



musC
Children's Health
Medical University of South Carolina

Boeing Center for Children's Wellness



**IMPACT
REPORT
2017-18**



Children are our future. That is why our vision is that each child grows up healthy, able to succeed in school, and thrive in life. We also know that children become healthier when the adults who care for them are healthy. For that reason, our approach is to improve the health and wellness of both children and adults by going where they are, in school or child care. The MUSC Boeing Center for Children's Wellness (BCCW) helps schools and child care programs put in place best practices and policies to provide healthy food, physical activity, and improve their social, emotional, physical, and built environments. In this way, we impact all the students and staff in each child care program and school with which we work.

We reach infants, young children, and their teachers with the **SC Program for Infant/Toddler Care**, the **Breastfeeding Friendly Child Care** designation, the **Infant–Early Childhood Mental Health Initiative**, and our newest program, **Be Well Care Well**, designed to support the well-being of child care staff. We reach school age children, their families, and school staff with the **Docs Adopt® School Health Initiative**, which aligns with the Whole School, Whole Community, Whole Child model. Through these projects, the MUSC BCCW was able to serve 107 child care centers, train 514 child care teachers and staff, and work with 11 school districts and 193 participating schools this year, serving a total of approximately 135,000 students and their families and 9,000 teachers. In addition, 93 schools (48%) included community members such as physicians, healthcare professionals, and businesses on their wellness committee.

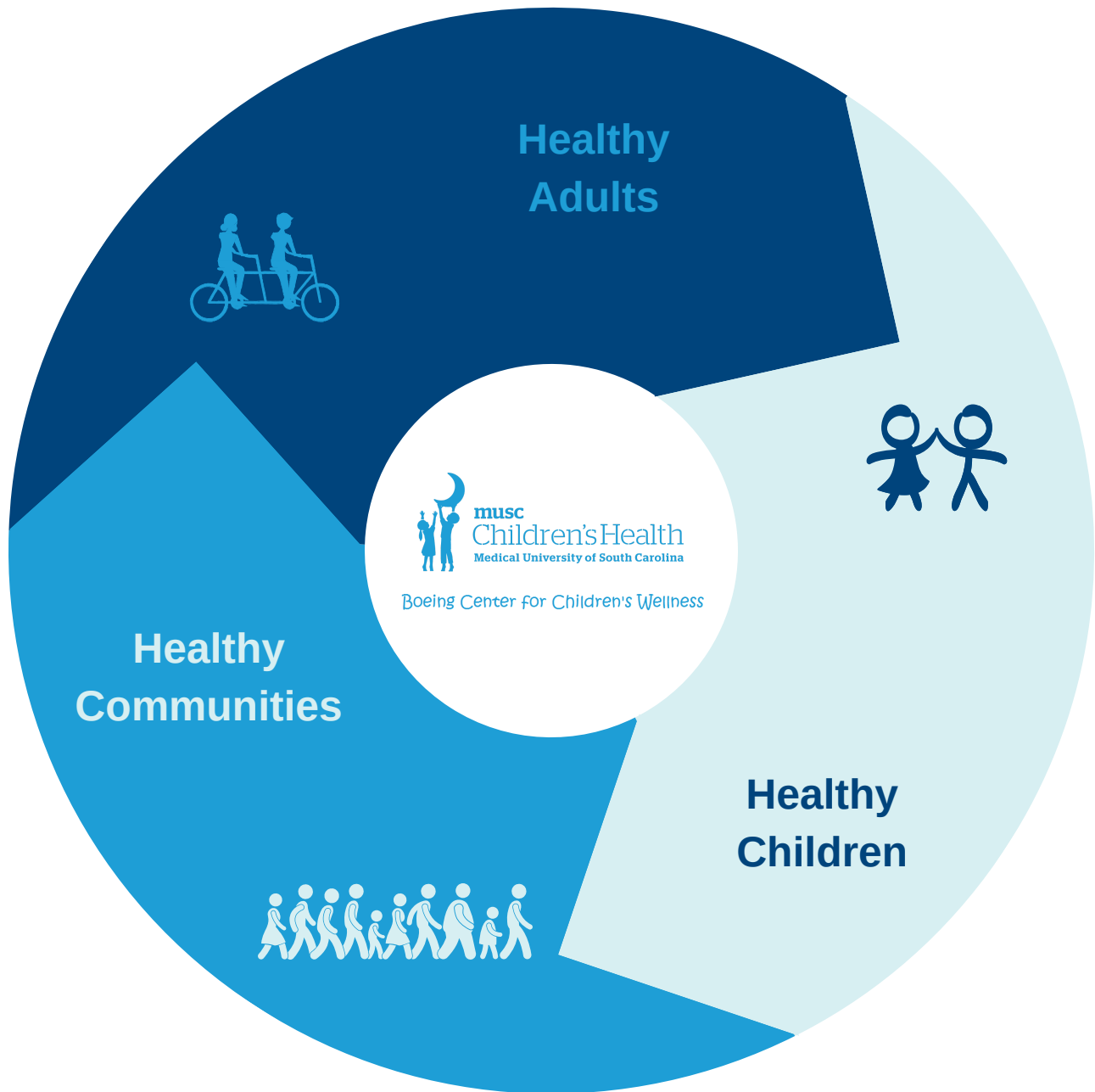
This coordinated approach to wellness is working. We have seen a decrease in obesity in participating schools. For example, obesity prevalence in our founding school district, Charleston County School District, has decreased significantly from 25% in the 2008-2009 school year, to 21% in the 2015-2016 school year ($p = 0.06$), with the schools scoring higher on the School Wellness Checklist® having lower student mean BMI (correlation and $p=0.005$). Our school-based wellness efforts are also having an effect on education. We have found with every four years of participation, attendance rates increased by 0.5% compared to those of non-participating schools.

