2021-22 SCHOOL YEAR SCHOOL HEALTH PROFILES FORM

Healthy Schools Act of 2010

Under Section 602 of the *Healthy Schools Act of 2010* (L18-0209, DC Official Code § 38-826.02), each public school and public charter school within the District of Columbia is required to:

- 1.) **Complete and submit** the online School Health Profile (SHP) form to the Office of the State Superintendent of Education (OSSE).
- 2.) **Make the completed profile available to the public** by posting it online, if the school has a website, and making the information available to parents in the school's main office.

Any public school or public charter school that fails to complete and submit its SHP form to OSSE **on or before Feb. 15** of each year will be out of compliance with Section 602 of the Healthy Schools Act of 2010. The School Health Profile is used by OSSE to inform the School Report Card. Non-compliant schools will not include data from their School Health Profile on their School Report Card.

Section 1: School Profile

1. Type of School*
O Public School
Public Charter School
O Private School
2. LEA ID: 108
3. School Code: 1207
4. Ward: 4
5. LEA Name* Capital City PCS
5a. School Name* Capital City PCS - High School
6. Grades Served. Select all that apply*
Pre-K-3 and Pre-K4
\square K
\Box 1
\square 2
\square 3
\Box 4
□ 7
□ 8
☑ 9
✓ 10
✓ 11

☑ ₁₂
□ Adult
Other:
7. Contact Name of Person Completing and verifying the School Health Profile (SHP)* Jonathan Rolf Weinstein
7a. E-mail of person completing the SHP* jweinstein@ccpcs.org
8. Job Title of person completing the SHP* COO
This person will be contacted by OSSE if there are questions about the SHP and will also receive a PDF copy of the completed HSA SHP via e-mail for posting per section 602(c) of the Healthy Schools Act of 2010.
Note: Responses are required for questions with an asterisk.

Section 2: Health Services

Recommended point of contact for this section: School Health Professional and School Behavioral Health Professional

Important Definitions for this Section:

Nursing: Registered nurses (RN) or licensed practical nurses (LPN).

<u>Allied health professional</u>: Nursing assistants, medical technicians, or anyone who can support a nurse; it doesnot refer to related service providers for purposes of special education.

<u>Undesignated Epinephrine Injector</u>: An epinephrine auto-injector that is not assigned to a specific student by prescription.

Please note, any nurse or allied health professional within the school building for the sole purpose of administering COVID-19 testing or vaccinations should not be included in responses to questions 9, 9a, or 9b below

9. Do you have nursing and/or	allied health p	rofessi	onal	coverage in your school?*		
✓ Yes						
□ _{No}						
9a. Please state the coverage of	f nursing and/	or allie	d hea	alth professional coverage in your school:*	k	
Nurse	# full time	(0 – 10)) 1	# part time $(0-10)$ <u>0</u>		
Allied health professional	# full time	(0 – 10)) <u>0</u>	# part time $(0-10)$ <u>0</u>		
9b. For the coverage you indic	ated in 9a, ple	ase sta	te the	e funding source:*		
Nurse Self-funded	_		Vo ✓	Allied health professional Self-funded	Yes	No
Provided by the Department of	Health [Z [Provided by the Department of Health		
Other						
10. What type(s) of health serv	vices does your	schoo	l offe	r to students? Select all that apply		
✓ Access and/or referrals t	o medical prov	iders th	irougl	h a systematic process		
✓ Prevention materials and resources for chronic diseases (diabetes, obesity, asthma, etc.)						
✓ Screening, testing, and/or treatment for chronic diseases (diabetes, obesity, asthma, etc.)						
✓ On-site COVID-19 testing						
✓ Prevention materials and resources for sexually transmitted diseases (HIV/AIDS, gonorrhea, chlamydia, etc.)						
☐ Screening, testing, and/or treatment for sexually transmitted diseases (HIV/AIDS, gonorrhea, chlamydia, etc.)						
Oral health services (scr	eening, cleanin	g, cour	nselin	g, etc.)		
✓ Vision screenings						
Hearing screenings						

On-site COVID-19 vaccinations	s and routine pediatric immunizations
10a. Does your school partner with an	ny outside programs or organizations to provide health services to students?
✓ Yes	
☐ No	
10b. Please specify their name below	(including Community Based Organizations, DC Health, etc.).
Name of agency or organization:	1health, St. Jude Laboratories
11. Does your school have at least two	unexpired undesignated epinephrine auto-injectors? *
✓ Yes	
\square No	
•	o employees or agents (outside of the school nurse) who are certified to a designated epinephrine auto-injector during all hours of the school day in
✓ Yes	
□ No	
11b. Please provide the names of AOI they were certified, if applicable:	M (Administration of Medication) certified personnel at your school and when
11bw. Name: Jonathan Weinstein	11bwi. Date of Certification: 09-03-2019
11bx. Name: Aisha Hassa	11bxi. Date of Certification: 08-26-2019
11by. Name:	11byi. Date of Certification:
11bz. Name:	11bzi. Date of Certification:
12. Does your school have an Automat	ted External Defibrillator (AED)?
✓ Yes	
□ No	
13. How many of the following clinica school?*	al staff are currently employed, work as a contractor, or volunteer at your
Licensed Independent Clinical Social Worker (LICSW)	# full time $(0-10)$: 1 #part time $(0-10)$: 0 Funding Source: Provided by the Department of Behavioral Health
Licensed Graduate Social Worker (LGSW)	# full time $(0-10)$: 1 #part time $(0-10)$: 0 Funding Source: Self-Funded
Licensed Professional Counselor (LPC)	# full time $(0-10)$: #part time $(0-10)$: Funding Source:

	nsed Graduate Professional selor (LGPC)	# full time (0 – 10):	#part time (0 – 10):	Funding Source:
Psyc	hologist	# full time $(0 - 10)$:	#part time $(0 - 10)$:	Funding Source:
Psyc	hiatrist	# full time $(0 - 10)$:	#part time (0 – 10):	Funding Source:
14. Pl	ease provide the contact inform	ation of your school be	havioral health point o	f contact:
14a. (Contact Name* Wanda Gregory			
14b. (Contact E-mail* wgregory@ccp	ocs.org		
indic	oes your school provide access t ates that behavioral health serv receive services through an IEP	ices are available to stu		
	✓ Yes			
	□ _{No}			
	Ooes your school partner with a test to students?	ny outside programs or	organizations to provi	de behavioral/mental health
	✓ Yes			
	☐ No			
	Please specify their name(s) bel	ow (including Commu	nity Based Organizatio	ns, Department of Behavioral
Na	ame of agency(ies) or organization	n(s): Mary's Center, l	DWW Psychological Ser	vices
staff v	Does your school facilitate parer working together to support and xample, PTO, PTA, Wellness C	l improve the learning,	0 0	is defined as parents and school th of children and adolescents.
	✓ Yes			
[□ No			
18. I	Ooes your school offer any healt	h and wellness educatio	on for parents?	
	✓ Yes			
	☐ No			
18a. apply		and wellness education o	options does your schoo	ol offer to parents? Select all that
Г	Health risks related education	(e.g. managing student a	sthma, blood pressure so	creenings)

	✓	Mental health education (e.g. stress management, warning signs of youth suicide)
		Physical health education (e.g. nutrition or cooking classes, obesity prevention)
	✓	Physical activity education (e.g. Zumba, yoga, parent-child exercise classes)
	✓	Personal health education (e.g. how to talk to your child about appropriate touch, puberty, healthy relationships, sexual health resources)
	✓	COVID-19 risks related education (e.g. mitigation strategies, vaccination, etc.)
		Other:
19.	Do	es your school offer any health and wellness initiatives to staff that contribute to a positive school climate?
	✓	Yes
		No
19a	. W	What type of staff wellness initiatives does your school offer that contribute to a positive school climate?
	✓	Organizational structures to support staff wellness (lactation rooms, welcoming break rooms, early dismissal days, opportunities to engage teacher voice and build trusting relationships, etc.)
	✓	Staff wellness events (retreats, wellness days, workshops, campaigns, etc.) to promote positive self-care skills like fitness, nutrition, stress management, etc.
	✓	Professional development (Trauma informed care, self-care, grief and loss, etc.)
	√	Mental/Behavioral health services offered through an Employee Assistance Program or partnering community-based organization

Section 3: Health Education Instruction

Recommended point of contact for this section: Health Education Teacher, Physical Education teacher

Important Definitions for this Section:

<u>Health Education:</u> Formal, structured health education as defined by the Centers for Disease Control and Prevention 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. Health education instruction of the District of Columbia Health Education Standards (DC Official Code § 38–821.01). The Healthy Schools Act requires an average of 75 minutes of health education per week for grades K - 8 (DC Official Code § 38–824.02).

Health Education Minutes (Grades 1-8): The average number of minutes per week during the school year that a student receives health education instruction. This average should only include time devoted exclusively to health education instruction that utilizes a health-specific curriculum. Do NOT include physical education instruction time in this figure. For this question, please indicate the average number of minutes per week that your school provides health education instruction to each grade level. Average number of minutes of health education instruction per week can range between 0 and 125 minutes.

Note: If your school provides more than 125 minutes of health education instruction in an average week, enter 125. If a student only receives health education for one semester or one quarter, please average the total weekly minutes for the whole school year.

Do you have questions regarding this calculation and need support? If so, please contact OSSE's Division of Health and Wellness here: OSSE.HYDT@dc.gov

The Office of the State Superintendent of Education (OSSE) is committed to providing technical assistance to schools that do not meet the Health Education minute requirements. Schools that do not meet the required Health Education minutes will receive follow-up support from OSSE.

<u>Health Education Requirement (Grades 9-12):</u> According to the District of Columbia Municipal Regulations, prior to graduation, all students must have one and one half (1.5) Carnegie Units in Health/Physical Education.

Cardiopulmonary Resuscitation (CPR) Training: Cardiopulmonary resuscitation (CPR) is a lifesaving technique that is useful in many emergencies, such as a heart attack or near drowning, in which someone's breathing or heartbeat has stopped. District of Columbia public and public charter schools that serve grades 9 through 12 shall include cardiopulmonary resuscitation (CPR) instruction in at least one health class necessary for graduation. The instruction shall be nationally recognized and based on the most current evidence-based emergency cardiovascular care guidelines for resuscitation, include appropriate use of an automated external defibrillator (AED), and incorporate hands-on practice (DC Official Code § 38–824.02).

The following questions ask for the names and contact information for teachers who instruct 1) only health education, 2) only physical education, and 3) both health education and physical education at your school.

20.	How many	teachers instruct	only health	education in you	r school? (0-10)* (

Note: Please make sure teachers reported in questions 20, 21, and 22 are not counted for more than one time.

20a. Name of Health Education Instructor 1 20ai. Health Education Instructor 1 E-mail

20L	Nama	of Hoolth	Education	Instructor	
zun.	Name (or Health	Education	Instructor	

2001. Health Baucanon instructor i D-man	20bi.	Health	Education	Instructor	1	E-mail
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21. How many teachers instruct only physical education in you school? (0-10)* 2

21a. Name of Physical Education Instructor 1 21ai. Ph

21ai. Physical Education Instructor 1 E-mail

Reggie Glass

rglass@ccpcs.org

21b. Name of Physical Education Instructor 2

21bi. Physical Education Instructor 2 E-mail

Tyra Jackson

tjackson@ccpcs.org

22. How many teachers instruct both health and physical education in your school? (0-10)* 2

22a. Name of Dual Instructor 1

22ai. Dual Instructor 1 E-mail

Adrian Degraffenreaidt

adegraffenreaidt@ccpcs.org

22b. Name of Dual Instructor 2

22bi. Dual Instructor 2 E-mail

Todd Kutyla

tkutyla@ccpcs.org

23. For each grade span in your school, please indicate the average number of minutes per week during the regular instructional school week that students receive health education instruction:*

Grades: K-5

Kindergarten Minutes/Week:

Grade 1 Minutes/Week:

Grade 2 Minutes/Week:

Grade 3 Minutes/Week:

Grade 4 Minutes/Week:

Grade 5 Minutes/Week:

Grades: 6 - 8

Grade 6 Minutes/Week:

	Grad	de 8 Minutes/Week:	
		•	r with any outside programs or organizations to supplement the health education nutrition, alcohol, tobacco and other drugs, sexual health, oral health, etc.)? *
	V	Yes	
		No	
24a.	If y	ves, please specify the	e name(s) of the partner program or organization below below.*
ľ	Name	of agency or organiza	ation: Latin American Youth Center (LAYC), GWU School of Medicine
25.	Does	your school include	CPR instruction to students in grades 9 through 12 prior to graduation?
	✓	Yes	
		No	
26.	Do yo	ou require high scho	ol students to take 0.5 units in Health Education prior to graduation?
	✓	Yes	
		No	
27. 1	Does	your school teach th	e following health education topics?
Note	: Ple	ase state the curriculi	um's full name or note the curricula/lesson plan is teacher created.
Gra	des: l	K – 5 (Some topics n	nay only be taught in older elementary grades.)
Alco	ohol, '	Tobacco, and Other	Drugs Prevention Education
		Yes If Yes	, what curriculum do you use?
		No	
Dise	ase P	Prevention Education	1
		Yes If Yes	, what curriculum do you use?
		No	
Hun	nan E	Body and Personal H	ealth Education
		Yes If Yes	, what curriculum do you use?
		No	

Grade 7 Minutes/Week:

Nutrition Education					
☐ Yes	If Yes, what curriculum do you use?				
□ No					
Mental and Emotiona	al Health Education				
☐ Yes	If Yes, what curriculum do you use?				
□ No					
Safety Skills Education	on				
☐ Yes	If Yes, what curriculum do you use?				
□ No					
Suicide Prevention Ed	ducation				
☐ Yes	If Yes, what curriculum do you use?				
□ No					
Grades: 6 - 8					
Alcohol, Tobacco, and	Alcohol, Tobacco, and Other Drugs Prevention Education				
☐ Yes	If Yes, what curriculum do you use?				
□ No					
Disease Prevention E	ducation				
☐ Yes	If Yes, what curriculum do you use?				
□ No					
Human Body and Per	rsonal Health Education				
☐ Yes	If Yes, what curriculum do you use?				
□ No					
HIV/STI Prevention Education					
☐ Yes	If Yes, what curriculum do you use?				
□ No					
Nutrition Education					
☐ Yes	If Yes, what curriculum do you use?				

] No	
Menta	l and Emotiona	al Health Education
	Yes	If Yes, what curriculum do you use?
] No	
Safety	Skills Education	on
	Yes	If Yes, what curriculum do you use?
] No	
Suicid	e Prevention E	ducation
	Yes	If Yes, what curriculum do you use?
] No	
Grade	s: 9- 12	
Alcoho	ol, Tobacco, and	d Other Drugs Prevention Education
V	Yes	If Yes, what curriculum do you use?
Cı	eated by instruc	etor
] No	
Diseas	e Prevention E	ducation
V	Yes	If Yes, what curriculum do you use?
Cı	eated by instruc	ctor
] No	
Huma	n Body and Per	rsonal Health Education
V	Yes	If Yes, what curriculum do you use?
Cı	eated by instruc	etor
] No	
HIV/S	TI Prevention	Education
V	Yes	If Yes, what curriculum do you use?
Cı	reated by instruc	etor
] No	

Nutrition Education

\checkmark	Yes	If Yes, what curriculum do you use?		
Crea	ated by instruc	tor		
	No			
Mental a	and Emotiona	l Health Education		
✓	Yes	If Yes, what curriculum do you use?		
Crea	ated by instruc	tor		
	No			
Safety S	kills Educatio	n		
√	Yes	If Yes, what curriculum do you use?		
Crea	ated by instruct	tor		
	No			
Suicide Prevention Education				
\checkmark	Yes	If Yes, what curriculum do you use?		
Crea	ated by instruc	tor		
	No			

Section 4: Physical Education Instruction

Recommended point of contact for this section: Physical Education Teacher

Important Definitions for this Section:

<u>Physical Activity</u>: Physical activity means bodily movement, including walking, dancing, or gardening (DC Official Code § 38–821.01). Physical activity promotes normal and healthy growth and development. It can help reduce the risk of chronic disease and improve general health and overall daily function in people who do it regularly.

<u>Moderate-to-Vigorous Physical Activity</u>: Movement resulting in a substantially increased heart rate and breathing (DC Official Code § 38–821.01). This number should include the time that students are participating in moderate-to-vigorous physical activity. It should NOT include time devoted to administrative tasks, transitions, or breaks.

<u>Physical Education</u>: Physical education (PE) is instruction based on the District of Columbia Physical Education Standards, of which at least 50% of the time is spent in moderate to vigorous physical activity (DC Official Code § 38–821.01). As SHAPE America explains, "physical education provides students with a planned, sequential, K through 12 standards-based program of curricula and instruction designed to develop motor skills, knowledge and behaviors for active living, physical fitness, sportsmanship, selfefficacy and emotional intelligence."

<u>Recess and Outdoor Physical Activity</u>: Recess and outdoor physical activity is a regularly scheduled period in the school day for physical activity and play that is monitored by trained staff or volunteers. During this time, students are encouraged to be physically active and engaged with their peers in structured physical activities or activities of their choice, at all grade levels.

Legislative Requirements and Instructions:

<u>Physical Activity</u>: For students in grades K-8, it shall be the goal to provide 60 minutes of physical activity per day (DC Official Code § 38–824.01). For students in grades Pre-K3 and Pre-K4, schools shall provide an average of 60 minutes of physical activity per day, with a goal to provide 90 minutes of physical activity per day. (DC Official Code § 38–824.02). For this question, please indicate a daily average between 0 and 135 for grades Pre-K3 and Pre-K4.

<u>Physical Education Minutes</u>: The Healthy Schools Act sets requirements for physical education and physical activity by grade band. For students in grades K - 5, schools shall provide an average of 90 minutes of physical education per week, with a goal to provide an average of 150 minutes per week. For students in grades 6 - 8, schools shall provide an average of 135 minutes of physical education per week, with a goal to provide an average of 225 minutes per week. At least 50 percent of physical education time shall be spent-on-moderate to vigorous physical activity (movement resulting in substantially increased heart rate and breathing). (DC Official Code § 38–824.02).

The Office of the State Superintendent of Education (OSSE) is committed to providing technical assistance to schools that do not meet the Physical Education minute requirements. Schools that do not meet the required Physical Education minutes will receive follow-up support from OSSE.

<u>Moderate-to-Vigorous Physical Activity Minutes</u>: For students in grades K-8, at least 50 percent of physical education time shall be spent on moderate-to-vigorous physical activity (DC Official Code § 38–824.02). For this question, please indicate a weekly average between 0 and 225 for grades K-5, and a weekly average between 0 and 300 for grades 6-8.

Recess and Outdoor Physical Activity:: Schools shall provide recess and outdoor physical activity for all students on a daily basis (weather and space permitting). For students in grades K – 8, it shall be the goal to provide at least one recess of at least 20 minutes per day. For students in grades Pre-K3 and Pre-K4, it schools shall be the goal to provide at least two 20-minute sessions of outdoor physical activity per day (DC Official Code § 38–824.02).

