

Health & Physical Education Department Program Review

May 2025

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May 2025

*Health & Physical Education Department
Program Review Report Prepared by:*

Dr. Brian Miller, Superintendent
Dr. Michael Pasquinelli, Asst. Superintendent for Secondary Education & Curriculum
Dr. Kristen Justus, Asst. Superintendent for Elementary Education & Curriculum
Nicole Berezo, Assistant Principal - Pine-Richland Middle School
Sherry Warrick, ALC and 7-8 Health & Physical Education Teacher
Michael Bashioum, 9-12 Health & Physical Education Teacher
Ellisyn Mularski, 9-12 Health & Physical Education Teacher
Zack Mazur, 9-12 Health & Physical Education Teacher
Chris Koss, 9-12 and K-3 Health & Physical Education Teacher
Gretchen Bleakney, 7-8 Health & Physical Education Teacher
Eric Rosing, 7-8 Health & Physical Education Teacher
Kurt Wolfe, 7-8 Health & Physical Education Teacher
Brittney Adams, 4-6 Health & Physical Education Teacher
Mark Kunz, 4-6 Health & Physical Education Teacher
Tom Beam, K-3 Health & Physical Education Teacher
Matt Hugus, K-3 Health & Physical Education Teacher
Trent Matteson, K-3 Health & Physical Education Teacher

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Overview:

During the 2016-2017 school year, the Pine-Richland K-12 Health & Physical Education Department conducted an In-Depth Program Review. The department was the first to complete this year-long study designed to identify program-based strengths and areas of opportunity. The findings and recommendations from the 2016-2017 study were shared with the school board and community in [June of 2017](#). Implementation of the recommendations began in the fall of 2017.

One of the essential recommendations from 2017 was the development of the department's vision and philosophy (Figure 1). Integrated into the vision and philosophy is the concept of "wellness for life". Each of the recommendations from the 2017 review was linked to program improvements aimed at improving students' understanding of the benefits of healthy living. The balance represents the effort to integrate program adjustments that consider healthy habits for the body and mind.

The teachers worked in grade-span and vertical teams during the 2024-2025 review. The horizontal and vertical team research and discussions led to specific grade-span action steps. As a result, each overarching recommendation will be followed by grade-span-specific findings.

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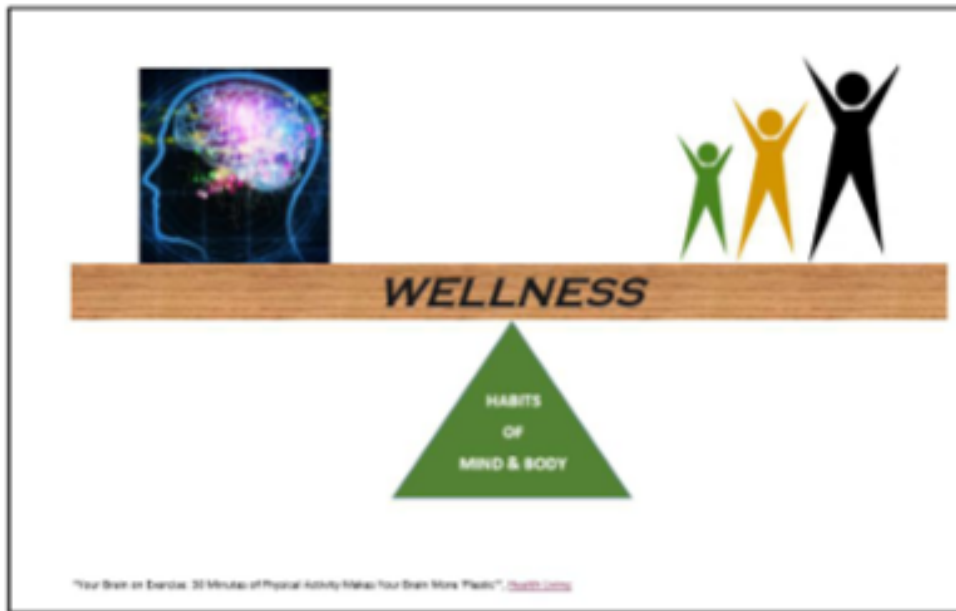


Figure 1

Empower students to develop habits of mind and body that support wellness throughout a lifetime.

Mini-Review Process:

Currently, all departments have completed an In-Depth Program Review. The district is now completing a cycle of “mini” reviews. This systematic approach to program improvement is embedded in the Teaching & Learning category of the PRSD Strategic Plan. These educational programs reflect the educational experience of Pine-Richland students. Figure 2 below describes the steps used to conduct this review.

Review Depth of IDPR Implementation

Data Review (PSSA, Keystone, Advanced Placement, Course Requests, etc.)



Revised/New Recommendations

Research

Local, State, Country, World Trends (PA Standards)

Figure 2

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All Health & Physical Education teachers participated. The **first phase** of the review was designed to evaluate the implementation of the 2016-2017 In-Depth Program Review recommendations. Each grade span analyzed every goal to determine the depth of implementation. **Phase two** of the process included the review and analysis of data points connected to the district's K-12 Health & Physical Education program (e.g., Time in H/PE; Course Requests; Fitness Assessments) and an audit of the grade 1-12 Health & Physical Education curriculum. The **third and fourth phases** of the mini-review included conducting high-level research on K-12 Health & Physical Education topics and interviewing a few selected universities and local school districts to identify other emerging trends. **Finally**, the committee reviewed the findings from each phase of the process to identify updated recommendations that will guide the department in making continuous refinements and improvements in the coming years.

Research and Recommendation Focus Areas:

Five key areas of focus were identified: 1) Wellness for life; 2) Health Integration into Physical Education Courses; 3) Developmentally appropriate RAMS Way integration; 4) Individualized Wellness Goal Setting; and 5) Health/Fitness Related Resource Considerations.