This improvement is heartening after our decade of diligent effort and speaks to our vision of healthy children who succeed in school. Of course, this was only achieved through the collaborative work of many partners and organizations, of which we are proud to be included. However, the problem of obesity is far from resolved. In fact, now is the time to strengthen our efforts as change is just starting to take hold. Personally, I am amazed at the growing momentum toward wellness and grateful to be part of it.



Janice Key, MD - Director

THE VISION



The MUSC Boeing Center for Children's Wellness works in partnership to instill a culture of wellness and prevent obesity such that each child is healthy, succeeds in school, and thrives in life.

South Carolina Program for Infant/Toddler Care

The SC Program for Infant/Toddler Care (SCPITC) focuses on the birth to three-year old period, and promotes a relationship-based, reflective, responsive, and respectful approach to infant and toddler care. Our 11 certified Infant/Toddler Specialists provide intensive training and strengths-based coaching to child care programs using a 12-month curriculum built on the six essential policies of relationship-based care. Reflective Action Planning occurs twice during the training cycle, where child care teachers and staff reflect on their experiences to date with SCPITC training and coaching, identify concepts they would like to explore further, and have an opportunity to shape the remaining opportunities for mentoring and coaching. The Infant/Toddler Specialists work with child care providers statewide to promote relationship-based practices that align with standards set by the ABC Quality Rating and Improvement System. SCPITC is supported by the SC Department of Social Services, Division of Early Care and Education.

At a January meeting of programs that recently completed SCPITC services, one teacher shared her "A-HA! Moment" from her experience this way: *"Communicating with the children at all times, even diaper changing, can be a learning moment."* And when asked what was their favorite part of SCPITC training and mentoring, one teacher said, *"Building a relationship with an Infant/Toddler Specialist who was willing to mentor us and answer any questions at any time."*

SERVICE HOURS PROVIDED:



4,041

Mentoring and coaching hours

1,255

Reflective Action Planning hours

513

Training hours

Advanced Training

The 2018 annual event for mentors and trainers certified by the WestEd Program for Infant/Toddler Care (PITC), highlighted "The Power of You" to convey the message that every individual who touches the lives of children has the power to make a difference. Presentations focused on the importance of caregiver well-being and its impact on children, and the role implicit bias plays in child care settings.

