

Minnesota Department of Health
Statewide Health Improvement Program



***Healthy School Food Options:
Outside of the USDA
Reimbursable Meal Program***

Guide to Implementation

Fiscal Years 2012 and 2013

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Healthy School Food Options

Implement policies and practices that increase access to healthy snacks and beverages and limit unhealthy snack and beverage choices through sodium, fat, and sugar content measurements on foods within the school environment outside of the USDA reimbursable meal program; such as snack cart, a la carte, vending, concessions, school store, food rewards, fundraising, and celebration/parties.

Description and Scope

School-based nutrition strategies and comprehensive programming can improve dietary practices that affect young persons' health, growth, and intellectual development and in turn, prevent health problems related to poor nutrition choices and obesity. In addition, this strategy can assist youth in attaining full educational potential and good health by providing them with the skills, social support, and environmental reinforcement they need to adopt long-term healthy eating behaviors. This will lead to fewer absences, greater academic achievement, reduced chronic disease, and reduced health care costs in Minnesota.

The *Healthy School Food Options* strategy supports the promotion of fruits and vegetables; minimally-processed foods made with whole grains and heart-healthy fats/oils without added sugar or trans fats; and beverages made without added sugars. These guidelines surfaced from literature stating that certain nutrition risk factors (including, too much sodium, too much sugar, too much fat, and not enough fruits and vegetables; are associated with chronic disease. Improving the nutritional content/value of snacks available in schools may also directly impact student's eating behaviors, as research shows that over 40% of young people have a snack at school (Briefel et al., 2009).

More specifically, schools can restrict the availability of less healthy foods by setting standards for the types of foods sold; restricting access to vending machines, banning snack foods and food as rewards in the classroom; or by prohibiting food sales at certain times of the school day (Keener et al., 2009). The Institute of Medicine recommends that competitive foods (food sold outside the USDA reimbursable school meal programs including vending machines, school stores and snack bars) be limited (IOM, 2007). However, when food is offered or sold, it should be limited to nutritious foods, including fruits and vegetables (IOM, 2007; CDC, 2009).

Implementing this strategy will be unique to each school based on an assessment of the school environment. All strategies can be tailored to accommodate age and developmental differences, allowing for implementation at all grade levels.

Outcomes

Standardized outcomes for required strategies are still under development. Strategies will be measured primarily on policy, systems and environmental change outcomes and health behavior change outcomes and then linked through literature projections to health care cost savings.

Evaluation Measures		
<p>Policy, Systems, Environmental Changes</p> <p>Existing tools or MDH database</p>	<p>Health Risks and Behavior Change</p> <p>Existing tools or medical records</p>	<p>Cost Savings</p> <p>Actual savings or literature projections</p>

Requirements

- School Health Council (SHC) convenes and conducts a needs assessment.
- SHC selects strategies based on the needs assessment as well as including: Local Public Health (LPH) and tribal grantee support, administrative support, teacher/student/parent buy-in, and feasibility within their specific setting and time frame.
- SHIP schools must select one strategy from Physical Activity Environment and Healthy Food Environment.
- SHIP focuses on policy, systems, and environmental changes that are sustainable.

Target Population (disparate/high priority groups are **bolded** below)

- **Students attending schools that serve a high percentage of free/reduced lunch** (NOTE: Schools with over 50% FR lunch participants are eligible to receive grant funding through the USDA Fresh Fruits and Vegetables Program)
- Students attending schools within the CHB and tribal government geographic boundaries.

