

SIX DIRECTIONS INDIGENOUS SCHOOL GOVERNING COUNCIL WELLNESS POLICY AND PLAN

INTRODUCTION AND WELLNESS POLICY TIMELINE

Definition: “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.

SDIS MISSION:

THE SIX DIRECTIONS INDIGENOUS SCHOOL, THROUGH A COMMITMENT TO CULTURALLY RELEVANT INDIGENOUS EDUCATION AND INTERDISCIPLINARY PROJECT-BASED LEARNING, WILL DEVELOP CRITICALLY CONSCIOUS STUDENTS WHO ARE ENGAGED IN THEIR COMMUNITIES, DEMONSTRATE HOLISTIC WELL-BEING, AND HAVE A PERSONAL PLAN FOR SUCCEEDING IN POST-SECONDARY OPPORTUNITIES.

Six Directions Indigenous School (SDIS), in compliance with 6.12.6 NMAC, is dedicated to providing a healthy learning environment and to creating a “coordinated school health approach,” recognizing the holistic needs of children and staff, and linking health and education. Grounded in indigenous epistemologies, health is not just the physical well-being of the individual, but the social, emotional, and cultural well-being of the whole community. This is a whole-of-life view.

All SDIS staff will be responsible for implementing, maintaining, evaluating, and improving the school's wellness policy in order to create a positive school environment conducive to the physical, social, and emotional wellbeing of students, staff, and parents and align with Restorative Justice practices to overcome the disproportionate punitive measures taken against students of color, including Native students, in the city of Gallup and the state of New Mexico.

The SDIS wellness framework will guide students and staff in indigenous-based, and culturally responsive holistic wellness. As per Public Education Department Wellness Policy rule 6.12.6.1 NMAC, SDIS shall establish a 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). The SHAC shall have the responsibility to make recommendations to the Board for the purpose of development, revision, implementation, and evaluation of the school district wellness policy. The SHAC will also be responsible for consulting with the board in respect to native cultural issues. The Principal will work cooperatively with the School Health Advisory Council to develop, revise, implement, and evaluate school-wide wellness practices. The Principal will be responsible for overseeing the School Health Advisory Council, scheduling meetings of the Council at least twice annually, and reporting Council activities to the Governance Board.

The Head Administrator (and in the future the Director of Education, when hired) will be responsible for the inclusion of the wellness policy in the classroom curriculum, particularly in the designated advisory time, and ensuring that the curriculum meets the health education content standards and benchmarks and performance standards, and for reporting information as required in 6.12.6 NMAC to the PED.

Prior to the start of each school year, the Governance Board will review and approve the Wellness Policy. Information regarding this policy will be available on the school website and included in the annual Parent-Student and Employee Handbooks which are disseminated free of charge to students, parents, and school staff.

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The education programs for children, professional development for staff, and family and community programming will provide for the following eight interactive components of coordinated school health: •

Family, School and Community Involvement (p. 3)

- *Physical Education and Activity (p. 6 & p.8)*
- *Nutrition (p.10)*
- *Health Education (p.12)*
- *Healthy and Safe Environment (p.14)*
- *Social and Emotional Well-being (p.16)*
- *Health Services (p.18)*
- *Staff Wellness (p.20)*

The following items will promote physical, social, and emotional wellbeing at SDIS: • *Development and Implementation of Personalized Learning Plan for Regular Education students*

- *Development and Implementation of Individualized Education Plan for Special Education Students*
- *Development of SDIS Wellness Framework*
- *Daily Advisory and student reflection and goal-setting protocols utilizing a wellness framework.*
- *Providing Education and Networking Opportunities for Families and Community Members*
- *Employment of Social Worker or School Counselor, after year one of operations and when school size allows*
- *Professional Development for Staff*
- *Health Education Classes for Middle School Students, including physical education • Including Health and Nutrition Information Across the Health Education Curriculum • Student-Led Family Conferences*
- *Providing Morning Workouts, Extra-Curricular and/or After-School Programming, including opportunities for physical activities, social interactions, etc.*
- *Daily Opportunities to promote wellness including: Morning Announcements, Morning Break, and Lunch.*
- *Restorative Justice practices and implementation of best practices from positive youth development theories*
- *School Safety and Emergency Response Plans*
- *Student Discipline Plan aligned with Restorative Justice best practices*
- *Compliance with Section 504 / American Disabilities Act*
- *Participation in School Lunch Program & Providing Healthy Snacks for Students • School Health Advisory Council (SHAC)*
- *Family Advisory Committee, as a standing committee of the Governing Council • Community and Family Events*
- *SEPD and SAT meetings*
- *Community-building circles (restorative justice)*

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FAMILY, SCHOOL AND COMMUNITY INVOLVEMENT

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: FAMILY, SCHOOL AND 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 that has the responsibility to make recommendations to the local school board in the development or revision, implementation, and evaluation of the wellness policy.

Requirement: That SDIS shall establish a school health advisory council (SHAC) that may consist of parent(s), school food authority personnel, school board member(s), school administrators, school staff, student(s), and/or community member(s). The SHAC shall have the responsibility to make recommendations to the governance board in the development or revision, implementation, and evaluation of the school district wellness policy. The SHAC shall meet for this purpose a minimum of two times annually.

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. SDIS is founded on a community-led approach to schooling; effective partnerships between families, schools and communities support the long-term, more sustainable development of life-long learning and healthy lifestyles. Local knowledge is vital to creating enduring healthy ways of living.

Activities:

I. PED required activities:

- School Health Advisory Council members (SHAC) will develop, implement, monitor and evaluate the school wellness policy.
- Create guidelines to provide physical activity opportunities to students before, during and/or after school.
- Create nutrition guidelines for a la carte offerings minimally meeting guidelines as stated in the competitive food sales rule.
- Create guidelines for school-sponsored fundraisers during normal school hours minimally meeting guidelines as stated in the competitive food sales rule.
- Create guidelines for school sponsored fund raisers before and after school hours ensuring that at least 50% of the offerings shall be healthy choices as stated in the competitive food sales rule. • Create guidelines for a planned, sequential, K-12 health education curriculum that • Address the physical, mental, emotional, and social dimensions of health aligned to the health education content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.
- Create guidelines for 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.

- Create a plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well-being.
- Create a school safety plan at each school building focused on supporting health and safe environments and including but not necessarily limited to prevention, policies and procedures, and emergency response.
- Create a plan addressing the health services needs of students in the educational process.

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- Create a plan addressing the staff wellness needs of all staff that minimally ensures an equitable work environment and meets the American with Disabilities Act Part III.
- Create a plan for measuring implementation and evaluation of the wellness policy. • The Head Administrator at SDIS will hold the operational responsibility for ensuring SDIS fulfills the school's wellness policy.

II. Other activities:

- Review contracts with outside vendors that encourage healthful eating and reduction of school/district dependence on profits from foods of little nutritional value.
- Through community presentations via PBL projects, work to increase community awareness of health, nutrition, exercise, and student health needs
- Partner with community to support policies and programs; utilize local resources •
Employ a Community/ Parent Liaison.
- Develop and implement Family Involvement Plans including student-led family conferences. • Provide Education & networking opportunities for family & community members. • Develop restorative justice protocols and hold restorative conferences with family and community in alignment with discipline policy
- Family Advisory Committee, as a standing committee of the Governing Council to assess to school's performance, bring forth concerns, propose ideas for the betterment of the school, learn and implement restorative practices, build community and support the overall growth of the school

Evaluation

See Appendix B

Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.
5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265): http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
7. *Improving School Health: A Guide to School Health Councils*, American Cancer Society, Inc., 1999: http://actionforhealthykids.org/filelib/resources/Ntl_Guide_to_SHAC.pdf.
8. *Promoting Healthy Youth, Schools and Communities: A Guide to Community-School*

Health Advisory Councils, Iowa Department of Public Health, 2000:

http://www.idph.state.ia.us/hpcdp/promoting_healthy_youth.asp.

9. Team Nutrition: Local Wellness Policy. A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.
10. Fit, Healthy and Ready to Learn, National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.
11. Changing the Scene: Improving the School Nutrition Environment, a joint publication released by USDA's Team Nutrition and CDC, provides a roadmap for assessing and improving school policies,

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in order to provide students with a healthy school nutrition environment. In the classroom students are taught to eat healthfully and to be active, but they also need the opportunity to practice those behaviors. Wellness policies combine education with practice to create healthful school environments and encourage healthy behavior: teammnutrition.usda.gov/Resources/changing.html.

12. Amstutz, L. S., and Mullet, J. (2005). *The little book of restorative discipline for schools: Teaching responsibility, creating caring climates*. Intercourse, PA: Good Books.

13. Brian Graetz, Lyn Littlefield, Margot Trinder, Brenda Dobia, Mignon Souter, Chris Champion, Susan Boucher, Chris Killick-Moran, and Robyn Cummins (2008) KidsMatter: A population health model to support student mental health and well-being in primary schools. *The International Journal of Mental Health Promotion*, pages 13–20, November 2008.

Passed by the SDIS GC 05 by the SDIS GC 05-18-2016

PHYSICAL EDUCATION

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: PHYSICAL EDUCATION

Definition: "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. *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.*

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 6.30.2.20 NMAC.

Goal: Early childhood is the most ideal time to teach active lifestyles to children and provide good examples of healthy behaviors. To provide every student with weekly physical education that meets the NM state standards and use appropriate practices to teach the skills, knowledge, and attitudes needed to be physically fit and active both now and for a lifetime. Activities are based on goals and objectives which are appropriate for all children but that, when possible, integrate local and/or traditional knowledge. These activities are planned after referring to a curriculum which has an obvious scope and sequence which aligns with the content standards with benchmarks and performance standards. SDIS seeks to take a holistic approach to wellness that is reflective of local, particularly indigenous methodologies and epistemologies and integrate local knowledge throughout the execution of the school's policies.

Activities:

I. PED required activities:

- 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 necessary to personally decide to participate in lifetime healthful physical activity.
- The physical education curriculum will be aligned to the physical education content standards with benchmarks and performance standards as per 6.30.2.20 NMAC.

II. Other Activities:

- SDIS will teach required school physical education classes in conjunction with health courses for 2016-2017; these courses are offered 4 times per week (with the exception of National Indian Youth Leadership Project time, which will include physical education and activity but that is a separate program).
- SDIS will offer access to Project Venture through the National Indian Youth Leadership Project, which is an outdoor experiential education program.

Evaluation

See Appendix B

Resources:

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1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.

5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265):
http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
7. Team Nutrition: Local Wellness Policy: A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food authority, the school board, school administrators and the public must be a part of the development process:
www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.
8. Fit, Healthy and Ready to Learn: National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.
9. Action for Healthy Kids: www.actionforhealthykids.org/resources.php.
10. American Alliance for Health, Physical Education, Recreation, and Dance:
www.aahperd.org/naspe, click on: Media and Advocacy and/or Publications.
11. PE Central: www.pecentral.org.
12. National Association of State Boards of Education: www.nasbe.org.
13. The National Indian Youth Leadership Project, <http://www.niylp.org/>.

PHYSICAL ACTIVITY

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District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: *PHYSICAL ACTIVITY

Definition: "Physical activity" means body movement of any type which include recreational, fitness, and

sport activities.

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. SDIS seeks to take a holistic approach to wellness that is reflective of local, particularly indigenous methodologies and epistemologies and integrate local knowledge throughout the execution of the school's policies.

Activities:

I. PED required activities:

- Create guidelines to provide physical activity opportunities to students before, during and/or after school.
- 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 6.30.2.19 NMAC.

II. Other Activities:

- SDIS will provide daily morning break for all students.
- SDIS will create a plan to incorporate physical activity into the academic curriculum (i.e. brain breaks, morning exercise, etc.).
- Students will have the opportunity to move throughout the classroom during their PBL • SDIS plans to promote community-based physical activities (i.e. sports clubs, bike club, hiking club, NIYLP time both during the weekdays and optionally on weekends).

Evaluation

See Appendix B

Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.
5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265): http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
7. Team Nutrition: Local Wellness Policy. A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.

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8. Fit, Healthy and Ready to Learn: National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.

9. CDC and Prevention: www.cdc.gov/nccdphp/dnpa/physical/inde.htm.
10. Action for Healthy Kids: www.actionforhealthykids.org/resources.php Select Topics.
11. American Alliance for Health, Physical Education, Recreation, and Dance: www.aahperd.org/naspe . click on: [Media and Advocacy and/or Publications](#).
12. National Association of State Boards of Education: www.nasbe.org.

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: NUTRITION

Definition: “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.

Requirement: The wellness policy shall include nutrition guidelines for a la carte offerings minimally meeting guidelines set forth in Subsection B of 6.12.5.8 NMAC. The wellness policy shall include guidelines for school sponsored fund raisers during the normal school hours minimally meeting guidelines set forth in Paragraph (1) of Subsection C of 6.12.5.8 NMAC. The wellness policy shall include guidelines for school sponsored fund raisers before and after school hours ensuring that at least 50% of the offerings shall be healthy choices in accordance with the requirements set forth in Paragraph (2) of Subsection C of 6.12.5.8 NMAC.