At the conclusion of the two-day training, participants shared their key takeaways. Here's what they had to say:



- *"Caregiver well-being directly affects the children"*
- *"We cannot make a lasting impact on children by skipping over the adults [in the middle of the relationship]."*
- *"We all have biases but we need to talk through to reach progress; we should not fear making a mistake to the point that we never address issues. "*

Supporting Breastfeeding in South Carolina

The **Breastfeeding Friendly Child Care (BFCC) Designation** leads child care programs to become more supportive of continued breastfeeding when moms return to work. Prolonged breastfeeding is a protective factor for lifelong health, and yet mothers frequently stop breastfeeding when they must return to work and place their baby in child care. We are working to help child care providers see the integral role they play in supporting working mothers' breastfeeding goals. Funding from SC DSS Division of Early Care and Education makes it possible for SCPITC staff to offer free training and materials to child care programs who have an interest in seeking the BFCC designation. After an initial training of the entire child care staff, the program submits an application that is reviewed by a committee that meets quarterly to approve applications. BFCC designations are granted to applicants who have demonstrated compliance with the 10 Steps to Breastfeeding Friendly Child Care. This three-year designation requires annual training and reporting, with renewal every three years.



A total of 19 programs have achieved the BFCC designation, representing Berkeley, Charleston, Darlington, Florence, Greenville, Horry, Richland, Spartanburg and Lexington counties. An additional 11 programs have been trained and are in the pipeline for designation. The SC DHEC Obesity Action Plan 2014-2019 (SCaledown.org), Strategy 6S, set an initial goal of 10 designated child care programs by 2019; MUSC BCCW exceeded that goal with 11 programs designated by 2017.

K-12 school settings are supporting working mothers' breastfeeding goals too. 47% of participating schools have established either a lactation room or breastfeeding policy to benefit school staff and families.

19

Breastfeeding friendly
child care programs



79

K-12 schools with
lactation rooms



58

K-12 schools with
breastfeeding policy



Recently, SCPITC was called upon by SC Department of Health and Environmental Control (DHEC) for assistance when updating print materials for the Women, Infants & Children Program (WIC). The “Returning to Work or School” flyer is part of the *Natural Nutrition: breastfeed for the best start* series. Revisions to the English and Spanish materials suggest selecting a child care program that is supportive of the mother’s decision to breastfeed, and directs readers to scpitc.org to find a breastfeeding friendly designated child care program.

At MUSC BCCW we have made a commitment to nursing mothers who need a clean, private location to express milk while they attend conferences. We work with conference planners to sponsor a private room to create **Breastfeeding Friendly Conferences** by providing “Do Not Disturb” signs for doors and “Do Not Disturb” doorknob hang tags. Inside the lactation room, we provide promotional materials for the Mother's Milk Bank of South Carolina, housed at MUSC, and a sampling of children's books provided to child care programs during training for the BFCC.

In 2017-18, we partnered to provide breastfeeding rooms at five annual conferences: the SC Association for the Education of Young Children (SCAEYC), the Eat Smart Move More SC Leadership Summit for Healthy Communities, the Prevention Conference of the Children’s Trust of SC, SC First Steps Chairmen’s Summit, the SC Early Childhood Association (SCECA), and our own SCPITC Advanced Training. In October, at the annual SCAEYC conference, one grateful mom remarked, “*This is so much better than sitting in my car!*”

I wanted to thank you for supporting my decision to breast feed my child. It is so hard to be a child care professional and a breastfeeding mom. I am extremely grateful that I was able to get the most out of the conference while continuing to support my infant's nutritional needs. Thank you again.


