CHILDREN COUNT PILOT STUDY PROJECT:



A toolkit to support school boards and public health units to collect child and youth health and well-being information (the Healthy Living Module) in a partnership model, for collaborative action



ACKNOWLEDGEMENTS

The project team thanks Public Health Ontario (PHO) for its support of this project. The team gratefully acknowledges funding received from PHO through the Locally Driven Collaborative Projects program. The views expressed in this publication are the views of the project team, and do not necessarily reflect those of PHO.

PROJECT LEAD:

Nicole Dupuis, Director of Health Promotion, Windsor-Essex County Health Unit

PROJECT CO-LEADS:

Jessica Deming, Epidemiologist, Region of Waterloo Public Health and Emergency Services

Ramsey D'Souza, Manager of Epidemiology and Evaluation, Windsor-Essex County Health Unit

RESEARCH COORDINATORS:

Stephanie Lu, Program Evaluation Specialist, Windsor-Essex County Health Unit

Smit Patel, Epidemiologist, Windsor-Essex County Health Unit

Saamir Pasha, Epidemiologist, Windsor-Essex County Health Unit

STEERING COMMITTEE:

School Board Representatives:

Heather Campbell, Director of Education, Rainy River District School Board

Tracey Idle, Mental Health Lead, Rainy River District School Board

Dr. Sharon Pyke, Superintendent, Greater Essex County District School Board

Teresa Hoffman-Sartor, Vice-Principal, Greater Essex County District School Board

Katie Colameco, Mental Health Lead, Lambton-Kent District School Board

Mark Houghton, Principal, Lambton-Kent District School Board

Gary Girardi, Superintendent, Lambton-Kent District School Board

Christine Preece, Mental Health Lead, St. Clair District School Board

Lisa Demers, Superintendent, St. Clair District School Board

Guy Gignac, Mental Health Lead, Conseil Scolaire Catholique Providence **Frederic Riviere,** Superintendent, Conseil Scolaire Catholique Providence

Mirella Fata, Mental Health Lead, Thunder Bay Catholic School Board

Public Health Representatives:

Stephanie Cran, Health Promotion Coordinator, Northwestern Health Unit

Dorian Lunny, Epidemiologist, Northwestern Health Unit

Shannon Robinson, Manager of Chronic Disease Prevention, Northwestern Health Unit

Sophie Wenzel, Health Promotion Planner, Thunder Bay District Health Unit

Jennifer McFarlane, Manager of Family & School Health, Thunder Bay District Health Unit

Anita Cramp, Manager of Young Adult, Middlesex London Health Unit

Laura Zettler, Epidemiologist and Program Manager, Chatham-Kent Public Health Unit

Crystal Palleschi, Epidemiologist, Lambton Public Health

Kelly Farrugia, Manager of Healthy Schools, Windsor-Essex County Health Unit

KNOWLEDGE USERS:

Janine Monahan, Manager of School Health, Kingston-Frontenac Lennox & Addington Public Health

Suzanne Biro, Foundational Standard Specialist, Kingston, Frontenac, Lennox & Addington Public Health

Suggested Citation: Population Health Assessment LDCP Team. Children Count Pilot Study Project: Healthy Living Module Toolkit. Windsor, ON: Windsor-Essex County Health Unit; 2019.

For more information, please contact: ChildrenCount@wechu.org

CHILDREN COUNT PILOT STUDY PROJECT

Our purpose was to look at the feasibility of coordinated monitoring and assessment of child and youth health to address local data gaps that meet the needs of boards of education and local public health units.

"Healthy, active living benefits both individuals and society in many ways – for example, by increasing productivity and readiness for learning, improving morale, decreasing absenteeism, reducing health-care costs, decreasing anti-social behaviour such as bullying and violence, promoting safe and healthy relationships, and heightening personal satisfaction. Research has shown a connection between increased levels of physical activity and better academic achievement, better concentration, better classroom behaviour, and more focused learning. Other benefits include improvements in mental health and wellbeing, physical capacity, self-concept, and the ability to cope with stress."

- The Ontario Curriculum, Grades 1-8: Health and Physical Education (2019)

Given that school boards across Ontario are required to administer a School Climate Survey (SCS) every two years, we viewed this tool as an ideal opportunity to collect data on child and youth health. The SCS is widely disseminated, spans a wide age range, and takes advantage of existing resources.

Together, the research team, including six school boards spanning five public health units, developed the Healthy Living Module (HLM), a set of questions for students in Grades 4 to 12, to supplement the information being collected by each school board's SCS. The HLM asks questions pertaining to healthy eating, physical activity, and mental health.

While the same HLM content was used by all the participating school boards, the implementation process was adapted to suit each school board's needs and their previous SCS. When it came to the analysis and interpretation of data, school boards benefited from the expertise and resources available through their local public health units.

As a result, data from the SCS, in coordination with the HLM, is now being used to inform programming in multiple schools. Overall, the process of developing and adding the HLM to the SCS has been productive and mutually beneficial. We challenge other communities to do the same!

FOR MORE INFORMATION PLEASE SEE THE CHILDREN COUNT PILOT STUDY PROJECT REPORT.



"Our new SCS is economical and efficient. We have the flexibility now to ask the questions we want to ask ... The health unit is getting information that's helpful to them, too."

- Rainy River District School Board

"In the process of choosing each question, we collectively challenged each other. The purpose of formulating questions was not to diagnose someone, but rather to plan for intervention, create tools and strategies."

- Greater Essex County District School Board

"Implementing the HLM in coordination with the SCS helped us meet our school health standard requirements, and filled gaps in provincial and national student health data that do not always accurately reflect our northern communities. It strengthened our relationship with the school board and provided opportunities for joint planning."

- Northwestern Health Unit

"Redesigning the SCS was a big undertaking given our limited resources.

However, having a collaborative working group that was very supportive of this process increased efficiencies and allowed for thorough discussion."

- Lambton-Kent District School Board

"Dans le cadre de ce partenariat, une telle collecte de données nous permet de mieux comprendre nos élèves du point de vue de leur bien-être et de leur habitudes de vie, données essentielles aujourd'hui, pour améliorer nos pratiques scolaires et cliniques pour la réussite des élèves."