In the pages below, each of these focus areas includes one or more recommendations for the department to implement beginning in the 2025 - 2026 school year.

Recommendation Overview

Recommendation Bucket #1 - Vision

Expand the vision statement to include a specific focus on four key pillars of wellness:

Empower students to develop habits of mind and body that support wellness throughout a lifetime **through focus on four key pillars: (1) Movement, Activity & Fitness; (2) Nutrition and Hydration; (3) Mental Health; and (4) Sleep & Recovery.**

Recommendation Bucket #2 - Curriculum & Instruction

In a classroom design that maximizes active engagement, apply the four pillars to guide the refinement of the curriculum and modify learning activities.

Grades 1-3

1. Increase racket/paddle-based activities and skills to meet current and emerging trends in lifetime activities.
2. Integrate cul-de-sac style and recess games/activities into the existing curriculum.

Grades 4-6

1. Curricular adjustments focused on skill development and modified gameplay, fitness, and wellness goal setting.
2. Group students for developmentally appropriate instruction based on skill levels and progression (e.g., highly skilled; instructional level; adaptive level).
3. Expand opportunities for Adapted Physical Education to support student growth and social experiences with a similarly skilled group (potentially with peer buddies).

Grades 7-8

1. Increase exposure to various lifetime fitness activities (yoga, pilates, cross-fit) in the curriculum.
2. Increase skill development opportunities while enhancing small group activities with leveled gameplay.

Grades 9-12

1. Develop different elective courses to be offered on a rotating schedule (e.g., competitive sports, strength training, emergency certifications).
2. Modify the curriculum to increase individual lifetime fitness activities and decrease traditional team-based activities.

Recommendation Bucket #3 - Health Integration

Increase the integration of health concepts into the physical education setting with reinforcement through building-based activities.

Grades 1-3

1. Revise the curriculum to intentionally highlight the specific health-related topics already covered throughout the year (e.g., the purpose of the heart, lungs, blood, etc).

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Grades 4-6

1. Strengthen the school/home connection related to the health and wellness topics already integrated into the physical education classes with engaging activities and checks for student understanding, particularly as this relates to the goal-setting activities in class.
2. Identify building-wide health and wellness themes for each month, to be communicated and integrated within health and physical education classes and communicated with the building through the morning announcements, signage/posters, and email communications.
3. Increase focus on resistance skills related to experiences such as vaping, substance use, and peer pressure.
4. Establish self-management skills related to the potentially harmful effects of social media and excessive screen time.

Grades 7-8

1. Integrate self-advocacy/self-awareness learning activities.
2. Intentional integration of health and physical education units of study.
3. Increase focus on resistance skills related to experiences such as vaping, substance use, and peer pressure.
4. Establish self-management skills related to the potentially harmful effects of social media and excessive screen time.

Grades 9-12

1. Intentional curricular integration between health and physical education units of study.
2. Increase focus on resistance skills related to experiences such as vaping, substance use, and peer pressure.
3. Establish self-management skills related to the potentially harmful effects of social media and excessive screen time.

Recommendation Bucket #4 - RAMS Way Integration

Reinforce RAMS Way concepts into physical activity, play, class games, and team sports.

Elementary

1. Incorporate the RAMS Way concepts into lessons that align with the building-wide theme and explain the relevance of each segment of RAMS to behaviors displayed during class.
2. Integrate RAMS Way themes into health and physical education courses, focusing on a specific component each quarter.
 - a. Q1 Respectful (sportsmanship, teamwork, positive social interaction; “Cheer for your team”).
 - b. Q2: Accountable (physically prepared for class - dress attire, prepared for different game-play roles of leading/following, following rules and fair play).
 - c. Q3: Motivated (Goal setting, effort, positive mindset).
 - d. Q4: Safe (Spring and summer safety).

Reinforce RAMS Way concepts into structured games; competition; athletic intangibles; and sportsmanship regardless of role as a spectator or direct participant.

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Secondary

1. Integrate RAMS Way language into the grading rubric.
2. Intentionally integrate RAMS Way into health and physical education lessons and feedback.
3. Partner with the athletic department to reinforce concepts (e.g., “Who do we want to be known as?”; RAMS Way in athletics; Excellence, Toughness, Respect; “Cheer for your team”).

Recommendation Bucket #5 - Wellness Goals/Assessment

Ensure that students are engaging in personalized goal-setting activities aligned with the four pillars and sharing their goals with their families with a culminating focus for students to “pursue their paths” toward their individualized post-high school wellness plans.

Grades 1-6

1. Build the school/home connection related to the wellness goals set by students around the pillars of health with parental acknowledgment (e.g., signature) of their child’s goal(s) to encourage support of each child’s efforts to improve their overall health.

Grades 7-8

1. Revise goal-setting activities to include additional progress monitoring and a potential parent engagement element.
2. Establish post-high school wellness plans.

Grades 9-12

1. Design an outline of goals aligned with our four key pillars: Activity/Movement, Nutrition/Hydration, Sleep/Recovery, and Mental Health to foster students' overall well-being and development (lifetime wellness).
2. Refine post-high school wellness plans.

Recommendation Bucket #6 - Resources

Expose students to tools and activities to assist them in developing and achieving their individualized wellness goals.

Grades 1-6

1. Integrate equipment and resources to support tracking and generation of fitness statistics for growth and wellness, to generate data for the health and wellness plan as evidence/data of growth over time.

Grades 7-8

1. Integrate equipment and resources to support tracking data for goals and development of wellness plans (e.g., fitness trackers with heart rate, pedometer, software PLT4M, weight room equipment).

Grades 9-12

1. Evaluate technology to be utilized to assess students and for students to assess themselves (e.g., apps, personal fitness trackers, smart watches, heart rate monitors, and pedometers).