28. For each grade span in your school, please indicate the average number of minutes per week during the regular instructional school week that a student receives physical education instruction. This does NOT include recess or after school activities.*^

Grades: K – 5 Minutes/Week:				
Grades: 6 – 8 Minutes/Week:				
Grades: 9 – 12 Minutes/Week:	110			
29. Which physical education c	urriculum (or curric	ula) is your school c	urrently using for instr	uction?
Note: Please state the curriculum' include the resources, standards, o		•		sson plans, please
Grades: K – 5 Curriculum:				
Grades: 6 – 8 Curriculum:				
Grades: 9 – 12 Curriculum:	DC and National Sta	ndards, created by ins	structor	
30. For each grade span in your instructional school week devote course. This does NOT include r	ed to actual moderate	e-to-vigorous physica	_	
			Less than 50%	50% or more
Grades: K – 5				
Grades: 6 – 8				
Grades: 9 – 12				V
31. Please indicate the average students:	number of minutes p	er day of physical a	ctivity offered for pre-I	K3 and pre-K4
Grades Pre-K3 and Pre-K4 Min	nutes/Day:			
31a. Please indicate the number	of sessions of outdoo	r physical activity p	er day:	
31b. Please indicate the average	minutes per session (of outdoor physical a	activity per day:	
32. How many minutes per day	do students get rece	ss on average?*		
Grades: K – 5 Minutes/Day:				
Grades: 6 – 8 Minutes/Day:				
33. What strategies does your so Select all that apply	chool use, during or o	outside of regular scl	nool hours, to promote	physical activity?
☐ Active Recess				
After-School Activities				
Bike to School				

✓	Playground/field off of school campus
	Shared Use Agreement with organizations that provide physical activity outside of the normal school day
✓	Movement in the Classroom
✓	Athletic Programs
	Playground/field on school campus
	Reward for student achievement or good behavior
✓	Gardening
✓	Walk to School
	Safe Routes to School
	Before-School Activities
✓	Dancing or Dance Programs
	Other:

Section 5: School Nutrition and Local Wellness Policy

Recommended points of contact for this section: Food Services Director or Manager, Principal, Chair of School Wellness Council/Committee

Important Definitions for this Section:

Alternative Breakfast Serving Model: An alternative breakfast serving model is a model of serving breakfast, such as breakfast in the classroom (BIC) or breakfast on grab-and-go carts, in which breakfast is offered in one or more locations with high student traffic other than the cafeteria. With alternative breakfast serving models, breakfast is also available after the start of the school day or both before and after the start of the school day. The model must be proven to increase student participation in breakfast relative to the traditional serving model, in which breakfast is served in the cafeteria before the start of the school day. Other alternative serving models may be used but may require approval by OSSE.

<u>Local Wellness Committee</u>: An action-oriented advisory group that focuses on the health and wellbeing of students, staff, and families in a school community. The local wellness committee implements the local wellness policy and leads or supports health-related initiatives.

<u>Share Table</u>: A location where school community members can place an unopened or sealed foods to provide for other community members to take food that would otherwise be thrown away.

34. Does your school operate a share table?		
✓ Yes		
□ _{No}		
34a. Please indicate the type of share table (select all that apply).		
Refrigerated		
✓ Unrefrigerated		
35. Is cold, filtered water available to students during meal times?*		
✓ Yes		
□ _{No}		
36. How many vending machines are available to students?(0-10)* 1		
36a. What hours are student vending machines available? Select all that apply		
	Yes	No
Before and/or after school	/	
During school hours		/
During school hours, excluding meal times		7

During school nours, only at meal times		▼
36b. What items are sold from student vending machines?	Select all that apply	
100% fruit and/or vegetable juice		
Baked chips, lower calorie and/or fat snacks		
☐ Fresh fruits and/or non-fried vegetables		
Milk and dairy products		
Fruit snacks		
Regular chips, pretzels and snack mixes		
☐ Sodas and/or fruit drinks		
✓ Whole grain products		
✓ Water		
37. Does your school have a school store?		
□ Yes		
✓ _{No}		
37a. What are the hours of operation? Select all that appl	y.*	
	Yes	No
Before and/or after school		
During school hours		
During school hours, excluding meal times		
During school hours, only at meal times		
37b. What food and/or beverages are sold in the school sto	ore? Select all that apply	
100% fruit and/or vegetable juice		
☐ Baked chips, lower calorie and/or fat snacks		
☐ Fresh fruits and/or non-fried vegetables		
☐ Milk and dairy products		

☐ Fruit snacks
Regular chips, pretzels and snack mixes
☐ Sodas and/or fruit flavored drinks
☐ Whole grain products
□ Water
38. Does your school serve breakfast via an alternative serving model?
✓ Yes
□ No
38a. If yes, select all alternative serving models in operation:
☐ Breakfast in the Classroom (BIC)
✓ Grab n Go (in-school)
☐ Second Chance Breakfast
☐ Home Delivery
☐ Meal Pick Up (for students learning in a distance learning environment)
39. Does your school have a local wellness committee or school health council/team?*
✓ Yes
□ No