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ABOUT THIS TOOLKIT

Enabling children and youth to reach their full potential, achieve academic success, and improve their overall quality of life, is a priority shared across multiple sectors, including health and education. Local, relevant, and consistent data is necessary to inform the planning and evaluation of effective programs that address student health and wellness. The HLM provides school boards and schools with pilot tested questions for physical activity, healthy eating, and mental health that are based on indicator frameworks and existing information gaps.

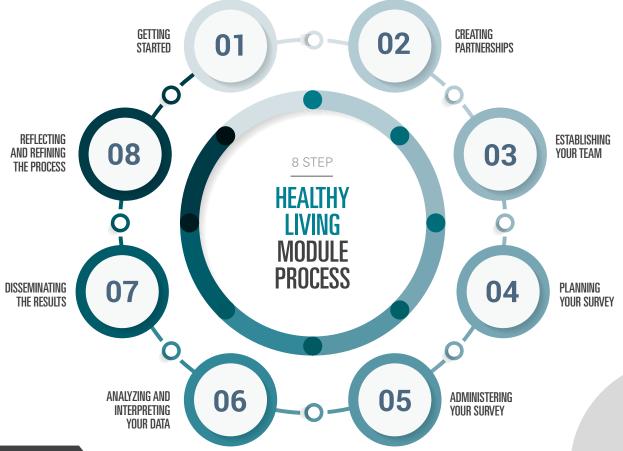
While this toolkit may be useful to various stakeholders in the community, the tools and resources in this toolkit are **designed for education professionals and school boards as the primary audience to:**

A Build upon existing school climate survey structure and mechanism for collecting data on aspects of healthy living;

Guide a partnership between local school boards and public health units to collect and share expertise and information to improve student health and well-being.

Improve programming and services to address local student needs pertaining to healthy eating, physical activity, and mental health; and

This toolkit is organized into 8 sections. Each section includes tools to support your partnership, SCS/HLM implementation and analysis, and data use.



Before incorporating the HLM into your own SCS, it is important to gather information and determine the best direction for your school board. Asking yourself and your team a few questions now will help to develop your approach and/or your plan for your SCS/HLM.

Getting started: Gather information and set direction

Your approach to implementing the HLM may be influenced by how you currently administer your SCS. The biggest question to answer is: will you be adding the HLM to your existing SCS or administer the HLM separately (with your SCS on an alternate year)? Incorporating the HLM into your current SCS is the easiest approach and reduces the work associated with running multiple surveys, however it may not be possible based on your current structure.

Consider the following questions as a first step towards developing your plan:

- 1. Is your SCS developed by your board or do you use a third party/outside researcher? Whether you are using a third party for your SCS or your own locally developed survey, you first need to determine if questions can be added to the survey. If the answer is yes, a secondary consideration is number of questions that can be added and the format.
- 2. What is the process for adding or changing questions to your SCS?
- 3. What is the length of your current SCS?
- 4. Is your SCS paper-based or electronic?



paper or electronic?

There are pros and cons to both methods, however administrating electronically cuts down on both the time to take the survey and the time needed to implement/analyze results.

Using simple language and keeping the survey as short as possible is important given that participants are in grades 4 to 12. If the survey is too long, students will likely give up, and if questions are too complicated, you may not get accurate responses. At this stage review your questions, mark those that may be too complicated or no longer seem relevant. As well, identify and highlight questions in your SCS that overlap with the HLM. This information will be helpful later when you are building and planning your survey with your team.

what we learned

Check the way questions are asked in your survey. Are they using a frequency scale, such as 'times per day' or 'per week' or are they organized in an agreement scale (i.e., 'strongly agree' to 'strongly disagree')?

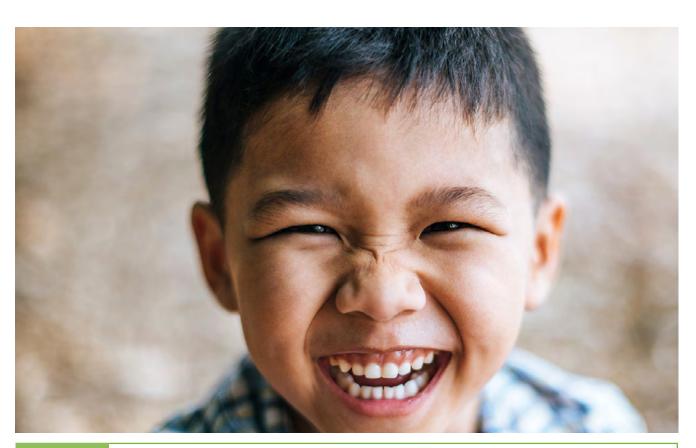
This is important because a change in question format can throw the participant off and make it more challenging to complete and lengthen the time.

- 5. Does your SCS currently include questions that examine physical activity, healthy eating, and mental health of students?
- 6. What is the timing of your SCS (i.e., fall, winter)?
- 7. Does each question in your SCS have a purpose? Is the information used to improve student health and academic success?
- 8. How is your SCS data analyzed?
- 9. Are there other surveys that your board uses to measure healthy living?

one survey?

Will you have one survey or a separate survey for the HLM?

If you have determined you are not adding the HLM into your SCS, but still want to administer the HLM you will follow the same steps as you would for administering your SCS with the HLM.



TIP

If you decide to administer your survey electronically, be sure to make paper copies available for accessibility reasons. Someone should also be responsible for transferring data from completed paper surveys to the electronic survey form.

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SCS information gathering checklist

How and when was your last SCS administered?		
RESPONSIBLE PARTY:	FORMAT:	
☐ Third party researcher	Paper-based	
☐ Self-administered	☐ Electronic	
Other:		ctronic
TIMING:		
The last SCS was developed from	(month, year) to	(month, year)
The last SCS was last administered from	(month, year) to	(month, year)
What did your last SCS cover?		
FOR GRADES 4-6:	FOR GRADES 7-8:	
questions about demographics	questions about dem	ographics
questions about safety	questions about safe	ty
questions diversity	questions diversity	
questions about healthy eating	questions about heal	Ithy eating
questions about physical activity	questions about phys	sical activity
questions about mental health	questions about men	ital health
questions in total	questions in total	
FOR GRADES 9-12:	NOTES:	
questions about demographics	110120.	
questions about safety		
questions diversity		
questions about healthy eating		
questions about physical activity		
questions about mental health		
questions in total		
How was your last SCS analyzed?		
RESPONSIBLE PARTY:	TESTS FOR STATISTICAL SIG	NIFICANCE WERE DONE:
Analyzed by a third party researcher	☐ Yes	
Analyzed internally	□ No	
Other:		
How do you plan to implement the Healthy Living Module (HLM)?		
☐ HLM will be integrated into SCS for administration in	(month, year)	
☐ HLM will be administered separately from SCS in	(month, year)	
SUPPORT REQUIRED FOR HLM ADMINISTRATION?	SUPPORT REQUIRED FOR HL	M ANALYSIS?
☐ Yes	Yes	
□ No	□ No	
NOTES:		

Creating partnerships: Engage public health

- How would you describe your relationship with your local public health unit?
- Have you worked together successfully in the past?
- Do you anticipate any challenges or barriers to strengthening your relationship?

In 2019, the Ministry of Education released a high quality, evidence informed policy curriculum document related to health. This curriculum document explicitly states the role of public health in supporting the new curriculum (Ministry of Education, 2019, p. 19) and cites the Ontario Public Health Standards School Health Requirements (2018, p. 3-4; 13-14). Public health professionals are required to collect and analyze data to monitor health trends of school-aged children and youth and to assist with the implementation of health related curricula and needs in schools, including healthy eating behaviours, substance use and harm reduction, physical activity and sedentary behaviour, and mental health promotion. Public health professionals need to work with teachers, administrators, students, and parents to assess the health priorities and needs of the school and to participate in developing and supporting plans to foster healthy activities, programs or policies within the school environment.

"Student well-being 'lives' in the context of child and youth well-being and as such, school boards and public health units share in this important mandate. Strong partnerships that focus efforts on strategic priorities can improve health outcomes for children and students, positively affect their achievement and reduce preventable illness and injuries, which in turn will contribute to a healthier and better-educated citizenry."

- CODE/COMOH (2013)

"The questions asked in the HLM are some of the underlying factors that determine a student's success. The data will help your local public health unit to support you better ... this process will also help us in identifying trends across school boards and geographic variations."

- Thunder Bay District Health Unit

The Council of Ontario Directors of Education/ Council of Ontario Medical Officers of Health (CODE/COMOH) Committee recommended that all school boards and public health units establish and maintain a written partnership agreement to support a mutually-beneficial working relationship between the local school board(s) and public health units. The purpose of enhancing the partnership is to help foster optimal delivery of services and supports for students and parents, and to further strong collaborative and sustainable partnerships between school boards and public health units. Adopting a HLM with your local public health unit would strengthen any partnership currently in existence. By identifying specific needs of the students, based on their SCS responses, public health units are able to coordinate resources and specific programming with the school board.

CHILDREN COUNT

School boards that participated in the Children Count Pilot Study all had strong existing relationships with their local public health unit, however for many of the pilot sites, collaboration around the collection and use of data was a new part of this relationship. Developing new relationships, especially when it comes to student data can be daunting; however, starting with these steps can make it easier and less intimidating.

If you do not yet have a relationship with your local public health unit, start by connecting with your local Medical Officer of Health. www.alphaweb.org/page/PHU

Your partnership agreement

The Children Count Pilot study was bound by a research proposal and terms of reference. These documents helped to establish the vision for the project, the mechanisms and framework for collaboration and outlined roles and responsibilities between school board and public health unit staff.

Developing a written partnership agreement or memorandum of understanding with your local public health unit can provide understanding and security when engaging in a new relationship or strengthening an existing one. If you already have an existing agreement, it may be time to renew or review, adding a section related to the HLM/SCS.

If you do not have an existing agreement, you can use our sample below as a guide. Your partnership agreement for the HLM should, at a minimum, include:



VISION OR PURPOSE STATEMENT:

A broad goal shared between the local school board and public health unit. It indicates the reason and/or rationale for the partnership and agreement.



GUIDING PRINCIPLES:

Provide parameters or a framework for the partnership under the vision.



ROLES AND RESPONSIBILITIES:

Describe the specific roles and responsibilities of school board and public health unit staff. For example, if the public health unit will be analyzing the HLM or SCS data, there should be a section identifying the staff (e.g., data analyst, epidemiologist) and the tasks or activities that individual will complete in service of the partnership.



ACCOUNTABILITY AND DECISION-MAKING:

Determine processes for decision-making and how each partner will be held accountable from the start.



RENEWAL:

Outline how often the partnership agreement is reviewed and renewed, and by whom.



SIGN-OFF:

Have an official sign-off between partners to solidify the relationship and to strengthen the agreement.

