Date & Location:

Facilitators:

**Instructions**: Complete this worksheet to let us know how Learning Community 3 went! We suggest co-facilitators switch off and take notes when they are not presenting. In the table below, indicate (yes or no) whether you covered each of the meeting objectives today and approximately how much time you spent on that objective. Then on a scale of 1-5 (1 being needs improvement/not at all clear, 5 being excellent/ very clear), let us know how successfully you think you delivered each meeting objective.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Meeting objectives** | **Yes/No** | **Time****(Minutes)** | **Rating****(1-5 scale)** | **Notes** |
| Discuss the policy, practice, and program changes you have made over the past 2 months |  |  |  |  |
| Identify ways to help staff model and encourage healthy eating and drinking behavior |  |  |  |  |
| Learn some great, healthy alternatives for celebrations and rewards |  |  |  |  |
| Learn to get kids moving with activity breaks in small spaces or when time is limited |  |  |  |  |
| Discuss plans to make the changes in your program stick & spread throughout your organization |  |  |  |  |
| Revise goals and action plan for healthy changes at your program |  |  |  |  |
| Sharing of goals and action plans |  |  |  |  |

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| **Facilitation** | **Yes/No** | **Notes** |
| Do you maintain good pacing today? |  |  |
| Were you organized and familiar with content? |  |  |
| Were participants highly engaged in the LC? |  |  |

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| **Use the table below to track all the materials you’ve distributed and collected (either paper or electronic copies) and content that was reviewed/completed on OSNAP.org.** |
| **Materials** | **Distributed****Yes/No** | **Collected****Yes/No** | **Reviewed/completed on OSNAP.org****Yes/No** |  | **Materials** | **Distributed****Yes/No** | **Reviewed****on OSNAP.org****Yes/No** |
| MyOSNAP online portal instructions |  |  |  | Physical activity ideas |  |  |
| 5 blank practice assessments  |  | Collect next week |  | Policy Writing Guide  |  |  |
| Copies of 5 Step Approach Worksheet  |  |  |  | Getting Staff on Board  |  |  |
| Copies of most recent action plans  |  |  |  | Snacking Bridge  |  |  |
| Evaluations  |  |  |  | Staff Modeling Tip Sheet |  |  |
| Copies of PowerPoint slides  |  |  |  | Health Celebration Handout  |  |  |
| OSNAP certificates (these can also wait until after LC3)  |  |  |  | Alternatives to Food as a Reward  |  |  |
|  |  |  |  | 60 Alternatives to Withholding Recess |  |  |
|  |  |  |  | OSNAP Interview Tips & Job Descriptions  |  |  |

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| --- |
| On a scale of 1-5 (1 being not prepared at all, 5 being very prepared), how prepared did you feel to run the learning community?  |
| Is there anything else you wish was covered or covered differently at today’s learning community? If yes, what would you have changed? |
| Were there issues that arose that you felt prepared to deal with? If yes, please describe the issues and how they were resolved. |
| Were there issues that arose that you felt unprepared to deal with? If yes, please describe the issues and how they were resolved. |
| Were there any areas of LC3 that you think should have been covered differently in the train-the-trainer session? If yes, please describe. |