LSWP Action Plan Form

General Information:

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| --- | --- |
| District Name:  |  |
| School Name (*if applicable)*: |  |
| Wellness Team Members:  |  |

Assessment Information:

|  |  |
| --- | --- |
| Name of Assessment Tool:  |  |
| Date Completed:  |  |
| Score:  |  |
| Areas of Strength:*Highlight areas where the school or district scored well*  | 1.
2.
3.
 |
| Areas of Opportunity:*Discuss the areas with lower scores and why they might not be meeting the criteria* | 1.
2.
3.
 |
| School/District Priorities:*Identify the “low-hanging fruit”. Consider capacity, stakeholder support, interest, and momentum.* | 1.2.3.  |

Local School Wellness Policy Action Plan Template

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Final Rule Requirement | Goal*What do we want to accomplish?* | Action Steps*What activities need to happen?* | Lead Person(s) | Timeline*Start dates* | Measurement*How is progress measured?* | Stakeholders*Who will be involved and/or impacted?* |
| *Example: Standards for all foods and beverages provided, but not sold, to students during the school day* | *Food and beverages will not be used as a reward for students.* | *1a. Provide teachers with list of non-food reward examples.**1b. Discuss changes at back-to-school staff training.**1c. Follow-up mid-year to discuss challenges and determine additional communication needed.**1d. Develop communication to families regarding the nutrition standards* | *1a. CFHL to develop, Food Service Director (FSD) to disseminate**1b. FSD**1c. CFHL staff**1d. CFHL staff* | *Before the beginning of next school year.* | * *Verbal check-ins with staff to ensure compliance.*
* *Teacher survey at end of school year.*
* *The Site-level Assessment Questionnaire (SLAQ)*
 | *FSD, principals, teachers, staff, students* |
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