

Logan Municipal Schools Wellness Policy

(Revised June 2017)

Statement

The Logan Municipal Schools Board of Education (BOE) is committed to providing:

1. A school environment that establishes a coordinated approach to student and staff wellness, and
2. A learning environment that fosters the development and practice of lifelong wellness behaviors that support student achievement.

Therefore, the Logan Municipal Schools BOE will follow and meet all requirements set forth by the Public Education Department (PED) in NMAC 6.12.6.8. The policies outlined within this document are intended to create a school environment that protects and promotes the health of our students.

A coordinated school health approach means building a framework for linking health and education, and establishing and maintaining health and successful lifestyles in our students.

The components of a coordinated school health program are:

1. Family, school, and community involvement
2. Health education
3. Health services
4. Healthy and safe environment
5. Nutrition
6. Physical activity
7. Physical education
8. Social and emotional well-being
9. Staff wellness

Preamble

Logan Municipal Schools (hereto referred to as the District) is committed to the optimal development of every student. The District believes that for students to have the opportunity to achieve personal, academic, developmental, and social success, we need to create positive, safe, and health-promoting learning environments at every level, in every setting, throughout the school year.

Research shows that two components, good nutrition, and physical activity before, during, and after the school day, are strongly correlated with positive student outcomes. For example, student participation in the U.S. Department of Agriculture's (USDA) School Breakfast

Program is associated with higher grades and standardized test scores, lower absenteeism, and better performance on cognitive tasks. Conversely, less-than adequate consumption of specific foods including fruits, vegetables, and dairy products, is associated with lower grades among students.

In addition, students who are physically active through active transport to and from school, recess, physical activity breaks, high-quality physical education, and extracurricular activities – do better academically.

This policy outlines the District’s approach to ensuring environments and opportunities for all students to practice healthy eating and physical activity behaviors throughout the school day while minimizing commercial distractions. Specifically, this policy establishes goals and procedures to ensure that:

- Students in the District have access to healthy foods throughout the school day—both through reimbursable school meals and other foods available throughout the school campus (See [6.12.5 Competitive Foods Requirements](#) per terms defined by federal laws and regulations, USDA competitive foods rules at 7 CFR 210.11 and 7 CFR 210.11a)—providing that all foods sold in schools and smart snacks provisions of the Healthy, Hunger Free Kids Act of 2010, the Richard B. Russell National School Lunch Act and the Child Nutrition Act of 1966 are incorporated for purposes of these rules.
- Students receive quality nutrition education that helps them to develop lifelong healthy eating behaviors;
- Students have opportunities to be physically active before, during, and after school;
- Schools engage in nutrition and physical activity promotion and other activities that promote student wellness;
- School staff are encouraged and supported to practice healthy nutrition and physical activity behaviors in and out of school;
- The community is engaged in supporting the work of the District in creating continuity between school and other settings for students and staff to practice lifelong healthy habits; and
- The District establishes and maintains an infrastructure for management, oversight, implementation, communication about, and monitoring of the policy and its established goals and objectives.

****In consideration of requirements governing possible food allergies in schools, children with food allergies may qualify for a Section 504 plan through the individualized education program's (IEP) individualized health plan (IHP). Schools are to follow these guidelines to ensure protection of students against allergic reaction to foods:**

- Ensure that a copy of the student's current IHP is attached to the student's current IEP;
- Follow guidance from Section 504 of the 1973 Rehabilitation Act in regards to persons with disabilities to include substantial limitations for an individual based on his or her food allergies

School District Wellness Policy Family, School & Community Involvement

Definition

Family, school and community involvement means an integrated family, school and community approach for enhancing the health and well-being of students by establishing a district school health advisory council (SHAC) that is responsible for making recommendations to the local school board regarding the development or revision, implementation and evaluation of the wellness policy.

The family, school and community involvement component promotes long-term effective partnerships between families, schools, and communities in the planning and implementation of health promotion projects and events, both within the school and throughout the community. The partnership can encourage and sustain environmental changes that support healthy lifestyles for children and their families. All staff, students, and community members will be allowed to participate.

Logan Municipal School Board shall maintain a district school health advisory council that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), school staff including representation from school safety committees, student(s) and community member(s).

The school health advisory council shall have the responsibility to make recommendations to the Board in the development or revision, implementation, and evaluation of the school district wellness policy.

The school health advisory council shall meet for this purpose a minimum of two times annually.

Wellness Policy Requirement

Each local board of education shall establish a district SHAC that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), and school staff, and student, and community members.

The SHAC will update or modify the wellness policy based on the results of the annual progress reports and triennial assessments, and/or as District priorities change; community needs change; wellness goals are met; new health science information, and technology emerges; and new Federal or state guidance or standards are issued.

Goal

The goal of family, school and community involvement within a coordinated school health approach is to create a total 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.

School Health Advisory Council Committee Role & Membership

The District will convene a representative district health advisory council (hereto referred to as the SHAC or work within an existing school health committee) that meets at least two times per year to establish goals and oversee school health and safety policies and programs, including development, implementation, and periodic review and update of this district-level wellness policy (heretofore referred as “wellness policy”).

The SHAC membership will represent all school levels (elementary and secondary schools) and include (to the extent possible), but not be limited to: parents and caregivers; students; representatives of the school nutrition program (ex., school nutrition director or school food authority); physical education teachers; health education teachers; special education teachers; classroom teachers; school health professionals (ex., health education teachers, school health services staff [i.e., nurses, physicians, dentists, health educators, and other allied health personnel who provide school health services], and mental health and social services staff [i.e., school counselors, psychologists, social workers, or psychiatrists]); school administrators (ex., superintendent, principal, assistant principal), school board members; health professionals (ex., dietitians, doctors, nurses, dentists); and the general public. To the extent possible, the SHAC will include representatives from each school building and reflect the diversity of the community.

Leadership

The Superintendent or designee(s) will convene the SHAC and facilitate development of and updates to the wellness policy, and will ensure each school's compliance with the policy. The name(s), title(s)/role(s), and contact information (email address is sufficient) of this/these individual(s) is listed in Appendix A. Each school will designate a school wellness policy lead, who will facilitate compliance with the policy. Administration will have the role of enforcing compliance with the Wellness Policy.

Wellness Policy Implementation, Monitoring, Accountability, & Community Engagement Implementation Plan

The District will develop and maintain a plan for implementation to manage and coordinate the execution of this wellness policy. 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 (per [USDA Food & Beverage Marketing and Advertising policies](#)), nutrition promotion and education, physical activity, physical education, and other school-based activities that promote student wellness. It is recommended that the school use the [Healthy Schools Program online tools](#) to complete a school level assessment based on the Centers for Disease

Control and Prevention's School Health Index, create an action plan that fosters implementation, and generate an annual progress report.

****This wellness policy and the progress reports can be found at: <http://www.loganschool.net/>

Recordkeeping

The District will retain records to document compliance with the requirements of the wellness policy at Logan Schools Administrative Offices and the Nurse's Office. Documentation maintained in this location will include but will not be limited to: **(JL-RA paragraph 1)**

- The written wellness policy;
- Documentation demonstrating compliance with community involvement requirements, including: (1) efforts to actively solicit SHAC membership from the required stakeholder groups; and (2) the participants' involvement in the development, implementation, and periodic review and update of the wellness policy;
- Documentation of annual policy progress reports for each school under its jurisdiction;
- Documentation of the triennial assessment of the policy for each school under its jurisdiction; and
- Documentation demonstrating compliance with public notification requirements, including: (1) methods by which the wellness policy, annual progress reports, and triennial assessments are made available to the public; and (2) efforts to actively notify families about the availability of wellness policy.

Annual Progress Reports

(See Policy JL-RA Paragraph 1 for current compliance.)

The District will compile and publish an annual report to share basic information about the wellness policy and report on the progress of the schools within the district in meeting wellness goals. This annual report will be published around the same time each May, and will include information from each school within the District. This report will include, but is not limited to:

- The website address for the wellness policy and/or how the public can receive/access a copy of the wellness policy;

- A description of each school's progress in meeting the wellness policy goals;
- A summary of each school's events or activities related to wellness policy implementation;
- The name, position title, and contact information of the designated District policy leader(s) identified in Section I; and
- Information on how individuals and the public can get involved with the SHAC.