TOOL

Title

Sample partnership agreement

Partnership agreement between				
School Board_				
and Public Health Unit				
Background The Ministry of Education requires that all school boards administer a school climate survey of students at minimum every two years for all students grades 4 to 12.	Roles and responsibilities: Public Health Unit The public health unit will work collaboratively with the school board, acting as a resource and consultant as subject			
The Ministry of Health through the Ontario Public Health Standards (2018) require that public health units collect and analyze data and monitor trends over time related to the health of school-aged children and youth and further that public health units develop programs and services that meet the unique needs of	matter experts in the area of health, survey methodology, data analysis and interpretation. The public health unit will provide staff resources to support the implementation of the HLM by the school board, and to analyze the data according to the agreement upon data sharing agreement.			
local school boards and students.	Optional: Include specific staff and time commitments			
Purpose of this document This document represents a partnership agreement and captures statements of shared intent. This document is not a legally binding document, but rather an informal agreement of joint collaboration between the named organizations.	School Board The school board will include the public health unit in meetings and communications related to the HLM and the school climate survey as appropriate. The school board will transfer data to the public health unit for analysis in accordance with the data sharing agreement.			
Vision for our partnership To built on the joint experience and expertise of education and public health professionals to administer the HLM as part of the SCS and to analyze and use the results to inform evidence based	Optional: Name specific staff positions or individuals as key contacts Accountability and decision making			
planning, direct resources and evaluate programs. Guiding principles 1. All joint work related to the SCS and HLM will abide by the fundamental ethical principle of doing no harm.	This agreement acknowledges that the public health unit is working collaboratively with the school board to administer their school climate survey with the HLM. Decisions will be made by consensus where possible;			
2. The rationale for the information being collected will be a key consideration in all discussions related to survey; both parties will endeavour to only ask survey questions that will serve a	however, the school board will make the final decisions regarding the survey and its use. Optional: Insert workflow of approvals here if appropriate.			
clear purpose. 3. Both organizations are committed to collaborative action on the results of the SCS and HLM.	Renewal This agreement will be reviewed and renewed yearly or at minimum bi-annually in conjunction with the SCS or HLM implementation schedule.			
Sign-off (Signatures on this agreement must have the authority)	ority to bind the organization.)			
School board representative D	ate			
Public health representative D	ate			

Establishing your team: Develop the data sharing relationship

Pilot Study participants agreed that the key to successfully implementing the HLM with the SCS was a strong relationship between senior level school board and public health unit representatives. These relationships were enabled by having a **data sharing agreement** and then forming new or expanding upon existing open,

transparent, and inclusive **working groups** made up of project champions (e.g., mental health lead or technology enabled learning and teaching contact from a school board; epidemiologist or school health manager from a public health unit).

It was also important to involve individuals who were familiar with a school board's past SCSs, especially if a third party organization was involved. Pilot Study participants wanted to know the assets and limitations of past SCSs to better understand how the HLM results could be used in conjunction with SCS data. After all, developing programs based on survey results from one question alone may not provide enough evidence or a complete story of student needs.

A data sharing agreement outlines the roles and responsibilities of each party involved—who will be responsible for collecting and analyzing the data, data confidentiality and security processes, and who has ownership and use of the data.

"The creation of a data sharing agreement was an important and useful first step, outlining the roles and responsibilities of the school board and the public health unit, and delineating the use and analysis of the data."

- Rainy River District School Board

"A data-sharing agreement removed reservations from school boards by providing clear expectations about how information will be used. In our scenario we looked to our public health unit to take the lead on establishing the data sharing agreement."

- Thunder Bay Catholic District School Board



Resource:

CODE and alPHa's letter to strengthen partnerships between public health units and district school boards

Resource:

The Ministry of Health's School Health Guideline, 2018

TOOL

Sample data sharing agreement

The purpose of the agreement is to define the roles and responsibilities of the [school board] and the [public health unit] in the collection, storage, analysis and dissemination of data collected through the School Climate Survey, to be administered from [insert start date] to [end date]. Upon reading and signing this document, the respective organizations agree to abide by the provisions specified in it.

The [school board]:

- 1. Will design the survey tool, with necessary support from the [public health unit], as required.
- **2.** Owns the survey instrument as intellectual property.
- **3.** Will oversee the administration of the survey and the collection of the data in eligible schools in [school board].
- 4. Owns the data.
- **5.** Has control over how the data is used.
- **6.** Decides who may access the data.
- 7. Will allow [public health unit] to access and store the data in their [online survey platform] account, should that be the platform of choice.
- 8. Has the authority to determine what [public health unit] may or may not use the data for.

The [public health unit]:

- 1. Will provide support in designing the survey instrument, as required.
- 2. Will facilitate ethics review of the survey and methodology, as required.
- 3. Will allow the survey to be housed within its organizational [online survey platform] account, should that be the platform of choice.
- **4.** Will ensure the data shared with them is kept secure and confidential at all times.
- **5.** Will store the data as per the organizational data storage and retention policy.
- **6.** Will not share the data with third parties without first getting permission from [school board].
- 7. Will not share the data publicly without first getting permission from [school board].
- **8.** Will not use the survey instrument without first getting permission from [school board].
- 9. Will use the data only for purposes agreed to by both parties.
- **10.** Will provide analytical support, as required.
- 11. Will provide support in drafting knowledge dissemination products (e.g., reports), as required.
- 12. Will work to protect anonymity of students by recommending and adhering to data suppression guidelines when necessary.
- 13. Will provide support for knowledge dissemination, as required.

14. Will info	orm [school bo	oard] if any of th	e conditions set	out in this agre	ement have be	en breached	

Sign-off (Signatures on this agreement m	ust have the authority to bind the organ	ization.)
School board representative Title	Date	
Public health representative Title	 Date	

Planning your survey

Bringing a diverse group of people together requires a significant time commitment; however, Pilot Study participants felt that their time and efforts were worthwhile. There is a lot that goes into planning your survey from building and reviewing questions, developing consents and announcements, and determining your timeline. Each group member helped to decide whether each question asked was going to help determine student need. This is a valuable part of the process. Deciding the best time to administer your SCS and working backwards through the key steps that will be required to get you there, with a timeline, is key.

When deciding the best time to administer your SCS/HLM, consider the following:

- a. How long students have been in their current grade and school: If you choose the beginning of the school year to administer your survey it may be more difficult for students to answers questions about their school year experience.
- b. School campaigns or events that the SCS/HLM could be aligned with: Pilot schools found that building on an existing campaign or higher profile event (e.g., parent and teacher interviews, Bullying Prevention Week) gave them more opportunities to promote the SCS/HLM with students and parents.
- c. Competing demands for time from school staff, and students: It is important to consider other events that are happening within the school that will compete with the school staff's capacity to implement the survey. The school staff's understanding of the SCS/HLM's purpose and their ability to assist students with completing it is crucial to successful implementation.
- d. How the data will inform current and future planning: Having analyzed SCS/HLM data will be useful to your school improvement planning processes. Therefore, use your typical school improvement processes to decide your deadlines for SCS/HLM implementation. For example, if you want school plans completed before the end of the year, implementing your SCS/HLM in May will not give you enough time to analyze and share the data appropriately.



