



RATON PUBLIC SCHOOLS

WELLNESS POLICY
2022 - 2023

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INTRODUCTION

Raton Public Schools 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 healthy 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 student at all grade levels. 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 are offered 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 offered by the NSLP meals, Fresh Fruit and Vegetable Program and Afterschool Snack Program. (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) -- 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; and
- ✓ Adhere to instructions under 7.30.12 NMAC: Emergency Medications in Schools in the potential case of anaphylaxis that may affect breathing and/or potentially affect other major life activities of students due to an allergic reaction.

A comprehensive District Wellness Policy is essential to the academic success and lifelong well-being of students and staff in the Raton Public School District. The intent of a Wellness Policy is to create a learning environment that allows students and staff to achieve their full academic potential and enjoy lifelong health, while meeting the Public Education Department Wellness Policy rule 6.12.6.6 NMAC and the requirements of

Section 204 of Public Law 108-265- June 30, 2004- Child Nutrition and WIC Reauthorization Act of 2004.

The link between nutrition, physical activity and good health has been well researched and documented. Healthy habits are known to reduce the risk of mortality and the development of many chronic diseases in adulthood. As a school district, we have a responsibility to assist staff and students in establishing and maintaining beneficial lifelong health habits.

All students shall possess the knowledge and skills necessary to make well-informed choices about healthy eating and physical activity as a valuable part of daily living. Raton Public Schools will implement a comprehensive plan to encourage healthy life habits. This plan will include the use of school and community resources, while equitably serving the needs and interests of all students and staff in the district.

Resources:

1. New Mexico Public Education Department, Coordinated School Health and Wellness Bureau or phone: 505-827-1804 or 505-827-1821.
2. Youth Risk and Resiliency Survey (YRRS) -online at <http://youthrisk.org>
3. School District Wellness Policy 6.12.6 NMAC
4. Wellness School Assessment Tool (Wellsat 2.0)
5. "Healthy, Hunger-Free Kids Act of 2010" (Sec. 204 of Public Law 111-296): <http://www.fns.usda.gov/tn/local-school-wellness-policy>
6. USDA Memorandum on wellness policies: http://www.fns.usda.gov/sites/default/files/SP42-2011_os.pdf
7. The Centers for Disease Control and Prevention, Division of Adolescent and School Health Local School Wellness Policy: <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>
8. Action for Healthy Kids, *Wellness Policy Tool: Seven Steps to Success*, <http://www.actionforhealthykids.org/tools-for-schools/revise-district-policy/wellness-policy-tool>
9. *Promoting Healthy Youth, Schools and Communities: A Guide to Community-School Health Advisory Councils*, Iowa Department of Public Health, 2000: <http://www.schoolwellnesspolicies.org/resources/AGuideToCommunitySchoolHealthCouncils.pdf>
10. Team Nutrition: Local Wellness Policy Resources: <http://www.fns.usda.gov/tn/local-school-wellness-policy>.
11. Fit, Healthy and Ready to Learn, National Association of State Boards of Education, provides detailed guidance for development of school health policies following the Coordinated School Health Program model: <http://www.nasbe.org>.
12. Alliance for a Healthier Generation Healthy Schools Program online tools: <https://schools.healthiergeneration.org/>
13. Fuel Up to Play 60 - Empowering Youth, Schools and Communities to Stay Healthy
14. Allergy and Emergency Action Plan Worksheet

NUTRITION AND NUTRITION EDUCATION

Definition:

Nutrition includes programs that provide access to a variety of nutritious and appealing meals that accommodate the health and nutritional needs of all students.

Nutrition Education aims to teach, encourage and support healthy eating by students. Nutrition Education and healthy eating will encourage proper physical growth, physical activity, brain development, the ability to learn, emotional balance, a sense of well-being, obesity prevention and the ability to resist disease.

Goal:

The goal of this nutrition policy is to promote the role of nutrition in academic performance and quality of life, and to ensure the adoption of school practices that provide adequate nutritional opportunities.

Requirements:

Raton Public School District will:

- 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.
- Promote and meet the minimal guidelines for a la carte offerings as set forth in Subsection B of 6.12.4.8 NMAC.
- Provide Fresh Fruits and Vegetables program for elementary students.
- Have second grade actively participate in Kid and Cows Program.
- Promote and meet the minimal guidelines for school-sponsored fundraisers during the normal school hours as set forth in Paragraph (1) of Subsection C of 6.12.5.8 NMAC.
- Promote and meet the minimal guidelines for school-sponsored fundraisers before and after school hours ensuring that at least 50% of the food offerings shall be healthy choices in accordance with the requirements set forth in Paragraph (2) of Subsection C of 6.12.5.8 NMAC.

