



Kern Family Health Care School Wellness Grant Program

Background

Kern Health Systems dba Kern Family Health Care (KFHC) is committed to improving the health status of our members and our community through an integrated managed health care delivery system. Since 2015, KFHC has been funding school wellness grant programs throughout the county and these programs have demonstrated success with decreasing obesity, improvement of physical fitness, and increasing student knowledge around nutrition, physical activity and safety. To continue assisting KFHC in fulfilling its commitment towards a healthier Kern County, KFHC will award up to 6 public schools in Kern County grant funding to implement a school wellness program that will engage students and stakeholders in activities that promote and support the physical, social, emotional and behavioral health and wellbeing among students and their families.

Award Amount

Up to \$35,000

Application Deadline

April 1, 2019

Award Announcement Date

May 12, 2019

Program Period

July 1, 2019 – June 30, 2020

Program Expectations:

- Program Lead must participate in monthly meetings to discuss the progress of the grant funded program and at least four of these meetings will be in-person at the school. It is highly recommended that key staff identified in the school's work plan and grant application attend these meetings.
- Monthly Progress Reports on the status of the work plan activities are due by the 5th of each month.
- Quarterly Financial Reports on all actual and encumbered expenses are due by the 5th of the month.
- End of Program Financial Report is due no later than 45 calendar days following the completion of the program.
- End of Program Evaluation Report is due no later than 45 calendar days following the completion of the program.
- The KFHC logo should be visible on all rewards, incentives, marketing and promotional items when possible.
- Any changes to the approved program or budget must be received in writing and approved by KFHC.
- Program activities must commence within 45 calendar days from the 1st day of school.
- End of Year Reward must be tied to the school's work plan and cannot exceed 40% of total grant funds.
- Rewards and incentives should include the KFHC logo when possible.

Eligibility Requirements:

- Applicants must serve Medi-Cal beneficiaries and low income students.
- Applicants must be a public school or district dependent charter school that serves students from Kindergarten up to 12th Grade in Kern County, California.
- Applicants that have previously participated in the KFHC School Wellness Grant Program are not eligible to reapply.
- Program expenses must be tied to the approved student wellness program objectives. Professional development, staffing, utilities, and furniture are not eligible expenses.
- Applicants must prepare and submit a completed School Wellness Grant Program Application, Work Plan and Proposed Budget.
- Preference will be given to applicants that demonstrate readiness and motivation to successfully implement the program, commitment to the program at all levels (from administrative staff to teachers), ability to engage in regular communication with the program liaison, and plans for sustaining the program after the conclusion of the program.

Application Process:

- A public notice announcing the application period along with the grant application will be made available at www.kernfamilyhealthcare.com and mailed by request when made in writing.
- Completed applications must be submitted during the application period, and received no later than the application deadline, **April 1, 2019**.
- Applications should be emailed to: healthedprograms@khs-net.com

Award Process:

The KFHC Wellness Committee will review eligible applications, conduct follow-up interviews and make recommendations to the CEO for grant awards.

Questions? Contact: healthedprograms@khs-net.com



Kern Family Health Care School Wellness Grant Program Application

Thank you for your interest in the Kern Family Health Care School Wellness Grant Program. Our grant funding supports school wellness programs with proven and measurable outcomes that are aligned with the Kern Family Health Care mission statement.

Please complete the application below and submit via email to: healthedprograms@khs-net.com

School Name: _____ **Year founded:** _____

Address: _____

Phone: _____ **Fax:** _____

Program Lead: _____ **Title:** _____

Phone: _____ **Email:** _____

Principal: _____ **Phone:** _____ **Email:** _____

School Nurse: _____ **Phone:** _____ **Email:** _____

Parent Club Member: _____ **Phone:** _____ **Email:** _____

(optional)

Amount requesting from KFHC: \$ _____

I have read the grant program conditions listed on this application. Should my school be awarded the requested grant funds, I agree to adhere to the program expectations and support all efforts towards completion of my school's approved work plan.

Program Lead's Signature: _____ **Date:** _____

Principal's Signature: _____ **Date:** _____

School Nurse Signature: _____ **Date:** _____

Parent Club Member Signature: _____ **Date:** _____

(optional)

For additional information or questions, please contact healthedprograms@khs-net.com.

The KFHC Wellness Committee will review all grant applications. Applications failing to meet the requirements set forth in this application will not be considered. If approved, the grant will be awarded to the grantee within 30 days following approval.

I. BACKGROUND AND NEED

1. Number of students enrolled: _____
Percentage of Students who are Medi-Cal beneficiaries: _____ %
-OR-
Percentage of Students who qualify for free or reduced lunch: _____ %
Number of teachers: _____
2. Please describe the racial, ethnic and economic makeup of your community and any health indicators or statistics that help describe your community (100 words).
3. Please describe your community and the health and wellness environment students and families experience outside your school (100 words).
4. Please describe the current state of your school environment as it relates to the physical, social, and behavioral health and wellbeing of the students. Please also attach your school wellness policy. (200 words).