Creating your timeline

Once you have determined when you would like to administer your SCS/HLM, develop your timeline, identifying key tasks, meetings and milestones needed to get you there. There are many tools that can be utilized, however building a simple Gantt chart is an easy way to keep organized and communicate to your team what needs to be done, who is the lead, and the deadlines. Using a Gantt chart will also help determine if the date picked for administering your survey will allow you enough time to get everything done that you need and want to accomplish prior to your survey launch.

Develop SCS/HLM

1.1 Finalize your survey

Reviewing the intent of each of your survey questions is an important step, whether you are integrating the HLM into your SCS or administering it separately. For some school boards, the biggest lesson learned was the importance of consulting an expert (e.g., epidemiologist) from their local public health unit well before the SCS/ HLM was administered. Early consultations will allow the epidemiologist to make recommendations regarding the collection of demographic information, the types of questions that are best suited for each indicator, question wording, and options for online survey platforms—all these decisions can influence how students may respond to a survey. Set aside time to review each question and consider what you are trying to measure and how you will use that information. Another key consideration is if the information is already being collected elsewhere. If so, remove questions as you see fit to avoid duplication.

Lastly, consider the demographic questions. Do you want to know if there are differences between student groups at your school, (by gender, or for Indigenous students, or for new Canadians)? To answer such questions, you will need to add demographic questions to the SCS/HLM. School boards in the Pilot Study were consistent in including questions about grade, school, and gender, while some boards also included questions related to Indigenous identity, language spoken at home, and others.

Ensuring that the questions are worded appropriately for all student age groups, and planning supports and accommodations for students completing the SCS/HLM, were key steps identified by participating boards. However, once the SCS with the HLM has been implemented, changes should be minor, if any, to ensure the results remain comparable over several years into the future.

1.2 Pilot test your survey

Once you have finalized your survey, consider pilot testing your questions. If you have already pilot tested your survey in the past, consider testing only newly developed questions. Pilot testing allows school boards the ability to determine if any changes need to be made to the questions and/or collect information that should be incorporated into instructions or scripting for teachers. Pilot testing is particularly important for students in younger grades as they may struggle with complex wording or questions that require recall.

1.3 Develop a data analysis plan

Determining up front how you would like your data to be analyzed can save time later on and ensure you will be able to get the information you want from your survey. The scope of this step will depend on the needs of the project team and can be modified accordingly.

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Sample SCS/HLM implementation timeline

Milestone	I	Vlor	nth '	1		Mor	nth :	2		Vlon	rth 3	3		Vlor	nth 4	ļ		Vlor	nth !	5		Vlor	nth 6	6
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1. Develop SCS/HLM																								
1.1 Finalize your survey																								
1.2 Pilot test your survey																								
1.3 Develop a data analysis plan																								
1.4 Develop a communication plan																								
2. Launch SCS/HLM																								
2.1 Develop communication tools																								
2.2 Provide training for staff																								
2.3 Promote SCS/HLM																								
2.4 Administer SCS/HLM																								
3. Analyze and report on SCS/HLM																								
3.1 Transfer and analyze data																								
3.2 Develop and review data reports																								
3.3 Create report summaries, infographics, etc.																								
3.4 Share results and plans for use																								
3.5 Use results to inform planning																								



Microsoft Excel and Microsoft Project both offer Gantt chart templates that you can use for planning.



Data analysis plan checklist

A data analysis plan is a roadmap for how you are going to approach and analyze your results, and what questions you are looking to answer. It also aids in mapping out how you will want your analysts to segment the data so that you can compare differences between demographics (e.g., between grades, gender, etc.).

For the HLM, the following checklist will help you determine what to ask of your data analysts and/or epidemiologists in terms of what you are hoping to have answered in your data

\square A board report is required for each cohort (e.g., grades 4-6, 7-8, 9-12)
☐ A report for each school is required by each cohort (e.g., grades 4-6, 7-8, 9-12)
\square Analysis to be stratified by grade within a cohort
☐ Analysis to be stratified by gender within a cohort
\square Analysis to be stratified by Indigenous status within a cohort
☐ Significance testing to show differences within each demographic stratifier mentioned above
☐ Student data to be suppressed or combined with another cohort if responses/class sizes are low or small

See **Appendix B** for an outline of a data analysis plan that can be used by your data analyst.

Administering your SCS/HLM

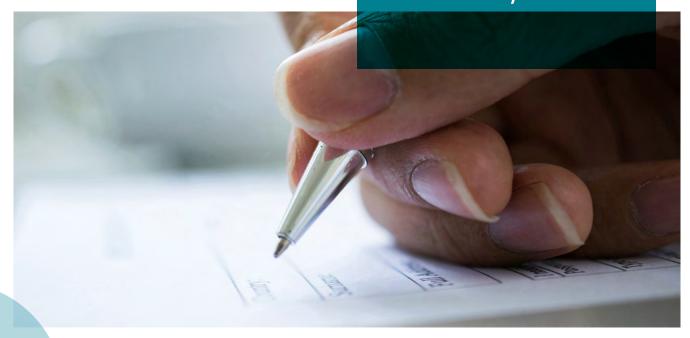
In the months leading up to the launch of the SCS/HLM, develop a communications plan with your project champions. A communications plan should include information about each of your stakeholder groups (e.g., principals, teachers, parents/guardians, students, community), how you plan to reach them (e.g., school website, local paper), and the key messages you want each group to receive before, during, and after your SCS/HLM has been administered.

What every school will need for certain is a letter to notify parents/guardians about the SCS/HLM, which is why we have included two samples. Other forms of communication that our Pilot Study participants used included principal memos or letters to school administrators, scripts to classroom teachers, or a combination of all of the above. One school board created video announcements to explain the purpose of the SCS/HLM and to draw students, teachers, and parents/guardians to their website to complete the survey. What was important in all of these communication strategies was having consistency in the messaging.

While the SCS/HLM is open, we recommend monitoring survey completion and sending reminders to schools to complete their surveys at various time checkpoints (e.g., a check-in 3 days before the survey deadline). With regular monitoring, Pilot Study participants found that having the survey open for one month was adequate.