- Provide all students with educational activities that align with the New Mexico Health Education Content Standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.

Nutrition

School Meals

Our District is committed to serving healthy meals to children, with plenty of fruits, vegetables, whole grains, lean proteins, 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 the Fresh Fruit & Vegetable Program (FFVP), NM Grown Fresh Fruits and Vegetables, Seamless Summer Option (SSO). The District also operates additional nutrition-related programs and activities including Breakfast after the Bell, when funding is provided. 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.)
- Provides sliced or cut fruit daily.
- Insure all staff members, especially those serving, have been trained

- to politely prompt students to select and consume the daily vegetable options with their meal.
- Offer low-fat unflavored milk placed in front of other beverages in all coolers; flavored milk is allowed if non-fat.
 - Posts weekly menus on the District website, emails menus to all staff and makes daily announcements to promote and market menu options.
 - Reports on the most recent food safety inspection and posts in a publically visible place in the school. Copies of the report are provided to any member of the public upon request. (Follow guidelines for submission of the Food Safety Inspections Assurance form in the Safe Schools Guidance Document.)
 - Accommodates students with special dietary needs with a doctor's statement to the school nurse who will then notify the cafeteria.
 - Provides at least 10 minutes to eat breakfast and at least 20 minutes to eat lunch, counting from the time they have received their meals and are seated. (NOTE: School lunch periods must be a minimum of 30 minutes per day – 6.29.1.9(1)6 NMAC.)
 - Serves lunch at a reasonable and appropriate time of day.
 - Promotes participation in federal child nutrition programs and provides information to students and families to help ensure that families know what programs are available in their children's school.

Staff Qualifications and 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. The USDA's Professional Standards for School Nutrition Standards website is a resource 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. The District will make drinking water available where school meals are served during mealtimes.

Competitive Foods and 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 or exceed 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.

These standards will apply in all locations and through all services where foods and beverage 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 and Rewards

All foods offered on the school campuses will meet or exceed the USDA Smart Snacks in School Nutrition Standards to include:

- ✓ Providing 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 the USDA.
- ✓ Encouraging parents to bring healthy classroom snacks by providing a list of foods and beverages that meet the Smart Snacks nutrition standards.
- ✓ Providing 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.
- ✓ Withholding food, water or bathroom privileges from a student for any reason is unlawful. (Ref: 6.1 1.2 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 campuses during the school day with prior administrative approval.

Fundraisers cannot compete with the meals provided by the school lunch

program unless agreed upon by the principal and Food Service Director.

The District does not permit any fundraiser exemptions, and all food-related fundraisers during the school day MUST meet USDA Smart Snack standards. [Meets HUSSC: SL Gold]

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:

- 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;
- ✓ Provides fresh fruits, fresh vegetables, whole grains, low-fat and fat-free dairy options and healthy food preparation methods;
- ✓ Emphasizes caloric balance between food intake and energy expenditure (promote physical activity/exercise);
- ✓ Links with school meal programs, cafeteria nutrition promotion activities, school gardens, Farm to School programs, other school foods, and nutrition-related community services;
- ✓ Teaches media literacy with an emphasis on food and beverage marketing; and include nutrition education training for teachers and other staff.

After School Snacks:

The afterschool snack component of the National School Lunch Program is a federally assisted snack service that fills the afternoon hunger gap for school children. The snack service is administered at the Federal level by USDA's Food and Nutrition Service. At the State level, it is administered by State agencies, which operate the snack service through agreements with the District. The NSLP Afterschool Snack program provides a nutritional boost to children enrolled in the Afterschool Program activities. The District offers structured and supervised educational and enrichment activities, including homework assistance, tutoring, garden club, cooking club, music club, and arts and crafts programs.

NM Grown:

The New Mexico Public Education Department and the District are committed to fostering healthy school environments and increasing market access for New Mexico growers through the New Mexico Grown Farm to School Program. Specifically, farm to school includes one or more of the following program

elements: 1) procurement, 2) school gardens and outdoor classrooms, and 3) food education. PED works to strengthen K-12 public, private, Bureau of Indian Education (BIE), and tribally-controlled schools and school districts' connection to fresh, healthy food and the local food producers by changing purchasing and education practices across New Mexico.