Recommendations

Recommendation Bucket #1 - Vision

Expand the vision statement to include a specific focus on four key pillars of wellness:

Empower students to develop habits of mind and body that support wellness throughout a lifetime **through focus on four key pillars: (1) Movement, Activity and Fitness; (2) Nutrition and Hydration; (3) Mental Health; and (4) Sleep & Recovery.**

FINDINGS:

Internal Analysis

1. The existing vision image and statement demonstrate the important balance and connection of mind and body (PRSD Health and Physical Education Vertical Team, 2025).
2. After a foundation of knowledge and skills, wellness is a function of the actions and behaviors - habits - that a person demonstrates in his or her daily life (PRSD Health and Physical Education Vertical Team, 2025).
3. The 1 - 12 curriculum progression is grounded in the Pennsylvania Academic Standards for Health, Safety & Physical Education and also informed by national standards (PRSD Health and Physical Education Vertical Team, 2025).
4. The four pillars identified in the expanded vision statement will be used to evaluate and improve curriculum, instruction and assessment in the Pine-Richland program (PRSD Health and Physical Education Vertical Team, 2025).
5. At a developmentally appropriate level, a comprehensive health and physical education program provides strategies related to relevant mental health topics such as healthy sleep, benefits of physical activity on learning, stress management, conflict resolution, social media, group dynamics, social connections, social pressure, and support resources (PRSD Health and Physical Education Vertical Team, 2025).
6. "Health & Wellness" was added as 1 of 4 categories reflected on the Pine-Richland School District [Graduate Portrait](#), given the community stakeholders' value of the development of skills and competencies in this domain as students graduate from our schools and move into the real world. This concept was born of the strategic planning development sessions in 2019 and was more fully developed through the input of parents, students, staff, and community members in the Pine-Richland School District (PRSD Health and Physical Education Vertical Team, 2025).
7. PRSD School Board Policy #819 mandates suicide awareness and prevention education for both employees and students, given the board's commitment to both protecting the health, safety, and welfare of its students and the community and supporting the provision of a comprehensive district program designed to promote behavioral health and prevent suicide (PRSD School Board Policy #819, 2022).

External Analysis

1. "Health and physical education provide students with the knowledge and skills that will enable them to achieve and maintain a physically active and healthful life, not only during their time in school but for a lifetime." (PA Health and Physical Education Curriculum, 2024).

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2. “Children who are healthy and physically active increase their chances of achieving their highest academic potential and are better able to handle the demands of today's hectic schedules.” (PA Health and Physical Education Curriculum, 2024).
3. Engage in physical activities that are developmentally/individually appropriate and support the achievement of personal finance, fitness, and activity goals. (Academic Standards for Health, Safety, & Physical Education, 2002).
4. Apply the components of skill-related fitness to movement performance (Academic Standards for Health, Safety, & Physical Education, 2002).
5. Understand the relationship between health-related information and adolescent consumer choices (e.g., tobacco products, weight control products) (Academic Standards for Health, Safety, & Physical Education, 2002).
6. Students should understand factors that impact nutritional choices (e.g., body choices, advertising, peer influence, social media) (Academic Standards for Health, Safety, & Physical Education, 2002).
7. Health education is defined as “*Planned, sequential K-12 program of curricula and instruction that helps students develop knowledge, attitudes and skills related to the physical, mental, emotional and social dimensions of health*” (Academic Standards for Health, Safety, & Physical Education, 2002).
8. Health is defined as “*A state of complete physical, mental and social well-being; not merely the absence of disease and infirmity.*” (Academic Standards for Health, Safety, & Physical Education, 2002).
9. Understand the positive and negative effects of the media on adult personal health and safety (Academic Standards for Health, Safety, & Physical Education, 2002).
10. Students should understand prevention and intervention strategies in relation to drug use (e.g., refusal skills, situational avoidance, goal setting, professional assistance/support groups) (Academic Standards for Health, Safety, & Physical Education, 2002).
11. Apply strategies to avoid or manage conflict and violence during adolescence (Academic Standards for Health, Safety, & Physical Education, 2002).
12. Apply the decision-making process to adolescent health and safety issues (e.g., sleep, exercise, nutrition) (Academic Standards for Health, Safety, & Physical Education, 2002).
13. Use functional health information to support the health and well-being of self and others. This standard includes health literacy, health promotion, health equity, social determinants of health, well-being, and health outcomes within individual, interpersonal, community, societal, and environmental contexts. (National Art Standards, 2024).
14. Analyze influences that affect health and well-being of self and others: This standard supports the individual’s ability to identify and use skills to recognize the types of influences, analyze the role of influences across a variety of wellness dimensions, and manage influences on health and well-being in digital and in-person settings (National Art Standards, 2024).
15. Students need to “classify foods by food groups... including the serving size and nutrient function within the body”, as well as being able to “define energy-yielding nutrients and calories” (PA Department of Education Family Consumer Science Standards, 2002).
16. Students should be able to “analyze the relationship between diet and disease and risk factors (e.g. calcium and osteoporosis; fat, cholesterol and heart disease; folate and birth defects; sodium and hypertension)” and “analyze the energy requirements, nutrient requirements and body composition for individuals at various stages of the life cycle” (PA Department of Education Family Consumer Science Standards, 2002).
17. Students should be able to apply and identify time management strategies as they relate to both personal

and work situations (Career Education and Work Standards, 2006).

Implementation Timeline (Anticipated Start/Finish): August 2025 - Ongoing.

Key Personnel: Health and Physical Education Teachers.

Major Action Steps: (1) Revise the vision image to incorporate the 4 pillars; (2) Integrate the four pillars into the K-12 curriculum and lesson design; (3) Communicate the vision and philosophy to all stakeholders (students, staff, parents/community); (4) Apply vision and philosophy to curriculum, instruction, and assessments.