To maximize participation, participating school boards used online platforms for their surveys (e.g., CheckMarket, internal tools), but also made paper copies available for accessibility reasons.

Consider making paper copies available for accessibility reasons.



Communication plan template

BEFORE School Climate Survey administration

Audience	Key Message	Medium	Person(s) Responsible	Timeline

DURING School Climate Survey administration

Audience	Key Message	Medium	Person(s) Responsible	Timeline

AFTER School Climate Survey administration

Audience	Key Message	Medium	Person(s) Responsible	Timeline

FAQ for principals and teachers

How will the survey be administered?

- The survey will be online and open for completion from [date] to [date].
- We will have four online surveys: Grades 4-6, Grades 7-12, parents/guardians, and staff.
- We ask that school staff schedule time/technology blocks for their students to complete the appropriate online survey during classroom hours.
- As for the survey for parents/guardians and staff, links to access the survey will be made available through [method].
- Paper copies of the surveys will also be made available at [location].

Who will have access to the collected data and how will it be used?

- The collected data belongs to [school board]—we will ensure that individualized results are kept confidential.
- [Statement about who will analyze the data.]
- Aggregated school level and Board level results will be shared with [local public health unit] to support joint program planning. The results will also be shared with our wider school community.

What should students be told before completing the survey?

- The survey is NOT a test. There are no "right" or "wrong" answers.
- Select only one option per question unless otherwise directed.
- All of your answers will be kept private. No one (parents, teachers, classmates) will ever know what you answered.
- Be honest and choose the option that is the closest to what you think and feel is true for you.
- Your answers are very important and help us to maintain a positive school environment and support student well-being.

Can I help students complete the survey?

- We encourage teachers of younger grades or students with special needs to have their students complete the survey together, at the same time, so that questions can be read out loud.
- You may also need to review specific words or clarify definitions with students, which is allowed.
- Please do what you can to support students in completing the survey as it is very important that we have full participation.

Sample parent notification letter (template 1)

[Date,]

Dear Parents/Guardians,

The [School Board] will conduct a school climate survey with students from [date] to [date]. School boards in Ontario are mandated by the Ministry of Education to conduct these surveys of students, staff and parents every two years.

Students will be asked to fill out the survey online during the school day. The questions will focus on student experiences and thoughts related to health, wellness, equity and inclusion, and safe schools.

These surveys are an important tool in helping the board and individual schools to assess perceptions of school safety and in helping to build and sustain positive school environments. They also assist in making informed decisions and plans to help promote safe and inclusive school and student health and wellness.

This is an opportunity for students to have their voices heard on these important topics. The surveys are anonymous and a good response to the survey is vital to obtaining reliable data.

If you have any questions, please contact your school principal.

Sincerely,

[Director of Education] [School Board]

Sample parent notification letter (template 2)

[Date,]

Dear Parents/Guardians,

The [School Board] will be evaluating aspects of healthy living as a supplement to our school climate survey with students from [date] to [date]. The Healthy Living Module asks questions about student nutrition, physical activity, sleep, relationships at school, help-seeking, and general coping and well-being.

The Healthy Living Module will be utilized in conjunction with the school climate survey data by the school board to target best practices and plan strategies to improve student achievement and well-being.

Students in grades 4 to 12 will be asked to fill out the survey online during the school day. Your child's participation is completely voluntarily and their responses will be anonymous. If you prefer that your child does not participate in the Healthy Living Module survey please fill out and return this form with your child by [date].

If you have any questions, please contact your school principal.

Analyzing and interpreting your data

School boards in the Children Count Pilot Study varied in their capacity and resources to analyze data. However, the partnership with public health units and staff with expertise in analysis (e.g., epidemiologist) made the process much easier. We highly recommend that an epidemiologist be in involved in this stage of the process when school board capacity is limited. An epidemiologist can help identify the goals and outcomes of analysis, apply a critical lens in determining the value of breaking down results by demographics, and explain the use of statistical testing methods to enhance findings for developing targeted initiatives and programming for students.

The purpose of stratifying and testing for significant differences between students of different grades, gender, and Indigenous status will allow you to determine where the issues and opportunities are for addressing the needs of your student population.

When sample sizes are adequate, each school should be provided with their own report. However, if sample sizes are not adequate, consider combining multiple grades within the same school to increase sample size.

During the Children Count Pilot Study, school boards worked with public health planners and epidemiologists to discuss how they would like their results analyzed.

All question responses were analyzed by demographic characteristics (e.g., gender) and then tested for statistical significance. When reporting back the results, graphs only showed demographic characteristics if there was a statistically significant difference between groups. For example, male and female were only shown if there was a statistically significant difference between their responses to questions.

The following checklist will help guide your data analyst and/or epidemiologist on how to analyze and understand your findings from the HLM:

- ☐ Review and carry out the data analysis plan from Step 4.
- ☐ Summarize the demographic make up of students by grade, gender, Indigenous status, and any other demographic stratifier of interest found in in the HLM (See tables below as an example of how to present the findings.)
- ☐ Analyze each question by the demographic variables identified above (e.g., gender, grade, Indigenous status, etc.)
- ☐ Conduct statistical tests to determine differences for each question between each of your demographic variables identified above (See tables below as an example.)

Example Table 1

Indigenous status	Survey responses	%
Indigenous	200	20%
Non-Indigenous	800	80%
Total	1,000	100%

Example Table 2

Grade	Female n (%)	Male N (%)	Other N (%)	Total
7	100 (10%)	250 (25%)	50 (5%)	400 (40%)
8	200 (20%)	300 (30%)	100 (10%)	600 (60%)
Total	300 (30%)	550 (55%)	150 (15%)	1,000 (100%)

Sharing and using the results

Once data analysis has been completed, it's time to share and use your results. To help you consider who needs to know about your survey results, revisit the communication plan from Step 5.

School boards in the Children Count Pilot Study are using a number of strategies and tools to communicate their results, including interactive data visualization (e.g., dashboard created in Power BI), infographics, summary reports, and presentations. Each of these strategies are being tailored to meet the specific interests and needs of stakeholders.