The District participates in NM Grown by purchasing locally grown fresh fruits and vegetables that are used as components of the NSLP meal planning, as well as classroom snacks and Cooking Club activities. The District celebrates **NM Grown Week** in October to celebrate our NM farmers and discover the diversity of NM Grown produce in the school meal production and snack programs. **Nuevo Thursdays** is another opportunity to highlight locally grown fresh fruits and vegetables through cafeteria tastings, visual storytelling, maps and classroom curriculum. The program also integrates opportunities for students to learn about new varieties of fruits and vegetables, biodiversity, New Mexico agriculture, geography, literacy and language, math and science, and more.

Fresh Fruit & Vegetables:

The Fresh Fruit and Vegetable Program (FFVP) can be an important tool in our efforts to combat childhood obesity. The Program has been successful in introducing students to a variety of produce that they otherwise might not have the opportunity to sample. FFVP is consistent with and supports the Institute of Medicine's recommendations to provide healthier snack choices in schools.

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, as well as disease prevention
- ✓ My Plate Food Guidance
- ✓ 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
- ✓ Acceptance of body size differences
- ✓ Food Safety
- ✓ Importance of Water Consumption
- ✓ Importance of eating breakfast
- ✓ Making healthy choices when eating at restaurants
- ✓ 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 and advocating for others' healthy dietary behaviors
- ✓ USDA Nutrition Team provides free nutrition education and promotion materials, including standards-based nutrition education curricula and lesson plans, posters, interactive games, menu graphics, and more.

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 well-being, optimal development, and strong educational outcomes.

Schools in the District are encouraged coordinate content across curricular areas that promotes 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.

Food Safety Inspections

The Environmental Inspection Department (EID) will conduct two annual food safety inspections (FSI) per USDA regulations and state regulations. The reports are 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-smarter-lunchrooms>
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-programs>
8. Smart Snacks in Nutrition standards: <http://www.fns.usda.gov/healthierschoolday/tools-schools-smart-snacks>.
9. NM PED: Student Safety and Wellness Bureau

The Alliance for a Healthier Generation provides a set of tools to assist with implementation of Smart Snacks available at www.healthiergeneration.org/smartsnacks.

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. It meets the New Mexico Content Standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.

Goal:

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

Requirement:

In the 2010 Regular Legislative session, Section 22-13-1. L (J) NMSA 1978 was amended to include health education as a requirement for graduation. Specifically:

Beginning with students entering the eighth grade, 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.

The staff at Raton Public Schools will implement 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 6.12.6 NMAC and 6.30.2.19 NMAC.

Raton Public School District will:

1. Provide at all sites, activities in comprehensive health education that align with the New Mexico Health Education Content Standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.

2. Provide instruction about HIV and related issues in the curriculum of the required Health Education content area to all students in the elementary grades, in the middle/junior high school grades, and in the senior high school grades as set forth in 6.12.2.1 O.C NMAC.
3. Encourage staff to integrate Health Education into the core curriculum and classroom routines.
4. Insure that teachers, staff and administrators are aware of and have opportunities to participate in coordinated school health professional development (i.e. School Health Institute, Head to Toe, NM Association for Health, Physical Education, Recreation and Dance.)
5. Health education lessons will be taught in a culturally sensitive and appropriate manner.
6. 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.

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 including bullying

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
- Heart Saver

All school districts are required to adopt a K-12 Health Education Curriculum, 6.29.6 NMAC, aligning with the New Mexico Health Education Content Standards with Benchmarks and Performance Standards. The Raton Public Schools health education curriculum, including the required health education course where applicable, is aligned to these standards. Raton Public Schools' Health Education curriculum is

at all grade levels. The K-12 District Health Education Curriculum is available for review.

Section 22-13-1 NMSA 1978, Section H was amended in 2016 to include a 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.

The Raton School District insures that parents have the right to request their child be exempted (opt-out) from the parts of the health education curriculum that address the sexuality performance standards.

1. Parents may request an exemption from the parts of the health education curriculum that address the sexuality performance standards or
2. Parents may request alternative lessons be established in place of the exempted parts of the curriculum.