-- Liz DiTullio,
Palmetto Preschool and
Learning Center



Infant-Early Childhood Mental Health

The SC Program for Infant/Toddler Care continues to lead the state-wide multidisciplinary Infant-Early Childhood Mental Health (I-ECMH) Committee. A significant outcome of the committee's work is the 2018 launch of the South Carolina Infant/Young Child Mental Health Association (SCIMHA) which houses South Carolina's **Competency Guidelines® and Endorsement for Culturally Sensitive, Relationship-Focused Practice Promoting Infant Mental Health®**.

Originally developed by the Michigan Association for Infant Mental Health, the I-ECMH Competencies and Endorsement® system offers guidance for professional development pathways to build a skilled and competent workforce that understands the profound impact that a child's early experiences have on short-term and later life success. This quality assurance model verifies that individuals engaging with infants, young children and families have the knowledge and skills to make the most of these interactions by providing culturally sensitive, relationship-focused practices that support young children's social and emotional well-being.



*It is easier to
build strong
children than to
repair broken
men.*
- Frederick Douglas



Multidisciplinary professionals working together to **promote and support** the social-emotional health and well-being of infants, young children and their families through **relationship-based** practices and services.

SCIMHA is a professional, non-profit membership organization open to all infant, young child, and family-serving individuals in South Carolina, and serves as a resource for professionals and the community at large. SCIMHA has primary responsibility for implementing South Carolina's I-ECMH Endorsement®, the nationally recognized, evidence-based system of I-ECMH standards and competencies promoting professional development pathways for all infant, child, and family-serving workforce sectors.

Membership in SCIMHA and Endorsement® is open to professionals across many different disciplines, including and not limited to, those working in the fields of social work, psychology, early childhood education, child care, child welfare, early intervention, Early Head Start, Head Start, nursing, home visiting, pediatrics, speech and language pathology, occupational and physical therapy, behavioral health, infant and early childhood mental health consultation, and infant and early childhood mental health treatment.

Become a member today! Visit SCIMHA.org.

Docs Adopt© School Health Initiative

The Docs Adopt© School Health Initiative is a school-based obesity prevention model that impacts the health of school-aged children, their families, and school staff. This is a simple approach that motivates school districts and schools to create a culture of wellness using many existing and evidence-based programs and resources. The initiative aligns with the Whole School, Whole Community, Whole Child model which calls for integration between health and education.



Participating schools utilize the School Wellness Checklist© tool (SWC) as a guide to implement and record wellness practices completed each year. The SWC includes seven categories of wellness: Getting Started, Nutrition, Physical Activity, Stress Management, Establishing a Wellness Culture, Employee Connections, and Sustainability. The items in these categories are assigned point values.

Schools that achieve enough points on the SWC receive a monetary award to further their wellness projects. Schools compete with other schools in their district to see who can make the most wellness changes, and the highest scoring school in each district receives an additional monetary award as well as their name on their district wellness trophy.

Examples of what schools use the wellness funds for are building a school garden, providing kinesthetic desks in classrooms, offering yoga instruction to students and staff, installing refillable water stations, providing additional recess and PE equipment, or purchasing incentives for students and staff for participating in healthy activities.

47%

of participating schools
had gardens



78%

of participating schools provided
stress relief programs for students



88%

of participating schools
incorporated physical activity
into the school day

The schools are also engaging community partners and resources in their school wellness initiatives. Physicians and healthcare professionals are trained to serve as a health resource to wellness committees by adopting a school. Currently, about 74 schools have been adopted. 72% of schools applied for wellness related grants to enhance their programs and 42% of schools had a community organization or business donate services, supplies, or additional monetary support to their school wellness committee.

School districts are encouraged to support their individual schools' wellness efforts as well as their Local Wellness Policies. MUSC BCCW is part of the state Local Wellness Policy interagency STAT team which is a partnership between the SCDE, SCDHEC, and the Alliance for a Healthier Generation to provide technical support for CSHACs on district-wide wellness policy changes. The STAT team collaborates and works together to provide trainings, webinars, and individual support to school districts in assessing and implementing the components of their district wellness policies.



Dr. Andrew McMarlin, President of the Charleston County Medical Society, presents their Rising Star award to Matilda F. Dunston Primary School Wellness Leader, Jaci Foister. In 2017-18, Dunston achieved the greatest total point improvement on the School Wellness Checklist.