**The annual report will be available in the written wellness policy and on

<http://www.loganschool.net/>. The District will actively notify households/families of the availability of the annual report.

The SHAC will establish and monitor goals and objectives for the District's schools, specific and appropriate for each instructional unit (elementary or secondary OR elementary, middle, and high school, as appropriate), for each of the content-specific components listed in the sections of this policy.

Triennial Progress Assessments

At least once every three years, the District will evaluate compliance with the wellness policy per the CSHWB nutrition administrative review process to assess the implementation of the policy and include:

- The extent to which schools under the jurisdiction of the District are in compliance with the wellness policy; and
- A description of the progress made in attaining the goals of the District's wellness policy. The position/person responsible for managing the triennial assessment and contact information is Jenna Gorman, RN, School Nurse, jgorman@loganschool.net

The SHAC, in collaboration with individual schools, will monitor schools' compliance with this wellness policy.

The District will actively notify households/families of the availability of the triennial progress report.

Revisions and Updating the Policy

The SHAC will update or modify the wellness policy based on the results of the annual progress reports and triennial assessments, and/or as: District priorities change; community needs change; wellness goals are met; new health science, information, and technology emerges; and new Federal or state guidance or standards are issued. The wellness policy will be assessed and updated as indicated at least every three years, following the triennial assessment.

Community Involvement, Outreach, & Communications

The District is committed to being responsive to community input, which begins with awareness of the wellness policy. The District will actively communicate ways in which representatives of SHAC and others can participate in the development, implementation, and periodic review and update of the wellness policy through a variety of means appropriate for that district. The District will also inform parents of the improvements that have been made to school meals and compliance with school meal standards, availability of child nutrition programs and how to apply, and a description of and compliance with Smart Snacks in School nutrition standards. The District will use electronic mechanisms, such as email or displaying notices on the district's website, as well as non-electronic mechanisms, such as newsletters, presentations to parents, or sending information home to parents, to ensure that all families are actively notified of the content of, implementation of, and updates to the wellness policy, as well as how to get involved and support the policy. The District will ensure that communications are culturally and linguistically appropriate to the community and accomplished through means similar to other ways that the district and individual schools are communicating other important school information with parents.

The District will actively notify the public about the content of or any updates to the wellness policy annually, at a minimum. The District will also use these mechanisms to inform the community about the availability of the annual and triennial reports.

School District Wellness

Health Education

Definition:

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 [6.29.1 NMAC Standards for Excellence](#).

Requirement:

In the 2010 Regular Legislative session, [Section 22-13-1.1\(J\) NMSA 1978](#) was amended to include health education as a requirement for graduation. Specifically:

Beginning with students entering the eighth grade in the 2012-2013 school year, a course in health education is required prior to graduation. Health education may be required in either middle school or high school, as determined by the school district. Each school district shall submit to the department by the beginning of the 2011-2012 school year a health education implementation plan for the 2012-2013 and subsequent school years, including in which grade health education will be required and how the course aligns with the department content and performance standards.

I. PED Required Activities: include the Public Education Department (PED) requirements outlined in the School District Wellness Policy rule [6.12.6 NMAC](#). The PED required activities are expected to be included in every wellness policy and submitted to the PED.

A. The wellness policy shall include a planned, sequential, K-12 health education curriculum that addresses the physical, mental, emotional and social dimensions of health. Health education will be incorporated into all elementary classes through collaboration between the classroom teacher and the physical education teacher. A more formal Health course will be taken by all 9th grade students to ensure they meet the graduation requirements in both state statute and local board policy. This course will be taught by a certified health educator.

B. The health education curriculum will be aligned to the health education content standards with benchmarks and performance standards as set forth in [NM PED Standards and Benchmarks](#).

C. All schools will provide activities in comprehensive health education that align with the New Mexico Health Education Content Standards with Benchmarks and Performance Standards.

D. All school districts/charter schools shall implement an “opt-out” policy that will ensure that parents have the ability to request their child to be exempted from the health education curriculum components that focus on the sexuality performance standards. The policy includes but is not limited to the process for parents to request an exemption of health education curriculum components that address the sexuality performance standards and how alternative lessons are established for the exempted parts of the curriculum.

E. All school district/charter schools shall provide instruction about HIV and related issues found in the curriculum of the required health education content area to elementary, middle/junior high, and senior high school grades as set forth in [6.12.2.10 NMAC](#) .

F. [Section 22-13-1 NMSA 1978](#) , [Section H](#) was amended in 2016 to include a require lifesaving skills training for hands-on (compression only) psychomotor skills cardiopulmonary resuscitation training including training to recognize the signs of a heart attack, training on the use of an automated external defibrillator, and training on how to perform the Heimlich maneuver for choking victims. Section K (2) of this same rule further states that this training must be included as part of the Health Education course that is required by all students to graduate.

II. Other Activities: Includes other activities each SHAC can create in addition to the requirements, specific to the needs of the local school district/charter school.

- A. Health education lessons will be taught in a culturally sensitive and appropriate manner.
- B. Health education lessons use a variety of instructional strategies (e.g., role play, projects, media literacy, etc.).
- C. Health education is integrated into the core curriculum.
- D. Teachers, staff and administrators are made aware of coordinated school health professional development opportunities (e.g., School Health Education Institute, Head to Toe, New Mexico Activities Association, etc.)
- E. The school nurse will be available to assist in health education needs as needed.
- F. Hygiene and puberty topics will be discussed in class once a year to applicable age groups. Parent permission and opt-out opportunities will be in place before each class.

Goal:

The goal of a comprehensive health education curriculum within a coordinated school health approach is to acquire life skills to help attain personal, family, community, consumer and environmental health.

Life Skills

Traditionally, health education emphasized the learning and comprehension of health facts. The health education curriculum was organized around health topic areas to be taught as multiple independent instructional units, designed to increase knowledge. The emergence of life skills education into health education calls for the emphasis to be placed on students being able to use essential knowledge and skills required to adopt, practice, and maintain healthy behaviors. Health education as life skills education requires a focus on prevention of risky behaviors including:

- use of tobacco, alcohol and other drugs
- poor dietary patterns
- sedentary lifestyles
- behaviors that result in sexually transmitted diseases/infections and unintended pregnancy

- behaviors that result in unintentional injuries
- violent and other anti-social behaviors

A life skills educational approach allows for health education to be taught as planned, sequential K-12 instructional units, designed to develop life skills, based on essential knowledge.

These skills are:

- communication
- non-violent conflict resolution
- decision-making
- goal setting
- stress management
- resisting negative social pressure
- negotiation skills
- establishing and maintaining values

NEW MEXICO HEALTH EDUCATION STANDARDS

1. Students will comprehend concepts related to health promotion and disease prevention.
2. Students will demonstrate the ability to access valid health information and health-promoting products and services.
3. Students will demonstrate the ability to practice health-enhancing behaviors and Reduce health risks.
4. Students will analyze the influence of culture, media, technology, and other factors on health.
5. Students will demonstrate the ability to use interpersonal communication skills to enhance health.
6. Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
7. Students will demonstrate the ability to advocate for personal, family, peer, and community health.

From the Health Education & Life Skills component of the *Healthier Schools NM* instructional program

Resources:

1. [National Health Education Standards](#)
2. [CDC: Whole School, Whole Community, Whole Child: A Collaborative Approach to Learning and Health](#)
3. [Coordinated Approach to Child's Health \(CATCH\)](#)
4. [Sexual Risk Behavior Guidelines & Resources: CDC](#)
5. [National Sexuality Education Standards and Tools](#)
6. [American School Health Association](#)
7. [6.12.4 NMAC: Tobacco, Alcohol and Drug Free Schools](#)
8. [Project Heart Start](#)
9. [CSHWB Tools for Schools – Lifesaving Skills/CPR Resource](#)

**School District Wellness Policy
Nutrition & Nutrition Education**

Definitions:

Nutrition means programs that provide access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students. Nutrition Education aims to teach, encourage and support healthy eating. Nutrition Education and healthy eating inspire proper physical growth, physical activity, brain development, learning ability, emotional balance, a sense of well-being, obesity prevention and disease resistance.

- **School day** is defined as midnight the night before to 30 minutes after the end of the instructional day
- **School campus** is defined as areas that are owned or leased by the school and used at any time for school related activities that are accessible to students

Requirement:

The wellness policy shall include, at a minimum: goals for nutrition education; other school based activities to promote student wellness; nutrition guidelines for all foods available on school campus; and goals for nutrition promotion.