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. [Priest Heart Start](#)
9. [CSHWB Tools for Schools -Lifesaving Skills/CPR Resources](#)

PHYSICAL ACTIVITY

Definition:

Physical activity is 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.

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.

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

Requirements:

Raton Public Schools will:

1. Provide opportunities for supervised physical activity for students before, during and/or after school hours. Opportunities shall include but are not limited to: free play (recess), organized intramurals, physical education classes, and school sponsored extracurricular activities.
2. Each school site 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 6.30.2.19 NMAC.
3. Children and adolescents should participate in 60 minutes of physical activity every day (<http://www.cdc.gov/physicalactivity/basics/children/index.htm>).
4. 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).

5. 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. This does not include participation on sports teams that have specific academic requirements.
6. Offer at least 20 minutes of elementary 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. Where possible, recess should be offered prior to lunch or snack times. If recess is offered before lunch, schools will have appropriate hand-washing facilities and/or hand-sanitizing mechanisms located just inside/outside the cafeteria to ensure proper hygiene prior to eating with students required to use these mechanisms before eating. Hand-washing time, as well as time to put away coats/hats/gloves, will be built into the recess transition period/timeframe before students enter the cafeteria.
7. Offer outdoor elementary recess when weather is feasible for outdoor play. In the event that the elementary 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. Each school will maintain and enforce its own indoor recess guidelines.

Environmental Design

The District will 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. Monitoring of building and grounds procedure will also include steps to complete necessary inspections and repairs in a timely manner.

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 physical activity
- How to resist peer pressure that discourages physical activity

Physical Activity Breaks (Elementary and 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. 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 can 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 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.

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

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. 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" (SB 122).

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 and 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.

Goal:

To provide every student with daily physical education during which a certified physical educator uses appropriate practices to teach the skills, knowledge, and attitudes needed to be physically fit and active for a lifetime. Activities are based on goals and objectives which are appropriate for all children, and are planned after referring to a curriculum which has an obvious scope and sequence that follow 6.29.9 NMAC Physical Education Standards for Excellence.

The staff at Raton Public Schools will implement 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 make personal decisions to participate in a lifetime of healthful physical activity, and is aligned to the Physical Education Content Standards with benchmarks and performance standards as per 6.30.2.20 NMAC.

Required Activities:

Raton Public Schools will:

1. Use a physical education curriculum that is aligned to the Content Standards with Benchmarks and Performance Standards as outlines in the NM Public Education Content Standards with Performance Standards and Benchmarks: K-4; 5-8; 9-12.
2. Hire certified physical educators to teach physical education and plan additional opportunities for physical activity at all sites.
3. Encourage physical educators to promote academic achievement by helping classroom teachers incorporate physical education concepts in classroom activities.
4. 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 (discussed in the "*Essential Physical Activity Topics in Health Education*" subsection).

5. 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.
6. Elementary students in each grade will receive physical education for at least 35 minutes per week throughout the school year.
7. Secondary students (middle and high school) are required to take the equivalent of one academic year of physical education.

Resources:

1. NM Content Standards with Benchmarks and Performance Standards K-12 in 3 age-group sets: K-4; 5-8; 9-12.
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 In compliance with *School Athletics Equity Act*, each public school with athletics for grades 7-12 is required to collect and submit prior year data on team enrollment, information on coaches, and income and expenditures among others to PED. The PED prepares and submits a report to the Governor's office and the New Mexico Legislative Education Study Committee (LESC) identifying those schools that submitted the required data.
This Act is inclusive of the requirement for schools to submit an Assurance of Compliance with Title IX through the WebEPPS system.
8. NM Activities Association – Important resource for NMAA schools to include rules, statutes, athletic waiver procedures and best practice guidance
9. NMAA Sports Medicine Page
10. NMAA Sports Regulations Master Calendar
11. Physical Education Curriculum Analysis Tool CPESATI
12. Appropriate Instructional Practice Guidelines. K-12: A Side-by-Side Comparison
13. Society of Health and Physical Educators: SHAPE America
14. PE Central
15. National Association of State Boards of Education

SOCIAL AND EMOTIONAL WELL-BEING

Definition:

Social and emotional health is the ability to understand and manage our emotions and to form social connections and relationships with the world around us. Strong social emotional health enables an individual to integrate their thoughts, emotions, and behaviors in a way that supports greater health and well-being in life.

Social and emotional wellbeing is essential for our overall health and wellness. Being socially and emotionally well means being able to realize our abilities, cope with the normal stresses of life, work productively and contribute to our community.