Estimated Budget/Resources: Limited budget implications.

Potential Implications (Short-Term and Long-Term): The vision and philosophy should be displayed **and** referenced throughout curriculum, instruction, and assessments. The vision and philosophy will also integrate into the RAMS Way initiative (e.g, Respectful - positive thoughts of self and others; Accountable - goal setting; Motivated - movement/fitness; Safe - sleep routines).

Recommendation Bucket #2 - Curriculum & Instruction

In a classroom design that maximizes active engagement, apply the four pillars to guide the refinement of curriculum and modify learning activities.

Grades 1-3

1. Increase racket/paddle-based activities and skills to meet current and emerging trends in lifetime activities.
2. Integrate cul-de-sac style and recess games/activities into the existing curriculum.

Grades 4-6

1. Curricular adjustments focused on skill development and modified gameplay, fitness, and wellness goal setting.
2. Group students for developmentally appropriate instruction based on skill levels and progression (e.g., highly skilled; instructional level; adaptive level).
3. Expand opportunities for Adapted Physical Education to support student growth and social experiences with a similarly skilled group (potentially with peer buddies).

Grades 7-8

1. Increase exposure to various lifetime fitness activities (yoga, pilates, cross-fit) in the curriculum.
2. Increase skill development opportunities while enhancing small group activities with leveled gameplay.

Grades 9-12

1. Develop different elective courses to be offered on a rotating schedule (e.g., competitive sports, strength training, emergency certifications).
2. Modify the curriculum to increase individual lifetime fitness activities and decrease traditional team-based activities.

FINDINGS:

Internal Analysis

1. Students enter the classroom with varying levels of readiness to engage in fitness and skill activities. Some have a high level of skill and simply need technical, specific feedback to help them grow their skillset, while others require direct instruction and scaffolding with additional feedback and support. Students who are ready for the activity could get started and remain as active as possible in the class session, while others could benefit from a smaller group of more specialized feedback to increase their success and expedite skill development (PRSD Health and Physical Education Vertical Team, 2025).
2. Students benefit from early exposure to racquet/paddle-based activities and games in upper-grade levels and beyond. Current trends in post-secondary recreational activities show an increased engagement in games and activities that utilize paddles and rackets. Improving the knowledge and skills for students in grades 1-3 will have a direct, positive impact on their future engagement in games like tennis and pickleball (PRSD Health and Physical Education Vertical Team, 2025).
3. Students with intense special needs are included within their homeroom's Health & Physical Education

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class and, at times, also receive an adapted course. Structuring the adapted course at a common time for all grade levels 4-6 (e.g. during Explore at Eden Hall Upper Elementary School) would allow students in this adaptive class to have a peer group of similarly skilled individuals in a safer environment and potentially with the addition of typical peer leaders (e.g. peer buddies) (PRSD Health and Physical Education Vertical Team, 2025).

4. Students will benefit from activities that require minimal equipment, can be played in a variety of locations, and offer the benefits of both physical activity and social interaction (i.e., recess, at home, or in a social setting) (PRSD Health and Physical Education Vertical Team, 2025).
5. Students will benefit from being presented with various options in health & physical education past their 9th-grade year of high school. Students with varying interests, skills, abilities, etc., will have the opportunity to gain exposure to activities that support wellness throughout a lifetime (PRSD Health and Physical Education Vertical Team, 2025).
6. The high school currently offers only 1 elective course in health & physical education. This course is "Personal Fitness & Lifetime Activities" and the interest has been growing over the past 3 years. We are in need of more elective courses, and some that are more specific to areas in health and wellness that students have an interest in. Ideas for elective courses include weight training options, emergency response options, and advanced health options (PRSD Health and Physical Education Vertical Team, 2025).
7. Students will continue to build upon fitness testing and frequency. Goal setting and emphasis on the "why" of fitness testing. Potentially track progression year to year. Departmentally adopt one common fitness assessment (PRSD Health and Physical Education Vertical Team, 2025).

External Analysis

1. Physical education programs are transitioning from a Traditional (sports) curriculum to Lifetime Fitness (pickleball, disc golf, lifetime activities) at all levels (Slippery Rock University; North Allegheny School District, 2025).
2. "Promoting healthy and safe behaviors among students is an important part of the fundamental mission of schools, which is to provide young people with the knowledge and skills they need to become healthy and productive adults." (SHI for Middle and High Schools, 2017).
3. After falling to #17 in the 2024 survey, traditional strength training moves back up the trends list to #5. Traditional strength training, a key tenet of ACSM's exercise guidelines, incorporates equipment such as barbells, dumbbells, and kettlebells, focusing on proper movement and lifting techniques to improve or maintain muscular fitness. Rising to #6 on the trends list, HIIT has been a consistent top 10 trend since 2018. Its stability is likely due to its effectiveness as a training modality across demographics and among varying health statuses (e.g., cardiometabolic disease and cancer). HIIT training has been shown to improve aerobic and anaerobic fitness, blood pressure, cardiovascular health, insulin sensitivity (which helps the exercising muscles more readily use glucose for fuel to make energy), cholesterol profiles, abdominal fat and body weight while maintaining muscle mass (American College of Sports Medicine, 2025).