Section 6: Distributing Information

Recommended point of contact for this section: Principal, Business Manager, Director of Operations

Important Definitions for this Section:

LEA's Local Wellness Policy

<u>Sustainable Agriculture:</u> An integrated system of plant and animal production practices having a sitespecific application that will, over the long-term: (a) Satisfy human food and fiber needs; (b) Enhance environmental quality and the natural resources base upon which the agriculture economy depends; (c) Make the most efficient use of nonrenewable resources and on-farm resources and integrate, where appropriate, natural biological cycles and controls; (d) Sustain the economic viability of farm operations and (e) Enhance the quality of life for farmers and society as a whole.

<u>Vegetarian Food Option:</u> Food or beverages that are: (a) free of meat, poultry, and seafood; and/or (b) utilize a meat alternative recognized by the United States Department of Agriculture as a meat alternate free of meat, poultry, and seafood for the purposes of the National School Lunch Program. Schools shall have a vegetarian food optional available for students as a main course for breakfasts and lunches. Schools shall clearly label vegetarian food options and rotate the main course vegetarian food option to avoid repetition (DC Official Code § 38–822.01).

40. How and to whom are following items distributed at your school? Select all that apply

	-		
\checkmark	School Website	✓	School Main Office
\checkmark	School Cafeteria or Eating Areas	√	To parent/teacher organization
\checkmark	To foodservice staff	/	To administrators
✓	To students		This information is not available for distribution
\checkmark	Upon request		School does not have a Local Wellness Policy
Schoo	l Menu for Breakfast and Lunch		
✓	School Website	✓	School Main Office
V	School Cafeteria or Eating Areas	✓	To parent/teacher organization
✓	To foodservice staff	✓	To administrators
\checkmark	To students		This information is not available for distribution
\checkmark	Upon request		School does not have a Local Wellness Policy
Nutrit	tional Content of Each Menu Item		
	School Website		School Main Office
V	School Cafeteria or Eating Areas		To parent/teacher organization
✓	To foodservice staff	✓	To administrators
	To students		This information is not available for distribution
	Upon request		School does not have a Local Wellness Policy
Ingred	dients of Each Menu Item		
	School Website		School Main Office
/	School Cafeteria or Eating Areas		To parent/teacher organization

√	To foodservice staff	☐ To administrators
] To students	☐ This information is not available for distribution
] Upon request	☐ School does not have a Local Wellness Policy
	mation on where fruits and vegetables served in schoolinable agriculture^ practices	ol are grown and whether growers are engaged in
	School Website	☐ School Main Office
	School Cafeteria or Eating Areas	☐ To parent/teacher organization
	To foodservice staff	☐ To administrators
] To students	☐ This information is not available for distribution
] Upon request	School does not have a Local Wellness Policy
41. Are s	students and parents informed about the availability o	f vegetarian food options at your school?*
✓	Yes	
	No	
	Vegetarian food options are not available	
41a. How	v are vegetarian food options made available to studen	ts at your school? Select all that apply
V	Veg food options are available at Breakfast	
✓	Veg food options are available at Lunch	
✓	Veg food options are rotated daily to avoid repetition	
/	Veg food options are clearly labeled or identified	
\checkmark	Veg accommodations available through formal process	or upon request
42. Are n	nilk alternatives, such as soy milk, rice milk, lactose fr	ree milk, etc., available at your school?*
✓	Yes	
	No	
42a. Are	students and parents informed about the availability	of milk alternatives?
/	Yes	

Section 7: Environment

Recommended point of contact for this section: Principal, Lead Science Teacher

Data from the School Health Profile will be used to complete the Environmental Literacy Indicator Tool, a biennial survey used to determine progress on environmental literacy goals in the Chesapeake Bay Watershed Agreement. In the future, compiled results will be available on the chesapeakebayprogress.com website.

Important Definitions for this Section:

School Gardens: outdoor spaces that engage students through hands-on lessons that enhance learning.

Meaningful Watershed Educational Experience (MWEE's): Provide students with a better understanding of the natural environment by connecting classroom learning with outdoor field investigations. MWEE's encourage students to define an environmental issue, investigate the issue by collecting data through outdoor field experiences, take action to address the environmental issue at the personal or societal level, and then analyze and evaluate the results of the investigation to communicate findings to an audience. More information about MWEE's can be found at https://bit.ly/3cM1utm.

<u>Environmental Literacy</u>: Environmental literacy is the development of knowledge, attitudes, and skills necessary to make informed decisions concerning the relationships among natural and urban systems. An environmentally literate person will ultimately understand how to take actions that respect, restore, protect, and sustain the health and well-being of human communities and environmental systems.

<u>Outdoor Learning</u>: Engaging in various activities outside during the school day and out of school time. Many school staff can visualize meals, recess, and physical activity taking place outdoors. Outdoor learning activities might include, but are not limited to, morning meetings, reading circles, lessons across all subject areas, and social-emotional learning.

Outdoor learning space: Any outside area where students and teachers can work together to learn, discuss, and explore. Outdoor learning spaces can be the temporary conversion of areas of school grounds, or it can be part of a larger initiative to create new outdoor teaching structures or enhance existing areas. The space can also be used for other school activities, such as meals, school-based behavioral health services, or student activity club meetings.

43. Does your school have an outdoor learning space?				
✓ Yes				
\square No				
43a. How many students are exposed to 10 or more hours of outdoor learning per school year? 345				
43b. How is your outdoor learning space used for outdoor learning?				
Instruction				
✓ Yes	□ No			
English	✓ Art			
✓ Math	✓ Music			
✓ Science	Physical Education			
✓ Social Studies	Health Education			
Other:				

✓ Yes	☐ No			
✓ Breakfast	✓ Snack			
✓ Lunch	☐ Supper			
☐ Fresh Fruit and Vegetable Program (FFVP)	Other:			
Social Development				
✓ Yes	☐ No			
Morning Meetings	✓ Wellness Breaks			
✓ After-School Activities	Educator Wellness Programs			
✓ Student Activity Club Meetings	Other:			
43c. Name(s) of outdoor learning coordinator(s): N/A				
43d. Email (s) of outdoor learning coordinator(s): N/A				
44. Does your school currently have a School Garden?*				
✓ Yes				
\square No				
44a. Name of Garden Contact* Ryoko Yamamoto 44b. Garden Contact E-mail* ryamamoto@ccpcs.org				
45. Did any of your classes or student groups attend a farm fie	eld trip this year?*			
\square Yes				
✓ No				
45a. How many students attended a farm field trip?				
Kindergarten:				
Grade 1:				
Grade 2:				
Grade 3:				
Grade 4:				
Grade 5:				
Grade 6:				
Grade 7:				

School Meals

Grade 8:			
Grade 9:			
Grade 10:			
Grade 11:			
Grade 12:			
45b. What farm(s) did the students visit? Select all that apply	y.		
	☐ Common Good City Farm (I	OC)	
Alice Ferguson Foundation's Hard Bargain Farm (MD)	☐ Pierce Mill (DC)		
☐ DC Urban Greens' Fort Stanton Farm (DC)	Arcadia Center for Sustainable I (VA)	Food and	Agriculture
Red Wiggler Farm (MD)			
Calleva Farm (MD)	☐ Rocklands Farm (MD)		
☐ City Blossoms Community Green Spaces (DC)	☐ Washington Youth Garden (DC)	
☐ Cox Farms (VA)	Other:		
46. Does your school offer an Environmental Science Class?*			
✓ Yes			
□ No			
46a. How many students are enrolled in this course in the 202	1-22 school year? 65		
47. Name of Lead Science Teacher/Environmental Literacy In	structor* Ellen Royse		
47a. Lead Science Teacher/Environmental Literacy Instructor	r E-mail* eroyse@ccpcs.org		
48. Please select the environmental literacy topics currently accourse in which the topic is taught and the curriculum (or curinstruction:	<u>-</u>		-
Note: Please state the curriculum's full name or note that the curr	ricula/lesson plan is teacher created	d.	
Grades: K – 5		Yes	No
Air (e.g., quality, climate change) Course: Curriculum:			
Water (e.g., stormwater, rivers, aquatic wildlife) Course:			

Curriculum:		
Land (e.g., plants, soil, urban planning, terrestrial wildlife) Course: Curriculum:		
Resource Conservation (e.g., energy, waste, recycling) Course: Curriculum:		
Health (e.g., nutrition, gardens, food) Course: Curriculum:		
Other Course: Curriculum:		
Grades: 6 – 8	Yes	No
Air (e.g., quality, climate change) Course: Curriculum:		
Water (e.g., stormwater, rivers, aquatic wildlife) Course: Curriculum:		
Land (e.g., plants, soil, urban planning, terrestrial wildlife) Course: Curriculum:		
Resource Conservation (e.g., energy, waste, recycling) Course: Curriculum:		
Health (e.g., nutrition, gardens, food) Course: Curriculum:		
Other Course: Curriculum:		
Grades: 9 – 12	Yes	No
Air (e.g., quality, climate change) Course: Environmental Science Curriculum: created by instructor	V	
Water (e.g., stormwater, rivers, aquatic wildlife) Course: Environmental Science, Chemistry Curriculum: created by instructor	V	
Land (e.g., plants, soil, urban planning, terrestrial wildlife)	/	