Goal:

The goal of this policy is to ensure that student's social, emotional, and behavioral needs are met. This is met by collaborating with students, parents, staff and community to influence student success by building awareness and promoting strategies to maintain and/or improve student's social and emotional wellbeing.

Required Activities:

Raton Public School District will:

1. Addresses behavioral health needs of all students in the educational process by focusing on students' social and emotional wellbeing. This is conducted by school wide Social Emotional Learning that is ongoing district wide.
2. Provides environments that are filled with safety and belonging. This ensures students are open to seek out or request social and emotional support when needed.
3. Provides a supportive school environment that links to community resources and maintains positive community relationships.
4. Provides support service programs, which strengthen the instructional program. Required support service programs include school counseling provided by a licensed counselor and/or licensed social worker.
5. Provides support and training to staff to better serve students in a more supportive approach.

6. Ensures that school personnel know they are required by law to report substance abuse, child abuse, and neglect. Adequate training is provided on an on-going basis to provide staff with information and guidance on how to make a report.

a. Substance Abuse: Section 22-5-4.4 NMSA 1978 "A school employee who knows, or in good faith suspects, any student of using or abusing alcohol or drugs shall report such use or abuse pursuant to procedures established by the local school board. No school employee who in good faith reports any known or suspected 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."

b. Child Abuse and Neglect: Section 22-1-32 NMSA 1978 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 shall complete the sexual abuse and assault component of the required training during the current school year. Section 32A-4-3 NMSA 1978. Duty to report child abuse and child neglect; responsibility to investigate child abuse or neglect; penalty.

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 de-stigmatize 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. New Mexico Social and Emotional Learning Framework
16. New Mexico Children, Youth, & Families Department (CYFD)

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.

Required Activities:

Raton Public Schools will:

1. Create a plan addressing the health service needs of students in the educational process.
2. Provide services in partnership with students, parents, staff and community.
3. Provide health services staff with professional development opportunities such as workshops, conventions and collaboration for the purpose of receiving the latest information, innovations and ideas in their field and implementing them in their areas of expertise.
4. Ensure that all health service programs strive to meet all reporting, record-keeping and confidentiality requirements. 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

5. Create a plan addressing the health service needs of students in the educational process.
6. Provide services in partnership with students, parents, staff and community.
7. Provide health services staff with professional development opportunities such as workshops, conventions and collaboration for the purpose of receiving the latest information, innovations and ideas in their field and implementing them in their areas of expertise.
8. Ensure that all health service programs strive to meet all reporting, record-keeping and confidentiality requirements.
9. 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.)
10. 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);
11. 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§ I I432(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.

12. All public and nonpublic school 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.
13. 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.

NOTE: Detailed information in regards to Health Services, including Social/Emotional Health can be found in the revised PED School Safety Guidance Document.

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

STAFF WELLNESS

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 insuring the right to privacy. Keeping employees safe and their information confidential, as well as addressing employee needs that meet the American with Disabilities Act, Title III.

Required Activity:

Raton Public Schools will:

1. Address staff wellness needs of all school staff that minimally insures an equitable work environment and meets the Americans with Disabilities Act, Part III.
2. Provide opportunities for staff to receive annual flu/ pneumonia/ vaccines.
3. 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.
4. When feasible, the District will offer annual professional learning opportunities and resources for staff to increase knowledge and skills about promoting healthy behaviors in the classroom and school (e.g., increasing the use of kinesthetic teaching approaches or incorporating nutrition lessons into math class).

Professional learning will help District staff understand the connections between academics and health and the ways in which health and wellness are integrated into ongoing district reform or academic improvement plans/efforts. Such learning will also assist school staff to develop current and lifelong habits that optimize their personal health.

Resources:

1. National Wellness Institute
Developing an Employee Wellness Program
Office of Personnel Management
Health Policy Briefs: Workplace Wellness Programs

Appendix A

HEATH ADVISORY COUNCIL (SHAC) MEMBERS

Per the Public Education Department Wellness Policy rule 6.12.6 NMAC, all New Mexico local school boards of education shall establish a district/charter School Health Advisory Council (SHAC) that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), other school staff, student(s), and community member(s).

The SHACs are responsible to meet at least two times annually and to make recommendations to the local school board in the development or revision, implementation, and evaluation of the wellness policy (Healthy Schools Report Card).