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4. Benefits to offering various physical education electives, including competitive team games, individual fitness and lifetime activity, and partners in PE with more electives on the way including lifeguarding and advanced weight training. With various options available, West Jefferson School District requires 1.5 credits in Health and Physical Education to graduate (West Jefferson Hills School District, 2025).
5. Benefits to offering various physical education electives, including weight training, yoga and pilates, basic swim, team sports, and lifeguarding. With various options available, Baldwin School District requires 1.5 credits in Health and Physical Education to graduate (Baldwin School District, 2025).
6. Differentiating per the individual rather than reaching a specific benchmark (North Allegheny School District, 2025).
7. National Health Education Standard 6: Students demonstrate effective goal-setting skills to enhance health (National Consensus for School Health Education, 2022).
8. Lifetime activities encourage students to engage in activities that can be used throughout their lives. Organizations can help integrate lifetime activities such as: PA Game Commission, PA Fish Commission, DCNR, and local bike shops (Indiana University of Pennsylvania, 2025).
9. Pennsylvania's economic future depends on having a well-educated and skilled workforce that is prepared to meet the current and projected demands of a global, knowledge-based 21st-century economy (Career Ready PA, 2024).

Implementation Timeline (Anticipated Start/Finish): Developing during the 2025-2026 school year and beyond.

Key Personnel: Health and Physical Education Teachers.

Major Action Steps: (1) Review and revise unit-based curriculum; (2) Identify racket/paddle activities at various developmental levels; (3) Identify a variety of “cul-de-sac” games for curricular integration; (4) Identify time and space to increase adaptive physical education; (5) Identify, recommend, and develop a variety of high school elective courses to be added on a rotating basis.

Estimated Budget/Resources: Additional adapted equipment. Managing monies or increasing the current budget to add the additional equipment needed for procurement and replacement of old equipment.

Potential Implications (Short-Term and Long-Term): (1) Major changes to curriculum sequence; (2) Eliminating some of the current team activities; (3) Professional development and resources integrating readiness stations into physical education lessons; (4) Master schedule implications at Pine-Richland High School (rotating courses, .25 credit course options, etc.).

Recommendation Bucket #3 - Health Integration

Increase the integration of health concepts into the physical education setting with reinforcement through building-based activities.

Grades 1-3

1. Revise the curriculum to intentionally highlight the specific health-related topics already covered throughout the year (e.g., the purpose of the heart, lungs, blood, etc).

Grades 4-6

1. Strengthen the school/home connection related to the health and wellness topics already integrated into the physical education classes with engaging activities and checks for student understanding, particularly as this relates to the goal-setting activities in class.
2. Identify building-wide health and wellness themes for each month, to be communicated and integrated within health and physical education classes and communicated with the building through the morning announcements, signage/posters, and email communications.
3. Increase focus on resistance skills related to experiences such as vaping, substance use, and peer pressure.
4. Establish self-management skills related to the potentially harmful effects of social media and excessive screen time.

Grades 7-8

1. Integrate self-advocacy/self-awareness learning activities.
2. Intentional integration of health and physical education units of study.
3. Increase focus on resistance skills related to experiences such as vaping, substance use, and peer pressure.
4. Establish self-management skills related to the potentially harmful effects of social media and excessive screen time.

Grades 9-12

1. Intentional curricular integration between health and physical education units of study.
2. Increase focus on resistance skills related to experiences such as vaping, substance use, and peer pressure.
3. Establish self-management skills related to the potentially harmful effects of social media and excessive screen time.

FINDINGS:

Internal Analysis

1. The current Grade 9 curriculum covers various health and physical education units. A more intentional approach to connect material in the health realm to the physical education realm will benefit students. The timing of when health units are presented to students will increase an understanding of WHY certain things are done in the corresponding physical education units (PRSD Health and Physical Education Vertical Team, 2025).
2. Being intentional with age-appropriate explanations of health-related content (ie, bones, muscles, and other body systems) relating to how they work/react during exercise and when experiencing stressful situations. (PRSD Health and Physical Education Vertical Team, 2025).

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3. Identify trends in college-aged students regarding general health, nutrition, health care, impediments to academic performance, violence/abuse, relationships/personal safety, tobacco/alcohol/drug use, sexual behaviors, mental health, acute conditions, chronic conditions, and sleep to aid in driving curriculum and instruction of current health topics (PRSD Health and Physical Education Vertical Team, 2025).
4. Intentionally incorporate health concepts (nutrition, mental health, stress management) into physical education lessons at the elementary level (PRSD Health and Physical Education Vertical Team, 2025).
5. Health topics are not integrated with physical education topics in the unit-based curriculum within many grade-level courses (PRSD Health and Physical Education Vertical Team, 2025).
6. Reintroduce the wellness newsletter to staff to promote wellness and our mission, vision, and values (pillars) (PRSD Health and Physical Education Vertical Team, 2025).
7. Increase staff and community member involvement in the wellness committee (PRSD Health and Physical Education Vertical Team, 2025).
8. Emphasize that quality education consists of much more than an increase in knowledge. The Graduate Portrait includes four dimensions: Knowledge, Skills, Health & Wellness, and Personal Qualities and Characteristics (PRSD Health and Physical Education Vertical Team, 2025).
9. Mental health learning experiences include topics such as positive self-concept; confidence & self-esteem; resiliency, growth mindset; stress management, and relationship development (PRSD Health and Physical Education Vertical Team, 2025).

External Analysis

1. Student participation in health education classes has been found to be associated with increased academic grades and test scores, decreased school absences, improved student behavior, and reduced school dropout (SHI for Middle and High Schools, 2017).
2. Physical education courses should have an intentional connection of specific health topics fully integrated into lessons with direct instruction and assessment (Slippery Rock University; North Allegheny School District, 2025).
3. Goal-setting, data collection, and differentiation of growth goals related to the 5 pillars of health should be based on the individual, not a benchmark (North Allegheny School District; Indiana University of Pennsylvania; Slippery Rock University; West Jefferson Hills School District, 2025; National Consensus for School Health Education, 2022).
4. Interpersonal assessments: Goal setting and developing how they are reaching those goals (Indiana University of Pennsylvania, 2025).
5. It is suggested to align a health standard within a physical education lesson. The health content can be introduced in the opener, followed through within the lesson, and then emphasized in the closure (Indiana University of Pennsylvania, 2025).
6. "Promoting healthy and safe behaviors among students is an important part of the fundamental mission of schools, which is to provide young people with the knowledge and skills they need to become healthy and productive adults" (SHI for Middle and High Schools, 2017).
7. "The standards are intended to guide the development of health education curricula, instruction, and assessment for pre-K–12 students. The performance expectations are designed to progressively challenge students at appropriate ages and development levels. The number and scope of the performance expectations focus primarily on personal health among younger students and expand to address the health of family, peers, schools, and communities among older students." (National Consensus for School Health Education, 2022).