Highest School Wellness Checklist© Contest point earners in each participating school district for the 2017-2018 school year:

Bamberg County School District 1
Bamberg-Erhardt Middle School

Dorchester County School District 2
Alston Middle School

Bamberg County School District 2
Denmark-Olar Elementary School

Greenwood County School District 50
Springfield Elementary School

Berkeley County School District
Devon Forest Elementary School

Spartanburg County School District 1
Holly Springs-Motlow Elementary School

Charleston County School District
James Island Elementary School

Cherokee County School District
Mary Bramlett Elementary School

Clarendon County School District 2
Manning High School

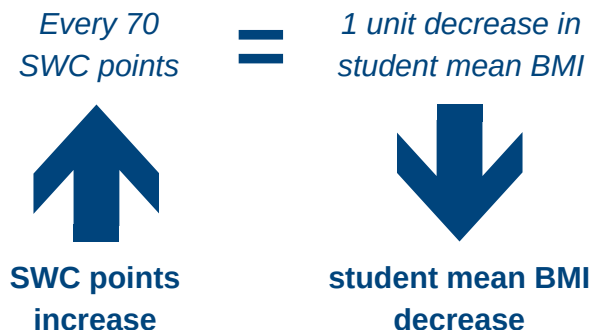
Colleton County School District
Cottageville Elementary School

Local Implementation

These partners have been trained to replicate the Docs Adopt© School Health Initiative in their community. They provide a Program Coordinator and Wellness Achievement Awards, and MUSC BCCW provides access to the School Wellness Checklist© portal and ongoing technical assistance.

Richland County School District 2
in partnership with Palmetto Health Children's Hospital
Bookman Road Elementary

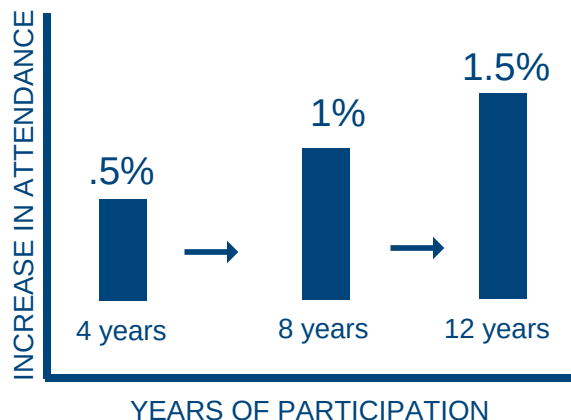
Pottstown, PA area School Districts
in partnership with Pottstown Area Health and Wellness Foundation
West Vincent Elementary; Owen J. Roberts School District



Obesity prevalence in CCSD decreased from 25% in 2008-2009 to 21% in 2015-2016



Every 4 years participation = increased school attendance by 0.5%



OUTCOMES

An evaluation is conducted at the end of each school year for the purpose of ongoing improvement. This includes measurement of the numbers of districts and schools, what each school did that year (i.e., how many had regular fresh fruit and vegetable tastings), how many were “adopted” by a healthcare professional, and surveys from teachers and staff.

This year, an outcome evaluation measuring the impact of Docs Adopt© School Health Initiative on health, wellness, and school performance has begun. Previous pilot studies with Charleston County School District (CCSD) found a decrease in student obesity and an improvement in school attendance and behavior. This new statewide evaluation is only possible through a collaboration between the MUSC BCCW, participating school districts, SC Department of Education, and SC Medicaid. The evaluation will not be completed until next year. However, the initial findings are very exciting as they confirm what was found in the pilot studies, and indicate there is a relationship between participation in the Docs Adopt© School Health Initiative and both health and school performance.