Recommended Partners

- School Health Councils (SHC) or Wellness Committees
- Foodservice staff person(s) with responsibilities of menu planning and food purchasing
- Foodservice line staff who are responsible for meal preparation and service
- Administration, in particular the direct supervisor for the foodservice staff person responsible for menu planning
- Students (if it exists, the student discussion group or advisory council that informs foodservice decision-making)
- Any organization that sells foods that compete with the school lunch or breakfast program (such as a school store)
- Nurses, teachers, physical education instructors, support staff
- Parents and guardians
- Community organizations working in school nutrition strategies
- School board members
- Tribal government members

Terms and Abbreviations

Terms

- **Competitive Foods:** Any foods sold in competition with the National School Lunch Program to children in food service areas during the lunch periods.
- **Foods of Minimal Nutritional Value (FMNV):** In the case of artificially sweetened foods, a food which provides less than five percent of the Reference Daily Intakes (RDI) for each of eight specified nutrients per 100 calories and less than five percent of the RDI for each of eight specified nutrients per serving. The eight nutrients to be assessed include: protein, vitamin A, vitamin C, niacin, riboflavin, thiamine, calcium, and iron. For more information, see page 68 of the following document on the USDA website. <http://www.gpo.gov/fdsys/pkg/CFR-2011-title7-vol4/pdf/CFR-2011-title7-vol4-part210.pdf>

Abbreviations

CHB	Community Health Board
FR	Free/Reduced lunch (National School Lunch Program)
LPH	Local Public Health
SHC	School Health Council
TA	Technical Assistance
USDA	United States Department of Agriculture

Planning and Assessment for *Healthy School Food Options*

1. **Convene a School Health Council (SHC) and conduct a needs assessment.** Refer to page 12 in the *School Setting Guide to Implementation and Evaluation* for more details.
2. **Connect with MDH on specific strategy selection** so that networking can begin to occur.
3. **Review existing school nutrition practices.** Familiarize yourself with current policies and/or guidelines on classroom snacks, vending/ concessions, classroom celebrations, food rewards, a la carte and fundraising.
4. **Meet with school staff** responsible for school nutrition/ food service programs, including administrators, food service staff, food service director, school nurse, health educators.
5. **Review literature and resources** on the selected healthy eating strategies for schools.
 - A. Review the following document to establish baseline knowledge of developing guidelines for a healthy school food environment: *Nutrition Standards for Foods in Schools: Leading the Way to Healthier Youth*, Institute of Medicine Report 2010.
<http://www.iom.edu/~media/Files/Report%20Files/2007/Nutrition-Standards-for-Foods-in-Schools-Leading-the-Way-toward-Healthier-Youth/factsheet.pdf>
 - B. Review the 2010 Dietary Guidelines for Americans.
<http://www.health.gov/dietaryguidelines/2010.asp>
 - C. Review the following memo from the USDA on school wellness policies, becoming familiar with the *Child Nutrition Reauthorization 2010 Act : Elements of a Local Wellness Policy*. http://www.fns.usda.gov/cnd/Governance/Policy-Memos/2011/SP42-2011_os.pdf
6. **Conduct an assessment of the current nutritional environment at the school.** See Evaluation/measurement methods below for optional tools to consider using.
7. **Develop an action plan designed to implement healthy eating strategies.** Prioritize based on feasibility, cost, resources, and sustainability. See SHIP school setting guide for a sample action plan worksheet.

Potential Milestones for Planning and Assessment

- Needs assessment completed
- Additional nutrition assessment/survey completed
- Action plan identified

Evaluation Tools for Planning and Assessment*

School Health Index (SHI)

Description: The School Health Index is a self-assessment and planning tool that enables schools to identify the strengths and weaknesses of the school's policies and programs that promote health and safety. The SHI has an Elementary and Middle/High School version. Both versions are available free of charge, online and in print form. The SHI consists of eight self-assessment modules and a planning for improvement process. The assessment process involves members of the school community, parents, students, tribal council and the community to improve school policies, programs and services. The SHI is a nationally recognized, researched-based assessment tool recommended by the CDC. Many schools are familiar with this tool. Training for the proper use of the SHI will be available through the Coordinated School Health Program at MN Department of Education and MN Department of Health.