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8. Students need to “classify foods by food groups... including the serving size and nutrient function within the body”, as well as being able to “define energy-yielding nutrients and calories” (PA Department of Education Family Consumer Science Standards, 2002).
9. Students should be able to “analyze the relationship between diet and disease and risk factors (e.g. calcium and osteoporosis; fat, cholesterol and heart disease; folate and birth defects; sodium and hypertension)” and “analyze the energy requirements, nutrient requirements and body composition for individuals at various stages of the life cycle” (PA Department of Education Family Consumer Science Standards, 2002).
10. Aligning a health standard within their physical education lesson. The health content is usually introduced in the opener, followed through within the lesson, and then emphasized in the closure. (Indiana University of Pennsylvania, 2025)
11. Health content is blended into each class: approximately 10 minute topics such as body systems, nutrition, and health-related fitness. (Deer Lakes School District, 2025).
12. Use functional health information to support health and well-being of self and others. Analyze influences that affect health and well-being of self and others. Advocate to promote health and well-being of self and others. (National Consensus for School Health Education, 2022)

Implementation Timeline (Anticipated Start/Finish): End of year 2025-2026.

Key Personnel: Health and Physical Education Teachers.

Major Action Steps: (1) Review of PA and National Standards for health and physical education; (2) Curriculum revisions to align health and physical education topics; (3) Identify sequence of health topics for building themes; (4) Revise unit or learning goal sequences for greater alignment between health and physical education; (5) Collaborate on lesson planning to develop high-quality, integrated lessons.

Estimated Budget/Resources: Expand resources from reputable professionals for K-6.

Potential Implications (Short-Term and Long-Term): (1) Teachers will need time to become more familiar with national standards; (2) Health and Physical Education teachers will need to collaborate with building administrators to identify building-based health themes; (3) Additional supplemental resources may be needed based on the identified learning activities; (4) Identify developmentally appropriate learning activities to strength students’ resistance skills and disciplined behavioral choices.

Recommendation Bucket #4 - RAMS Way Integration

Reinforce RAMS Way concepts into physical activity, play, class games, and team sports.

Elementary

1. Incorporate the RAMS Way concepts into lessons that align with the building-wide theme and explain the relevance of each segment of RAMS to behaviors displayed during class.
2. Integrate RAMS Way themes into health and physical education courses, focusing on a specific component each quarter.
 - e. Q1 Respectful (sportsmanship, teamwork, positive social interaction; “Cheer for your team”).
 - f. Q2: Accountable (physically prepared for class - dress attire, prepared for different game-play roles of leading/following, following rules and fair play).
 - g. Q3: Motivated (Goal setting, effort, positive mindset).
 - h. Q4: Safe (Spring and summer safety).

Reinforce RAMS Way concepts into structured games; competition; athletic intangibles; and sportsmanship regardless of role as a spectator or direct participant.

Secondary

1. Integrate RAMS Way language into the grading rubric.
2. Intentionally integrate RAMS Way into health and physical education lessons and feedback.
3. Partner with the athletic department to reinforce concepts (e.g., “Who do we want to be known as?”; RAMS Way in athletics; Excellence, Toughness, Respect; “Cheer for your team”).

FINDINGS:

Internal Analysis

1. Students are familiar with and should follow the RAMS Way concepts during class. Respectful, Accountable, Motivated, and Safe are all concepts reflected in a physical education program. Using the RAMS Way as a closure during a lesson is a great way for the students to self-reflect on how we as a class performed. (PRSD Health and Physical Education Vertical Team, 2025).
2. Students would benefit from continuity among grading policies (rubrics) in class that are aligned with RAMS Way expectations (PRSD Health and Physical Education Vertical Team, 2025).
3. RAMS Way was first integrated into Pine-Richland in 2019 across all six schools. RAMS Way is firmly integrated into the district culture (PRSD Health and Physical Education Vertical Team, 2025).
4. In 2024, 78% of students at Eden Hall Upper Elementary; 95% of students at Hance Elementary; 84% of students at PRHS; 80% of students at PRMS; 89% of students at Richland Elementary; and 92% of students at Wexford Elementary indicated that RAMS Way was “in place” as a classroom intervention (RAMS Way Student Survey Data, 2024).

External Analysis

1. “In addition, student participation in health education classes has been found to be associated with increased academic grades and test scores, decreased school absences, improved student behavior, and reduced school dropout” (SHI for Middle and High Schools, 2017).
2. The Whole School, Whole Community, and Whole Child (WSCC) model is a framework that highlights the critical connection between health and academic achievement. (1) It provides guidance for supporting healthy student behaviors, school health services, safe and positive school environments, and family and community involvement. (SHI for Middle and High Schools, 2017)
3. Health education is defined as “*Planned, sequential K-12 program of curricula and instruction that helps students develop knowledge, attitudes and skills related to the physical, mental, emotional and social dimensions of health*” (Academic Standards for Health, Safety, & Physical Education, 2002).
4. Health is defined as “*A state of complete physical, mental and social well-being; not merely the absence of disease and infirmity.*” (Academic Standards for Health, Safety, & Physical Education, 2002).
5. Use functional health information to support health and well-being of self and others. This standard includes health literacy, health promotion, health equity, social determinants of health, well-being, and health outcomes within individual, interpersonal, community, societal, and environmental contexts. (National Art Standards, 2024).
6. Analyze influences that affect health and well-being of self and others: This standard supports the individual’s ability to identify and use skills to recognize the types of influences, analyze the role of influences across a variety of wellness dimensions, and manage influences on health and well-being in digital and in-person settings (National Art Standards, 2024).