A Culture of Wellness

A three-year pilot program, **Be Well Care Well**, supporting child care teachers' well-being is underway with generous support from the W.K. Kellogg Foundation. The program helps child care teachers take care of themselves, by supporting their physical, emotional, economic and social well-being, so they can take care of children. Research shows that caregivers who take care of themselves are better able to provide the kind of responsive, individualized care that all young children need. Pulling from a mix of urban and rural, private and public, and faith based programs, some 40 child care programs representing 450 individuals from the Lowcountry, Midlands and Pee Dee areas of SC are participating in the pilot.



regions of SC



individuals



programs

Each child care program participating in Be Well Care Well works with a Well-Being Coach who assists with connections to local community health and wellness partners and creates activities and learning opportunities that promote overall well-being. Well-Being Coaches support child care programs as they form Well-Being Committees with a minimum of three members: a program administrator or owner, a teacher, and a family representative. The committee is responsible for working with the Well-Being Coach to create a well-being plan for their program by selecting goals and activities from six domains suggested in the "Well-Being Activities Checklist," adapted from the School Wellness Checklist© developed by MUSC BCCW. The program offers incentives and awards to participants who meet goals along the way.

Teacher well-being is another focus of the **Docs Adopt© School Health Initiative**. Students whose teachers miss school have lower academic achievement and less engagement in school. Teachers and staff serve as role models, and students are watching the choices teachers make. The School Wellness Checklist© promotes healthy practices and policies that benefit school staff. The Employee Connections section of the checklist is a required element to earn a Wellness Achievement Award. Schools provide employee wellness programs and incentives such as health screenings, fitness workout rooms, weight management classes, and quiet meditative spaces.



48%

of participating schools provided a weight management program for staff

77%

of participating schools provided health screenings for staff



58%

of participating schools provided a meditation space for staff

63%

of participating schools provided fitness workout rooms for staff



It is impossible to do this work alone. We are grateful to so many partners who are aligned with our work and have a common vision. MUSC BCCW has played an important role in two statewide efforts to prevent childhood obesity, detailed below. We are very proud that the SC State Obesity Action Plan includes three of our programs: The Docs Adopt© School Health Initiative (Strategy S4.1), the SC Program for Infant/Toddler Care (Strategy S6), and the SCMA Obesity Toolkit (Strategy SH 1-7).

Partners

ABC Quality	SC Children's Hospital Collaborative
Alliance for a Healthier Generation	Palmetto Health Children's Hospital
Charleston County Medical Society	Physicians and Healthcare Professionals of adopted schools
Coastal Community Foundation	Roper St. Francis Foundation
College of Charleston	SC Infant Mental Health Association
Dorchester County Medical Society	SC Department of Education
Eat Smart Move More SC and	SC Department of Health and Environmental Control
Charleston Tri-County	South Carolina Medical Association
Medical Society of South Carolina	SC Team Nutrition/Growing Heathy in Child Care
Mother's Milk Bank of South Carolina	SC Thrive
MUSC Shawn Jenkins Children's Hospital	Trident United Way/Healthy Tri-County Initiative

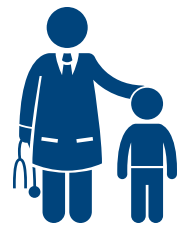
SC DHEC Obesity Action Plan 2014-2019



SCaledown.org was developed following a year-long process led by SC DHEC and was made up of many contributors, including the MUSC BCCW. We actively coordinate our efforts with the statewide Obesity Action Plan so that obesity prevention efforts throughout the state are synergistic.

