your school assess how your school is meeting the district’s local wellness policy requirements during the current and previous years? (Mark Yes or No for each school year.)

|  |  |  |
| --- | --- | --- |
| School Year | Yes | No |
| * 1. [insert year range, e.g., 2024-2025] school year
 |  |  |
| * 1. 2023-2024 school year
 |  |  |
| * 1. 2022-2023 school year
 |  |  |

1. During the [insert year range, e.g., 2024-2025] school year, did someone at your school communicate about the district’s local wellness policy to school staff, after-school program staff, families, and students? Examples of communication methods include school websites, Parent-Teacher Association meetings, and school newsletter.
2. Yes
3. No

**The next question is about offering employee health and wellness.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school offer employee health and wellness programming to promote the following areas for teachers and school staff?

|  |  |  |
| --- | --- | --- |
| Topic | Yes | No |
| * 1. Physical activity
 |  |  |
| * 1. Healthy Eating
 |  |  |
| * 1. Mental Health
 |  |  |

**The next question is about providing health education.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school provide formal, structured health education for students? Formal, structured health education consists of any combination of planned learning experiences that provide the opportunity to acquire information and the skills students need to make quality health decisions.
2. Yes
3. No

**The next question is about health needs and interests of students.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school assess the needs and interests of students related to healthy eating, physical activity, or health services?
2. Yes
3. No

**The next 4 questions are about family engagement.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school assess the needs and interests of parents or primary caregivers related to healthy eating, physical activity, or health services?
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school send out a newsletter for parents or primary caregivers that includes information about healthy eating, physical activity, or health services?
5. Yes
6. No
7. During the [insert year range, e.g., 2024-2025] school year, did your school host periodic health and wellness events that educate and inform parents or primary caregivers about healthy eating, physical activity, or management of chronic health conditions (such as asthma, diabetes, and food allergies)?
8. Yes
9. No
10. During the [insert year range, e.g., 2024-2025] school year, did your school promote volunteer opportunities for parents or primary caregivers to help with programs and events related to healthy eating, physical activity, or health services?
11. Yes
12. No

**The next 3 questions are about community engagement.**

1. During the [insert year range, e.g., 2024-2025] school year, did any community partners contribute resources or expertise to school health activities?
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school partner with community organizations to provide students with formal before- or after-school programs? Examples include school-age childcare programs, academic instruction and tutoring programs (e.g., 21st Century Community Learning Centers), and multipurpose programs offered by youth-serving organizations such as the YMCA or the Boys & Girls Clubs of America.
5. Yes
6. No
7. During the [insert year range, e.g., 2024-2025] school year, did your school partner with community organizations to help students and families access food when school is not in session? Examples include helping families enroll in programs for which they are eligible, like SNAP and/or Summer EBT, or partnering with food banks to organize backpack programs during weekends and school breaks.
8. Yes
9. No

**Section 2: School Physical Education and Physical Activity**

This section focuses on school physical education and physical activity practices that help schools implement a [Comprehensive School Physical Activity Program](https://www.cdc.gov/healthyschools/physicalactivity/pdf/2019_04_25_PE-PA-Framework_508tagged.pdf) (CSPAP), which is a framework for planning and organizing activities for school physical education and physical activity. The questions address physical education, physical activity during the school day and before and after school, family and community engagement in physical activity, and having a written plan for physical education and physical activity.

**The next 4 questions are about physical education.**

1. During the [insert year range, e.g., 2024-2025] school year, how many weeks were students required to attend physical education? (For each grade, select the option that best represents the number of weeks required to attend physical education, or if your school does not have that grade, mark “grade not taught in your school.”)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Grade | Physical education is not required | One quarter of the year (or ~9 weeks) | Two quarters of the year (or ~18 weeks) | Three quarters of the year (or ~27 weeks) | All School Year(36 weeks) | Grade not taught in your school |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |

1. During the [insert year range, e.g., 2024-2025] school year, how many days per week were students scheduled to take physical education during a typical school week? (For each grade, select the number of days of scheduled physical education per week when it is offered, or if your school does not have that grade, mark “grade not taught in your school.”)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Grade | 0 days | 1 day | 2 days | 3 days | 4 days | 5 days | Varied (e.g., 2 days one week, 3 the other) | Grade not taught in your school |
| 6 |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |

1. During the [insert year range, e.g., 2024-2025] school year, did your physical education program use a curriculum that aligns with state or national standards for physical education?
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did students complete fitness or physical activity assessments at least once?
5. Yes
6. No

**The next 3 questions are about physical activity during school.**

1. During the [insert year range, e.g., 2024-2025] school year, not including physical education and classroom physical activity, did your school offer opportunities for all students to be physically active for at least 20 minutes each school day? Examples include lunchtime intramural activities, physical activity clubs, or recess.
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did students participate in daily physical activity breaks or active lessons in classrooms during the school day outside of physical education and other physical activity opportunities, including lunchtime intramural activities, physical activity clubs, or recess?
5. Yes
6. No
7. During the [insert year range, e.g., 2024-2025] school year, did your school regularly promote or provide school-wide physical activity opportunities outside of physical education classes, recess, and classroom physical activity—for example, during morning announcements, school-wide fitness challenges, school-wide structured walking programs?
8. Yes
9. No