<http://www.cdc.gov/healthyyouth/SHI/index.htm>

**This section is currently under development. MDH will be providing additional tools for the standardized evaluation of required strategies at a later date.*

Implementing *Healthy School Food Options* Strategy

1. **Meet with school staff** responsible for school wellness, food service, administration, and nutrition education to review the initial action plan to address competitive foods within the school environment.
 - A. Gather additional input from key stakeholders.
 - B. Finalize action plan so next steps are clearly identified. Action plans should clearly identify goals, steps, responsible party, timeline, budget, resources, and outcome measures, including plans for sustainability.
2. **Work with school staff, teachers, and other community partners to attend training opportunities** based on needs identified and prioritized action plan. Tribal grantees may need to engage their tribal governments throughout the planning and implementation of this strategy, or parts of this strategy, depending upon your particular environment.
 - A. Refer to the SHIP calendar for technical assistance (TA) that MDH might be able to provide on selected strategies.
<http://www.health.state.mn.us/healthreform/ship/calendar/index.html>
 - B. Educate school staff on SHIP strategies selected to implement, getting staff “buy-in” is equally important as administrator support.
 - C. Generate excitement over selected SHIP strategies.
3. **Network with other SHIP grantees.**
4. **Engage students in the promotion of selected healthy snack practices.**
5. **Hold follow-up meetings with school and community stakeholders** to review action plan and identify barriers and next steps.
6. **Present action plan** to school administration, school board, and other community elected officials, key decision makers, tribal governments and community groups.

Potential Milestones for Implementing *Healthy School Food Options*

- Trainings/workshops on selected healthy snack strategies attended.
- Decision makers involved with healthy snack practices being implemented.
- Promotion of healthy snack strategies to all school partners, including students and parents.

Sustaining Long-Term *Healthy School Food Options* Change

1. **Implement school policies supporting healthy snack practices that have been identified in the action plan.**
 - A. Review **USDA's Team Nutrition: Local Wellness Policy** clearinghouse that has numerous reference materials to assist school districts in developing, implementing, and sample policies for physical activity and nutrition. These resources are continuously updated by the Local School Wellness Policy Interagency Workgroup, comprised of USDA's Food and Nutrition Service, US Department of Education's Office of Safe and Drug-Free Schools, and the Health and Human Services, acting through the Centers for Disease Control and Prevention (CDC).
 - B. Review **Action for Healthy Kids: Wellness Policy Tool** website which houses a searchable database developed by Action for Healthy Kids in partnership with CDC to compliment USDA's local wellness policy resources. Helps districts identify policy options and write their own policies. Users can adapt sample language from un-reviewed policies gathered from across the country. <http://www.actionforhealthykids.org/school-programs/our-programs/wellness-policy-tool/>
 - C. Review **National Alliance for Nutrition and Activity (NANA)**. Includes a database of model local school wellness policies that meet the federal requirements. This comprehensive set of model nutrition and physical activity policies is based on nutrition science, public health research, and existing practices from exemplary states and local school districts around the country. Specific model policy and resources are identified for fundraising, non-food rewards, snacks, and celebrations. Tribal grantees may need to engage their tribal governments throughout the planning and implementation of this strategy, or parts of this strategy, depending upon your particular environment. <http://schoolwellnesspolicies.org/WellnessPolicies.html#snacks>
 - D. Review the following toolkit to assist in areas of school nutrition environment improvement. This toolkit contains goals, fact sheets, model policies, surveys, and more that will be useful in the development of your action plan. Please note: This toolkit was developed in 2003, so the proposed 2010 USDA guidelines will not be the standard. <http://www.cspinet.org/schoolfoodkit/>
2. **Update action plan and conduct an evaluation** of the implementation of healthy snack-buying and selling strategies. Gather feedback from students, staff, and parents.
3. **Develop future plans and funding proposals** to further advance school food/snack practices. This could include future teacher workshops on related topics, expansion of healthy snacks- buying and selling practices and aligning with community physical activity events.