Implementation Timeline (Anticipated Start/Finish): Ongoing beginning during the 2025-2026 school year and beyond.

Key Personnel: Health and Physical Education Teachers.

Major Action Steps: (1) Review curriculum and learning activities to determine where RAMS Way can be seamlessly integrated into the curriculum; (2) Work with the RAMS Way committees to determine where building initiatives will overlap with the health and physical education curriculum; (3) Revise EHUE grading rubric; (4) Collaborate with the athletic department to determine actions steps for alignment.

Estimated Budget/Resources: Potential need for substitute coverage for staff to collaborate.

Potential Implications (Short-Term and Long-Term): (1) Natural integration of the RAMS Way into courses and athletics; (2) Building-based ownership and cross-curricular integration of the RAMS Way; (3) Decrease in behavioral referrals; (4) Partner with the athletic department in reinforcing Effort, Toughness, and Respect; and (5) In collaboration with parents/community members, establish a culture of how we “Cheer for Our Team”.

Recommendation Bucket #5 - Wellness Goals/Assessment

Ensure that students are engaging in personalized goal-setting activities aligned with the four pillars and sharing their goals with their families with a culminating focus for students to “pursue their paths” toward their individualized post-high school wellness plans.

Grades 1-6

1. Build the school/home connection related to the wellness goals set by students around the pillars of health with parental acknowledgment (e.g., signature) of their child’s goal(s) to encourage support of each child’s efforts to improve their overall health.

Grades 7-8

1. Revise goal-setting activities to include additional progress monitoring and a potential parent engagement element.
2. Establish post-high school wellness plans.

Grades 9-12

1. Design an outline of goals aligned with our four key pillars: Activity/Movement, Nutrition/Hydration, Sleep/Recovery, and Mental Health to foster students' overall well-being and development (lifetime wellness).
2. Refine post-high school wellness plans.

FINDINGS:

Internal Analysis

1. Students will continue to build upon fitness testing and frequency. Goal setting and emphasis on the "why" of fitness testing. Reinforce goal-setting with emphasis on the "why" of fitness testing. Help students reflect upon and track progression year to year. Departmentally adopt one common fitness assessment with developmental progression embedded (PRSD Health and Physical Education Vertical Team, 2025).
2. Adopting a system of tracking wellness goals across the 1-12 grade span would provide feedback and continuity in expectations from the program (PRSD Health and Physical Education Vertical Team, 2025).
3. At a developmentally appropriate level, a comprehensive health and physical education program provides strategies related to relevant mental health topics such as healthy sleep, benefits of physical activity on learning, stress management, conflict resolution, social media, group dynamics, social connections, social pressure, and support resources (PRSD Health and Physical Education Vertical Team, 2025).
4. Emphasize that quality education consists of much more than an increase in knowledge. “Health & Wellness” was added as 1 of 4 categories (Knowledge; Skills; Health & Wellness; and Personal Qualities and Characteristics) reflected on the Pine-Richland School District [Graduate Portrait](#), given the community stakeholders’ value of the development of skills and competencies in this domain as students graduate from our schools and move into the real world. This concept was born of the strategic planning development sessions in 2019 and was more fully developed through the input of parents, students, staff,

and community members in the Pine-Richland School District (PRSD Health and Physical Education Vertical Team, 2025).

External Analysis

1. Bring lifetime activities back (lifetime wellness) to encourage students to engage in activities that can be used throughout their lives. (Deer Lakes School District; West Jefferson Hills School District; Indiana University of Pennsylvania; Bethel Park School District, 2025).
2. Incorporate goal setting into Fitnessgram testing so it's more individualized per student (Indiana University of Pennsylvania; 2025)
3. Goal-setting, data collection, and differentiation of growth goals related to the 5 pillars of health should be based on the individual, not a benchmark (North Allegheny School District; Indiana University of Pennsylvania; Slippery Rock University; West Jefferson Hills School District, 2025; National Consensus for School Health Education, 2022).
4. Interpersonal assessments: Goal setting and developing how they are reaching those goals (Indiana University of Pennsylvania; 2025).
5. National Health Education Standard 6: Students demonstrate effective goal-setting skills to enhance health (National Consensus for School Health Education, 2022).
6. Health education is defined as "*Planned, sequential K-12 program of curricula and instruction that helps students develop knowledge, attitudes and skills related to the physical, mental, emotional and social dimensions of health*" (Academic Standards for Health, Safety, & Physical Education, 2002).
7. Health is defined as "*A state of complete physical, mental and social well-being; not merely the absence of disease and infirmity.*" (Academic Standards for Health, Safety, & Physical Education, 2002).
8. Use functional health information to support health and well-being of self and others. This standard includes health literacy, health promotion, health equity, social determinants of health, well-being, and health outcomes within individual, interpersonal, community, societal, and environmental contexts. (National Art Standards, 2024).
9. Analyze influences that affect health and well-being of self and others: This standard supports the individual's ability to identify and use skills to recognize the types of influences, analyze the role of influences across a variety of wellness dimensions, and manage influences on health and well-being in digital and in-person settings (National Art Standards, 2024).
10. National Health Education Standard 6: Students demonstrate effective goal-setting skills to enhance health (National Consensus for School Health Education, 2022).
11. "Promoting healthy and safe behaviors among students is an important part of the fundamental mission of schools, which is to provide young people with the knowledge and skills they need to become healthy and productive adults."(SHI School Health Index - Middle and High School, 2017).