For example, the Lambton-Kent District School Board is using one page summary reports at the school level to communicate results to parents/guardians. They created a template that could be used across all of their schools for a uniform look and feel. Their template included sections for highlighting results of interest and actions the school would take to improve their school

climate. In addition, they were supported by Lambton Public Health who created a dashboard with mapping capability in Power BI that interactively displays results by grade, category (e.g., bullying, mental health and resiliency, etc.), survey question, and more.

To summarize the results of their individualized school reports, the Greater Essex County District School Board created an infographic to communicate their identified priority areas. Across their 85 schools, the school board identified 10 trends, which have since been used to inform a new strategic plan, operational plans, and school improvement plans.

"The plans from the GECDSB have been very useful to us in public health. The plans allow us to take a more targeted approach to higher needs schools. Our Healthy Schools teams can now offer more intensive support in these schools thanks to joint planning with the school board."

- Windsor-Essex County Health Unit



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The purpose of the school climate survey is to strengthen our system and our individual schools by celebrating our successes, identifying opportunities for improvement, and planning the next steps to provide safe, inclusive, and respectful learning environments that support academic growth and well-being.

DATA FROM THE STUDENT AND COMMUNITY SURVEYS





HEALTHY LIVING MODULE

BOARD LEVEL HIGHLIGHTS

BOARD NAME HERE

NUTRITION

As student age increases, the percentage of sugar sweetened beverage and fast food consumption significantly increases.

44%

of students are eating breakfast every school day

PHYSICAL ACTIVITY

Majority of students

20%

are not getting 60 minutes of moderate to vigorous exercise a day



SCREEN TIME

Majority of students

40%

spend 3 or more hours a day on screen time



BULLYING BEHAVIOUR



Approximately 1/3 of students reported being verbally or socially bullied at least once in the last 4 weeks

PATHWAYS TO HELP

10%

of students **DO NOT** know who to approach

50%

would not ask for help at school if they were experiencing a mental health or emotional problem

SCHOOL BELONGING

20%

of students feel they belong at school

LIFE SATISFACTION

60%

of students indicated, in general, they were happy with life

Students, who are generally healthy overall—physically, mentally and emotionally, socially and spiritually— are more likely to do well in school and in life. A number of factors and life experiences contribute to student overall health or well-being, some within Education's sphere of influence. Skills for healthy living can be taught, modeled and supported in schools that have a positive climate, are culturally-informed and adequately resourced.

RESILIENCY

37%

OF STUDENTS WORRY ALWAYS OR MOST OF THE TIME 60%

OF STUDENTS INDICATE BEING ABLE TO BOUNCE BACK WHEN BAD THINGS HAPPEN **30**%

OF STUDENTS ARE ABLE TO CALM THEMSELVES DOWN WHEN STRESSED SCHOOL BOARD | HIGHLIGHTS

Celebrating successes and refining the process

At the conclusion of your collaborative partnership, be sure to follow up with any schools who had low survey completion rates to understand their challenges, and to devise mitigation strategies for the next round of data collection. Be sure to also engage your working group one last time to reflect on the overall process, document any changes that should be made for future iterations, and to celebrate your successes!

"[The project] has opened that door for collaboration going forward ... [The school boards] already need to do this—they just want to do it better and more efficiently ... And if this negates the need for us to have other data collection opportunities in schools it's a win-win for us."

- Lambton Public Health

"Working with our public health partners is a benefit to all children and youth in our communities. Together we can collaboratively work to support their wellbeing needs."

> - St. Clair Catholic District School Board

Questions to prompt reflection and discussion:

- Who were our project champions? Should we include anyone else/any different perspectives in our working group next time?
- How was the timing for each of the steps involved in administering the SCS/HLM? Did any of the steps take longer than expected?
- What were the biggest takeaways from the collected data? Were any of the results surprising to you?
- How will we know if our use of local data has improved programing in schools/in the community?
- How have the SCS/HLM results been received by principals, teachers, and parents/guardians?

"[The project] has opened up the opportunity to collaborate with respect to data, whereas before there were more barriers ...

Having some comprehensive in-person meetings with the school board to go through the actual survey was the most helpful piece from my perspective. It goes beyond 'we have this list of questions.' It supports the relationship."

- Chatham-Kent Public Health

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Appendix A

Healthy Living Module (HLM)

Demograph	ic questions to l	be added by 1	the school	l board:
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- Please select your school (dropdown list)
- What grade are you in? (dropdown list)
- What is your gender? (dropdown list)
- What language do you speak most often at home? (dropdown list)
- How long have you lived in Canada? (dropdown list)
- Do you identify as Indigenous or with mixed Indigenous ancestry? (dropdown list)

Pu	rpo	ose:

The following questions and statements will help your school understand how healthy their students are and how they feel about certain things. Please answer as truthfully as possible. It will only take a few minutes to complete. All of your answers will be kept private and you will never be judged based on your response.

1. ON A USUAL DAY how often do you eat fruits and vegetables (not including juices)?

	5 or more times a day	4 times a day	3 times a day	2 times a day	1 time a day	0 times a day
a. Fruits (bananas, oranges, mangoes, etc.)						
b. Vegetables (carrots, broccoli, etc.)						
2. ON A USUAL D	AY how often o	do you do the f	ollowing?			
	0 times a day	1 time a day	2 times a day	3 times a day	4 times a day	5 or more times a day
a. Eat sweets (candy, chocolate, fruit roll up, etc.)						
b. Drink sugar sweetened beverages (soda pop, energy drinks, fruit juice, etc.)						
c. Eat fast food (burgers, pizza, French fries, hot dogs, tacos etc.)						
d. Eat snack foods (chips, popcorn, cheese puffs, granola bars, etc.)						