Potential Milestones for Sustaining Long Term *Healthy School Food Options* Change

- Healthy food/snack practices implemented by school staff and recognized by students, parents, and the community
- Snack policy adopted
- Future action plan complete

Appendix A: Snack/Competitive Food Nutritional Guidelines

Competitive foods are defined by the USDA as foods and beverages, regardless of nutritional value, sold at a school separate from the USDA school meals program. These foods are typically available in school stores, vending machines and a la carte lines. Currently in Minnesota there is no standard for competitive food guidelines. However, the Healthy Hunger-Free Kids Act requires USDA to issue healthy nutrition standards for all foods sold in schools with the goal of eliminating unhealthy foods in vending machines, snack bars, a la carte, and other foods sold outside of the federally-reimbursed school meal program. These standards are forthcoming and should be made available no later than one year after enactment of law (December 13, 2010). As of September 30, 2011, the standards have not yet been released. However, best practices include:

- 2010 Dietary Guidelines for Americans
- USDA's Healthier US School Challenge
- National Alliance for Nutrition and Activity
- Alliance for a Healthier Generation

Districts and tribal communities can have nutrition standards that exceed the federal rules, both before and after new rules are implemented. Schools are encouraged to stay abreast of the new USDA rules and requirements related to the Healthy, Hunger-Free Kids Act of 2010. For current information, visit: www.fns.usda.gov/cnd/governance/legislation/cnr_2010.htm

Resources

- **Institute of Medicine.** Standards for Foods in Schools: Leading the Way toward Healthier Youth. <http://www.iom.edu/Reports/2007/Nutrition-Standards-for-Foods-in-Schools-Leading-the-Way-toward-Healthier-Youth.aspx>
- **USDA Healthier US Schools Challenge.** The goal of the Healthier US School Challenge is to improve the health of the Nation's children by creating healthier school environments. <http://teammnutrition.usda.gov/HealthierUS/vision.html>
- **The Alliance for a Healthier Generation.** The Alliance developed the School Beverage and Competitive Foods Guidelines to help students make healthier food and beverage choices in the school environment. The guidelines cover foods and beverages offered outside of the reimbursable meal program, including products sold in school vending machines, a la carte lines, snack bars, fundraisers, and school stores. This website offers numerous tools and resources around the area of healthy eating after establishing free enrollment. Two commonly used tools are the: Product Navigator (an online searchable database) and the Product Calculator which can input nutritional information to determine if it meets the Guidelines established. These tools can be found at: <http://www.healthiergeneration.org/companies.aspx?id=3463>
- **School Beverage Guidelines Toolkit.** For more general information about the guidelines visit: <http://www.healthiergeneration.org/schools.aspx?id=3425>

- **Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion.** Nutrition Standards for Foods in Schools contains four fact sheets outlining guidelines from the IOM report that can be used as resources to share with school staff, parents, youth, and policy makers. These fact sheets answer commonly asked questions and provide implementation recommendations of the nutrition standards. <http://www.cdc.gov/healthyyouth/nutrition/standards.htm>
- **National Alliance for Nutrition and Activity (NANA).** Provides a database of model local school wellness policies that meet the federal requirements. This comprehensive set of model nutrition and physical activity policies is based on nutrition science, public health research and existing practices from states and local school districts around the country. The NANA work group's first priority was to promote children's health and well-being. However, feasibility of policy implementation also was considered.

Talking Points

- Schools should establish and enforce strong nutrition standards for foods and beverages sold or offered in schools, such as the Institute of Medicine's *Nutrition Standards for Foods in Schools*. This would eliminate the availability of foods and beverages low in nutritional value and high in calories, fat, sodium, and added sugars (CDC 2010).
- Minnesota does not currently have nutritional standards for competitive food products sold a la carte, in vending machines and school stores or at bake sales. 27 other states do have nutritional standards (2007 NSCH).
- Research studies provide evidence that promoting and establishing healthy behaviors for younger people are more effective, and often easier, than efforts to change unhealthy behaviors already established in adult populations (CDC 2007).

References

Institute of Medicine. *Nutrition Standards for Foods in Schools: Leading the Way Toward Healthier Youth*. Stallings VA, Yaktine AL, eds. Washington, DC: National Academics Press; 2007.