Implementation Timeline (Anticipated Start/Finish): End of the school year 2025-2026.

Key Personnel: Health and Physical Education Teachers.

Major Action Steps: (1) Establish a goal-setting resource for students in grades 3, 6, 8, and 9; (2) Using the four pillars, identify developmentally appropriate goals for each grade span; (3) Communicate with families the goal-setting justification and process; (4) Develop a culminating experience for high school students to identify a lifetime wellness plan.

Estimated Budget/Resources: Time for staff to develop the goal-setting resource (substitute coverage); communication costs.

Potential Implications (Short-Term and Long-Term): (1) Students will identify specific areas of strength and opportunity that will guide future wellness opportunities (e.g., running, biking, water sports, etc.); (2) Findings could lead to additional adjustments in the curriculum (e.g., need for more independent fitness activities to help increase students movement/engagement); (3) Parents will need to be informed and engaged in setting the goals and analyzing the results.

Recommendation Bucket #6 - Resources

Expose students to tools and activities to assist them in developing and achieving their individualized wellness goals.

Grades 1-6

1. Integrate equipment and resources to support tracking and generation of fitness statistics for growth and wellness, to generate data for the health and wellness plan as evidence/data of growth over time.

Grades 7-8

1. Integrate equipment and resources to support tracking data for goals and development of wellness plans (e.g., fitness trackers with heart rate, pedometer, software PLT4M, weight room equipment).

Grades 9-12

1. Evaluate technology to be utilized to assess students and for students to assess themselves (e.g., apps, personal fitness trackers, smart watches, heart rate monitors, and pedometers).

FINDINGS:

Internal Analysis

1. Students can benefit from incorporating technology (apps/personal fitness trackers/smart watches/heart rate monitors/pedometers) in the classroom by increasing engagement, improving efficiency, and fostering collaboration. (PRSD Health and Physical Education Vertical Team, 2025).
2. In addition to being used as a means of activity itself, technology expands opportunities for students to:
 - a. Learn about the benefits of physical activity.
 - b. Monitor their progress toward fitness.
 - c. Learn physical skills.
 - d. Acquire feedback.
 - e. Plan for a healthy and active lifestyle.
3. A large amount of information and feedback can be provided in real-time with wearable technology. These devices can help support healthy living in a variety of ways (PRSD Health and Physical Education Vertical Team, 2025).
4. Emphasize that quality education consists of much more than an increase in knowledge. The Graduate Portrait includes four dimensions: Knowledge, Skills, Health & Wellness, and Personal Qualities and Characteristics (PRSD Health and Physical Education Vertical Team, 2025).

External Analysis

1. Using apps to help students track mental wellness, food tracking, sleep tracking, time management skills (Indiana University of Pennsylvania; 2025).
2. Reinforcing and teaching students the skills to track and manage for themselves (Indiana University of Pennsylvania; 2025).
3. Wearable technology continues as the #1 trend in the 2025 survey, nearly consistent with previous survey results since 2016 (#3 for 2018 and #2 for 2021). The field of wearable technology is constantly

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advancing and allows real-time self-monitoring and feedback from devices such as fitness trackers, smartwatches, heart rate monitors, and GPS tracking devices. These devices can provide information such as physical activity, health markers, sedentary behaviors, sleep, and even stress. Wearable activity trackers can support healthy lifestyle behavior change through goal setting, personalized coaching, or connecting with apps to provide actionable insights (American College of Sports Medicine, 2025).

4. Mobile exercise apps continue to move up the list (#7 in 2024 and #20 in 2023). In 2023, there were 850 million fitness app downloads by nearly 370 million users. The upward trajectory of mobile exercise apps could be fueled by their complementary nature with wearable technology (the #1 trend). Many people opt to use workout or fitness apps at home or to guide their workouts in a fitness facility. Industry professional James Peterson, PhD., FACSM, has put together a list for *ACSM's Health & Fitness Journal*® of the top 10 most sought-after functions in these apps including: affordability, progress tracking, caloric expenditure, quick workout options, synced music, muscle matters, amp-up indoor cycling, workout videos, gamification, and charitable connection (American College of Sports Medicine, 2025).
5. In addition to being used as a means of activity itself, technology expands opportunities for students to:
 - a. Learn about the benefits of physical activity.
 - b. Monitor their progress toward fitness.
 - c. Learn physical skills.
 - d. Acquire feedback.
 - e. Plan for a healthy and active lifestyle (SHAPE America, 2025).
6. Gopher Optic+ is utilized to monitor heart rate in live time as the teacher can see exact heart rates throughout class on an iPad. Students are able to see a color that corresponds to a certain heart rate zone (West Jefferson Hills School District, 2025).
7. PLT4M is utilized in strength training allowing students to track exercises, sets and reps, and weight used on their phones. Health components can also be connected into this program (Baldwin School District, 2025).

Implementation Timeline (Anticipated Start/Finish): End of year 2025-2026.

Key Personnel: Health and Physical Education Teachers.

Major Action Steps: (1) Modify the unit-based curriculum based on the IDPR recommendations; (2) Inventory current resources; (3) Identify potential new resources to help students meet the revised learning goals and or learning activities; (4) Evaluate resources for curricular alignment.

Estimated Budget/Resources: Budget funds on an annual basis for resource integration. Only resources tightly aligned with the unit-based curriculum will be considered.

Potential Implications (Short-Term and Long-Term): (1) Future-focused budgetary challenges may limit the number of new resources that can be integrated into the curriculum; (2) The support for any electronic resources will need to be reviewed with the district information technology team to determine compatibility; (3) Refresh cycles of new resources will need to be considered before purchase (renew and replace).

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