New Mexico has adopted the federal guidelines established for all foods available on the school campus, including all foods sold to students. Guidelines must minimally meet the competitive food standards as stated in [7 CFR 210.11](#) and [6.12.5.8 NMAC](#).

Guidelines for fundraisers that do not meet the competitive food standards 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 as stated in [6.12.5.8 NMAC](#).

Goal:

The goal of nutrition is to promote its role in academic performance and quality of life, and to ensure the adoption of school policies, which provide adequate nutrition opportunities.

I. PED Required Activities: Includes the Public Education Department (PED) requirements outlined in the School District Wellness Policy rule ([6.12.6 NMAC](#)). The PED required activities are expected to be included in every wellness policy submitted to the PED. 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 [7 CFR 210.11](#) and [6.12.5.8 NMAC](#).

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.

II. Other Activities: Includes other activities that each SHAC can create in addition to the requirements specific to the needs of the local school district/charter school.

- A. Ensure that students receive nutrition messages that are consistent throughout schools, classrooms, cafeterias, homes, community and media.
- B. All schools in the district will support the school breakfast program.
- C. All schools will create a collaborative plan between the cafeteria and classroom to promote healthy selections and nutrition education.
- D. All schools will consider scheduling recess before lunch so that children are less distracted and ready to eat a healthy diet.

School District Wellness

Nutrition

School Meals

Our 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 programs aim 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.

All schools within the District participate in USDA child nutrition programs, including the National School Lunch Program (NSLP), the School Breakfast Program (SBP), and Fresh Fruit & Vegetable Program (FFVP). The District also operates additional nutrition-related programs and activities including. All schools within the District are committed to offering school meals through the NSLP and SBP programs, and other applicable Federal child nutrition programs, that:

- Are accessible to all students;
- Are appealing and attractive to children;
- Are served in clean and pleasant settings;

- Meet or exceed current nutrition requirements established by local, state, and federal statutes and regulations. (The District offers reimbursable school meals that meet [USDA nutrition standards](#).) (Further guidelines on food handling, food service and food processing can be located in [7.6.2 NMAC](#).)
- Promote healthy food and beverage choices using at least ten of the following Smarter Lunchroom techniques:
 - Whole fruit options are displayed in attractive bowls or baskets (instead of chafing dishes or hotel pans).
 - Sliced or cut fruit is available daily.
 - Daily fruit options are displayed in a location in the line of sight and reach of students.
 - All available vegetable options have been given creative or descriptive names.
 - All staff members, especially those serving, have been trained to politely prompt students to select and consume the daily vegetable options with their meal.
 - White milk is placed in front of other beverages in all coolers; flavored milk is allowed if non-fat.
 - Alternative entrée options (e.g., salad bar, yogurt parfaits, etc.) are highlighted on posters or signs within all service and dining areas.
 - Daily announcements are used to promote and market menu options.
 - The report on the most recent food safety inspection must be posted in a publically visible place in the school and copies of the report provided to any member of the public upon request.

Staff Qualifications & Professional Development

All school nutrition program directors, managers, and staff will meet or exceed hiring and annual continuing education/training requirements in the [USDA professional standards for child nutrition professionals](#). These school nutrition personnel will refer to [USDA's Professional Standards for School Nutrition Standards website](#) to search for training that meets their learning needs.

Water

To promote hydration, free, safe, unflavored drinking water will be available to all students throughout the school day (*defined as midnight the night before to 30 minutes after the end of the instructional day) and throughout every school campus (**defined as areas that are owned or leased by the school and used at any time for school related activities that are accessible to students). The District will make drinking water available where school meals are served during mealtimes.

Competitive Foods & Beverages

The District is committed to ensuring that all foods and beverages available to students on the school campus during the school day support healthy eating. The foods and beverages sold and served outside of the school meal programs (i.e., “competitive” foods and beverages) will meet the USDA Smart Snacks in School nutrition standards, at a minimum. Smart Snacks aim to improve student health and well-being, increase consumption of healthful foods during the school day, and create an environment that reinforces the development of healthy eating habits.

To support healthy food choices and improve student health and well-being, all foods and beverages outside the reimbursable school meal programs that are sold to students on the school campus during the school day will meet or exceed the USDA Smart Snacks nutrition standards. These standards will apply in all locations and through all services where foods and beverages are sold, which may include, but are not limited to, a la carte options in cafeterias, vending machines, school stores, and snack or food carts.

Celebrations & Rewards

All foods offered on the school campus will meet or exceed the USDA Smart Snacks in School nutrition standards including:

1. Celebrations and parties; the district will provide a list of healthy party ideas to parents and teachers, including non-food celebration ideas. Healthy party ideas are available from the [Alliance for a Healthier Generation](#) and from the [USDA](#) .
2. Classroom snacks brought by parents; the District will provide to parents a [list of foods and beverages that meet Smart Snacks](#) nutrition standards.

3. Rewards and incentives; the District will provide teachers (including special education teachers and related service personnel) and other relevant school staff a [list of alternative ways to reward children](#) . Foods and beverages will not be used as a reward, or withheld as punishment for any reason, such as for performance or behavior.

4. Withholding food, water or bathroom privileges from a student for any reason is unlawful. (Ref: [6.11.2 NMAC](#).)

Fundraising

Foods and beverages that meet or exceed the USDA Smart Snacks in Schools nutrition standards may be sold through fundraisers on the school campus during the school day. The District will make available to parents and teachers a list of healthy fundraising ideas.

Nutrition Promotion

Nutrition promotion and education positively influence lifelong eating behaviors by using evidence-based techniques and nutrition messages, and by creating food environments that encourage healthy nutrition choices and encourage participation in school meal programs. Students and staff will receive consistent nutrition messages throughout schools, classrooms, gymnasiums, and cafeterias. Nutrition promotion also includes marketing and advertising nutritious foods and beverages to students and is most effective when implemented consistently through a comprehensive and multi-channel approach by school staff and teachers, parents, students, and the community.

The District will promote healthy food and beverage choices for all students throughout the school campus, as well as encourage participation in school meal programs. This promotion will occur through at least:

- Implementing evidence-based healthy food promotion techniques through the school meal programs, using [Smarter Lunchroom techniques](#); and
- Promoting foods and beverages that meet the USDA Smart Snacks in School nutrition standards. Additional possible promotion techniques that the District and individual schools may use are available at www.healthiergeneration.org/smartsnacks.

Nutrition Education

The District aims to teach, model, encourage, and support healthy eating by students. Schools will provide nutrition education and engage in nutrition promotion that:

- Are designed to provide students with the knowledge and skills necessary to promote and protect their health;
- Are part of not only health education classes, but also integrated into other classroom instruction through subjects such as math, science, language arts, social sciences, and elective subjects;
- Include enjoyable, developmentally-appropriate, culturally-relevant, and participatory activities, such as cooking demonstrations or lessons, promotions, taste testing, farm visits, and school gardens;
- Promote fruits, vegetables, whole-grain products, low-fat and fat-free dairy products, and healthy food preparation methods;
- Emphasize caloric balance between food intake and energy expenditure (promote physical activity/exercise);
- Link with school meal programs, cafeteria nutrition promotion activities, school gardens, Farm to School programs, other school foods, and nutrition-related community services;
- Teach media literacy with an emphasis on food and beverage marketing; and
- Include nutrition education training for teachers and other staff.

Essential Healthy Eating Topics in Health Education

The District will include in the health education curriculum the following essential topics on healthy eating:

- The relationship between healthy eating and personal health and disease prevention
- Food guidance from [MyPlate](#)
- Reading and using USDA's food labels
- Eating a variety of foods every day
- Balancing food intake and physical activity
- Eating more fruits, vegetables, and whole grain products
- Choosing foods that are low in fat, saturated fat, and cholesterol and do not contain *trans* fat

- Choosing foods and beverages with little added sugars
- Eating more calcium-rich foods
- Preparing healthy meals and snacks
- Risks of unhealthy weight control practices
- Accepting body size differences
- Food safety
- Importance of water consumption
- Importance of eating breakfast
- Making healthy choices when eating at restaurants
- Eating disorders
- The Dietary Guidelines for Americans
- Reducing sodium intake
- Social influences on healthy eating, including media, family, peers, and culture
- How to find valid information or services related to nutrition and dietary behavior
- How to develop a plan and track progress toward achieving a personal goal to eat healthfully
- Resisting peer pressure related to unhealthy dietary behavior
- Influencing, supporting, or advocating for others' healthy dietary behavior

[USDA's Team Nutrition](#) provides free nutrition education and promotion materials, including standards-based nutrition education curricula and lesson plans, posters, interactive games, menu graphics, and more.