Identify below the members of your SHAC, their roles and contact information. Please note that you are not limited to only one person, representing each category.

Each school district/charter school is to identify a wellness policy champion(s) within the school district/charter school, or at each school, as appropriate, charged with the operational responsibility for ensuring that each school fulfills the school district's/charter school's wellness policy.

NAME	TITLE	E-MAIL
Kristie Medina	Superintendent	kristie.medina@ratonschools.com
Olga Neurauter	High School Principal	olga.neurauter@ratonschools.com
Michelle Hopper	Raton Intermediate	michelle.hopper@ratonschools.com
Kim Sanchez	Elementary Principal	kim.sanchez@ratonschools.com
Bette Lujan	Nurse Assistant	bette.lujan@ratonschools.com
Deia Craig	Special Education	deia.craig@ratonschools.com
Justin Mattorano	Special Education	justin.mattorano@ratonschools.com
Sue Holland	NEA Rep. RIS	sue.holland@ratonschools.com
Myra Baird	Business Manager/Food Service Director	myra.baird@ratonschools.com
Virginia Valdez	NEA Rep. Longfellow	virginia.valdez@ratonschools.com
Tenelle Phillips	Elementary Counselor	tenelle.phillips@ratonschools.com
Chris Naccarato	NEA Rep. High School	chris.naccarao@ratonschools.com
Lynette Simpson	Mid/High Counselor	lynette.simpson@ratonschools.com
BryLee Medina	Physical Education Teacher	brylee.medina@ratonschools.com
Penny Lopez	Physical Education	penny.lopez@ratonschools.com
Caitlin Romero	Nurse	Caitlin.romero@ratonschools.com
Tory Giacomo	Physical Education	tory.giacomo@ratonschools.com
Michael Sandoval-Romero	Food Service Manager	Michael.sandoval-romero@ratonschools.com

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:

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.

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.

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.

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.

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.

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.

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.

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

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.

J. "Social and emotional wellbeing" means services provided to maintain or improve students' mental, emotional, behavioral, and social health.

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.

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:

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.

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.

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

(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.

(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.

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

(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;

(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;

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

(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;

- (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;
- (6) a plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional wellbeing;
- (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:
 - (a) introduction;
 - (b) school policies and procedures;
 - (c) prevention; and
 - (d) a school EOP;
- (8) a plan addressing the health services needs of students in the educational process;
- (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;
- (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.

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

Raton Evaluation Plan

The Evaluation Plan Template will be used by the district 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 will also assist the schools in assuring that all statutes related to the policy are in place.

School: **Raton Public Schools**

Date of most recent review: _____

Yes	No	Date of Completion	Item	Name of Person(s) Responsible
			Compliance with PED Wellness Policy rule, 6.12.6 NMAC - Wellness Policy completed and fully implemented	
			Each school's progress in meeting district's Wellness Policy goals recorded	
			Wellness Policy available to parents/guardians of school children/youth	
			SHAC established according to regulation (see Appendix A for list of council members)	
			SHAC meets minimum of two times annually, regarding wellness policy development and/or assessment	
			SHAC representative assigned to provide recommendations and to participate with district on wellness policy development	
			Federal and PED guidelines used to develop wellness policy	
			Parents and community members actively sought to participate in development of wellness policy	

		<p>Not a requirement by NMAC</p> <p>Not a requirement by NMAC except for diabetes. 7.30.12 is optional 2016</p> <p>EFE</p>	<p>Each of the following Nutrition components of the policy met:</p> <ul style="list-style-type: none"> * District Wellness Policy meets requirements of section 204 of Healthy, Hunger-Free Kids Act of 2010, Public law 111-296 * 6.12.5.8 NMAC Competitive Foods Standards Compliance * Assurance of adherence to requirements of possible food allergies in schools * Individualized Healthcare Plan guidelines incorporated 7.30.12 NMAC Emergency Medications in Schools compliance in case of allergic reactions * USDA Food & Beverage Marketing and Advertising policies compliance * District schools meet or exceed local, state and federal nutrition requirements and/or USDA nutrition standards * Compliance with NSLP, SBP, FFVP, SFSP, ASSP and other USDA regulated programs
			<ul style="list-style-type: none"> * The district appropriately operates other programs, including: Farm to School, Breakfast after the Bell, school gardens, etc. * Smarter Luncheon Techniques are used to encourage students by promoting healthier food and beverage choices * School nutrition staff meet or exceed hiring and professional development requirements per the USDA standards for child nutrition professionals * Free, safe unflavored drinking water is made available to all students throughout the school day * Celebrations, rewards and fundraising in schools meet or exceed nutrition standards for USDA Smart Snacks in Schools * Nutrition education is included as part of the health education curriculum * Healthy messages and nutrition promotional materials are made available throughout the school and school-related activities * Food Safety Inspections are conducted twice annually per USDA regulations and state rules, and reports are posted publicly

			<p>Health Education contents standards with benchmarks and performance standards (6.29.1 NMAC Standards for Excellence) disseminated to each school</p> <ul style="list-style-type: none"> * Health Education curriculum for each school validated as comprehensive, per PED standards and benchmarks * Life skills training is integral part of health education curriculum * Schools apply PED's "opt-out" policy, regarding sexuality component of health education curriculum * Assurance that HIV instruction is provided (6.12.2.10 NMAC) * Lifesaving skills training is included in Health Education courses
			<p>Quality physical activity is a component of the district's wellness policy, which aligns with the NM Health Education Content Standards as set forth in 6.29.9 NMAC</p> <ul style="list-style-type: none"> * Schools provide physical activity opportunities before and after school * Elementary schools provide at least 20 minutes of daily recess for all students * Playground facilities and equipment are regularly inspected for safety and accessibility * Schools are restricted from withholding physical activity from students as a form of punishment * Physical activity is included as a health education topic * Families are encouraged to assist children in using active means (walking or biking) to go to/from school

			<p>Physical education (PE) is included in schools' required programs and is based on Section 6.29.6 NMAC, NM Physical Education Content Standards with benchmarks and Performance Standards</p> <ul style="list-style-type: none"> * The wellness policy includes a planned, sequential, and developmentally appropriate K-12 physical education curriculum * PE instruction aligns with 6.29.1 NMAC Primary and Secondary Education Standards for Excellence General Provision
			<ul style="list-style-type: none"> • One unit in physical education is included as a district graduation requirement • Any alternative course offered by the district in lieu of PE is compliant with state content and performance standards • Adapted physical education is available to all students where appropriate • Physical educators are appropriately trained and certified/licensed to teach the subject
			<p>Each school has an approved Safe School Plan that is compliant with wellness policy rule 6.12.6 NMAC. (A separate Safe School Plan guidance document is provided to schools from the PED, which has detailed information and supplemental materials to guide districts/ schools)</p> <ul style="list-style-type: none"> * Schools perform 12 emergency drills each year, consisting of: 9 fire drills; 2 Shelter-in-Place drills; and one evacuation drill * A fully developed Bullying Prevention Policy is available at each school, which prohibits bullying/cyber bullying and is made available to students and parents/guardians, according to 6.12.7.8 (D) NMAC

			<ul style="list-style-type: none"> * The school policies include full compliance with 6.12.4 NMAC: Tobacco, Alcohol and Drug Free Schools; communication of such policy includes posting of signs on campuses to prohibit ATOD in all campuses and campus-related activities * All schools are compliant with 6.11.2 NMAC: Rights and Responsibilities of Public Schools and Public Students in providing schools that are absolutely gun free * Schools are compliant with 6.29.1.9 NMAC: Standards for Excellence General Provisions, Part 0 in requiring full implementation of procedures for pest management * All other Assurance forms have been completed and submitted through Web EPPS to the PED
			<p>District Wellness Policy includes a plan to address the behavioral health needs of students</p> <ul style="list-style-type: none"> * Support services are available for all students, including a referral system that is clearly conveyed to all members of the school community * Schools provide licensed staff to develop and supervise the behavioral health program * Students' behavioral health needs are assessed as part of the education plan process for student success * Schools adhere to substance abuse reporting per Section 22-5-4, 4 NMSA 1978 * School staff members are trained in child abuse and neglect detection and reporting, per Section 22-1 OA-32, NMSA 1978