II. PROGRAM OUTLINE

Please outline the program that you wish to implement if awarded funding. Programs must include S.M.A.R.T. objectives and activities to address physical, social, emotional, and behavioral health and wellbeing of students. S.M.A.R.T. is an acronym for Specific, Measurable, Achievable, Realistic, and Time-Oriented. An example of SMART objectives is provided below. Methods for evaluating the success of your program is required.

SAMPLE WORK PLAN WITH SMART OBJECTIVES

Objective	Activity	Person(s) Responsible	Timeline	Projected Outcome	Evaluation Method
1. By October 1, 2019, all students will have received training on the sun safety health education curriculum	<ol style="list-style-type: none"> 1. Purchase and train PE teachers on the sun safety curriculum. 2. Distribute and collect pre and post knowledge tests from students in grades 2-5. 3. Obtain photos of student drawings on sun safety in grades K-1. 	School Nurse and PE Teacher	August 15, 2019, October 1, 2019	5% increase in student knowledge on sun safety in grades 2-5 and observed knowledge gain by teachers for grades K-1.	<ol style="list-style-type: none"> 1. Excel spreadsheet of attendance sheets for training dates. 2. Pre and Post knowledge tests of students. 3. Photobook of drawings. 4. Teacher attestations on observed knowledge gain.
2. By May 15, 2020, 30% of all students will have decreased their 1 mile run time by 10%.	<ol style="list-style-type: none"> 1. Obtain baseline and post intervention run times for students and enter in Excel spreadsheet. 2. Establish lunch time and afternoon walk/run club. 3. Encourage students to participate in club and other walk/run events through announcements, posters and incentives. 	PE Teacher and Principal	September 1, 2019 – May 15, 2020	<ol style="list-style-type: none"> 1. Student participation in club and walk/run events 2. 10% decrease in 1 mile run times for 30% of students 	<ol style="list-style-type: none"> 1. Student run times will be collected in September and in April. Baseline and post data will be compared to determine the decrease. 2. Photos of students in club and walk/run events
3. By June 1, 2020, the school will have a 5% reduction in student discipline referrals.	<ol style="list-style-type: none"> 1. Purchase 20 classroom sets of mindfulness activity cards. 2. Training and distribution to teachers on how to use activity cards. 3. Use activity cards in the classrooms. 	School Nurse and Student Counselor	August 15, 2019 – June 1, 2020	5% decrease in student discipline referrals	Comparison of total number of discipline referrals from previous to current school year.

WORK PLAN

(Please complete and include with your application. You may print additional copies of the Work Plan template and attach with your application)

Objective	Activity	Person(s) Responsible	Timeline	Projected Outcome	Evaluation Method

III. BUDGET JUSTIFICATION. Please complete the template on the next page and include with your application. An example is provided below.

SAMPLE BUDGET JUSTIFICATION

Item Description	Expense Amount
Outreach Materials (<i>Items to inform and engage students and parents</i>):	\$3,000.00
1. Parent flyers (print & design)	
2. Program reminder letters for parents (printing costs)	
Supplies/Materials (<i>Items to implement, monitor and track student progress and program activities</i>):	\$5,000.00
1. World Maps (shows geographic milestones and school progress)	
2. Potter the Otter Posters (promotes drinking water at school)	
3. Pedometers (tracks steps/miles walked for students and staff)	
4. Reusable water bottles (encourages students to drink water)	
Incentives (<i>Items to motivate and encourage participation of students, parents and staff</i>):	\$6,000.00
1. T-shirts and awards for students who meet their walking goals (\$5,000)	
2. T-shirts for parent club members (\$200)	
3. T-shirts for staff program leads (\$200)	
3. Teacher raffle and gift cards to promote (\$400)	
4. End of year top student walker prizes (\$200)	
End of Year Reward (<i>Upon successful completion of the program, item desired by the school that sustains healthy habits among students</i>):	\$8,000
1. Water drinking stations (\$8,000)	
Other (<i>Please list additional items needed to implement program activities</i>):	\$0.00
1. Fruit of the Month student party (in-kind donation)	
Total Grant Request =	\$22,000

BUDGET JUSTIFICATION

Item Description	Expense Amount
Outreach Materials (<i>Items to inform and engage students and parents:</i>)	\$
1.	
2.	
3.	
Supplies/Materials (<i>Items to implement, monitor and track student progress and program activities:</i>)	\$
1.	
2.	
3.	
Incentives (<i>Items to motivate and encourage participation of students, parents and staff:</i>)	\$
1.	
2.	
3.	
End of Year Reward (<i>Upon successful completion of the program, item desired by the school that sustains and supports student health. Should not exceed 40% of grant funds:</i>)	\$
1.	
Other (<i>Please list additional items needed to implement program activities:</i>)	\$
1.	
2.	
3.	
Total Grant Request =	\$