Food & Beverage Marketing in Schools

The District is committed to providing a school environment that ensures opportunities for all students to practice healthy eating and physical activity behaviors throughout the school day while minimizing commercial distractions. The District strives to teach students how to make informed choices about nutrition, health, and physical activity. These efforts will be weakened if students are subjected to advertising on District property that contains messages, inconsistent with the health information the District is imparting through nutrition education and health promotion efforts. It is the intent of the District to protect and promote student's health by

permitting advertising and marketing for only those foods and beverages that are permitted to be sold on the school campus, consistent with the District's wellness policy.

**Any foods and beverages marketed or promoted to students on the school campus during the school day will meet or exceed the USDA Smart Snacks in School nutrition standards.

**Food advertising and marketing is defined as an oral, written, or graphic statement made for the purpose of promoting the sale of a food or beverage product made by the producer, manufacturer, seller, or any other entity with a commercial interest in the product. This term includes, but is not limited to the following:

- Brand names, trademarks, logos or tags, except when placed on a physically present food or beverage product or its container;
- Displays, such as on vending machine exteriors;
- Corporate brand, logo, name, or trademark on school equipment, such as marquees, message boards, scoreboards, or backboards (Note: immediate replacement of these items is not required; however, districts will consider replacing or updating scoreboards or other durable equipment over time, so that decisions about the replacement include compliance with the marketing policy.);
- Corporate brand, logo, name, or trademark on cups used for beverage dispensing, menu boards, coolers, trash cans, and other food service equipment, as well as on posters, book covers, pupil assignment books, or school supplies displayed, distributed, offered, or sold by the District;
- Advertisements in school publications or school mailings; and
- Free product samples, taste tests, or coupons of a product, or free samples displaying advertising of a product.

Other Activities that Promote Student Wellness

The District will integrate wellness activities across the entire school setting, not just in the cafeteria, other food and beverage venues, and physical activity facilities. The District will coordinate and integrate other initiatives related to physical activity, physical education, nutrition, and other wellness components, so all efforts are complementary, not duplicative, and work towards the same set of goals and objectives promoting student wellbeing, optimal development, and strong educational outcomes.

Schools in the District are encouraged to coordinate content across curricular areas that promote student health, such as teaching nutrition concepts in mathematics, with consultation provided by either the school or the District's curriculum experts.

All efforts related to obtaining federal, state, or association recognition or grants/funding opportunities for healthy school environments will be coordinated with and complementary of the wellness policy, including but not limited to ensuring the involvement of the SHAC.

All school-sponsored events will adhere to the wellness policy. All school-sponsored wellness events will include physical activity opportunities.

Community Partnerships

The District will enhance relationships with community partners (i.e. hospitals, universities/colleges, local businesses, etc.) in support of this wellness policy's implementation. Existing and new community partnerships and sponsorships will be evaluated to ensure that they are consistent with the wellness policy and its goals.

Community Health Promotion & Engagement

The District will promote to parents/caregivers, families, and the general community the benefits of and approaches to healthy eating and physical activity throughout the school year. Families will be informed and invited to participate in school-sponsored activities and will receive information about health promotion efforts.

As described in the "Community Involvement, Outreach, and Communications" subsection, the District will use electronic mechanisms (such as email or displaying notices on the district's website), as well as non-electronic mechanisms, (such as newsletters, presentations to parents, or sending information home to parents), to ensure that all families are actively notified of opportunities to participate in school-sponsored activities and receive information about health promotion efforts.

Food Safety Inspections

The District will conduct two annual food safety inspections (FSI) per USDA regulations and state rules. The reports will be posted publicly. Any findings will be addressed within the set time allocated with verifiable proof of completion.

Resources:

1. Nutrition: Competitive Food Sales rule [6.12.5.8 NMAC](#).
2. USDA Team Nutrition for nutrition education materials: <http://www.fns.usda.gov/tn/team-nutrition>
3. Dietary Guidelines for Americans 2015 - 2020: <http://health.gov/dietaryguidelines/2015/>
4. Healthier US School Challenge: Smarter Lunchrooms
<http://www.fns.usda.gov/hussc/healthierus-school-challenge-smarterlunchrooms>
5. USDA Best Practices Share Center: School Nutrition Environment and Wellness Resources - <http://healthymeals.nal.usda.gov/best-practices>
6. USDA Healthier School Day Tools for Schools:
<http://www.fns.usda.gov/healthierschoolday/tools-schools>
7. USDA Guide to Professional Standards for School Nutrition Programs:
<http://www.fns.usda.gov/guide-professional-standards-school-nutrition>

School District Wellness Policy

Physical activity

A [Comprehensive School Physical Activity Program \(CSPAP\)](#) 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. A CSPAP reflects strong coordination and synergy across all of the components: quality physical education as the foundation, physical activity before, during, and after school, staff involvement, and family and community engagement. Students can accumulate the recommended amount of physical activity through the provision of the multi-component CSPAP.

Definition:

Physical activity means body movement of any type which includes recreational, fitness and sport activities.

Note: physical activity is a component of, but is not a substitute for, quality physical education. Physical education is an instructional program taught by a certified physical educator and focuses on developing skills, knowledge, and attitudes necessary to personally decide to participate in a lifetime of healthful physical activity.

Physical education is one source, but should not be the only source of physical activity before, during and/or after school.

Requirement:

The wellness policy shall include guidelines to provide physical activity opportunities to students before, during and/or after school.

Goal:

The goal of physical activity within the coordinated school health approach provides students with increased opportunities to engage in moderate to vigorous physical activity before, during and/or after school.

I. PED required activities: Includes the Public Education Department (PED) 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 health benefits of physical activity that align with the New Mexico health education content standards with benchmarks and performance standards as set forth in 6.29.9NMAC.

II. Other Activities: Includes other activities that each SHAC can create as well as requirements, specific to the needs of the local school district.

- A. Elementary schools in the district will provide daily recess for all students.
- B. All schools in the district prohibit withholding physical activity (e.g., physical education class, recess, etc.) as a means/method of punishment.

- C. All schools in the district will provide physical activity opportunities before and after school (e.g., afterschool programs, intramurals, club activities, interscholastic sports, etc.).
- D. All schools in the district encourage walking, biking and skating as transportation modes to and from school if safe and weather permitting.
- E. All schools in the district will encourage the use of school facilities (Teacher workout room, weight room, etc.) outside of school hours or during school hours if their schedule is allowable and not in use by the athletics program.

Physical Activity

Children and adolescents should participate in 60 minutes of physical activity every day (<http://www.cdc.gov/physicalactivity/basics/children/index.htm>). A substantial percentage of students' physical activity can be provided through a comprehensive, school-based physical activity program (CSPAP) that includes these components: physical education, recess, classroom-based physical activity, walk and bicycle to school, and out-of-school time activities, and the district is committed to providing these opportunities. Schools will ensure that these varied opportunities are in addition to, and not as a substitute for, physical education (addressed in "Physical Education" subsection).

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 in accordance with the Three-Tier Model of positive behavioral intervention per the PED's [Response to Intervention \(RtI\)](#) framework.

The district will provide teachers and other school staff with a [list of ideas](#) for alternative ways to discipline students.

JL-RB states the requirement of not withholding physical activity as it is found in law. See JK-R side heading Permissible Penalties for suggested alternative discipline.

Environmental Design

The District will identify a plan to ensure that its grounds and facilities are safe and that equipment is available to students to be active. The District will conduct scheduled safety checks to include regular inspections of playing fields and playgrounds, using an approved checklist.

Monitoring of building and grounds procedure will also include steps to complete necessary inspections and repairs in a timely manner. This is outlined in detail in the District Safety Plan.