National Survey of Children's Health (NSCH) 2007. Retrieved August 29, 2011 at <http://www.childhealthdata.org>

Appendix B: Classroom Snacks/Snack Carts/School Stores

Resources

- Eat Right. The American Dietetic Association put together this list of 25 healthy snacks for kids. This could be used as a parent informational piece. [Http://www.eatright.org](http://www.eatright.org)
- A thorough spreadsheet of snacks that meet IOM nutritional standards. <http://www.dakmed.org/uploads/resources/330/snack-booklet---revised-7-11.pdf>
- Starting a School Store. A site that utilizes classroom building skills and incorporates them into the running of a school store. <http://www.raymondgeddes.com/school-store-academy.html>

Talking Points

- Improving the availability of healthier food and beverage choices (e.g., fruits, vegetables, and water) may increase the consumption of healthier foods (Keener 2009).

References

Keener, D., Goodman, K., Lowry, A., Zaro, S., & Kettel Khan, L. (2009). *Recommended community strategies and measurements to prevent obesity in the United States: Implementation and measurement guide*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.

Appendix C: Vending Machines/Concessions

Resources

- National Policy and Legal Analysis Network to Prevent Childhood Obesity. *District Policy Establishing a Healthy Vending Program*. This model will help school districts in develop a vending program that fits within any established wellness policy by making sure products meet the policy's nutritional standards. Model policies are also on this site for healthy vending agreements. <http://www.nplanonline.org/nplan/products/district-policy-establishing-healthy-vending-program>
- Eat Well Work Well. A wide array of resources and tools specific to vending including: vending machine assessment tools, sample vending policies, and sample letters to vendors. <http://www.eatwellworkwell.org/education-tools.htm#vending>

Talking Points

- Improving the availability of healthier food and beverage choices (e.g., fruits, vegetables, and water) may increase the consumption of healthier foods (Keener 2009).
- Less than 30% of school districts prohibit the sale of junk food in vending machines and less than 6% prohibit it in concession stands (CDC 2007).
- 51.3% of schools allow soft drink companies to advertise on vending machines and 16.4% allow soft drink advertisements on school grounds, including on the outside of school buildings, playing fields or other areas of campus (CDC 2007).

References

Centers for Disease Control and Prevention. *State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006*. Atlanta: U.S. Department of Health and Human Services; 2007.

Appendix D: A La Carte

Resources

- Competitive Foods Calculator. USDA's Healthier US School Challenge. <http://healthymeals.nal.usda.gov/hsmrs/HUSSC/calculator.html>
- Meeting the Competitive Foods Criteria for the Healthier US School Challenge (HUSSC). Provides objectives, lessons plans, and handouts specific to the HUSSC program. <http://www.fns.usda.gov/tn/HealthierUS/NFSMI/lesson5.pdf>

Talking Points

- USDA defines a la carte as any food or beverage sold by the school food service that is not part of a reimbursable meal. Some examples include: milk, juice, entrée, salad, dessert, snack items, and second servings of any food item from the menu.
- A national study found that most high schools offered high-fat cookies or cakes (80%); pizza, burgers, or sandwiches (76%); and French fries (62%) in a la carte areas (Wechsler 2001).

References

Wechsler, H., Brener, ND., Kuester, S., Miller, C. Food service and foods and beverages available at school: results from the School Health Policies and Programs Study 2000. *Journal of School Health*, 2001: 71:313-324.

Appendix E: Food Rewards in the Classroom/Non-Food Rewards

Resources

- Alternatives to Food as a Reward. A comprehensive list of ways to encourage positive behavior creatively as well as a list of consequences when food is given as a reward within the classroom. <http://www.johnson.ksu.edu/DesktopDefault.aspx?tabid=453>
- Constructive Classroom Rewards- Promoting Good Habits While Protecting Children's Health. http://cspinet.org/new/pdf/constructive_classroom_rewards.pdf
- "You Did It": How to Reward and Motivate Kids Without Using Food. A comprehensive brochure from the Utah Department of Health providing talking points, ideas, and resources teachers, parents, and various age-leveled students. http://health.utah.gov/obesity/gms/pdfs/You_Did_It!.pdf
- Ideas for Alternatives to Using Food as a Reward. Connecticut State Department of Education developed a one-page document on how to promote a healthy school environment including consequences of using food as a reward, and a list of age appropriate non-food rewards. http://healthymeals.nal.usda.gov/hsmrs/Connecticut/Food_As_Reward.pdf