**The next 2 questions are about physical activity before and after school.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school offer before-school physical activity programs to students? Examples include walking clubs, early access to gyms or other school grounds and facilities, and initiatives that promote walking, biking, or rolling (in a wheelchair or on a scooter or skateboard) to school.
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school offer after-school physical activity programs to students? Examples include walking clubs, early access to gyms or other school grounds and facilities, and initiatives that promote walking, biking, or rolling (in a wheelchair or on a scooter or skateboard) from school.
5. Yes
6. No

**The next 3 questions are about family and community engagement.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school ask parents or primary caregivers to help with any activity, event, or program related to physical activity? Examples include volunteering during physical education, serve on planning committees, donating equipment and supplies, and attending school physical activity events.
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school ask community partners or community members to help with any activity, event, or program related to physical activity? Examples include providing grant funding for physical activity programming, volunteering to lead physical activity programs, and providing equipment or supplies for physical activity programs.
5. Yes
6. No
7. During the [insert year range, e.g., 2024-2025] school year, did your school, either directly or through the school district, have a joint use agreement for shared use of physical activity or sports facilities? A joint use agreement is a formal agreement between a school or school district and another public or private entity to jointly use either school facilities or community facilities to share costs and responsibilities.
8. Yes
9. No

**The next question is about having a plan for physical education and physical activity.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school have a written plan for providing opportunities for students to be physically active before, during, and after school? This might be called a Comprehensive School Physical Activity Program (CSPAP) plan.
2. Yes
3. No

**Section 3: School Nutrition Environment and Services**

This section focuses on the school nutrition environment and services. The questions address school meal programs, Smart Snacks in School nutrition standards, clean and safe drinking water, food and drink marketing, nutrition education opportunities, and the use of foods and drinks for celebrations and rewards. They also address access to nutritious foods in Out of School Time (OST) programs.

*School nutrition environment* includes the foods and beverages that are available to students throughout the school day, and information and messages about food, beverages, and nutrition that students encounter on school grounds.

*School nutrition services* provide meals that meet federal nutrition standards for the National School Lunch and Breakfast Programs, accommodate the health and nutrition needs of all students, and help ensure that foods and beverages sold outside of the school meal programs meet Smart Snacks in School nutrition standards.

**The next 6 questions are about school meal programs.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school coordinate class schedules with bus transportation schedules to allow all students the opportunity to obtain breakfast at school?
2. Yes
3. No
4. Not applicable: Our school offers breakfast in the classroom or during morning break
5. During the [insert year range, e.g., 2024-2025] school year, did your school offer breakfast meals during morning breaks or in the classroom?
6. Yes
7. No
8. During the [insert year range, e.g., 2024-2025] school year, did your school offer free and reduced-price meals for students who meet income requirements?
9. Yes
10. No
11. During the [insert year range, e.g., 2024-2025] school year, did your school use the following practices to increase consumption of school meals? (Mark Yes or No for each practice.)

|  |  |  |
| --- | --- | --- |
| Practice | Yes | No |
| 1. Offered taste tests of menu items
 |  |  |
| 1. Pre-sliced fruit
 |  |  |
| 1. Provided recess before lunch
 |  |  |
| 1. Added new menu items
 |  |  |
| 1. Revised recipes to improve taste
 |  |  |
| 1. Other practices used: [Add space to write other practiced used]
 |  |

1. During the [insert year range, e.g., 2024-2025] school year, how many minutes did students have to eat breakfast, counting from the time they are seated? \_\_\_\_\_\_\_\_.
2. During the [insert year range, e.g., 2024-2025] school year, how many minutes did students have to eat lunch, counting from the time they are seated? \_\_\_\_\_\_\_\_.

**The next question is about foods sold in addition to school meal programs.**

1. During the [insert year range, e.g., 2024-2025] school year, could students at your school buy the following items from vending machines or at a school store, canteen, or snack bar? (Mark Yes or No for each item.)

|  |  |  |
| --- | --- | --- |
| Item | Yes | No |
| 1. Chocolate candy or other kinds of candy
 |  |  |
| 1. Salty snacks that are not low in fat (e.g., regular potato chips)
 |  |  |
| 1. Cookies, crackers, cakes, pastries, or other baked goods that are not low in fat
 |  |  |
| 1. Ice cream or frozen yogurt that is not low in fat
 |  |  |
| 1. Soda pop or fruit drinks that are not 100% juice
 |  |  |
| 1. Sports drinks (e.g., Gatorade)
 |  |  |
| 1. Energy drinks (e.g., Red Bull, Monster)
 |  |  |

**The next 2 questions are about clean and safe drinking water.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school make safe, unflavored, drinking water available throughout the school day at no cost to students?
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school conduct periodic testing of drinking water sources for lead and other contaminants?
5. Yes
6. No

**The next question is about food and beverage marketing.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school allow food and beverage marketing (such as contests, coupons, signage) on school campus for foods and beverages that do not meet the USDA’s Smart Snacks in School nutrition standards (such as soda, candy)?
2. Yes
3. No