Essential Physical Activity Topics in Health Education

The District will include in the health education curriculum the following essential topics on physical activity:

- The physical, psychological, or social benefits of physical activity
- How physical activity can contribute to a healthy weight
- How physical activity can contribute to the academic learning process
- How an inactive lifestyle contributes to chronic disease
- Health-related fitness, that is: cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition
- Differences between physical activity, exercise, and fitness
- Phases of an exercise session, that is: warm up, workout, and cool down
- Overcoming barriers to physical activity
- Decreasing sedentary activities, such as TV watching and video games
- Opportunities for physical activity in the community
- Preventing injury during physical activity
- Weather-related safety, for example: avoiding heat stroke, hypothermia, and sunburn while being physically active
- How much physical activity is enough, that is: determining frequency, intensity, time, and type of physical activity
- Developing an individualized physical activity and fitness plan
- Monitoring progress toward reaching goals in an individualized physical activity plan
- Dangers of using performance-enhancing drugs, such as steroids
- Social influences on physical activity, including media, family, peers, and culture
- How to find valid information or services related to physical activity and fitness
- How to influence, support, or advocate for others to engage in

Recess (Elementary)

All elementary schools should offer at least **20 minutes of recess** on all or most days, not included as part of the instructional day, during the school year. This policy may be waived on early dismissal or late arrival days.

Outdoor recess will be offered when weather is feasible for outdoor play.

In the event that the school or district must conduct **indoor recess**, teachers and staff will follow the indoor recess guidelines that promote physical activity for students, to the extent practicable.

Recess should never be removed as a form of discipline, such as in the case of incomplete work or steps in the order of consequences for breaking rules. The exception to this would only be when a student is a danger to him/herself or others or is being detained through District-guided procedures of in-school suspension or detention.

Recess will complement, not substitute for, physical education classes. Recess monitors or teachers will encourage students to be active, and will serve as role models by being physically active alongside the students whenever feasible.

Physical Activity Breaks (Elementary & Secondary)

The District recognizes that students are more attentive and ready to learn if provided with periodic breaks when they can be physically active or stretch. Thus, students will be offered **periodic opportunities** to be active or to stretch throughout the day on all or most days during a typical school week. The District recommends teachers provide short (3-5 minute) physical activity breaks to students during and between classroom times. These physical activity breaks will complement, not substitute, for physical education class, recess, and class transition periods. The District will provide resources and links to resources, tools, and technology with ideas for physical activity breaks. Resources and ideas are available through [USDA](#) and the [Alliance for a Healthier Generation](#).

Active Academics

Teachers will incorporate movement and kinesthetic learning approaches into “core” subject instruction when possible (e.g., science, math, language arts, social studies, and others) and do their part to limit sedentary behavior during the school day.

The District will support classroom teachers incorporating physical activity and employing kinesthetic learning approaches into core subjects by providing annual professional development opportunities and resources, including information on leading activities, activity options, as well as making available background material on the connections between learning and movement. (Refer to Neuroscience learning, Brain Activities, Movement Matters, etc.)

Teachers will serve as role models by being physically active alongside the students whenever feasible.

Before & After School Activities

The District offers opportunities for students to participate in physical activity either before and/or after the school day (or both) through a variety of methods. The District will encourage students to be physically active before and after school.

Active Transport

The District will support active transport to and from school, such as walking or biking. The District will encourage this behavior by engaging in *six or more* of the activities below; including but not limited to:

- Designation of safe or preferred routes to school
- Promotional activities such as participation in International Walk to School Week, National Walk and Bike to School Week
- Secure storage facilities for bicycles and helmets (e.g., shed, cage, fenced area)
- Promotion of safe routes program to students, staff, and parents via newsletters, websites, local newspaper
- Crosswalks exist on streets leading to schools
- Documentation of number of children walking and or biking to and from school
- Creation and distribution of maps of school environment (e.g., sidewalks, crosswalks, roads, pathways, bike racks, etc.)

Resources and References:

- 1 . [CDC : Comprehensive School Physical Activity Program](#)
- 2 . [Action for Healthy Kids](#): includes “Tools for Schools” resources.
- 3 . [US Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity](#)

- 4 . [Let's Move! Active Schools](#)
- 5 . [Change Lab Solutions](#)
- 6 . [Presidential Youth Fitness Program](#) - Includes Fitness Program Checklist
- 7 . [USDA Healthy Meals Resource System on Physical Activities](#)
- 8 . [Alliance for a Healthier Generation Physical Activity Resources](#)
- 9 . [American Academy of Pediatrics: The Crucial Role of Recess in School](#)
- 10 . [Environmental Protection Agency](#) Resources for school environmental health program

School District Wellness Policy

Physical Education

Definition:

Physical education (PE) is an academic subject and serves as the foundation of a CSPAP. As such, PE demands the same education rigor as other core subjects. Physical education provides students with a planned, sequential K-12 standards-based program of curricula and instruction, designed to develop motor skills, knowledge and behaviors for active living, physical fitness, sportsmanship, self-efficacy and emotional intelligence.

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. It meets the Content Standards with Benchmarks and Performance Standards as set forth in Section 6.29.6 NMAC . New Mexico

Physical Education Content Standards with Benchmarks and Performance Standards are mandated for students in grades K-12. All instruction must be aligned with 6.29.1 NMAC Primary and Secondary Education Standards for Excellence General Provision. Further reference is available in the NM Content Standards with Benchmarks and Performance Standards .

Note: Physical activity is a component of, but is not a substitute for, quality physical education. Physical education is an instructional program taught by a certified physical educator focused on developing skills, knowledge, and attitudes necessary to personally decide to participate in a lifetime of healthful physical activity.

The New Mexico Legislature passed a law in 2014 that allows “one unit in physical education, as determined by each school district, which may include a physical education

program that meets state content and performance standards or participation in marching band, junior reserve officers' training corps or interscholastic sports sanctioned by the New Mexico activities association” (SB122).

Schools must offer developmentally appropriate physical education. Adapted physical education (APE) is physical education which 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** by qualified personnel professionals who are prepared to gather assessment data and provide physical education instruction for children and youth with disabilities and developmental delays.
- **Accurate assessment data**, including diagnostic and curriculum-based data collected by qualified personnel.
- **Individualized Education Program (IEP) Goals and Objectives / Benchmarks** that are measurable and objective statements written by the physical education instructor. The goals and objectives are reflective of the physical education instructional content and monitored/evaluated according to district policy to ensure that goals and objectives are being met in a timely manner.
- **Instruction in a Least Restricted Environment (LRE)** that adapts or modifies the physical education curriculum and/or instruction to address the individualized abilities of each child.

Adaptations are made to ensure that each student will experience success in a safe environment. Placement is outlined in the IEP and may include one or more of the following options:

- The general physical education setting;
- The general physical education setting with a teaching assistant or peers;
- A separate class setting with peers;
- A separate class setting with assistants; and/or
- A one-to-one setting between students and the instructor.

Requirement:

A planned, sequential, K-12 physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes necessary to personally decide to participate in lifetime healthful physical activity and is aligned to the physical education content standards with benchmarks and performance standards as per 6.29.9 NMAC.

Goal:

To provide all students with daily physical education taught by a certified physical educator who uses appropriate practices for the skills, knowledge, and attitudes needed to be physically fit and active for life. Activities are based on goals and objectives appropriate for all children and are planned according to a curriculum with an obvious scope and sequence that follow [6.29.9 NMAC Physical Education Standards for Excellence](#) .

I. PED required activities: Includes the Public Education Department (PED) requirements that are outlined in the School District Wellness Policy rule ([6.12.6 NMAC](#)).

A. The wellness policy shall include a planned, sequential, K-12 physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes needed to decide to participate in a lifetime of healthful physical activity.

B. The physical education curriculum will be aligned to the Content Standards with Benchmarks and Performance Standards as outlined in the NM Public Education Department Content Standards with Performance Standards and Benchmarks: [K-4](#); [5-8](#); [9-12](#).

National Standards

Standard 1 - The physically literate individual demonstrates competency in a variety of motor skills and movement patterns.

Standard 2 - The physically literate individual applies knowledge of concepts, principles, strategies and tactics related to movement and performance.

Standard 3 - The physically literate individual demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness.

Standard 4 - The physically literate individual exhibits responsible personal and social behavior that respects self and others.

Standard 5 - The physically literate individual recognizes the value of physical activity for health, enjoyment, challenge, self-expression and/or social interaction.

Physical Education

The District will provide students with physical education, using an age-appropriate, sequential physical education curriculum, consistent with national and state standards for physical education. The physical education curriculum will promote the benefits of a physically active lifestyle and will help students develop skills to engage in lifelong healthy habits, as well as to incorporate essential health education concepts.