in th	e morning before 9:00 AM (more than j	ust milk or fruit	juice)?		
	Every day				
	4 days				
	3 days				
	2 days				
	1 day				
	Never				
breath	sical activity is any activity that increa at times. Some examples of physical a a bike, swimming, playing tag, playing	ctivity are run	ning, fast walking, dancing,		
	SUAL WEEK, how many days do you spal activity?	end doing at le	east 60 minutes (one hour) of		
	Every day				
	6 days				
	5 days				
	4 days				
	3 days				
	2 days				
	1 day				
	Never				
5. How much time do you spend OUTSIDE OF SCHOOL HOURS playing video/computer games, watching shows or videos (YouTube, Netflix, TV), chatting (Facebook, Twitter, Snapchat, Instagram, etc.) sending text messages and using the internet? a. On a USUAL SCHOOL DAY? b. On a USUAL WEEKEND DAY (SATURDAY OR SUNDAY)?					
	Less than 1 hour		Less than 1 hour		
	1 hour to less than 2 hours		1 hour to less than 2 hours		
	2 hours to less than 3 hours		2 hours to less than 3 hours		
	3 hours to less than 4 hours		3 hours to less than 4 hours		
	4 hours to less than 5 hours		4 hours to less than 5 hours		
	5 hours to less than 6 hours		5 hours to less than 6 hours		
	6 hours to less than 7 hours		6 hours to less than 7 hours		
	7 hours to less than 8 hours		7 hours to less than 8 hours		

8 or more hours

3. On a USUAL SCHOOL WEEK (MONDAY TO FRIDAY), how many days do you eat something

8 or more hours

6. On a	6. On a USUAL SCHOOL NIGHT, how many hours of sleep do you get?							
	9 hours or more							
	8 hours to less than 9 hours							
	7 hours to less than 8 hours							
	6 hours to less than 7 hours							
	5 hours to less than 6 hours							
	4 hours to less than 5 hours							
	Less than 4 hours							
_	od night's sleep happens when you do not u do not have difficulty staying asleep, and	_	•	_				
On a US	SUAL WEEK, how often do you get a goo	d night's	sleep?					
	Every day							
	6 days a week							
	5 days a week							
	4 days a week							
	3 days a week							
	2 days a week							
	1 day a week							
	Never							
8. We want to find out about student bullying at your school. Bullying is when a person tries to hurt another person forcefully and usually repeatedly. It can be physical, verbal, or social, and can also take place over the internet with emails or text messages. The bully usually feels that he or she has more power over the other person. Sometimes a group of students will bully others.								
IN THE	PAST 4 WEEKS, how often have you bee	en:						
		Never	Once or twice in the past 4 weeks	Every week	Many times each week	Do not know		
a. Physic by some	cally bullied (e.g., pushed, punched, or scared eone)?							
	lly bullied (e.g., called names, teased, threatened, /ed comments about the way you look)?							
rumour	lly bullied (e.g., excluded by others, had s spread about you, or had someone try to bu look bad)?							
social m	r bullied (e.g., used email, text messages, or nedia such as Facebook, Twitter, or Instagram or threaten you more than once)?							

CHILDREN COUNT 33

	nk about the last time you : k all that apply.	saw or heard ab	out a st	udent be	ing bullied. What d	ıd you do?
	I don't remember/I haven't se	en bullying	☐ I:	stood up f	or the person who wa	as being bullied
	I told my parent(s) or guardia	n(s) about it		helped the	e person being bullied	to fight back
	I told an adult at school about vice-principal, or principal)	tit (e.g., teacher,		tried to ta	lk to the bully about it	:
	I told a friend about it			made an e as bullied	ffort later to include t	he person who
	I tried to comfort the person bullied	who was being	☐ Ii	ignored it		
	I encouraged the person bein ignore it	g bullied to		did somet	hing else	
10. Do	o you have close friends at	school you can	trust?			
	Yes – more than one close	friend				
	Yes – one close friend					
	No					
	o you have at least one car	ing adult that yo	u can tr	ust or go	to if you need hel _l	o with
anyth	ling?	\	Yes		No	
a. At s	school?					
b. Out	tside of school?		 D		 	
12. So belon	chool is a place where I fee	el like l	13.	In gene	ral, I am happy witl	h life
	Always			☐ Al	ways	
	Most of the time			■ M	ost of the time	
	Sometimes			☐ So	metimes	
	Never			□ Ne	ever	
	I wanted to talk to someon					have (e.g.,
	feeling really sad, worried, etc.), I know who I could get help from. a. At school b. Outside of school					
	. 1			Yes		
	l No		П	No		

15. If I experienced a mental health or emotional problem (e.g., feeling really sad, worried, etc.), I would ask for help.							
a. At school b.			b. Outside of school				
	Yes		Yes				
	No		No				
		,					
16. Answ	er the following questions thinking abo	out the PA	AST 12 MONTH	IS (1 YEAR).			
		Neve	Sometimes	Most of the time	Always		
	ssured by another student, friend, or adult to thing that didn't feel right to do)					
b. I worried about things too much							
c. I was able to solve my problems in positive ways							
d. When bad things happened, I was usually able to bounce back							
e. I calmed myself down when I was stressed							
f. I spoke to	o myself in a positive way						

Your responses have been registered. Thank you!

Appendix B

Outline of data analysis plan

1. Background

In this section, provide descriptive statistics for the HLM indicators from the school board as a way to examine and better understand student demographics, health behaviours, and help-seeking behaviours.

2. Aims

The analysis aims to inform decision-makers at the [school board] about student needs. In this section, describe the students who are identified as 'high priority' (i.e., students who report health behaviours and/or less access to supports and/or perceptions about school that are less favourable than their peers).

3. Methods

In this section, include details on the following:

Datasets

- Surveys completed by school and grade (list all)
- Online survey platform that data was extracted from
- Variable names and labels to be used in the analysis for each survey question

Inclusion and exclusion criteria

• E.g., All students from [school board] in grades 4 to 12 were included

Variables for analysis

• E.g., Gender, grade, and indigenous status

4. Statistical software

In this section, describe how data preparation and statistical analysis were conducted.

For several of the pilot study sites that had their data analyzed by an epidemiologist, the following statistical procedures were applied using R Studio:

- 1. Data cleaning
- 2. Tabulating outcomes of interest by relevant stratifying variables
- 3. Assessing statistical significance of stratifying variable using chi-square tests adjusted for multiple comparisons
- 4. Visualizing results via bar charts
- 5. Integrating data products into a MS Word document