**The next 2 questions are about nutrition education opportunities.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school provide nutrition education to students?
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school use the following strategies to expose students to different fruits and vegetables? (Mark Yes or No for each strategy.)

|  |  |  |
| --- | --- | --- |
| Strategy | Yes | No |
| 1. Fruit and vegetable tastings
 |  |  |
| 1. Hosted a local farmer at the school for students to learn about farming
 |  |  |
| 1. Planted or used a school garden
 |  |  |
| 1. Took students on a field trip to a farm
 |  |  |
| 1. Other: [Add space to write in a strategy]
 |  |

**The next 2 questions are about foods and beverages for celebrations and rewards.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school have nutrition standards in place for foods and beverages given for celebrations?
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did your school have nutrition standards in place for foods and beverages given as rewards?
5. Yes
6. No

**The next 3 questions are about Out of School Time (OST) nutrition and food security policies and practices.**

1. During the [insert year range, e.g., 2024-2025] school year, did your school offer snacks or meals to students in after-school programs through USDA’s Child and Adult Care Food Program (CACFP)?
2. Yes
3. No
4. During the [insert year range, e.g., 2024-2025] school year, did all foods and beverages served in after-school programs meet or exceed the USDA Smart Snacks in School nutrition standards or Child and Adult Care Food Program standards?
5. Yes
6. No
7. During the [insert year range, e.g., 2024-2025] school year, did your school offer meals or snacks to children, either as part of a summer school program or as a site for the USDA Summer Food Service Program?
8. Yes
9. No

**Section 4: Support for Students with Chronic Health Conditions**

This section focuses on the delivery of school health services and supports for students with chronic health conditions. The questions address school nurses, medication, and efforts to help students and their families manage chronic health conditions.

1. During the [insert year range, e.g., 2024-2025] school year, did your school have a full-time registered nurse who provides health services to students? A full-time nurse means that a nurse is at the school during all school hours, 5 days a week.
2. Yes, the school had a full-time nurse
3. No, but the school had a part-time nurse
4. No, the school did not have a nurse
5. During the [insert year range, e.g., 2024-2025] school year, did your school have a school-based health center that offers health services to students? *School-based health centers* are places on school campus where enrolled students can receive primary care, including diagnostic and treatment services. These services are usually provided by a nurse practitioner or physician’s assistant.
6. Yes
7. No
8. Approximately what percentage of your student body receives direct care from school nurses or other qualified school health services staff?
9. 0-24%
10. 25%-50%
11. 51%-74%
12. 75%-100%
13. Approximately what percentage of your student body receives care from school nurses or other qualified school health services staff that is reimbursable under Medicaid expansion?
14. 0-24%
15. 25%-50%
16. 51%-74%
17. 75%-100%
18. During the [insert year range, e.g., 2024-2025] school year, did your school provide daily medication administration for students with chronic health conditions (such as asthma, diabetes, or food allergies)?
19. Yes
20. No
21. During the [insert year range, e.g., 2024-2025] school year, did your school provide stock rescue or “as needed” medication for any student experiencing a health emergency (such as an asthma episode or severe allergic reaction)?
22. Yes
23. No
24. During the [insert year range, e.g., 2024-2025] school year, did your school provide case management for students with chronic health conditions (such as asthma, diabetes, or food allergies)?
25. Yes
26. No
27. During the [insert year range, e.g., 2024-2025] school year, did your school offer disease-specific education to students with chronic health conditions and their families to support self-management?
28. Yes
29. No
30. During the [insert year range, e.g., 2024-2025] school year, did your school help students with chronic health conditions develop disease-specific management or action plans?
31. Yes
32. No
33. During the [insert year range, e.g., 2024-2025] school year, did your school help students with chronic health conditions to be physically active at school? Examples include collaborating with students’ families and health-care providers to maximize student participation in structured and unstructured physical activity, modifying intensity and duration of physical activity as needed, including relevant physical activity information in students’ Individualized Health Care Plan, 504 Plan, and Individualized Education Plan (IEP), and ensuring access to preventive and quick-relief medications.
34. Yes
35. No
36. During the [insert year range, e.g., 2024-2025] school year, did your school help students with chronic health conditions to make healthy food choices at school? Examples include knowing students’ dietary restrictions or modifications, asking parents or caregivers to provide schedules for meals and snacks, collaborating with students’ primary health-care providers to ensure monitoring of vital signs and compliance with treatment program, including relevant nutrition information in students’ Individualized Health Care Plan, 504 Plan, and Individualized Education Plan (IEP), and ensuring access to preventive and quick-relief medications.
37. Yes
38. No
39. During the [insert year range, e.g., 2024-2025] school year, did your school refer students with chronic health conditions, as needed, to school- or community-based health services that can help with their chronic health condition?
40. Yes
41. No
42. During the [insert year range, e.g., 2024-2025] school year, did your school communicate with parents or primary caregivers about after-school protocols and practices for students with chronic health conditions (e.g., asthma, diabetes, or food allergies), including if they differ from those used during school hours?
43. Yes
44. No