All students will be provided equal opportunity to participate in physical education classes. The District will make appropriate accommodations to allow for equitable participation for all students and will adapt physical education classes and equipment as necessary.

- All [District] **elementary students** in each grade will receive physical education for at least 60-89 minutes per week throughout the school year.
- All [District] **secondary students** (middle and high school) are required to take the equivalent of one academic year of physical education.

The District physical education program will promote student physical fitness through individualized fitness and activity assessments (via the [Presidential Youth Fitness Program](#) or other appropriate assessment tool) and will use criterion-based reporting for each student.

Resources:

- 1 . [NM Content Standards with Benchmarks and Performance Standards](#)
- 2 . [National Association of Sport and Physical Education](#) – Largest of 5 professional organizations within the American Alliance for Health, Physical Education, Recreation and

Dance

3 . American Alliance for Health, Physical Education, Recreation, and Dance:

<http://www.shapeamerica.org/> , click on: Media and Advocacy and/or Publications

4 . National Association of State Boards of Education: School Health Policy

Database - http://www.nasbe.org/healthy_schools/hs/index.php.

5 . [6.29.9 NMAC, Standards for Excellence](#)

6 . [SHAPE America: National PE Standards](#)

7 . [School Athletics Equity Act Summary Report 2015](#)

i. 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.

ii. This Act is inclusive of the requirement for schools to submit an Assurance of Compliance with [Title IX](#) through the [WebEPPS](#) system.

School District Wellness Policy

Healthy & Safe Environment

Definition:

A healthy and safe environment is defined as the surroundings, the **psychosocial** climate and the culture of the school. It supports a total learning experience that **promotes personal growth, healthy interpersonal relationships, wellness and freedom from discrimination and abuse.**

Every school is required to provide a safe and orderly environment, as outlined in the [6.29.1 NMAC](#) Standards for Excellence General Provisions. These standards contain requirements, educational standards and student expectations in public schools. Specific to school safety, Standards for Excellence General Provisions require:

- schools to provide a safe, clean, well maintained, orderly, and purposeful environment with an atmosphere that is conducive to teaching and learning; and
- practice of Emergency drills including fire, shelter-in-place and evacuation drills.

Goal:

The goal of a healthy and safe environment is to promote a climate and culture before, during and after school for students, teachers, staff, parents and community members that support academic achievement.

I. PED Required Activities: Includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule [6.12 . 6 NMAC](#) . The following PED required activities are expected to be included in every wellness policy submitted to the PED.

- A. Develop a safe schools plan at each school building that is focused on supporting healthy and safe environments, including, but not necessarily limited to: prevention, policies and procedures and an all- hazards emergency response plan, as described in the Safe Schools Guidance Document as found on the NM PED website's [Safe Schools](#) tab within the Coordinated School Health & Wellness Bureau. The plan must be submitted to the PED once every three years for review and approval, beginning in the 2013-2014 School Year. See Section E and particularly policies
- B. Perform 12 emergency drills in each public school in New Mexico. Emergency drills shall consist of 9 fire drills, 2 Shelter-in-Place drills and one evacuation drill with specific guidance as outlined in subsection N of [6.29.1 NMAC](#) Standards for Excellence General Provisions.
- C. Create and maintain a Bullying Prevention Policy, which is established and communicated as outlined in [6.12.7 NMAC Bullying Prevention](#) . Such bullying prevention policies must contain an absolute prohibition against bullying and must also be inclusive of cyber bullying prevention with specific requirements as set forth in [6.12.7.8 \(D\) NMAC](#).

II. Other Activities

- A. All school buildings and grounds, structures, buses and equipment are kept inviting, clean, safe and in good repair and will meet current safety standards or formally report deficiencies.

B. All schools will abide by district/charter school policies which create an environment free of tobacco, alcohol and other drugs. Refer to [6.12.4 NMAC: Tobacco , Alcohol and Drug Free Schools](#) , which outlines instructions to local school boards on establishing and communicating such policies.

C. All schools must comply with [6.11.2 NMAC: Rights and Responsibilities of Public Schools and Public School Students](#) in providing gun-free schools and allowing students to attend a safe public school within his/her district in accordance with [6.19.3 NMAC: Unsafe School Choice Option](#).

D. The school will maintain 2 Automatic External Defibrillators (AEDs) on the school grounds at all times. These will be registered with the State of New Mexico, and local EMS and dispatch are aware of the AED locations. All staff will be trained in the use of AEDs by AHA Heartsaver guidelines. 2 additional AEDs will be readily available and maintained to travel with staff on the bus for all student events held off campus.

E. Specific to use of pesticides [6.29.19 NMAC: Standards for Excellence General Provisions, Part O](#) , requires that all school districts develop procedures for the implementation of pest management with consideration for reducing the possible impact of pesticide use on human health and the environment, including people with special sensitivities to pesticides.

**EMERGENCY MEDICAL RESPONSE ACTION PLAN
FOR AUTOMATIC EXTERNAL DEFIBRILLATOR (AED)
IN THE SCHOOL SETTING**

PURPOSE

To provide guidance for the school emergency team utilizing an AED for treatment in response to a cardiac arrest in the school setting.

TRAINING REQUIREMENTS

Any school district employee who is expected to provide emergency care will be trained in Cardiopulmonary Resuscitation (CPR) and AED use according to the American Heart Association or the American Red Cross standards.

REGISTRATION REQUIREMENTS

Logan EMS and Tucumcari emergency dispatch has been notified by phone and in writing of AED locations.

DESIGNATED EMERGENCY RESPONDERS

Jenna Gorman

Bobby Dugger

Sherri Cox

Rickey Maxey

SCHOOL EMERGENCY RESPONSE ACTIVATION

- **Internal** – Determine how school staff will be made aware of an emergency within the facility.
- **External** – Call 911.

MEDICAL EMERGENCY TYPES

- Cardiac Arrest – Follow guidelines for use of AED.
- Other Medical Emergencies – Responder should provide patient care consistent with his/her training.

ASSESSMENT/INTERVENTION

- Assess situation/scene safety.
- Evaluate patient's consciousness, breathing and circulation status.
- If a child, establish the victim's age (AEDs are not recommended for children younger than 8 years of age).
- Follow manufacturer's recommended guidelines for use of available AED.

POST EVENT ACTION

- Replace any used AED equipment as recommended.
- Provide requested information to medical director.

EQUIPMENT MAINTENANCE PLAN

- AEDs are equipped with a daily self-check function and yearly maintenance is done by a contracted provider.
- Jenna Gorman is lead for AED maintenance.
- AED maintenance is provided by CP Support, contact David Loar 806-241-6570

Resources:

1. US Department of Education Office of Safe and Healthy Students
2. For a list of current resources and trainings, visit the PED's [Safe Schools](#) tab.
3. Federal Emergency Management Agency (FEMA)
U.S. Department of Homeland Security (sign up to receive email updates)
4. American Red Cross (Training for Employees)
5. NM Department of Homeland Security and Emergency Management
6. Youth Risk and Resiliency Survey (YRRS) – online at <http://youthrisk.org>

School District Wellness Policy Social & Emotional Well-Being

Definition:

Social and Emotional well-being are services 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 students' 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.

Goal:

The goal of social and emotional well-being is to collaborate with students, parents, staff and community to influence student success by building awareness and promoting strategies to maintain and/or improve student mental health.

PED Required Activities:

- Includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule ([6.12.6.8-6 NMAC](#)).
- Create a plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well-being.
 - 6.29.1 NMAC Standards for Excellence General Provisions require districts and charter schools to 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.
- Law requires school personnel to report substance abuse, child abuse and neglect.

Substance Abuse: [Section 22-5-4.4 NMSA 1978](#)

See Policies ADB/ADC Drug, alcohol and tobacco, JLF Child Abuse, JICH Drug and alcohol use and discipline policies for current compliance.

“A. 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.

B. No school employee who in good faith reports any known or suspected 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.”

Also see Policies JLF, JICG, and Regulation GBEB-R for compliance with A and B above.

Child Abuse and Neglect: [Section 22-10A-32 NMSA 1978](#)

A. 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. Except as otherwise provided in this subsection, this requirement shall be completed within the licensed school employee's first year of employment by a school district. Licensed school employees hired prior to the 2014-2015 school year shall complete the sexual abuse and assault component of the required training during the 2014- 2015 school year.