		No statutory or regulatory information found except for self-medicating diabetics	Students with healthcare needs that may affect their school attendance and/or performance have Individualized Health Plans, which are separated from Individualized Education Program (IEP) plan but attached to the IEP or 504 plan based upon students' needs
			Schools are compliant with 6.12.2.10 NMAC in reference to students who may be diagnosed with HIV/AIDS
			Schools enroll students who provide satisfactory evidence of commencement or completion of NM's Public Health Division schedule NOTE: District ensures that students who are identified as homeless are not prevented from entering schools, based on inability to produce records normally required for enrollment, as per the McKinney-Vento Homeless Assistant Act
			The Wellness Policy includes the provision for any student in K - 12 the authorization to carry and self-administer health care practitioner prescribed asthma treatment and anaphylaxis emergency treatment medications, as well as the right to self-management of diabetes in school settings
			Vision screenings are administered to students enrolled in pre-K, Kindergarten, 1st and 3rd grades at a minimum

			Schools provide a plan to address staff wellness needs based upon state statute guidelines, 6.12.6 NMAC Section K: Staff Wellness for all school staff, insuring an equitable environment in compliance with the Americans with Disability Act, Title III
			District and its governing boards and schools, implement policy to ensure rights to privacy of all school employees infected with HIV, keeping these safe and confidential
			Schools provide staff with the information on activities related to personal health promotion and with the opportunity for every staff member to participate in these as feasible
			Members of the school staff are included as participants on the district's SHAC, as per 6.12.6.8 NMAC Section E

- i. Bradley, B, Green, AC. Do Health and Education Agencies in the United States Share Responsibility for Academic Achievement and Health? A Review of 25 years of Evidence About the Relationship of Adolescents' Academic Achievement and Health Behaviors, *Journal of Adolescent Health*. 2013; 52(5):523-532.
- ii. Meyers AF, Sampson AE, Weitzman M, Rogers BL, Kayne H. School breakfast program and school performance. *American Journal of Diseases of Children*. 1989;143(10):1234-1239.
- iii. Murphy JM. Breakfast and learning: an updated review. *Current Nutrition & Food Science*. 2007; 3:3-36.
- iv. Murphy JM, Pagano ME, Nachmani J, Sperling P, Kane S, Kleinman RE. The relationship of school breakfast to psychosocial and academic functioning: Cross-sectional and longitudinal observations in an inner-city school sample. *Archives of Pediatrics and Adolescent Medicine*. 1. 1998;152(9):899-907.
- v. Pollitt E, Mathews R. Breakfast and cognition: an integrative summary. *American Journal of Clinical Nutrition*. 1998; 67(4), 804S-813S.
- vi. Rampersaud GC, Pereira MA, Girard BL, Adams J, Metz! JD. Breakfast habits, nutritional status, body weight, and academic performance in children and adolescents. *Journal of the American Dietetic Association*. 2005;105(5):743-760, quiz 761-762.
- vii. Taras, H. Nutrition and student performance at school. *Journal of School Health*. 2005;75(6): 199-213.
- viii. MacLellan D, Taylor J, Wood K. Food intake and academic performance among adolescents. *Canadian Journal of Dietetic Practice and Research*. 2008;69(3): 141-144.
- ix. Neumark-Sztainer D, Story M, Dixon LB, Resnick MD, Blum RW. Correlates of inadequate consumption of dairy products among adolescents. *Journal of Nutrition Education*. 1. 1997;29(1):12-20.
- x. Neumark-Sztainer D, Story M, Resnick MD, Blum RW. Correlates of inadequate fruit and vegetable consumption among adolescents. *Preventive Medicine*. 1996;25(5):497-505.
- xi. Centers for Disease Control and Prevention. *The association between school-based physical activity, including physical education, and academic performance*. Atlanta, GA: US Department of Health and Human Services, 2010.
- xii. Singh A, Uijtdewilligne L, Twisk J, van Mechelen W, Chinapaw M. *Physical activity and performance at school: A systematic review of the literature including a methodological quality assessment*. *Arch Pediatr Adolesc Med*, 2012; 166(1):49-55.
- xiii. Haapala E, Poikkeus A-M, Kukkonen-Harjula K, Tompuri T, Lintu N, Vaisto J, Leppanen P, Laaksonen D, Lindi V, Lakka T. *Association of physical activity and sedentary behavior with academic skills -A follow-up study among primary school children*. *PLoS ONE*, 2014; 9(9): e107031. xiv Hillman C, Pontifex M, Castelli D, Khan N, Raine L, Scudder M, Drollette E, Moore R, Wu C-T, Kamijo K. *Effects of the FITKids randomized control trial on executive control and brainfunction*. *Pediatrics* 2014; 134(4): e1063-1071.
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