Getting Started Worksheet

This tool will help you look at your environment and highlight which strategies you are already working on, and those that will best help you in promoting physical activity and healthy eating.

Using the following scale, mark in the first column what level of attention you are currently giving each strategy. Use the middle column to indicate the areas you would like to focus on. And finally, use the last column to mark where you would like to be in the next 6 months on your selected strategies.

1. Not even on the radar screen.
2. We are making plans to do this, but aren't doing it yet.
3. We are doing this in a few classrooms.
4. We are doing this in more than a few classrooms.
5. We are doing this in most classrooms.
6. We are doing this program/school-wide.

We:	Currently	Would like to address this year	6 Months
1. Provide healthy choices for snacks and celebrations; limit unhealthy choices.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
2. Participate in local, state, or national initiatives that promote healthy eating and active living.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
3. Engage community partners to help support and promote healthy eating and active living at your site.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
4. Partner with and educate families in adopting and maintaining a lifestyle that supports healthy eating and active living.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
5. Provide water and low fat milk; limit or eliminate sugary beverages.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
6. Provide non-food rewards.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
7. Provide opportunities for children to get physical activity every day.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
8. Implement a staff wellness program that includes healthy eating and active living.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
9. Collaborate with Food and Nutrition Programs to offer healthy food and beverage options.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐
10. Limit recreational screen time.	1 2 3 4 5 6 ☐☐☐☐☐☐	☐ Yes ☐ No	1 2 3 4 5 6 ☐☐☐☐☐☐

Use these questions to plan out your action steps.

Which strategies would you or your program like to focus on this year?

What are some specific ways you could address your chosen strategies?

What potential barriers do you foresee?

Next Steps: