



Wellness Policy Formation and Implementation Guide

TABLE OF CONTENTS

The Intent of the Wellness Policy Formation and Implementation Guide 2020	3
The Whole School, Whole Community, Whole Child Model: A New Approach	3
How to Use the Guide Document	4
Federal Wellness Policy Requirements	5
Wellness Leadership	5
Public Involvement	5
Triennial Assessments	5
Documentation	6
Updates to the Wellness Policy	6
Public Updates	6
New Mexico Administrative Code 6.12.6 Requirements	6
Wellness Policy Process	7
Wellness Policy Implementation, Monitoring, Accountability, and Community Engagement	8
School District Wellness Policy	9
School District Wellness Policy: Nutrition and Nutrition Education	11
School District Wellness Policy: Physical Activity	18
School District Wellness Policy: Health Education	22
School District Wellness Policy: Physical Education	26
School District Wellness Policy: Social and Emotional Well-Being	28
School District Wellness Policy: Health Services	31
School District Wellness Policy: Staff Wellness	34
School District Wellness Policy: Resources	36

THE INTENT OF THE WELLNESS POLICY FORMATION AND IMPLEMENTATION GUIDE 2020

A wellness policy is a requirement of Local Education Agencies (LEA) by both the Federal and State government.

The Wellness Policy Formation and Implementation Guide 2020 document has been constructed to inform and advise an LEA in the formation, revision, and implementation of a wellness policy. The creation of policy is informed by Federal and State regulations that may affect an LEA. The New Mexico Public Education Department (NM PED) strives to advise and guide LEAs, not only in the formation of a wellness policy, but also in moving toward the generation and implementation of a policy that can provide the school and surrounding community with a foundation for long-term, healthy citizens. This document provides the Federal and State rules as well as strategies and practices that can—with a level of commitment from the entire school community—move the policy from merely meeting requirements to one that is strong and robust and addresses and resolves school community education and health needs and problems.

A child who enters school healthy and feels safe is ready to learn. A student who feels connected to school is more likely to stay in school.¹ All students who have access to challenging and engaging academic programs are better prepared for further education, work, and civic life. These components must work together, not in isolation. That is the goal of whole child education.²

The Whole School, Whole Community, Whole Child Model: A New Approach



By focusing on youth, addressing critical education and health outcomes, organizing collaborative actions and initiatives that support students, and strongly engaging community resources, the Whole School, Whole Community, Whole Child (WSCC) approach offers important opportunities that may improve healthy development and educational attainment for students.³

The goal of family, school, and community involvement within a coordinated school health approach is to create a holistic school environment that is conducive to student health and academic achievement. This inclusive atmosphere features a shared responsibility that supports healthy children and families. Effective partnerships between families, schools, and communities support the development and the maintenance of this comprehensive learning environment.

Through the thoughtful and intentional creation of wellness policy, a school district/charter school might address the specific physical and emotional health needs of their students and, in turn, the community.

¹ https://www.cdc.gov/healthyyouth/health and academics/index.htm

² http://www.wholechildeducation.org/assets/content/mx-resources/WholeChild-MakingTheCase.pdf

https://www.cdc.gov/healthyyouth/wscc/

How to Use the Guide Document

Note: This document is intended to assist school districts in developing and implementing wellness policies; it is not a template.

The remainder of this document has been written in sections, each corresponding to Federal or State requirements with respect to health categories. Following the title of each section is a stated objective of the content and information for its implementation. Information is presented in table format.

- The first column in the tables highlights those topic areas in which it is expected that wellness staff will react to requirements with written, specific policy statements.
- The second column, *Evidence of Policy Implementation*, consists of the most basic statement requirements of Federal or State law and is written in dark blue bold font and placed in a light blue cell. Statements in this column that are written in plain black text are not required but are basic practices in that section.
- The third column, *Transitioning to Best Practices*, consists of those strategies that districts can use to strengthen the wellness policy requirements.
- The last column, *Modeling of Highly Effective Practices*, is comprised of implementation practices that are reflective of modeling best practices in wellness policy implementation.

The practices listed in the *Modeling* and *Transitioning* categories for each section of the policy are not inclusive of all possible strategies or best practices a district may choose to meet their specific wellness policy needs.

A wellness policy need only meet the minimum requirements for NM PED approval, though planning and implementing a policy that goes beyond the minimum requirements is highly recommended. Table formatting follows.

Wellness Policy Section I: Wellness Policy			
Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.			
	NMAC/Rule Requirements Strategies for Improving Policy Outcomes		
Topic	Evidence of Policy	Transitioning to Bost Brasticas	Modeling of Highly
	Implementation	Transitioning to Best Practices	Effective Practices

FEDERAL WELLNESS POLICY REQUIREMENTS

Federal Final Rule Wellness Policy Administrative Requirements.⁴ At a minimum, policies are required to include:

Wellness Leadership

LEAs must establish wellness policy leadership of one or more LEA and/or school official(s) who have the authority and responsibility to ensure each school complies with the policy.

Public Involvement

At a minimum LEA's must:

 Permit participation by the public and the school community (including parents, students, and representatives of the school food authority, teachers of physical education, school health professionals, the school board, and school administrators) in the wellness policy process.

Triennial Assessments

The final rule requires State agencies to assess compliance with the wellness policy requirements as a part of the general areas of the administrative review every 3 years.

LEAs must assess the wellness policy every 3 years, at a minimum. This assessment will determine:

- compliance with the wellness policy,
- cow the wellness policy compares to model wellness policies, and
- progress made in attaining the goals of the wellness policy.

Staff
Wellness

Wellness

Wellness

Physical Activity

Other School-Based Activities

Nutrition Guidelines

Wellness

Policy

Nutrition Fromotion & Education

Marketing & Advertising

Physical Education

Physical Education

Monitor & Evaluate

Public Notification

Evaluate

⁴ https://fns-prod.azureedge.net/sites/default/files/tn/LWPsummary_finalrule.pdf

Documentation

The State agency will examine records during the Administrative Review, including:

- copy of the current wellness policy,
- documentation on how the policy and assessments are made available to the public,
- the most recent assessment of implementation of the policy, and
- documentation of efforts to review and update the policy, including who was involved in the process and how stakeholders were made aware of their ability to participate.

Updates to the Wellness Policy

The final rule requires that LEAs update or modify the wellness policy as appropriate.

Public Updates

The rule requires that LEAs must make available to the public:

- the wellness policy, including any updates to and about the wellness policy, on an annual basis, at a minimum, and
- the Triennial Assessment, including progress toward meeting the goals of the policy.

NEW MEXICO ADMINISTRATIVE CODE 6.12.6 REQUIREMENTS

The New Mexico school district wellness policy rule supports school districts to create a wellness policy that includes the components of a Coordinated School Health Model approach to student health and well-being 6.12.6 NMAC). Each school district and state-chartered charter school is required to:

- A. designate one or more persons within the school district, or at each school, as appropriate, charged with operational responsibility for ensuring that each school fulfills the district's wellness policy;
- B. establish school health advisory councils;
- C. develop goals for each of the following areas:
 - 1. nutrition and nutrition education;
 - 2. physical activity;
 - 3. physical education;

- 4. health education;
- 5. behavioral health;
- 6. school safety;
- 7. health services; and
- 8. staff wellness; and
- D. develop a plan for measuring the implementation and evaluation of the wellness policy.

Wellness Policy Process

Step 1: Formation and Purpose of the School Health Advisory Council (SHAC)

- A. The local board of education or charter school board will establish a district/charter SHAC that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), school staff, student(s), and community member(s).
- B. The SHAC will meet a minimum of two times annually for the purpose of making recommendations to the local school board in the development or revision, implementation, and evaluation of the wellness policy.

Step 2: The SHAC creates a K-12 (or applicable grades) wellness policy that addresses the following areas:

- A. Nutrition guidelines for school meals, competitive foods and beverages sold during the school day, exempt fundraisers, water, celebrations and rewards, nutrition promotion, nutrition education, food and beverage marketing in school, and school nutrition staff qualifications and professional standards requirement;
- B. Physical activity guidelines for before, during and/or after school;
- C. Guidelines for a planned, sequential physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes that encourage a lifetime of physical activity, consistent with the Physical Education Content Standards with Benchmarks and Performance Standards set forth in <u>6.29.9 NMAC</u>: Standards for Excellence;
- D. Guidelines for a planned, sequential, health education curriculum that addresses the physical, mental, emotional, and social dimensions of health and is aligned to the Health Education Content Standards with Benchmarks and Performance Standards as set forth in Standards for Excellence (6.29.6.8 NMAC);
- E. Establish course instructions for all students in grades K–12 to receive instruction in health education and to require all students to complete a course in health education prior to graduation in either middle or high school that is aligned to high school Health Education Content Standards with Benchmarks and Performance Standards (22-13-1.1 NMSA (1978);
- F. Develop a plan that addresses the behavioral health needs of all students in the educational process by focusing on the social and emotional well-being of students;

- G. Provide and submit a Safe School Plan at each school, focused on healthy, safe environments, including but not limited to policies, procedures and an all-hazards emergency operations plan (EOP) that is inclusive of: prevention, protection, mitigation, response and recovery, and is aligned with the National Response Framework, Fourth Edition, Guide for Developing High-Quality School Emergency Operations Plans (2013), See Safe Schools Plans, Safe and Healthy School Bureau
- H. A plan that addresses the health service needs of students in the educational process;
- I. A plan that addresses the wellness needs of all staff that minimally ensures an equitable work environment that meets the Americans with Disabilities Act, Part III; and
- The implementation and evaluation of all guidelines.

Step 3: The district/charter submits wellness policy documents to the Public Education Department on a date to be determined and communicated to every school on a three-year rotating cycle.

The school district wellness policy will be monitored as part of the PED's Student Success and Wellness Bureau nutrition administrative review process (three year rotating cycle), based upon immediacy of required response to review findings, or whenever a school district or state charter school is scheduled for an administrative review. School districts or charter schools should be prepared to provide health educators with access to their **most recently revised** school district wellness policy during each school year that they are scheduled for review. A public school (i.e., local or state charter school) that does not participate in the U.S. Department of Agriculture's School Breakfast Program (SBP) or National School Lunch Program (NSLP) will be randomly assigned a year within the three year rotating cycle for submission of their wellness policy.

Wellness Policy Implementation, Monitoring, Accountability, and Community Engagement

The District will develop and maintain a plan for implementation to manage and coordinate the initiatives of the wellness policy. Wellness policy discussion is a community effort. Members of the school staff, student caregivers, out of school time programs and the community should be actively involved. The plan delineates roles, responsibilities, actions, and timelines specific to each school, as well as specific goals and objectives for nutrition standards for all foods and beverages available on the school campus, food and beverage marketing, nutrition promotion and education, physical activity, physical education, and other school-based activities that promote student wellness. Yearly review and assessment of policy initiatives can focus action plans that foster implementation and strengthen the policy. Communicating the results of assessments, evaluation and changes in implementation to the public yearly is a best practice.

SCHOOL DISTRICT WELLNESS POLICY



Objective: The formation of a quality wellness policy is the result of an intentional, thoughtful process that supports a learning environment in which students meet their academic potential and develop habits for lifelong health. Developing and maintaining a Wellness Policy meets the Public Education Department Wellness Policy rule NMAC 6.12.6. An approved Wellness Policy also meets the requirements of section 204 of the Healthy, Hunger-Free Kids Act of 2010 (the Act), Public Law 111-296, which added 1758b

Wellness Policy Section I: Wellness Policy			
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
School Health Advisory	A School Health Advisory Council (SHAC) members include school food authority personnel, a school board member, a school administrator, school staff, parents, and members of the community. 6.12.6 NMAC, Local School Wellness Policy Implementation	The district actively recruits SHAC membership to include school staff content experts in PE and health education, students, and local agencies—such as parks and recreation, DOH regional school health and mental health advocates, and out of school time providers.	The district actively recruits SHAC membership to include school staff from every school site in addition to content experts in PE and health education, students, and local agencies—such as parks and recreation, DOH regional school health and mental health advocates, out of school time providers, local physicians, dentists, and behavioral health practitioners.
Council		Each school site is represented.	Each grade level cluster (K–5, 6–8, and 9–12) is represented.
The district SHAC meets at least a year. <u>6.12.6 NMAC</u>	The district SHAC meets at least two times	The SHAC meets more than twice a year.	Monthly meetings are held at school sites to ensure implementation and evaluation of wellness initiatives.
	a year. 0.12.0 INIVIAC	Each school site has a SHAC.	Each site holds monthly wellness initiatives and provides its constituents with updates.

	NMAC/Rule Requirements	Strategies for Improvin	ng Policy Outcomes
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
	District Wellness Policy, including any updates to and about the wellness policy, is available to the public on an annual basis.	The district/charter school wellness policy is available in a number of formats that are linguistically and culturally appropriate such as the school website, student handbooks, and newsletters.	The district/charter school actively communicates wellness policy initiatives, using a variety of methods that may include school website, student handbooks, newsletters, school announcements, social media, local television, and radio.
	Districts make available the Triennial Assessment, including progress towards meeting the goals of the policy, Local School Wellness Policy	The policy is communicated to students, staff, parents, and community members to ensure understanding and how implementation affects them.	Messaging is positive and intentional, reflecting the districts commitment to student, staff, and community health.
	Implementation Summary of the Final Rule	Wellness and Health messages are marketed at least twice a year.	Messaging is frequent and repetitive often sent to supplement seasonal or calendar-specific events, e.g., Safe goblin trick-ortreating, Ride-share #s for a carefree prom.
	A plan is in place for the implementation and evaluation of the wellness policy. 6.12.6 NMAC, Local School Wellness Policy Implementation Summary of the Final Rule	Wellness policy decisions are informed by data. A variety of tools are used to evaluate the strength of policy language (WellSAT) and the effectiveness of wellness implementation. Wellness policy evaluation, revision, and implementation are driven by data using a variety of resources such as district/site school nurse visits and the School Health Index.	Wellness policy decisions are informed by data using a variety of resources, such as district/site school nurse visits, local childhood obesity data such as https://stateofchildhoodobesity.org/states/nm/ , NM DOH The Weight of Our Children, the county Youth Risk and Resiliency Survey (YRRS), and local climate and culture surveys (Safe, Supportive Learning Survey).

School District Wellness Policy: Nutrition and Nutrition Education



Objective: The school district is committed to serving healthy meals to children, with plenty of fruits, vegetables, whole grains, and fat-free, flavored, and low-fat, non-flavored milk; moderate in sodium, low in saturated fat, and zero grams *trans*-fat per serving (nutrition label or manufacturer's specification), and to meet the nutrition needs of school children within their calorie requirements. The school meal program's aim is to improve the diet and health of school children, help mitigate childhood obesity, model healthy eating to support the development of lifelong healthy eating patterns, and support healthy choices while accommodating cultural food preferences and special dietary needs.

<u>Federal Final Rule Requirements</u>: At a minimum, policies are required to include:

- **Specific goals** for nutrition promotion and education, physical activity, and other school-based activities that promote student wellness. LEAs are required to review and consider evidence-based strategies in determining these goals.
- Standards and nutrition guidelines for all foods and beverages sold to students on the school campus during the school day that are consistent with Federal regulations for:
 - o school meal nutrition standards, and the
 - Smart Snacks in School nutrition standards.
- Standards for all foods and beverages provided, but not sold, to students during the school day (e.g., in classroom parties, classroom snacks brought by parents, or other foods given as incentives).
- **Policies for food and beverage marketing** that allow marketing and advertising of only those foods and beverages that meet the Smart Snacks in School nutrition standards. 7 CFR 210.11 and 6.12.5.8 NMAC.

Water: Schools participating in the school lunch program under this Act shall make available to children free of charge, as nutritionally appropriate, potable water for consumption in the place where meals are served during meal service. RICHARD B. RUSSEL NATIONAL SCHOOL LUNCH ACT 2014

<u>PED Nutrition Requirements:</u> All schools will provide nutrition education activities that align with the New Mexico Health Education Content Standards with Benchmarks and Performance Standards as set forth in 6.29.6 NMAC.

- A. Create procedures for the documentation of all foods available on the school campus including all foods sold to students that must minimally meet the competitive food standards as stated in <u>7 CFR 210.11</u> and <u>6.12.5.8 NMAC.</u>
- B. Create procedures for the documentation of fundraisers that do not meet the competitive food standards that must be limited to no more than two occasions per semester or trimester term per school and may not be conducted during meal service or in the food service area.
- C. Establish guidelines for other school-based activities to promote student wellness.

Wellness Policy Section II: Nutrition Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.			
	NMAC/Rule Requirements	Strategies for Improvi	ng Policy Outcomes
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
		At least three different fruits offered each week on three different days. At least one fruit per week is served fresh.	At least five different fruits are offered each week. At least two fruits per week are served fresh.
	All school breakfasts comply with the USDA and state policies.	District offers at least 15 minutes "seat time" for students to eat breakfast (not including time spent walking to and from class or waiting in line).	
	Students pre-k to grade 6 have the opportunity to participate in Breakfast After the Bell (BATB). NMAC 6.12.9	Grab n Go breakfast options are available.	District has implemented alternative breakfast service options. "Breakfast in the Classroom" (Action for Healthy Kids) or "Second Chance Breakfast" is available. Breakfast in the Classroom: How it Works; Second Chance Breakfast
Breakfast, Lunch, and	All school lunches comply with the <u>USDA</u> and <u>state policies</u> .	At least three different fruits offered each week. Two fruits per week are served fresh.	At least five different fruits are offered each week. Four fruits per week are served fresh.
Snack		Fresh Fruit and Vegetable tastings occur.	Participation in the Department of Defense Fresh Fruit and Vegetable Program.
		Some or all schools have school-based gardens.	Some of what is grown is used for fresh fruit and vegetable tasting in the cafeteria.
	All schools comply with the Standards for Excellence <u>lunch recess guidelines</u> .	Students have at least 20 minutes "seat time" to eat lunch not including time spent walking to/from class or waiting in line.	Students are offered recess before lunch and at least 20 minutes seat time to eat.
	Meals and snacks served under the USDA At-Risk Afterschool Meals, Afterschool Snack Program, Fresh Fruit & Vegetable Program and/or Summer Food Service Program comply with all federal regulations and state policies.	Participate in one of four programs (At-Risk Afterschool Meals, Afterschool Snack Program, Fresh Fruit & Vegetable Program, or Summer Food Service Program).	Participate in two or more of the four programs (At-Risk Afterschool Meals, Afterschool Snack Program, Fresh Fruit & Vegetable Program, or Summer Food Service Program).

	Wellness Policy Section II: Nutrition Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.			
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes		
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices	
	All foods and beverages sold in schools comply with USDA's Smart Snacks in School "All Foods Sold in Schools" Standards from the midnight before to 30 minutes after the end of the school day.	All foods and beverages sold in schools are in compliance with <u>USDA's Smart Snacks in School "All Foods Sold in Schools" Standards</u> from the midnight before to 5 pm to include after school programs and some school sponsored events.	All foods and beverages sold in schools are in compliance with <u>USDA's Smart Snacks in School "All Foods Sold in Schools" Standards</u> 24 hours a day, inclusive of all before and after school programs and school sponsored events.	
All Foods Sold in Schools	No energy or other high sugar or highly caffeinated beverages sold on the school property from midnight the night before to 30 minutes after the end of the official school day.	No energy or other high sugar or highly caffeinated beverages are sold on the school property from midnight the night before to 5 pm.	No energy or other high sugar or highly caffeinated beverages are sold on the school property 24 hours a day.	
(Snack Sales, School Stores & Fundraisers)	Fundraisers within the school day meet USDA's Smart Snacks in School "All Foods	Fundraisers within the school day until 5 pm meet USDA's Smart Snacks in School "All Foods Sold in Schools" Standards. (Two, documented, one-day exceptions per semester per site exception)	No exempted fundraisers. All fundraisers involving foods or beverages meet the USDA's Smart Snacks in School "All Foods Sold in Schools" Standards.	
	Sold in Schools" Standards. (Two, documented, one-day exceptions per semester per site exception)	Fundraisers involving the sale of food or beverages that meet <u>USDA's Smart Snacks in School "All Foods Sold in Schools" Standards</u> and support nutrition, nutrition education and physical activity messaging.	No food or beverage fundraisers. Alternative fundraisers like those including physical activities are supported. All fundraisers support nutrition, nutrition education, hydration and physical activity messaging.	

Wellness Policy Section II: Nutrition Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.				
	NMAC/Rule Requirements	Strategies for Improvi	Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices	
		District adopts <u>Smart Snacks in School "All Foods Sold in Schools" Standards</u> for all food and beverages provided, not sold, on school campus during the school day.	All foods and beverages provided meet Smart Snacks in School "All Foods Sold in Schools" Standards.	
All Foods Provided in	District develops nutritional standards for foods and beverages provided, not sold, on	The number of celebrations in which food and beverages are included is limited.	No celebrations involve food.	
Schools	school campus during the school day.	School provides information to staff for the incorporation of non-food rewards and incentives.	Food is not used as a reward or incentive.	
		Celebrations including food are paired with physical activity opportunities.	District supports and promotes physical activity celebrations.	
	District allows marketing* (oral, written, or graphics) of only those foods and beverages sold on the school campus during the school day that meet the requirements set forth in the Smart Snacks Rule . (Schools are not required to allow food or beverage marketing on campus.)	District allows marketing* (oral, written, or graphics) of only those foods and beverages that meet the requirements set forth in the Smart Snacks Rule on the school campus during school activities at all times.	District allows marketing* (oral, written, or graphics) of only those foods and beverages that meet the requirements set forth in the Smart Snacks Rule on the school campus at all times.	
Nutrition Promotion	District promotes participation in the National School Lunch Program (NSLP) and School Breakfast Program (SBP) if applicable and chooses nutritious foods and beverages throughout the day. Menus are posted on school website and/or distributed to families via another method.	District implements marketing and advertising of nutritious foods and beverages consistently through a comprehensive and multi-channel approach to school staff, teachers, parents, and students.	District implements marketing and advertising of nutritious foods and beverages consistently through a comprehensive and multi-channel approach to the community.	
		District purchases locally grown seasonal produce.	District purchases locally grown seasonal produce and participates in New Mexico Grown activities.	

Wellness Policy Section II: Nutrition Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.			
	NMAC/Rule Requirements	ts Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
		District supports and promotes school gardens.	District supports and promotes school gardens and the integration to nutrition promotion and academic programs such as STEM.
	Students provide input on foods offered in the cafeteria.	Students learn about the nutrition requirements for school meals and some students are involved in helping plan menus.	A student advisory council is formed and meets with a food service representative and school administration twice a year to provide input.
		dvertising and other marketing, such as the name or de or facility owned or leased by the school district or scho	= -
	All schools will provide nutrition education activities that align with the New Mexico Health Education Content Standards with Benchmarks and Performance Standards as set forth in 6.29.6 NMAC.	District administrators inform teachers and other school personnel about opportunities to participate in professional development on nutrition and on teaching nutrition.	Teachers and other school personnel participate in nutrition education-related professional development at least once a year.
Nutrition Education	Include nutrition education as part of physical education/health education classes and/or stand-alone courses for all grade levels.	Active learning experiences are provided such as involving students in food preparation or other hands-on activities at least once a semester.	Active learning experiences are provided such as involving students in food preparation or other hands-on activities at least once each quarter.
	District uses qualified personnel or organizations from the community to provide nutrition education to students under the direct supervision of a teacher once/year.	District uses qualified personnel or organizations from the community to provide nutrition education to students under the direct supervision of a teacher once/semester.	District uses qualified personnel or organizations from the community to provide nutrition education to students under the direct supervision of a teacher more than once a semester.

Wellness Policy Section II: Nutrition

Policy statements in a **DARK BLUE BOLD** are those required by federal and/or state law.

	Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.		
	NMAC/Rule Requirements	le Requirements Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
	Integrate age-appropriate nutrition education into at least one core subject such as math, science, language arts, and social sciences.	Integrate age-appropriate nutrition education into at least two core subjects such as math, science, language arts, and social sciences.	Integrate age-appropriate nutrition education into three or more core subjects such as math, science, language arts, and social sciences as well as in non-core and elective subjects.
	Include nutrition and health posters, signage, or displays in the cafeteria food service and dining areas.	Include nutrition and health posters, signage, or displays in classrooms, hallways, gymnasium, and/or bulletin boards.	School personnel collaborate with the school nutrition staff to use the cafeteria as a nutrition learning laboratory that allows students to apply critical thinking skills.
	Offer information to families at least once per semester that encourages them to teach their children about health and nutrition.	Offer information to families at least once per quarter that encourages them to teach their children about health and nutrition, and assists them in planning nutritious meals.	Offer information to families at least once per month that encourages them to teach their children about health and nutrition, and assists them in planning nutritious meals for their families.
Water Availability	Students have access to <u>free drinking</u> water throughout the school day, including during meal service.	Students have clear or transparent individual water bottles in the classroom where appropriate.	Students have clear or transparent individual water bottles containing water only in the classroom where appropriate.
Food Allergies	Assurance of adherence to requirements regarding possible food allergies in schools.	The district provides training on common allergens to the staff including food service personnel.	Educate children, families, and staff about food allergies. Ensure the response to food allergy emergencies is part of the school site emergency plan. A communication system for staff to respond to food allergy reactions and emergencies.
	Reimbursable meals and/or parts of a reimbursable meal are not withheld or denied as a disciplinary action.	Students being disciplined are NOT seated at tables separated from other students in the dining area.	Students being disciplined are NOT seated in a separate location.

Wellness Policy Section II: Nutrition Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.			
	NMAC/Rule Requirements	Strategies for Improvi	ng Policy Outcomes
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
	Content of reimbursable lunch and breakfast is identified near or at the beginning of the serving line(s).	New Mexico Grown food products are served as part of the school meals program are identified on the serving line.	A New Mexico Grown product served in the school meals program at least one time per week.
	Schools provide staff information on non-food rewards.	Schools begin incorporating non-food rewards.	Food is not used as a reward in district schools.
Possible Additional Statements	Meals purchased at fast-food outlets to be consumed at school must not be brought to school in their original containers. Caffeinated beverages are not allowed in sack lunches to be consumed in the cafeteria. (Elementary/Middle School)	Meals purchased at fast-food outlets to be consumed at school must not be brought to school in their original containers. Caffeinated beverages are not allowed in sack lunches to be consumed in the cafeteria. (High School)	No meals purchased at fast food outlets are consumed at mealtime in cafeteria.
	All school food service personnel receive required food safety training at a minimum of every 5 years. Continuing education training for all food service personnel meets federal and state requirements.	All school food service personnel receive required food safety training at a minimum of every 3 years.	All school food service personnel receive food safety training annually.



School District Wellness Policy: Physical Activity

Objective: Schools play a vital role in ensuring children and adolescents get the nationally recommended 60 minutes of physical activity each day. Through the <u>WSCC</u> model, schools can provide many opportunities for students to be physically active. A <u>Comprehensive, Schoolbased Physical Activity Program</u> is a multi-component approach by which school districts and schools use all opportunities for students to be physically active, meet the nationally recommended 60 minutes of physical activity each day, and develop the knowledge, skills, and confidence to be physically active for a lifetime. A CSPAP reflects strong coordination and synergy across all the components: physical education as the foundation; physical activity before, during, and after school; staff involvement; and family and community engagement. Schools will ensure that varied opportunities for physical activity are in addition to, and not as a substitute for, physical education.

Physical activity differs from physical education in that physical activity are those opportunities for engaged movement during the day for maintenance of a healthy lifestyle. Physical education is a structured, curriculum driven, learning environment. As such, physical activity and physical education will be addressed separately for the purposes of wellness policy.

<u>Federal Final Rule Requirements</u>: At a minimum, policies are required to include:

• **Specific goals** for nutrition promotion and education, **physical activity**, and other school-based activities that promote student wellness. LEAs are required to review and consider evidence-based strategies in determining these goals.

NM PED Physical Activity Requirements: All schools will meet the requirements that are outlined in the School District Wellness Policy rule (6.12.6 NMAC).

- A. Create guidelines to provide physical activity opportunities to students before, during and/or after school.
- B. All schools will provide education on the benefits of physical activity that align with the New Mexico Health Education Content Standards using benchmarks and performance standards as set forth in 6.29.9 NMAC.

	Wellness Policy Section III: Physical Activity Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.			
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes		
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices	
	Guidelines created to provide physical activity opportunities before, during and after school. (6.12.6.8.D.3 NMAC)	Structured physical activity opportunities, in addition to recess and physical education, are offered to all students at least 1 time daily. School staff are encouraged to participate.	Structured physical activity opportunities, in addition to recess and physical education, are offered to all students at least 2 times daily. School staff are encouraged to participate.	
	Physical activity is included as a health education topic. (6.29.9 NMAC)	Resources of effective practices supporting the health benefits of physical activity are provided to educators at all grade levels and encouragement is given for implementation.	District provides health educators with professional development in effectively implementing CSPAP.	
Throughout the Day	Elementary school students have at least 15 minutes a day of supervised recess (not including time spent getting to and from the playground), preferably	Elementary school students have two supervised recess periods per day (not including time spent getting to and from the playground), totaling at least 20 minutes. Supervisory staff encourage moderate to vigorous physical activity.	Elementary school students have two supervised recess periods per day, totaling at least 30 minutes (not including time spent getting to and from the playground), with one being offered in the morning. Supervisory staff encourage moderate to vigorous physical activity.	
	outdoors. Supervisory staff encourage moderate to vigorous physical activity.	Physical activity during the school day (including but not limited to recess, physical activity breaks, or physical education) will not be withheld as punishment for any reason.	Physical activity during the school day (including but not limited to recess, physical activity breaks, or physical education) will not be withheld as punishment for any reason.	
	Students are not excluded from physical activity, including recess, for disciplinary or academic performance.	District provides school staff with <u>Positive</u> <u>Behavior Intervention and Supports</u> (PBIS) information and strategies regarding alternatives to withholding physical activity, including recess.	School staff receive professional development in the effective use of PBIS to redirect behavior.	

	Wellness Policy Section III: Physical Activity Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.		
	NMAC/Rule Requirements	Strategies for Impro	ving Policy Outcomes
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
	Physical activity is not used as punishment.		
	School policy outlines guidance on conditions regulating indoor and outdoor recess during extreme weather conditions.	Each school provides equipment, instruction, and supervision for active indoor recess.	Students that participate in indoor recess are provided moderate to vigorous physical activity opportunities.
	Professional development on integrating physical activity into core/non-core subjects is provided to licensed physical education teachers, school nurses, and building administrators.	Professional development on integrating physical activity into core/non-core subjects is provided to most staff. School staff are encouraged to model healthy physical activity behaviors.	Professional development on integrating physical activity into core/non-core subjects is provided to all staff. School staff model healthy physical activity behaviors.
	Structured physical activities are planned by a licensed physical education teacher and integrated into health education and at least one core subject, such as math, science, language arts, and social sciences, as well as non-core electives.	Structured physical activities are planned by a licensed physical education teacher and integrated into at least two core curriculum subjects, such as math, science, language arts, and social sciences, as well as in non-core and elective subjects.	Structured physical activities are planned by a licensed physical education teacher and integrated into three or more core curriculum subjects, such as math, science, language arts, and social sciences, as well as in non-core and elective subjects.

Wellness Policy Section III: Physical Activity Policy statements in a DARK BLUE BOLD are those required by federal and/or state law.			
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
Before & After School	Extracurricular physical activity programs, such as a physical activity club or intramural programs are offered.	Extracurricular physical activity programs, such as a physical activity club or intramural programs, are offered with input from students, and meet the needs, interests, and abilities of a diverse student body.	Extracurricular physical activity programs, such as a physical activity club or intramural programs are offered through partnerships with community organizations and resources.
	An assessment on walking and/or biking to school has been completed to determine safety and feasibility.	The school has developed a walk and/or bike to school plan and encourages students to walk and/or bike to school based on a safety and feasibility assessment.	The school has implemented a walk and/or bike to school plan or implemented an alternative plan based on a safety and feasibility assessment and has communicated it to the community.
	Community members are provided access to the district's outdoor physical activity facilities.	Community members are provided access to the district's indoor and outdoor physical activity facilities at specified hours.	Community members are encouraged to access the district's indoor and outdoor physical activity facilities at specified hours.
Family & Community	Offer information via multiple channels at least once per semester to all families that encourages them to teach their children about physical activity and assists them in planning physical activity for their families.	Offer information via multiple channels and provide opportunities for physical activity at least once per quarter to all families that encourages them to teach their children about physical activity, and assists them in planning physical activity for their families.	Offer information via multiple channels and provide opportunities for physical activity at least once per month to all families that encourages them to teach their children about physical activity, and assists them in planning physical activity for their families.

School District Wellness Policy: Health Education

<u>Objective:</u> Health education is the instructional program that provides the opportunity to motivate and assist all students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors. It allows students to develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices. As well, Health Education meets the content standards with benchmarks and performance standards as set forth in <u>6.29.1 NMAC Standards for Excellence</u>.



Wellness Policy Section IV: Health Education Policy statements in a DARK BLUE BOLD are those required by state law.				
	NMAC/Rule Requirements	NMAC/Rule Requirements Strategies for Impro		
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices	
Health Education	The wellness policy shall include a planned, sequential K- 12 health education curriculum that addresses the physical, mental, emotional and social dimensions of health. NMAC6.12.6 The health education curriculum shall be aligned to the health education content standards with benchmarks and performance standards as set forth in	The district uses a curriculum assessment tool such as the Health Education Curriculum Analysis Tool to inform the current or future curriculum adoption. The school district adopts an evidence-based K – 12 health education curriculum that is addressed in an inclusive, culturally, and linguistically suitable manner using a variety of instructional strategies.	The district uses a curriculum assessment tool such as the Health Education Curriculum Analysis Tool to inform the current or future curriculum adoption. The school district adopts an evidence-based K–12 health education curriculum that is addressed in an inclusive, culturally, and linguistically suitable manner using a variety of instructional strategies.	
	the NMPED Standards and Benchmarks. NMPED Standards and Benchmarks	Health education concepts are integrated into core curriculum.	Health education concepts are integrated into core curriculum. Local health data is used to drive health instruction for positive health behavior outcomes.	

Wellness Policy Section IV: Health Education Policy statements in a **DARK BLUE BOLD** are those required by state law. **Strategies for Improving Policy Outcomes NMAC/Rule Requirements Topic Evidence of Policy Modeling of Highly Transitioning to Best Practices Implementation Effective Practices** Teachers, staff, and administrators are supported in time and funding by the Teachers, staff, and administrators are made aware of school health professional district to take advantage of state and development opportunities. national school health professional development. Membership in national health education Membership in national health education organizations is promoted and financially organizations is promoted. supported. 0.5 credit of Health Education is offered in either middle or high school as a Graduation Health education is integrated into all Health education is required instruction at graduation requirement. Requirement grade levels. all grade levels. **Graduation Requirements**

Wellness Policy Section IV: Health Education Policy statements in a DARK BLUE BOLD are those required by state law.			
	NMAC/Rule Requirements	Strategies for Improvin	g Policy Outcomes
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
Sexual Health Education	Each school district or charter school shall implement a policy that will ensure that parents have the ability to request that their child be exempted from the parts of the health education curriculum that address sexuality performance standards. The policy shall include, but is not limited to: 1. the process for parents to request an exemption from the parts of the health education curriculum that address the sexuality performance standards; and 2. how alternative lessons are established for the exempted parts of the curriculum. Each local board of education or governing body of a charter school shall ensure the involvement of parents, staff, and students in the development of the policy. NMAC 6.29.6.11 Sexuality Performance Standards Exemption	District provides lesson plans to the parents with expectations that the material is covered.	

Wellness Policy Section IV: Health Education Policy statements in a DARK BLUE BOLD are those required by state law.			
NMAC/Rule Requirements Strategies for Improving Policy Outcomes			ving Policy Outcomes
Topic Evidence of Policy Implementation		Transitioning to Best Practices	Modeling of Highly Effective Practices
		Professional development is provided to ensure that sexual health is implemented through a trauma informed, culturally and linguistically appropriate approach.	Professional development, aligned with Professional Learning Standards for Sex Education is provided to ensure that sexual health education is implemented through a trauma informed, culturally and linguistically appropriate approach that is inclusive of intersectionality (LGBTQ+) and social justice.

School District Wellness Policy: Physical Education

<u>Objective</u>: Physical education (PE) is an academic subject and serves as an integral component of a Comprehensive School Physical Activity Program (CSPAP). Physical education is the instructional program that provides cognitive content and learning experiences in a variety of activity areas. It also provides the opportunity for all students to learn and develop the skills, knowledge, and attitudes necessary to choose a lifetime of healthy physical activity. As such, PE demands the same education rigor as other core subjects.



Wellness Policy Section V: Physical Education Policy statements in a DARK BLUE BOLD are those required by state law.			
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
	The Wellness Policy includes a planned, sequential and developmentally appropriate K-12 physical education curriculum (6.29.1 NMAC Primary and Secondary education standards for Excellence General Provision) aligned to the Content Standards with Benchmarks and Performance Standards.	District indicates frequency and duration of physical education for some grade levels.	District indicates frequency and duration of physical education for all grade levels.
		PE is inclusive and adaptive to meet the needs of a diverse student population.	
Physical		Schools limit physical education class sizes so that they are consistent with those of other subject areas.	Schools limit physical education class sizes so that they are consistent with those of other subject areas no matter what the circumstances may be.
Education		PE is taught by certified instructors.	PE instructors hold 4-year degrees in Physical Education.
		Physical educators promote academic achievement by helping teachers incorporate physical education concepts in classroom activities.	Physical educators promote academic achievement by helping teachers incorporate PE concepts in classroom activities by the inclusion of PE teachers on grade level, leadership and MLSS teams. Professional development on integrating PE concepts across academic content areas.

Wellness Policy Section V: Physical Education Policy statements in a DARK BLUE BOLD are those required by state law. NMAC/Rule Requirements Strategies for Improving Policy Outcomes Evidence of Policy Implementation Transitioning to Best Practices Physical educators are supported with time and funding to pursue opportunities

development.

Physical education teachers are

encouraged to participate in professional

for professional development at the state

Membership in national physical education

No PE waivers are allowed to replace the

Not allowed to test out of the content.

and national level.

organizations is promoted.

graduation content requirement.

Graduation
Requirement
One unit of PE, or allowable alternative, is included as a district graduation requirement. Statute NMSA 22.13.1.1

School District Wellness Policy: Social and Emotional Well-Being



<u>Objective:</u> Social and Emotional well-being services are those provided to maintain and/or improve students' mental, emotional, behavioral, and social health. School behavioral and mental health programs should focus on breaking down health and social barriers to students' learning with emphasis on meeting each student's individual health needs. Behavioral health programs should support the student's process to become a fully functioning and happy member of society. Programs should encourage and support links among youth, families, schools, communities, and private and government agencies to create and maintain an environment in which all students can learn and thrive.

"Social and emotional learning (SEL) is the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions." A districtwide SEL approach may be instrumental in providing the foundation to students, staff, families and the community with the structure to gain strategies of self-awareness,

self-management, responsible decision-making, relationship skills and social awareness skills to be productive, healthy members of the community.

Wellness Policy Section VI: Social and Emotional Well-Being Policy statements in a DARK BLUE BOLD are those required by state law.			
NMAC/Rule Requirements Strategies for Improving Policy Outcomes			ving Policy Outcomes
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
Student Supports	Districts shall create a plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well-being. 6.12.6.8-6 NMAC	Using data such as a climate and culture survey and/or New Mexico Youth Risk and Resiliency (YRRS) data to inform instruction.	Participating in the New Mexico Youth Risk and Resiliency Survey as a method to be informed by district data to drive instruction.

⁵ https://casel.org/what-is-sel/

Wellness Policy Section VI: Social and Emotional Well-Being					
	Policy statements in a DARK BLUE BOLD are those required by state law.				
	NMAC/Rule Requirements	Strategies for Improv	ving Policy Outcomes		
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices		
	Districts and charter schools provide or make provisions for support service programs, which strengthen the instructional program. Required support service programs include school counseling. Support services must: (1) have a written, delivered, and assessed program, K-12; (2) provide licensed staff to develop and supervise the program; (3) be assessed as part of the educational plan for student success (EPSS) process (see 6.29.1.8 NMAC); and (4) support the local curriculum and EPSS.	Provide a positive, supportive environment in which students are able to request assistance when needed using a trauma informed approach and social and emotional (SEL) model. Encourage school sites to adopt and implement an SEL framework. Create a referral network to get help quickly. Schools have available student counselors while maintaining a current local referral list with clear guidelines on steps in the referral process. Use state and county data sources to assess behavioral health needs.	Fully implement a social and emotional (SEL) model from the district administration through all school levels.		
Staff Requirements	All licensed school employees shall be required to complete training in the detection and reporting of child abuse and neglect, including sexual abuse and assault, and substance abuse. This requirement shall be completed within the licensed school employee's first year of employment by a school district. Section 22-10A-32 NMSA 1978 Duty to report child abuse and child neglect; responsibility to investigate child abuse or neglect; penalty. Section 32A-4-3 NMSA 1978	Provide the training to all staff yearly.			

Wellness Policy Section VI: Social and Emotional Well-Being

Policy statements in a **DARK BLUE BOLD** are those required by state law.

	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
	A school employee who knows, or in good faith suspects, any student of using or abusing alcohol or drugs shall report such use or abuse pursuant to procedures established by the local school board. No school employee who in good faith reports any known or suspected	Provide reminders yearly.	
	instances of alcohol or drug use or abuse, shall be held liable for any civil damages as a result of such report or his efforts to enforce any school policies or regulations regarding drug or alcohol use or abuse." Section 22-10A-32 NMSA 1978		

School District Wellness Policy: Health Services

<u>Objective:</u> Health services ensure access or referral to primary health care or behavioral health services, or both. The services also foster appropriate use of primary health care services and behavioral health services; prevent and control communicable disease and other health problems; provide emergency care for illness or injury; promote and provide optimum sanitary conditions for a safe school facility and school environment; and provide educational and counseling opportunities to improve individual, family, and community health.





	Wellness Policy Section VII: Health Services Policy statements in a DARK BLUE BOLD are those required by state law.				
Topic	NMAC/Rule Requirements Evidence of Policy Implementation	Strategies for Impro Transitioning to Best Practices	wing Policy Outcomes Modeling of Highly Effective Practices		
Health Services	Students with healthcare needs that may affect their school attendance and/or performance have Individualized Health Plans (IHP) (NASN Position Statement: Individualized Healthcare Plan) which are separated from Individualized Education Program (IEP) plan but attached to the IEP of 504 plan based on a student's needs. Section V: Individualized Healthcare Plans	The district, at the school site level, documents the need for health services in the IEP or 504 plan and is prepared to respond to emergencies related to the student's health condition(s) outlined in Emergency Care Plans (ECP) or emergency action plans. Procedures meet the need of students with ECR plans relative to non-medical emergencies such as those outlined in the school site's Safe Schools Plans.	The school employs a PED-licensed school nurse that develops IHPs for all necessary students who require consistent care related to their health condition(s) during the school day. The PED-licensed school nurse may delegate appropriate health related services to trained unlicensed personnel (e.g., health assistants, bus drivers, etc.). ECPs are available and system is in place for relevant staff to be trained to respond in the event of student medical emergencies. The PED-licensed school nurse collaborates with additional teams, such as 504 and IEP teams, to meet the needs of individual student's Care Plans (ECP) or emergency action plans.		

Wellness Policy Section VII: Health Services

Policy statements in a **DARK BLUE BOLD** are those required by state law.

	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
			Procedures meet the need of students with ECR plans relative to non-medical emergencies such as those outlined in the school site's Safe Schools Plans. Training is provided to ensure implementation.
	District policy is included to ensure all students with HIV/AIDS have appropriate access to public education and that their rights to privacy are protected as set in 6.12.2.10 NMAC Human Immunodeficiency Virus (HIV).	Students with a diagnosis of HIV/AIDS receive education regarding their access to care and a personal education plan regarding their diagnosis.	The school employs a PED-licensed nurse to assist in the provision of coordinated care and in a personalized education plan for the student with a diagnosis of HIV/AIDS.
	Statement addressing statute 6.12.2.8 NMAC, which makes it unlawful for any student to enroll in school unless the student is properly immunized or in the process of being properly immunized and can provide satisfactory evidence of such immunization, unless the child is properly exempted. 7.5.3 NMAC NOTE: District ensures that students who are identified as homeless are not prevented from entering schools based on inability to produce records normally required for enrollment, as per the McKinney-Vento Homeless Assistance Act. McKinney-Vento Homeless Assistance Act	The Homeless Liaison pursues obtaining immunization documentation on the student's behalf.	The Homeless Liaison pursues obtaining documentation related to immunization and provides access to immunization providers.

	Wellness Policy Section VII: Health Services Policy statements in a DARK BLUE BOLD are those required by state law.			
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes		
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices	
	The Wellness Policy includes the provision for any student in K–12, providing authorization to carry and self-administer health care practitioner prescribed asthma treatment and anaphylaxis emergency treatment medications, as well as the right to self-management of diabetes in school settings. 6.12.2.9 NMAC, 6.12.8 NMAC	Students self-administer prescribed asthma and diabetes medications as outlined in the rules and a PED-licensed school nurse is employed and available for student assessment and assistance with managing chronic conditions.	Students self-administer prescribed asthma and diabetes medications as outlined in the rules and a PED-licensed school nurse is employed and available for student assessment and assistance with managing chronic conditions. IHPs and ECPs are documented, and the school nurse has trained relevant staff to provide appropriate routine and/or emergency care as needed.	
	At a minimum, vision screenings are administered to students enrolled in pre-K, Kindergarten, 1 st , and 3 rd grades. 7.30.10 NMAC	District administers vision screenings to all elementary school students yearly. The district administers hearing screenings in pre-K, Kindergarten, 1 st , and 3 rd grades.	District administers vision and hearing screenings to all students in the district.	

School District Wellness Policy: Staff Wellness



<u>Objective:</u> Healthy employees are more productive, have more energy, are better able to manage stress, and are more likely to model healthy behaviors. By prioritizing employee wellness, schools can empower staff to feel their best while further supporting students' well-being.⁶ A healthy school workplace helps retain teachers and staff, reduces stress, boosts job satisfaction, and supports employees to perform at their best. Healthy and well supported employees are absent fewer days and more likely to stay in their positions, creating the continuity and stability that is essential for students' success. Teachers and staff are also influential role models for students.⁷

Wellness Policy Section VIII: Staff Wellness Policy statements in a DARK BLUE BOLD are those required by state law.			
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes	
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices
Staff Wellness	District and its governing boards and schools implement policy to ensure the right to privacy of all school employees infected with HIV, keeping records safe and confidential. HHS Civil Rights	Ensuring staff, particularly managers, have equality and diversity training which includes information about HIV and how to sensitively manage staff living with HIV (particularly confidentiality).	Helping to end stigma and discrimination by improving staff knowledge about HIV (for example, by marking World AIDS Day on December 1st). Advice for Employers National AIDS Trust UK

⁶ https://www.healthiergeneration.org/take-action/schools/wellness-topics/staff-well-being

⁷ https://thrivingschools.kaiserpermanente.org/school-employees/

Wellness Policy Section VIII: Staff Wellness Policy statements in a DARK BLUE BOLD are those required by state law.				
	NMAC/Rule Requirements	Strategies for Improving Policy Outcomes		
Topic	Evidence of Policy Implementation	Transitioning to Best Practices	Modeling of Highly Effective Practices	
	Create a plan to address the staff wellness needs of all school staff that minimally ensures an equitable work environment and meets the Americans with Disabilities Act, Title III. (6.12.6.8.D.9 NMAC)	Implement a continuous improvement process by prioritizing staff health, assessing the current program and evaluating the results frequently. The district provides health information to staff yearly. Involvement in the formation of groups based on health initiatives such as physical activity groups and healthy eating is encouraged. Staff gatherings provide healthy eating options. Staff is encouraged to model healthy behaviors such as hydration and participating in physical activities with students. The school athletic equipment and facilities are available to staff after hours.	As part of the continuous improvement process, communicate staff health promotions and incorporate tools for individual staff health and assessment tools for evaluating success. The district surveys the physical and emotional health needs of the staff, utilizing the data to create and implement a staff wellness plan. Groups based on health initiatives initiated at the district level are promoted or incentivized. All staff gatherings provide options for healthy food. Staff models healthy behaviors in food and beverage choices. Staff is discouraged from consuming sugary beverages.	
	Members of the school staff participate on the district's SHAC. (6.12.6.8.D.9 NMAC)	All school staff are encouraged to participate in the district SHAC. One staff member at each school site serves as a representative on the SHAC.	All school staff are actively encouraged to participate in the district SHAC. Incentives are offered. At least one member at each school site serves as a representative on the SHAC and provides oversite on wellness policy initiatives.	

New Mexico School Wellness Policy Resources			
Wellness Policy Formation	https://webnew.ped.state.nm.us/bureaus/safe-healthy-schools/wellness-policy/ Contained on this site are resources relating to policy development, implementation and review of the wellness policy.		
	https://www.healthiergeneration.org/take-action/schools/wellness-topics/policy-environment/school-wellness-committees The Alliance for a Healthier Generation provides information and tools on the formation and maintenance of a district School Health Advisory Council (SHAC) or wellness team.		
	Healthier Generation Model Local School Wellness Policy Guidance How to include Out of School Programming and model language exemplars		
	https://www.cdc.gov/healthyschools/ CDC Healthy Schools houses a resources to promote healthy behaviors, assess and improve school health, manage health conditions and access to training and professional development. Also included is wellness policy information that can be integrated into the Whole School, Whole Community, Whole Child (WSCC) model for school health, and can help put into action several provisions of the Every Student Succeeds Act, including Title I and Title IV. Local Wellness Policies can address policies and practices for before-, during-, and after-school. Visit Our Virtual Healthy School		
	https://www.actionforhealthykids.org/activity/student-wellness-team/ Help students create meaningful change in your school by encouraging them to mobilize, organize, and speak out for a healthy and active school culture. Here are some steps to starting a student wellness team.		
	https://www.actionforhealthykids.org/revise-district-policy/ Revise district wellness policy.		
	http://youthrisk.org/ The New Mexico Youth Risk and Resiliency Survey (YRRS) is a tool to assess the health risk behaviors and resiliency (protective) factors of New Mexico high school and middle school students. The YRRS is part of the national CDC Youth Risk Behavior Surveillance System (YRBSS). The survey results have widespread benefits for New Mexico at the state, county, and school district levels.		
Wellness Policy	http://www.wellsat.org/ The WellSAT 3.0 is a quantitative assessment tool to help you score and improve your local School Wellness Policy. Since 2010, this measure has been used by thousands of people across the country, representing school districts from every state. All WellSAT 3.0 items reflect the federal law or best practices. The purpose of scoring your district policy is to identify where it is strong and where it could be improved.		
Assessment Tools	https://www.cdc.gov/healthyschools/shi/index.htm The School Health Index (SHI) Self-Assessment and Planning Guide is an online self-evaluation and planning tool for schools. The SHI is built on CDC's research-based guidelines for school health programs that identify the policies and practices most likely to be effective in reducing youth health risk behaviors. The SHI is easy to use and is completely confidential.		
Nutrition	https://webnew.ped.state.nm.us/bureaus/student-success-wellness/ Student Success and Wellness Bureau (SSWB) at the NMPED. The Student Success and Wellness Bureau (SSWB) administers the United States Department of Agriculture (USDA) Food and Nutrition Program for 210 School Food Authorities (Districts, Charters, BIE's, Private and RCCI's) across the state of New Mexico. Find information here on the National School Lunch Program (NSLP), Administrative Reviews, Breakfast after the Bell (BAB), Seamless Summer, Meal Pattern requirements, the Fresh Fruit and Vegetable Program and more.		
	https://www.fns.usda.gov/nslp The National School Lunch Program (NSLP) is a federally assisted meal program operating in public and nonprofit private schools and residential childcare institutions. It provides nutritionally balanced, low-cost or free lunches to children each school day. The program was established under the National School Lunch Act, signed by President Harry Truman in 1946.		
	https://www.fns.usda.gov/school-meals/tools-schools-focusing-smart-snacks Smart Snacks: A number of tools and resources are available to help schools identify food items that meet Smart Snacks criteria. See this site for information about the Smart Snacks requirement, helpful tools, and ways to encourage children to make healthier snack choices that give them the nutrition they need to grow and learn.		
	https://www.fns.usda.gov/tn/best-practices-healthy-school-fundraisers Resources and ideas to make your next fundraiser healthy and successful.		

https://www.fns.usda.gov/school-meals/school-day-just-got-healthier-school-administrators-and-foodservice You have the ability to help make the school meal changes a positive and exciting experience for everyone. Let everyone know that healthier food choices and physical activity are important to you and the whole school. Talk it up at staff meetings, Back to School Night, or the next parent's association meeting. Encourage teachers, staff, students and parents to participate in the school wellness council and share best practices. Let the local wellness policy guide you. It is an important tool for parents, local education agencies and school districts in promoting student wellness, preventing and reducing childhood obesity, and providing assurance that school meal nutrition guidelines meet the minimum federal school meal standards. You make a difference every day when you offer nutritious food choices to students.

https://www.changelabsolutions.org/product/restricting-food-and-beverage-marketing-schools ChangeLab Solutions developed Restricting Food and Beverage Marketing in Schools to explain what school districts are required to do under federal law. The fact sheet also discusses policy options for school districts that want to go beyond the minimum requirements and address unhealthy marketing comprehensively.

https://www.cdc.gov/healthyschools/npao/wateraccess.htm Information regarding the benefits, regulations and tools to increase access to drinking water in schools.

https://hsc.unm.edu/school-of-medicine/pediatrics/divisions-centers-programs/prevention-research-center/eat-smart-to-play-hard/index.html Eat Smart to Play Hard (ESPH) is a six-week campaign developed using the social marketing framework to increase fruit and vegetable consumption in 8- to 10-year olds. Our goal is to reduce obesity and prevent chronic disease in the children, families, schools, and communities across New Mexico by making it enjoyable and fun to eat healthy and exercise.

https://www.shapeamerica.org/cspap/what.aspx Comprehensive School Physical Activity Program: A CSPAP is a multi-component approach by which school districts and schools use all opportunities for students to be physically active, meet the nationally-recommended 60 minutes of physical activity each day, and develop the knowledge, skills, and confidence to be physically active for a lifetime.

https://www.cdc.gov/physicalactivity/basics/children/index.htm This site provides guidelines for a child's physical activity levels based on age ranges, provides tips to help keeping children active.

https://www.activeacademics.org/ Active Academics® is a resource for classroom teachers to provide practical physical activity ideas that can be integrated into regular classroom content areas. Get students "up and moving" while still engaged in the academic learning process. Our standards-based activity ideas utilize the Common Core Standards as well as national standards. We offer a variety of activities for PreK - 5th grade classrooms.

https://www.gonoodle.com/ GoNoodle® engages 14 million kids every month with movement and mindfulness videos created by child development experts. Available for free at school, home, and everywhere kids are!

Physical Activity

https://brain-breaks.com/ Brain Breaks® is a dynamic online platform designed for teachers to support Whole School, Whole Community, Whole Child (WCWCC) and the United Nation's Sustainable Development Goals (SDGs). Great for before school, during school, and after school hours, these 3-5 minute web-based games, videos, and resource links provide focused educational "shorts" to teach, raise awareness, and inspire kids to take action in creating a better world for themselves and others.

https://www.healthiergeneration.org/ Working with schools, youth-serving organizations, and businesses, we're building healthier communities and empowering kids to develop lifelong healthy habits.

https://www.fueluptoplay60.com/ Fuel Up to Play 60, the leading in-school health and wellness program empowers students and educators to work together to build healthier schools and create healthy, high achieving students. The program offers a variety of opportunities for adults, students and schools: from in-school wellness initiatives to funding opportunities, there is something for everyone!

New Mexico Health Education Content Standards <u>Kindergarten - 4th Grade</u>, <u>Grades 5 - 8</u>, and <u>Grades 9 - 12</u>. <u>Health Standards Supplemental Guide</u> This Resource Guide is intended to provide health education teachers and other health advocates with national, state, and local resources that may enhance their delivery of health education lessons aligned to the New Mexico Health Education Content Standards with Benchmarks and Performance Standards.

Health Education	https://www.cdc.gov/healthyschools/sher/standards/index.htm The National Health Education Standards (NHES) were developed to establish, promote, and support health-enhancing behaviors for students in all grade levels—from pre-Kindergarten through grade 12. The NHES provide a framework for teachers, administrators, and policy makers in designing or selecting curricula, allocating instructional resources, and assessing student achievement and progress. Importantly, the standards provide students, families and communities with concrete expectations for health education.	
	https://www.cdc.gov/healthyschools/sher/characteristics/index.htm Center for Disease Control and Prevention Characteristics of an Effective Health Education Curriculum and Health Education Curriculum and Analysis Tool (HECAT)	
	https://snapedtoolkit.org/interventions/programs/coordinated-approach-to-child-health-catch/ The Coordinated Approach to Child Health (CATCH) is a PSE change and direct education intervention aiming to prevent childhood obesity in school-age children. The two main behavioral targets are helping children identify and choose healthy foods and increasing moderate-to-vigorous physical activity (MVPA). CATCH's training and curriculum materials provide the information and resources teachers need to implement strategies to improve child health.	
	https://advocatesforyouth.org/media/future-of-sex-education-national-sex-education-standards-second-edition/ The National Sex Education Standards (NSES) outline the foundational knowledge and skills students need to navigate sexual development and grow into sexually healthy adults. The updated NSES reflect advancements in research regarding sexual orientation, gender identity, social, racial, and reproductive justice, and the long-term consequences of stigma and discrimination. Other additions include advances in medical technology, the emergence of digital technologies, and the growing impact of social and sexually explicit media on relationships.	
	http://www.ashaweb.org/ The mission of the American School Health Association (ASHA) is to transform all schools into places where every student learns and thrives. ASHA envisions healthy students who learn and achieve in safe and healthy environments nurtured by caring adults functioning within coordinated school and community support systems.	
	http://www.projectheartstartnm.org/training-programs/ Project Heart Start provides free training for school nurses, health teachers, or other designated staff to learn how to teach the program using Project Heart Start resources. The program is a self-sustaining, no cost way to help all schools in New Mexico teach students the four lifesaving skills required before graduation.	
	https://cpr.heart.org/en/cpr-courses-and-kits/hands-only-cpr Hands on Only CPR - Access additional resources for Hands-Only CPR, including the study behind the training, videos, printable resources, social media assets, and more.	
	https://www.shapeamerica.org/ SHAPE America envisions a nation where all children are prepared to lead healthy, physically active lives. The site offers resources, for general education and adaptive and modified lessons, online professional development, grants, events, and conferences for physical and health educators.	
Physical Education	https://www.nfhsnetwork.com/associations/nmaa The New Mexico Athletics Association was formed in 1921 as a private/non-profit organization whose principle purpose is the regulation, direction, administration and supervision of interscholastic activities in the State of New Mexico.	
	https://schoolspringboard.org/ Springboard to Active Schools: When it comes to promoting physical education and physical activity in schools, we recognize that some of you may feel like your state is bouncing in place, while others have been doing flips and tricks for years. No matter where you are, the Springboard to Active Schools Team aims to launch you higher and further in your pursuit of active schools. Training events and resources.	
	https://www.pecentral.org/adapted/adapted/whatis.html Adapted physical education (APE) is physical education that may be adapted or modified to address the individualized needs of children and youth who have gross motor developmental delays. This service should include the following: assessment and instruction, accurate assessment data, Individualized Education Program (IEP) goals and objectives/benchmarks, and instruction in the Least Restricted Environment (LRE).	
	https://webnew.ped.state.nm.us/bureaus/safe-healthy-schools/athletic-equity-act/ In compliance with School Athletics Equity Act, each public school with athletics for grades 7-12 is required to collect and submit prior year data on team enrollment, information on coaches, and income and expenditures among others to PED. The PED prepares and submits a report to the Governor's office and the New Mexico Legislative Education Study Committee (LESC) identifying those schools that submitted the required data. This Act is inclusive of the requirement for schools to submit an Assurance of Compliance with Title IX through the WebEPPS system.	

https://www.cdc.gov/healthyschools/pecat/index.htm The Physical Education Curriculum Analysis Tool (PECAT) pdf icon[PDF – 6 MB] is a self-assessment and planning guide developed by CDC. The PECAT is designed to help school districts and schools conduct clear, complete, and consistent analyses of physical education curricula based upon national physical education standards. https://www.pyfp.org/ The Presidential Youth Fitness Program helps schools achieve excellence in physical education through quality fitness education and assessment practices by providing tools to: teach fitness concepts, assess fitness and understand results, plan for improvement or maintenance of fitness levels, and empower students to be fit and active for life. https://casel.org/ CASEL is transforming American education through social and emotional learning. The Collaborative for Academic, Social, and Emotional Learning (CASEL) defined SEL more than two decades ago. Today, we collaborate with leading experts and support districts, schools, and states nationwide to drive research, guide practice, and inform policy. This site houses supporting research, practices and professional development. https://nmhealth.org/about/phd/pchb/osah/ The Office of School and Adolescent Health (OSAH) works to improve student and adolescent health through integrated school-based or school-linked health services. https://www.nmasbhc.org/ The New Mexico Alliance for School-Based Health Care represents school-based health centers in New Mexico and collaborates with other partners to promote, facilitate, and advocate for comprehensive, culturally competent health care, including health education, in schools. https://www.schoolclimate.org/services/measuring-school-climate-csci The Comprehensive School Climate Inventory (CSCI) is a nationally recognized school climate survey that provides an in-depth profile of your school community's particular strengths, as well as areas for improvement. With the CSCI, you can quickly and accurately assess student, parent/ guardian, and school personnel perceptions in order to get the data that you need to make informed decisions for lasting improvement. https://safesupportivelearning.ed.gov/school-climate-improvement A positive school climate is critically related to school success. For example, it can improve attendance, achievement, and retention and even rates of graduation, according to research. School climate has many aspects. Defining a framework for understanding school climate can help educators identify key areas to focus on to create safe and supportive climates in their schools. http://youthrisk.org/ The New Mexico Youth Risk and Resiliency Survey (YRRS) is a tool to assess the health risk behaviors and resiliency (protective) factors of New Social and Mexico high school and middle school students. The YRRS is part of the national CDC Youth Risk Behavior Surveillance System (YRBSS). The survey results have widespread benefits for New Mexico at the state, county, and school district levels. Topic areas for the YRRS include risk behaviors related to alcohol and drug use, **Emotional** unintentional injury, violence, suicidal ideation and attempts, tobacco use, sexual activity, physical activity, and nutrition; resiliency (protective) factors such as **Well-Being** relationships in the family, school, community, and with peers; and health status issues such as body weight and asthma. https://www.nimh.nih.gov/index.shtml National Institute of Mental Health: Transforming the understanding and treatment of mental illnesses. https://www.samhsa.gov/ The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities. https://www.mhanational.org/ Mental Health America: When we think about cancer, heart disease, or diabetes, we don't wait years to treat them. We start before Stage4--we begin with prevention. So why don't we do the same for individuals who are dealing with mental health concerns? We believe that mental health conditions should be treated long before they reach the most critical points in the disease process, and we're committed to addressing mental health B4Stage4. https://swrtc.nmsu.edu/educators/ Recognizing and Child Abuse and Neglect e-learning opportunity through the New Mexico State University. https://webnew.ped.state.nm.us/wp-content/uploads/2018/01/Individualized-Health-Care-Plan.pdf A 2015 guidance memo that defines the Individualized Healthcare Plan, identifies components, addresses the IHP with reference to the Individualized Education Program (IEP), and guides the role of the school nurse with respect to formation of the plan and continuity and consistency of care. https://webnew.ped.state.nm.us/bureaus/safe-healthy-schools/section-504-resources/ Section 504 is federal civil rights law under the Rehabilitation Act of 1973. The U.S. Department of Education's Office for Civil Rights (OCR) administers Section 504—not the State. Section 504 is the other service option available to students with disabilities, but who are not eligible and/or already receiving special education services under the eligibility requirements of the IDEA (Tier 3). https://www.cdc.gov/hiv/default.html At this CDC site, learn basic information about HIV, access clinical tools and guidelines, continuing education and patient

materials. Also, explore the CDC's public health partner resources on HIV testing and prevention.

https://aidsinfo.nih.gov/understanding-hiv-aids/fact-sheets US Department of Health and Human Services offers information on HIV/AIDS treatment, prevention and research. https://www2.ed.gov/policy/elsec/leg/esea02/pg116.html McKinney-Vento Laws and Guidance/Elementary and Secondary Education from the U.S Department of Education. https://webnew.ped.state.nm.us/bureaus/student-success-wellness/mckinney-vento/ New Mexico Public Education Department resources regarding definitions, Other Wellness Homeless Liaisons, federal resources and New Mexico laws and resources. Policy https://nmhealth.org/about/phd/pchb/osah/shm/ School Health Manual website at the New Mexico Department of Health is a guidance document to be used by New Mexico schools in supporting a coordinated school health practice and program. It provides evidence-based guidelines, recommendations and information developed by **Components** the New Mexico Department of Health, Office of School and Adolescent Health (OSAH), in conjunction with other partners committed to New Mexico School Health, https://www.nmlions.org/projects Lions International projects include New Mexico Lions Operations KidSight to establish and maintain a sustainable program that will provide annual eye screenings and follow-up eye exams and treatment (if needed) for all young children ages 3 to 7 years in New Mexico. If the family of a referred youth does not have the financial wherewithal to pay for the eye exam and treatment or if there is not an eye professional in the child's community that takes Medicaid, New Mexico Lions Operation KidSight, Inc., will assist in providing an eye exam and glasses voucher to do so. https://www.hhs.gov/civil-rights/for-individuals/special-topics/hiv/index.html Health and Human Services information on protecting the civil rights and health information privacy rights of people living with HIV/AIDS. https://www.dol.gov/general/topic/disability/ada U.S. Department of Labor site offers definitions, information and resources regarding American with Disabilities Act. School Employee Wellness A Guide for Protecting the Assets of Our Nation's Schools A publication developed by the Division of School and Adolescent Health at the CDC https://thrivingschools.kaiserpermanente.org/school-employees/ Kaiser Permanente: Thriving Schools believes that school employee well-being is an essential component of helping schools to be the healthiest they can be. School employee well-being means support for the physical, social, emotional, and professional wellbeing of all school employees, teachers, administrators, and classified staff. Topics include Healthy Eating, Physical Activity, Social and Emotional Well-being, Staff breakroom makeovers. https://www.shapeamerica.org/publications/resources/teachingtools/teachertoolbox/school-based-employee-wellness.aspx?hkey=3d42d2aa-79be-490f-9001-7c158384fbca What is a school-based employee wellness program? A comprehensive set of programs, policies, benefits, and environmental supports that address **Staff Wellness** various risk factors, including, but not limited to: Lack of physical activity, unhealthy dietary habits, stress management, and tobacco use (CDC, 2015). https://www.healthiergeneration.org/take-action/schools/wellness-topics/employee-wellness Alliance for a Healthier Generation believes that healthy employees are more productive, have more energy, are better able to manage stress, and are more likely to model healthy behaviors. By prioritizing employee wellness, schools can empower staff to feel their best while further supporting students' well-being. This site helps assess your program, make wellness a priority and plan for success. Healthy School, Healthy Staff, Healthy Students A Guide to Improving School Employee Wellness by the National Disease Association Chronic Disease Directors https://www.nationalwellness.org The National Wellness Institute (NWI) is the leader in providing professional development and engagement opportunities that support individuals from a variety of disciplines in promoting whole-person wellness.

The Wellness Policy Guidance was produced in collaboration with the New Mexico Public Education Department (NMPED) Student Success and Wellness Bureau, the New Mexico Department of Health (NMDOH) Obesity, Nutrition, and Physical Activity Program, SHAPE NM, the Undergraduate and Graduate Programs for Physical Education and Teacher Education in the Department of Health, Exercise and Sport Science at the University of New Mexico, and the NMDOH Office of School and Adolescent Health.