



# HEALTH ACTION TEAM PLANNING TOOL

Use one page for each priority issue your school is working on.

School Year: \_\_\_\_\_ School: \_\_\_\_\_

Priority Issue: \_\_\_\_\_

Goal: \_\_\_\_\_

Focus (target group): \_\_\_\_\_

**HAT TEAM MEMBERS:**

Principal: \_\_\_\_\_ CSAC Chair: \_\_\_\_\_

Public Health Nurse: \_\_\_\_\_ Lead Teacher: \_\_\_\_\_

Additional Teachers: \_\_\_\_\_

Student Representatives: \_\_\_\_\_

COMPONENT	EXISTING ACTIVITIES/ STRENGTHS	STRATEGIES (PLAN FOR NEW ACTIVITIES/ ACTION	INDICATORS OF SUCCESS	TIMELINE	WHO IS RESPONSIBLE?
High Quality Instruction and Program (Curriculum/Instruction /Health Education)	♦	♦	♦	♦	♦
A Healthy Physical Environment	♦	♦	♦	♦	♦
Supportive Social Environment	♦	♦	♦	♦	♦
Community Partnerships (Health, Social, & Other Services from School Board or Community)	♦	♦	♦	♦	♦

Send completed form to your HPE/PLN teacher.