

Healthy Schools Initiative

DUE: JUNE 30, 2018

About the Healthy Schools Grant

As part of the Healthy Schools Initiative, schools receive the Health School Grant (HSG) to support their Healthy Schools plans and priorities. It is available to support school divisions and schools as they work together with their community partners (including local regional health authorities) to build healthy school communities. School funding is calculated as \$125 + \$2.06 per student in the school. Activities are planned and implemented based on the needs identified within the school community and align with the priority health topics of Healthy Schools (healthy eating, mental health promotion, physical activity, safety and injury prevention, sexual health, and substance abuse and addictions).

Consider using the *Healthy School Planner* to assess the overall state of your school environment and build a plan for improving the health of the school. This free, online tool also allows schools to further explore one or more specific topics such as healthy eating, physical activity, positive mental health, and tobacco use. The enclosed handout provides more information about the Healthy School Planner, which can be accessed from the Healthy Schools website. Schools are encouraged to use results from surveillance tools such as the *Youth Health Survey*, or *Tell Them From Me* to facilitate evidence-informed decision making. More information is available at www.manitoba.ca/healthyschools.

Guidelines for Completing and Submitting the HSG Report

This report gives an account of Healthy Schools activities from the 2017-18 school year and is required for the school to receive the HSG for the 2018-19 school year. It is an annual report which is due June 30 each year. The following sections must be completed in full and submitted to the Healthy Schools Initiative:

1. **Identification**
2. **Planning Process**
3. **Financials**
4. **Outcomes**
5. **Comprehensive School Health**
6. **Successes and Challenges**

There are 4 ways the HSG Report can be completed and submitted:

1. **Online** – complete the online report form at www.manitoba.ca/healthyschools. It will automatically submit and a summary of your information will be emailed to you.
2. **Email** – complete the report in “word document” format OR complete and scan, then email it to healthyschools@gov.mb.ca
3. **Fax** – complete the report and fax it to 204-948-4748
4. **Mail** – complete the report and mail a hard copy to the Healthy Schools Initiative (4089-300 Carlton Street, Winnipeg MB R3B 3M9). Please keep a copy for your records before mailing.

1. IDENTIFICATION

School:	Principal:	Principal Email:
HSG Contact Person:	Position:	Email:
RHA(s) where school resides:		

2. PLANNING PROCESS

List your school's strategic priorities:	
Does your school have a Healthy Schools Committee? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, who is it comprised of?
Does your school use the Healthy School Planner to assess and plan for Healthy Schools activities? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Fully describe your planning process for the HSG:	

3. FINANCIALS

Using the table below provide an overview of how the HSG was used. If there were surplus funds from the Healthy Schools Grant remaining, please indicate how they will be spent.

TOTAL 2017-2018 HSG FUNDING	HEALTH SCHOOLS GRANT ALLOCATION Provide a breakdown of the total funds (note: this column should equal the total HSG received).	HEALTHY SCHOOLS ACTIVITIES – ACTIVITY TITLE List the project title of your Healthy Schools activities
\$	\$	1.
	\$	2.
	\$	3.
	\$	4.
	\$	5.

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4. OUTCOMES

TITLE # (from section 3)	ACTIVITY DESCRIPTION AND GOALS Describe the activity, measurable goals, and if it was a division-based, school-based, or hybrid activity. If the activity includes multiple health topics, please describe below.	TARGET Indicate which members of the school community were engaged.	PRIORITY HEALTH TOPIC Please check the main health topic for each activity.	EVIDENCE Check all applicable evidence that informed the decision-making for the activity.	PARTICIPATION/RESULTS Approximately how many students participated in the activity?
1.			<input type="checkbox"/> Mental health promotion <input type="checkbox"/> Nutrition <input type="checkbox"/> Physical activity <input type="checkbox"/> Safety and injury prevention <input type="checkbox"/> Sexual & reproductive health <input type="checkbox"/> Substance abuse & addictions	<input type="checkbox"/> Healthy School Planner <input type="checkbox"/> Tell Them From Me <input type="checkbox"/> Youth Health Survey <input type="checkbox"/> Anecdotal <input type="checkbox"/> N/A <input type="checkbox"/> Other? Specify:	
2.			<input type="checkbox"/> Mental health promotion <input type="checkbox"/> Nutrition <input type="checkbox"/> Physical activity <input type="checkbox"/> Safety and injury prevention <input type="checkbox"/> Sexual & reproductive health <input type="checkbox"/> Substance abuse & addictions	<input type="checkbox"/> Healthy School Planner <input type="checkbox"/> Tell Them From Me <input type="checkbox"/> Youth Health Survey <input type="checkbox"/> Anecdotal <input type="checkbox"/> N/A <input type="checkbox"/> Other? Specify:	
3.			<input type="checkbox"/> Mental health promotion <input type="checkbox"/> Nutrition <input type="checkbox"/> Physical activity <input type="checkbox"/> Safety and injury prevention <input type="checkbox"/> Sexual & reproductive health <input type="checkbox"/> Substance abuse & addictions	<input type="checkbox"/> Healthy School Planner <input type="checkbox"/> Tell Them From Me <input type="checkbox"/> Youth Health Survey <input type="checkbox"/> Anecdotal <input type="checkbox"/> N/A <input type="checkbox"/> Other? Specify:	
4.			<input type="checkbox"/> Mental health promotion <input type="checkbox"/> Nutrition <input type="checkbox"/> Physical activity <input type="checkbox"/> Safety and injury prevention <input type="checkbox"/> Sexual & reproductive health <input type="checkbox"/> Substance abuse & addictions	<input type="checkbox"/> Healthy School Planner <input type="checkbox"/> Tell Them From Me <input type="checkbox"/> Youth Health Survey <input type="checkbox"/> Anecdotal <input type="checkbox"/> N/A <input type="checkbox"/> Other? Specify:	
5.			<input type="checkbox"/> Mental health promotion <input type="checkbox"/> Nutrition <input type="checkbox"/> Physical activity <input type="checkbox"/> Safety and injury prevention <input type="checkbox"/> Sexual & reproductive health <input type="checkbox"/> Substance abuse & addictions	<input type="checkbox"/> Healthy School Planner <input type="checkbox"/> Tell Them From Me <input type="checkbox"/> Youth Health Survey <input type="checkbox"/> Anecdotal <input type="checkbox"/> N/A <input type="checkbox"/> Other? Specify:	



5. COMPREHENSIVE SCHOOL HEALTH

Healthy Schools is rooted in *comprehensive school health* (CSH) which is an internationally recognized framework for supporting improvements in students’ educational outcomes while addressing school health in a planned, integrated, and holistic way. See attached “What is Comprehensive School Health” document for background information.

ACTIVITY #	DESCRIBE HOW YOUR ACTIVITIES CONSIDERED/COMPLEMENTED/ADDRESSED THE CSH FRAMEWORK PILLARS:			
	TEACHING & LEARNING (e.g. how do your activities support what is taught through curriculum?)	HEALTHY SCHOOL POLICY (e.g. how do your activities align with various healthy school policies?)	PARTNERSHIPS & SERVICES (e.g. how do your activities engage parents, community organizations, and volunteers to support your efforts?)	SOCIAL & PHYSICAL ENVIRONMENT (e.g. how do your activities support the creation of a safe, welcoming, and health promoting environment?)
1.				
2.				
3.				
4.				
5.				

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GENERAL COMMENTS (Strengths/Challenges?):

Direct inquires about reports to: Jennifer Wood, Healthy Schools Initiative
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