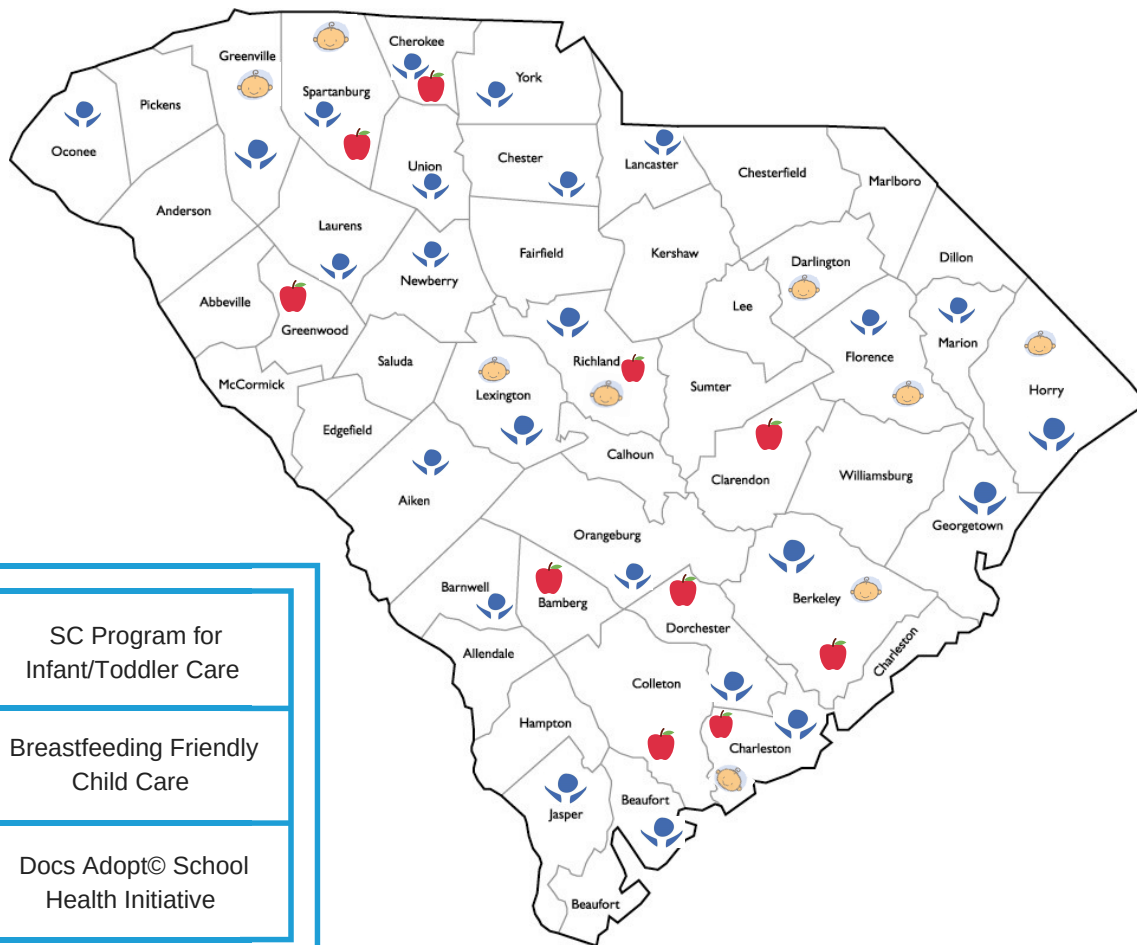
The South Carolina Medical Association Obesity Toolkit

The South Carolina Medical Association (SCMA) Childhood Obesity Taskforce developed the *South Carolina Medical Association Obesity Toolkit* in collaboration with Eat Smart Move More SC, Blue Cross Blue Shield SC, Dr. James Simmons, and the former DHEC Region 4. The MUSC BCCW Director, Dr. Janice D. Key, co-chaired the SCMA Childhood Obesity Taskforce to develop the South Carolina Medical Association Obesity Toolkit for physicians. This toolkit provides materials that facilitate physician counseling of children and their families to improve prevention and treatment of childhood obesity. A continuing medical education training session on the toolkit is available on the SCMA website. Upon completion of the training, the toolkit is available for purchase. Visit scmedical.org to learn more.



1,025
physicians trained

OUR REACH



SPECIAL THANKS TO OUR SUPPORTERS



Changing What's Possible



*The Duke Endowment
 Baldwin Foundation
 Coastal Community Foundation
 Cooper River Bridge Run
 Pottstown, PA Area Health and Wellness Foundation
 SC Department of Education
 U.S. DHHS Administration of Children and Families*

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