Course: Environmental Science Curriculum: created by instructor		
Resource Conservation (e.g., energy, waste, recycling)	V	
Course: Environmental Science, Urban Ecology		
Curriculum: created by instructor		
Health (e.g., nutrition, gardens, food)	✓	
Course: Urban Ecology		
Curriculum: created by instructor		
Other		
Course: Curriculum:		
Currentum.		
49. Which of the following groups in your school participated in environmental education provided by outside organizations or agencies?	n (EE) learning	experiences
49a. Teachers of Grades K – 5		
\square Yes		
□ _{No}		
Who was the maridan?		
Who was the provider?		
☐ Informal EE organization (e.g., Anacostia Watershed Society)		
☐ Higher Education (e.g., University of the District of Columbia)		
☐ Local Education Agency (e.g., DC Public Schools)		
☐ State Education Agency (OSSE)		
☐ Other District Agency (e.g., DC Department of Energy & Environment)		
Federal Program (e.g., Smithsonian Institution)		
Other, please list:		
49b. Teachers of Grades 6 – 8		
□ Yes		
\square No		
Who was the provider?		
☐ Informal EE organization (e.g., Anacostia Watershed Society)		
☐ Higher Education (e.g., University of the District of Columbia)		
☐ Local Education Agency (e.g., DC Public Schools)		
☐ State Education Agency (OSSE)		
Other District Agency (e.g., DC Department of Energy & Environment)		

Federal Program (e.g., Smithsonian Institution)		
Other, please list:		
49c. Teachers of Grades 9 – 12		
□ Yes		
✓ No		
Who was the provider?		
☐ Informal EE organization (e.g., Anacostia Watershed Society)		
☐ Higher Education (e.g., University of the District of Columbia)		
☐ Local Education Agency (e.g., DC Public Schools)		
☐ State Education Agency (OSSE)		
Other District Agency (e.g., DC Department of Energy & Environment)		
Federal Program (e.g., Smithsonian Institution)		
Other, please list:		
49d. Administrators		
\square Yes		
✓ No		
If yes, who was the provider?		
☐ Informal EE organization (e.g., Anacostia Watershed Society)		
☐ Higher Education (e.g., University of the District of Columbia)		
☐ Local Education Agency (e.g., DC Public Schools)		
☐ State Education Agency (OSSE)		
Other District Agency (e.g., DC Department of Energy & Environment)		
Federal Program (e.g., Smithsonian Institution)		
Other, please list:		
50. For each grade at your school, please indicate the level of participation in Meaningful Watershed Educational Experiences (MWEE).		
Grades: K – 5		
☐ A system wide Meaningful Watershed Educational Experience is in place. Please describe (i.e., grade, description of unit, partnerships, etc.):		
☐ Some classes participated in a Meaningful Watershed Educational Experience. Please describe (i.e., grade,		

	des	scription of unit, partnerships, etc.):
		No evidence that students in this grade participated in a Meaningful Watershed Educational Experience.
	Gra	ndes: 6 – 8
		A system wide Meaningful Watershed Educational Experience is in place. Please describe (i.e., grade, description of unit, partnerships, etc.):
		Some classes participated in a Meaningful Watershed Educational Experience. Please describe (i.e., grade, description of unit, partnerships, etc.):
		No evidence that students in this grade participated in a Meaningful Watershed Educational Experience.
	Gra	ndes: 9 – 12
		A system wide Meaningful Watershed Educational Experience is in place. Please describe (i.e., grade, description of unit, partnerships, etc.):
		Some classes participated in a Meaningful Watershed Educational Experience. Please describe (i.e., grade, description of unit, partnerships, etc.):
	✓	No evidence that students in this grade participated in a Meaningful Watershed Educational Experience.
51	ъ.	
31.		es your LEA implement any practices related to sustainable, green schools? Select all that apply
	√	School-wide Recycling Program
	√	Lead testing of water
		On-site Composting
	✓	LEED Certification Type: Silver Gold Platinum
		Project Learning Tree Green Schools
		National Wildlife Federation Eco-Schools
	✓	Environmentally-friendly cleaning products
	✓	Landscaping with native plants
	✓	Stormwater reduction efforts (i.e., rain barrels, cisterns, rain gardens)
		Other:
		None of these
52.	Wł	nat type of recycling hauling services does your school receive? Select all that apply
	П	Cardboard only
	\Box	Paper and cardboard only
		Mixed recyclables (plastic, metals, glass) only
		Co-mingled paper, cardboard, and mixed recyclables together ("single-stream")
	<u></u>	
		Organics
	\Box	Other:

	☐ None of these
53.	Does your school compost? Select all that apply
	Yes, we participate in an organics recycling (off-site composting) program
	Yes, on-site outdoors (e.g. in garden)
	Yes, on-site indoors (e.g. worm bin in classroom)
	Other method:
	✓ No, we don't compost
Pro	Does your school promote the Environmental Protection Agency's Indoor Air Quality Tools for Schools gram to reduce exposure to environmental factors that impact asthma among children and adults in publicools?
	□ Yes
	✓ No
55.	Does your school purchase environmentally-friendly cleaning supplies?
	✓ Yes
	□ _{No}
56.	Does your school cleaning/maintenance staff follow green cleaning procedures?
	✓ Yes
	□ No