Talking Points

- "Rewarding children with unhealthy foods in school undermines our efforts to teach them about good nutrition. It's like teaching children a lesson on the importance of not smoking, and then handing out ashtrays and lighter to the kids who did the best job listening." – Marlene Schwartz, PhD., Co-Director of the Yale Center for Eating and Weight Disorders
- Using food as a positive reinforcement or withholding food for punishment can lead to learned behaviors that may lead to major weight problems. When children are rewarded with food, they associate "junk food" with being good or feelings of happiness. This may lead to the learned behavior of eating when they want to rewards themselves instead of eating to satisfy hunger (UDH 2008).
- Only 16.6% of schools prohibit faculty and staff from using food or food coupons as a reward for good behavior or academic performance (CDC 2007).

References

Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Atlanta: U.S. Department of Health and Human Services; 2007.

Utah Department of Health (2008). *You Did It*.

Appendix F: Classroom Celebrations/Parties

Resources

- Alliance for a Healthier Generation. A listing of creative, healthy alternatives for in-class celebrations. <http://www.healthiergeneration.org/schools.aspx?id=3296>
- Rosa Parks Kindergarten Birthday Menu. A template of healthy birthday options that allows the students to choose their celebration request. http://www.healthiergeneration.org/uploadedFiles/For_Schools/_New_Builder_Pages/Resources/10-1659.pdf
- Center for Science in the Public Interest. A 4 page resource that offers creative celebration ideas throughout the months of the school calendar. http://cspinet.org/new/pdf/healthy_school_celebrations.pdf
- Action for Healthy Kids. *Putting the Health Back in Fun*. Provides information on how teachers and parents can work together to give consistent messages to kids about healthy eating during celebrations. <http://www.actionforhealthykids.org/resources/files/vaafhk-school-parties.pdf>

Talking Points

- Benefits of healthy classroom celebrations include:
 - Healthy kids learn better
 - Provides consistent messaging
 - Promotes a healthy school environment
 - Creates excitement about good nutrition
 - Protects children with food allergies
- Research studies provide evidence that promoting and establishing healthy behaviors for younger people are more effective, and often easier, than efforts to change unhealthy behaviors already established in adult populations (CDC 2007).

References

Healthy Celebrations: Promoting a Healthy School Environment. Connecticut State Department of Education, 2005 (rev. 2007).

http://healthymeals.nal.usda.gov/hsmrs/Connecticut/CT%20Healthy_Celebrations.pdf

U.S. Department of Health and Human Services. *Healthy Youth: An Investment in Our Nation's Future*, 2007. Atlanta, GA: U.S. Department of Health and Human Services, CDC, Coordinating Center for Health Promotion; 2007. Retrieved June 3, 2007 from <http://www.cdc.gov/HealthyYouth/about/HealthyYouth.2007.pdf>

Appendix G: Fundraising

Resources

- Alliance for a Healthier Generation. A helpful resource that provides creative ideas on how to engage the community and provide large-scale healthy fundraising options.
<http://www.healthiergeneration.org/schools.aspx?id=3320>
- Sweet Deals: School Fundraising Can Be Healthy and Profitable. The Center for Science in the Public Interest developed this resource to dispel myths circulating around schools needing to sell junk food to raise money. Instead it provides contact information for companies that offer healthy fundraising options.
<http://www.cspinet.org/schoolfundraising.pdf>
- Action for Healthy Kids. *Guide to Healthy Fundraising*.
<http://www.actionforhealthykids.org/resources/files/alafhk-healthy-fundraising.pdf>

Talking Points

- 54.3% of schools sold cookies or other baked goods that are not low in fat as part of fundraising for any school group/organization (CDC 2007).
- 67.1% of high schools, 56.2% of middle schools, and 49.8% of elementary schools sold chocolate candy as a fundraiser for a school organization (CDC 2007).

References

Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Atlanta: U.S. Department of Health and Human Services; 2007.