Section 32A-4-3 NMSA 1978. Duty to report child abuse and child neglect; responsibility to investigate child abuse

Other Activities: Includes other activities that each SHAC may create in addition to the requirements that are specific to the needs of the local school district/charter school.

A. Provide a positive, supportive environment in which students can request assistance when needed.

Resources:

1. [American School Counselor Association.](#)
2. [NM Department of Health Office of School & Adolescent Health](#)
3. [NM Suicide Prevention Coalition](#)

4. [Mental Health America](#)
5. [National Institute of Mental Health](#)
6. [National Association of School Psychologists](#)
7. [Breaking the Silence](#) - Lesson plans, games and posters to address/create safe discussion and destigmatize mental illness
8. [Responding to Crisis at a School](#) – white paper to assist schools in preparing for recovery due to loss, grief and other crises
9. Training module from a prevention perspective: [Addressing Barriers to Learning: New Directions for Mental Health in Schools](#)
10. [National Indicators of Child Well-Being](#)
11. [Mental Health: Suicide Behavior](#)
12. [UNM Department of Psychiatry and Behavioral Sciences](#)
13. [Reporting Child Abuse and Neglect: An E-Learning for School Personnel and Health Providers](#)
14. [Positive Behavioral Interventions & Supports](#)
15. [Functional Behavioral Assessment and Behavior Intervention Plan](#) – School Psychologist Files **or neglect; penalty.**

School District Wellness Policy

Health Services

Definition:

Health services are provided for students to apprise, protect, and promote health. These services are designed to 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.

Goal:

The goal of health services is to provide coordinated, accessible primary health and behavioral health services for students, families, and staff.

- **PED Required Activities:** Includes the Public Education Department (PED) requirements that are outlined in the School District Wellness Policy rule (6.12.6 NMAC).
- District Wellness Policy includes plan for addressing the health service needs of students in the educational process; **Compliance see JLC Health Services and sub policies through JLCD.**
- Per the U.S. Office of Special Education (OSEP), students with healthcare needs that may “affect or have the potential to affect safe and optimal school attendance and academic performance requires the professional school nurse to write an Individualized Health Plan (IHP) in collaboration with the student, family, educators, and healthcare care providers” **NASN Position Statement: Individualized Healthcare Plan**). The IHP should be reviewed annually at a minimum. The need for an IHP is based upon each child’s required health care, not upon “educational entitlement such as special education or Section 504 of the Rehabilitation Act of 1973.”

OSEP considers that the IHP should be a separate document from the Individualized Education Program (IEP) and should be attached to the student’s IEP or 504 plan based upon the student’s needs. (See the PED School Health Manual, **Section V: Individualized Healthcare Plans** for instructions.) **See IHBA and IHBC for at risk students and Student Assistance Team for compliance.**

- 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)**;
- District policy acknowledges that all students enrolled in the public, nonpublic, or home schools in the state must present satisfactory evidence of commencement or completion of immunization in accordance with the immunization schedule and rules and regulations of the Public Health Division (PHD)/Department of Health (DOH), with an allowance for exemption by the PHD/DOH if certain conditions are met. Statute **6.12.2.8 NMAC** 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: Vaccinations and Immunizations](#)

Exemptions. An exception is provided to a student experiencing homelessness. Pursuant to the McKinney- Vento Homeless Assistant Act [[42 USC§ 11432\(g\)\(3\)\(C\)](#)], children experiencing homelessness must be able to enroll in school immediately, even if they are unable to produce records normally required for enrollment, such as previous academic records, medical records, proof of residency, or other documentation. If the child needs to obtain immunizations, or medical or immunization records, the enrolling school must immediately refer the parent or guardian of the child or youth to the designated local educational agency (LEA) homeless education liaison, who must assist in obtaining necessary immunizations, or immunization or medical records. **See JLCB Immunizations and JFABD Homeless and cross referenced policies for current compliance.**

- District policy acknowledges all public and nonpublic schools must grant to any student in grades kindergarten through 12 authorization to carry and self-administer health care practitioner prescribed asthma treatment medications and anaphylaxis emergency treatment medication as well as the right to self-manage their diabetes care in the school setting and to develop mechanisms that support safe diabetes self-management in the school environment as long as certain conditions are met. Such rules are established in [6.12.2.9](#)

[NMAC Students Rights to Self-Administer Certain Medications](#) and [6.12.8 NMAC Diabetes Self-Management by Students](#) in the school setting. More information on medications in the school may be found in Section VI. of the New Mexico School Health Manual (see link below);

- District policy acknowledges that all schools are required to ensure that vision screening tests are administered to students enrolled in the school in pre-kindergarten, kindergarten, first grade and third grade and for transfer and new students in those grades, unless a parent affirmatively prohibits the visual screening. The [Save our Children's Sight Fund](#), created in 2007, through [7.30.10 NMAC](#) further allows DOH to promulgate rules for the award of money for certain eligible students and to establish vision screening test standards.

Resources:

1. [NMDOH Secretary Memo: 2-20-2015 Immunization Guidance](#)
2. [Exemption from Immunization Form](#)

3. NM School Health Manual
4. NM School Health Manual, Section VI: Medications in the Schools
5. National Association of School Nurses

School District Wellness Policy Staff Wellness

Staff Wellness and Health Promotion Recommendations

The SHAC will consider and implement any input from the staff or community in regards to staff wellness issues, identifies, and disseminates wellness resources, and performs other functions that support staff wellness in coordination with human resources staff.

Schools in the District will implement strategies to support staff in actively promoting and modeling healthy eating and physical activity behaviors. Examples of strategies that schools will use, as well as specific actions staff members can take, include dissemination of activities in the community that promote physical activity, like fun runs or 5Ks. The District promotes staff member participation in health promotion programs and will support programs for staff members on healthy eating and weight management that are accessible and free or low-cost when available.

Definition:

Staff wellness is defined as opportunities for school staff to improve their health status through activities such as health assessments, health education, wellness education, nutrition education, fitness education and health-related fitness activities. These offerings encourage school staff to pursue a healthy lifestyle that improves health status and morale and provides a greater personal commitment to the school's overall coordinated school health approach.

A staff wellness program allows the staff to learn and practice skills that help them to make personal decisions about healthy daily habits.

Goal:

The goal of staff wellness is to promote activities for staff designed to promote the physical, emotional, and mental health of school employees along with disease and disability prevention activities.

- I. PED Required Activities:** Includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule ([6.12.6 NMAC Section K: Staff Wellness](#)). The PED required activities are expected to be included in every wellness policy submitted to the PED.
- Create a plan to address the staff wellness needs of all school staff that minimally insures an equitable work environment and meets the [Americans with Disabilities Act, Title III](#) .
 - Ensure that all school boards, districts, and charter schools implement a policy that will ensure that the rights to privacy of all school employees infected with HIV are protected.

II. Other Activities:

- A. All schools in the district will encourage the use of school facilities (Staff workout room, weight room, etc.) outside of school hours or during school hours if their schedule is allowable and not in use by the athletics program.
- B. All school staff will be offered the flu shot (if available) every year
- C. The workout equipment (treadmills, elliptical, weight machines and benches) will be maintained yearly and as needed for safe and effective use by student athletics, staff, and community
- D. All staff will be certified in the American Heart Association Heartsaver CPR/AED/First aid course every 2 years

Resources:

1. [National Wellness Institute](#)
2. [Developing an Employee Wellness Program](#)
3. [Office of Personnel Management](#)
4. [Health Policy Briefs: Workplace Wellness Programs](#)

Appendix A
 Logan Municipal Schools
 SCHOOL HEALTH ADVISORY COUNCIL (SCS SHAC)
 MEMBERS

As per the Public Education Department Wellness Policy rule, all New Mexico local boards of education shall establish a district School Health Advisory Council (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).

NAME	ROLE	E-MAIL
Linnea Paris	Nutrition Services	lparis@loganschool.net
Jenna Gorman	Health Services	jpgorman@loganschool.net
Billy Burns	Health Educator	bburns@loganschool.net
Tommy Thompson	School Administrator	tthompson@loganschool.net
Beth Fair	Parent	bfair@loganschool.net
Lynn Birch	School Board Member	lynnbirch@yahoo.com
Cambry Lujan	Student	N/A

Appendix B

**TITLE 6 PRIMARY AND SECONDARY EDUCATION
CHAPTER 12 PUBLIC SCHOOL ADMINISTRATION - HEALTH AND SAFETY
PART 6 SCHOOL DISTRICT WELLNESS POLICY**

6.12.6.1 ISSUING AGENCY: Public Education Department.

[6.12.6.1 NMAC - N, 02-28-06]

6.12.6.2 SCOPE: This regulation applies to public schools in New Mexico unless otherwise expressly limited.

[6.12.6.2 NMAC - N, 02-28-06]

6.12.6.3 STATUTORY AUTHORITY: This regulation is adopted pursuant to Sections 22-2-1 and 9-24-8 NMSA 1978.

[6.12.6.3 NMAC - N, 02-28-06]

6.12.6.4 DURATION: Permanent.

[6.12.6.4 NMAC - N, 02-28-06]

6.12.6.5 EFFECTIVE DATE: February 28, 2006, unless a later date is cited at the end of a section.

[6.12.6.5 NMAC - N, 02-28-06]

6.12.6.6 OBJECTIVE: This rule requires the adoption of local school district wellness policies.

[6.12.6.6 NMAC - N, 02-28-06]

6.12.6.7 DEFINITIONS:

12.6.7.A. “Coordinated school health approach” means the framework for linking health and education. The focus is healthy and successful students. There are eight interactive components of coordinated school health: health education; physical education and activity; nutrition; social and emotional well-being; healthy and safe environment; health services; staff wellness; and family, school and community involvement.

12.6.7.B. “Family, school and community involvement” means an integrated family, school and community approach for enhancing the health and well-being of students by establishing a district school health advisory council that has the responsibility to make recommendations to the local school board in the development or revision, implementation, and evaluation of the wellness policy.

12.6.7.C. “Fund raiser” means a sale on a school campus to benefit a school or school organization of beverage or food products limited by a United States department of agriculture school meal program for use, consumption or sale during the school day in competition with school meals. A fundraiser may be conducted only for up to one school day on two occasions per semester or trimester term in a school that participates in United States department of agriculture school meal programs. The wellness policy implemented through

6.12.6 NMAC shall include annual assurances to the New Mexico public education department of compliance with limitations on “fund raisers” pursuant to this subsection and subject to review as part of the administrative review of a school food authority.

12.6.7.D. “Health education” means 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. It meets the content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.

12.6.7.E. “Health services” means services provided for students to appraise, protect, and promote health. These services are designed to ensure access or referral to primary health care or behavioral health services or both, foster appropriate use of primary health care services, behavioral health services, prevent and control communicable diseases 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 for promoting and maintaining individual, family, and community health.

12.6.7.F. “Healthy and safe environment” means the physical and aesthetic surroundings and the psychosocial climate and culture of the school. It supports a total learning experience that promotes personal growth, healthy interpersonal relationships, wellness, and freedom from discrimination and abuse.

12.6.7.G. “Nutrition” means programs that provide access to a variety of nutritious and appealing meals and snacks that accommodate the health and nutrition needs of all students.

12.6.7.H. “Physical activity” means body movement of any type which include recreational, fitness, and sport activities.

12.6.7.I. “Physical education” means the instructional program that provides cognitive content and learning experiences in a variety of activity areas. It provides the opportunity for all students to learn and develop the skills,

knowledge and attitudes necessary to personally decide to participate in a lifetime of healthful physical activity. It meets the content standards with benchmarks and performance standards as set forth in Section 6.30.2.20 NMAC. 12.6.7.J. “Social and emotional wellbeing” means services provided to maintain or improve students’ mental, emotional, behavioral, and social health.

12.6.7.K. “Staff wellness” means opportunities for school staff to improve their health status through activities such as health assessments, health education and health-related fitness activities. These opportunities encourage school staff to pursue a healthy lifestyle that contributes to their improved health status, improved morale, and a greater personal commitment to the school's overall coordinated school health approach.

12.6.7.L. “Emergency Operation Plan (EOP)” means the document which outlines and explains functions, resources and coordination procedures for responding to and supporting crisis, emergency, terrorist-response, and disaster operations, and is that portion of a safe school plan that details risk assessments and establishes the plans or procedures to manage a crisis, emergency, terrorist or disaster event before, during and after it has occurred and includes, but is not limited to, emergency routes and staff assignments as they relate to immediate actions, delayed actions, mitigation actions, facility evacuations and facility reentry.

[6.12.6.7 NMAC - N, 02-28-06; A, 11-30-06; A, 05-15-14; A, 12-30-14]

6.12.6.8 REQUIREMENTS:

12.6.8.A. This section applies to local school boards, local school districts, and charter schools and governs policies to be implemented by local school districts with regards to student and school employee wellness.

12.6.8.B. Each school district and charter school shall develop and implement a policy that addresses student and school employee wellness through a coordinated school health approach.

12.6.8.C. Each school district and charter school shall submit the wellness policy to the public education department for approval.

(12.6.8.C.1) Sections of the wellness policy that meet the requirements set forth in Paragraphs (3), (4), (5) and (10) of Subsection D and the requirements set forth in Subsection E of this section shall be submitted to the public education department

on or before August 30, 2006.

(12.6.8.C.2) Sections of the wellness policy that meet the requirements set forth in Paragraphs (1), (2), (6), (7), (8) and (9) of Subsection D of this section shall be submitted to the public education department on or before January 30, 2007.

12.6.8.D. The wellness policy shall include, but shall not be limited to:

(12.6.8.D.1) a planned, sequential, K-12 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 6.30.2.19 NMAC;

(12.6.8.D.2) a planned, sequential, K-12 physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes necessary to personally decide to participate in lifetime healthful physical activity and is aligned to the physical education content standards with benchmarks and performance standards as set forth in 6.30.2.20 NMAC;

(12.6.8.D.3) guidelines to provide physical activity opportunities to students before, during and after school;

(12.6.8.D.4) nutrition guidelines meeting standards established by federal rules at 7 CFR 210.11 and 7 CFR 210.11a, the Healthy Hunger-Free Kids Act of 2010, the Richard B. Russell National School Lunch Act and the Child Nutrition Act of

1966; (12.6.8.D.5) guidelines for fund raisers established at 6.12.5 NMAC and an annual assurance of compliance with limitations on fund raisers established at 6.12.5 NMAC;

(12.6.8.D.6) a plan addressing the behavioral health needs of all students in the educational process by focusing on students’ social and emotional wellbeing;

(12.6.8.D.7) school safety plans at each school building focused on supporting healthy and safe learning environments; the school safety plan must be submitted to the public education department for approval on a three-year cycle and must include

the following minimum components:

(12.6.8.D.7.a) introduction;

(12.6.8.D.7.b) school policies and procedures;

(12.6.8.D.7.c) prevention; and

(12.6.8.D.7.d) a school EOP;

(12.6.8.D.8) a plan addressing the health services needs of students in the educational process;

(12.6.8.D.9) a plan addressing the staff wellness needs of all school staff that minimally ensures an equitable work environment and meets the American with Disabilities Act, Part III;

(12.6.8.D.10) a plan for measuring implementation and evaluation of the wellness policy, including the designation of 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.

12.6.8.E. Family, school and community involvement. Each local board of education shall establish a district school health advisory council that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), school staff; student(s); and community member(s). The school health advisory council shall have the responsibility to make recommendations to the local school board in the development or revision, implementation, and evaluation of the wellness policy consistent with this rule. The school health advisory council shall meet for this purpose a minimum of two times annually.

[6.12.6.8 NMAC - N, 02-28-06; A, 11-30-06; A, 05-15-14; A, 12-30-14]

History of 6.12.6 NMAC: [Reserved]

Appendix C Evaluation Plan Template

The Evaluation Plan Template may be used by districts to ensure that each component of the wellness policy has been fully developed. It is a useful checklist for planning and for monitoring the implementation of each component. The template may also assist the schools in assuring that all statutes related to the policy are in place.

This checklist should be included together with the wellness policy materials that are presented by the district to members of the Public Education Department during the CSHWB nutrition administrative review process.

Name(s) of Designated Person(s) monitoring the district's wellness policy development and ongoing assessment: Jenna Gorman, School Nurse

District/Charter School: Logan Schools

Date of most recent review: May 2017