

## Companion Document for the 2012 School Health Profiles Survey Middle School/High School Principal Questionnaire

For principals completing the **green** survey, this companion document may be helpful as some of the questions are considered. **Please refer to this document when completing the survey.** It is important to also ask other school staff and/or school wellness/safety team members to assist you with your response as input from team members helps to ensure correct answers and accurate data.

The number and question in each box below mirror the number and question in the actual questionnaire. Rationale related to each question follows. The questions found in the companion document specifically provide data on the status of nine Connecticut-selected School Level Impact Measures (SLIMs). These SLIMs are areas of focus for Department activities. Information on SLIMs is found at the end of this document.

### This question informs SLIM (CSH #3)

1. Has your school ever used the School Health Index or other self-assessment tool to assess your school's policies, activities, and programs in the following areas?  
(Mark yes or no for each area a-e)

**HINT:** You may want to check with your school wellness team (School Nurse, PE/Health Teacher, School Nutrition Manager) if you are unsure. Answer **YES to some or all of the areas** for this question if you used other assessments tools such as: *The Healthy School Report Card* (ASCD), *Healthy Schools Inventory* (Alliance for a Healthier Generation) or *Wellness School Assessment Tool* (WellsAT). If your school participates in the Coordinated School Health Leadership Project, answer **YES** to all areas for this question.

**RATIONALE:** Assessment of policies related to student health is a critical first step in improving implementation of policies, programs, or environmental strategies to effect change or improvement in school health. Findings from school health assessments may provide valuable information to inform school improvement plans.

### These questions inform SLIM (CSH #2)

5. Is there one or more than one group (e.g., a school health council, committee, or team) at your school that offers guidance on the development of policies or coordinates activities on health topics? If **No**, skip to Question 8.
6. Are each of the following groups represented on any school health council, committee, or team? (Mark yes or no for each group a-q)

**HINT:** Schools may refer to these groups in a number of ways, including: school health teams, school wellness/safety teams or school improvement teams. What teams do you have at your school? **Check membership lists before answering Question 6.**

**RATIONALE:** The school health committee or team should represent a coalition of representatives from within and outside of the school community interested in improving the health of youth in schools. Policies and actions tend to be more comprehensive and effective when developed with input from those they affect.

**This question informs SLIM (HIV #9)**

8. Has your school adopted a policy that addresses each of the following issues on human immunodeficiency virus (HIV) infection or AIDS? (Mark yes or no for each issue a-h)

**HINT:** Research-based best practice supports the adoption of these policies; many of which are required by state mandates.

**RATIONALE:** This question assesses important components of school-level policies in place to address students and staff infected with HIV or AIDS. Students and staff infected with HIV or AIDS need policies protecting their rights.

**This question informs SLIM (PE #3)**

15. Are those who teach physical education at your school provided with each of the following materials? (Mark yes or no for each material a-d)

**HINT:** A district-approved physical education (PE) or wellness education curriculum would likely contain goals, objectives and expected outcomes for physical education as well as scope and sequence charts and assessment plans and expectations. PE teachers usually participate in the development of the subject-area curriculum.

**RATIONALE:** This question measures the type of information and support materials PE teachers are given in order to implement PE classes. According to the National Association for Sport and Physical Education (NASPE), quality physical education is guided by and should include a written PE curriculum; goals, objectives, and expected outcomes; scope and sequence of instruction for PE; and plans for age-appropriate student assessment.

**These questions inform SLIM (TOB #1)**

20. Has your school adopted a policy prohibiting tobacco use? If **No**, skip to Question 27.
21. Does the tobacco-use prevention policy specifically prohibit use of each type of tobacco for each of the following groups during any school-related activity? (Mark yes or no for each group a-d)
22. Does the tobacco-use prevention policy specifically prohibit tobacco use during each of the following times for each of the following groups? (Mark yes or no for each of the following times for each group a-b)
23. Does the tobacco-use prevention policy specifically prohibit tobacco use in each of the following locations for each of the following groups? (Mark yes or no for each group a-d)

**HINT:** Under Connecticut state law, all schools must be smoke-free. Many school districts have comprehensive policies banning the use of any tobacco products on school property and at any school-sponsored activities by both students and adults. Please review a copy of your district's tobacco use policy as well as your student and faculty handbooks as you consider which rules are in place for this question.

**RATIONALE:** The existence and enforcement of a school policy creates a tobacco-free environment that models acceptable behavior and sends a clear message to students, teachers, staff, parents and visitors that the use of tobacco is socially unacceptable.

**Thank you for your assistance with the 2012 School Health Profiles Survey. Your time and expertise is greatly appreciated. For more information on Coordinated School Health and School Health Profiles, please go [www.ct.gov/sde/healthyconneCTions](http://www.ct.gov/sde/healthyconneCTions).**

## Connecticut Selected School Level Impact Measures (SLIMs)

School Level Impact Measures (SLIMs) are measures of the percentage of secondary schools in the State of Connecticut that are implementing policies and practices recommended by the Centers for Disease Control and Prevention (CDC) to address critical health problems faced by children and adolescents. *School Health Profiles* questions are used to measure each of the nine state-selected SLIMs.

Connecticut's Coordinated School Health activities will focus on nine SLIMs that encompass four distinct categories: Coordinated School Health (CSH), tobacco (TOB), nutrition (NU), physical activity/physical education (PA/PE) and HIV.

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1. Percentage of schools that have a **school health team**.  
(Coordinated School Health #2)
  2. Percentage of schools that use the **School Health Index** to assess their policies, activities and programs. (Coordinated School Health #3)
  3. Percentage of schools in which those who teach **health education** are provided with the necessary **tools** such as curriculum, student assessment tools, etc. (Coordinated School Health #6)
  4. Percentage of schools that have a **tobacco policy** that prohibits tobacco use.  
(Tobacco #1)
  5. Percentage of schools in which the lead health education teacher received **professional development** on **nutrition education** and **dietary behavior** during the past two years. (Nutrition #4)
  6. Percentage of schools in which those who teach **physical education** are provided with the necessary **tools** such as curriculum, student assessment tools, etc. (Physical Education #3)
  7. Percentage of schools that provide parents and families health information to increase **parent and family knowledge of HIV, STD or teen pregnancy prevention**. (HIV #5)
  8. Percentage of schools in which the lead health education teacher received **professional development** during the past two years in at least **six HIV areas**. (HIV #8)
  9. Percentage of schools that have a **policy or policies that address HIV issues**. (HIV #9)