Goal: The goal of nutrition is to promote the role of healthy eating/nutrition in academic performance and quality of life, and to ensure the adoption of school policies which provide adequate nutrition opportunities. SDIS seeks to take a holistic approach to wellness that is reflective of local, particularly indigenous methodologies and epistemologies and integrate local knowledge throughout the execution of the school's policies.

Activities:

I. PED required activities:

- Create nutrition guidelines for a la carte offerings minimally meeting guidelines set forth in Subsection B of 6.12.5.8 NMAC.
- Create guidelines for school sponsored fund raisers during the normal school hours minimally meeting guidelines set forth in Paragraph (1) of Subsection C of 6.12.5.8 NMAC.
- Create guidelines for school sponsored fund raisers before and after school hours ensuring that at least 50% of the offerings shall be healthy choices in accordance with the requirements set forth in Paragraph (2) of Subsection C of 6.12.5.8 NMAC.
- 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 6.30.2.19 NMAC.

II. Other Activities:

- Ensure that students receive consistent nutrition messages throughout the school and classrooms; staff will practice healthy food choices as a model for students (see: Staff Wellness section below).
- SDIS will contract with local food service provider to provide a school meal with healthy selections & reinforce nutrition education.
- SDIS, in alignment with PBL, will offer courses on growing healthy foods both local and others, cooking and meal planning
- SDIS will develop specific nutritional guidelines for the school with input from the Family Advisory Committee.

Evaluation

See Appendix B

Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.

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3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.
5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265):
http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
7. Team Nutrition: Local Wellness Policy: A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.
8. Fit, Healthy and Ready to Learn: National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.
9. Team Nutrition Website: www.fns.usda.gov/tn.
10. Dietary Guidelines for Americans 2005: www.fns.usda.gov.
11. My Pyramid Food Guidance System: www.fns.usda.gov.

Passed by the SDIS GC 05-18-2016

HEALTH EDUCATION

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: HEALTH EDUCATION

Definition: "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.

Requirement: The wellness policy shall include 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.

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. SDIS seeks to take a holistic approach to wellness that is reflective of local, particularly indigenous methodologies and epistemologies and integrate local knowledge throughout the execution of the school's policies.

Activities:

I. PED required activities:

- The wellness policy shall include a planned, sequential, K-12 health education curriculum that addresses the physical, mental, emotional and social dimensions of health.
 - The health education curriculum will be aligned to the health education content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.
 - All schools will provide 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.
 - All school district/charter schools shall implement a policy that will insure that parents have the ability to request that their child be exempted from the parts of the health education curriculum that addresses the sexuality performance standards. The policy includes but is not limited to:
 - o the process for parents to request an exemption from the parts of the health education curriculum that addresses the sexuality performance standards and
 - o how alternative lessons are established for the exempted parts of the curriculum.
- All school district/charter school shall 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 6.12.2.10.C NMAC.

II. Other Activities:

- Health education lessons will be taught in a manner that is culturally sensitive during the wellness course and in alignment with the SDIS wellness philosophy
- Health education lessons are taught using a variety of instructional strategies (i.e. role playing, projects, media literacy, etc.).
- Health education is integrated into the core curriculum.

Evaluation

See Appendix B

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Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265): http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
7. Team Nutrition: Local Wellness Policy. A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food

- authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html
8. Fit, Healthy and Ready to Learn, National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.
 9. American Association for Health Education. Online at www.aahperd.org/aahe/. 10. American Alliance for Health, Physical Education, Recreation and Dance. Online at www.aahperd.org/.
 11. *Coordinated School Health Program Infrastructure Development Process Evaluation Manual*. Atlanta: CDC, 1997. Available at www.cdc.gov/nccdphp/dash/publications/inde.htm. 12. Evaluating a national program of school-based HIV prevention. Collins J, Rugg D, Kann L, Pateman B, Banspach S, Kolbe L. *Evaluation and Program Planning* 1996; 19(3): 209–18.
 13. *Handbook for Evaluating HIV Education*. Atlanta: CDC, 1992. Available at www.cdc.gov/nccdphp/dash/publications/inde.htm.
 14. *Introduction to Program Evaluation for Comprehensive Tobacco Control Programs*. MacDonald G, Starr G, Schooley M, Yee SL, Klimowski K, Turner K. Atlanta: CDC, 2001.
 15. U.S. Department of Health and Human Services. *The Surgeon General's call to action to prevent and decrease overweight and obesity*. Rockville, MD.: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General, 2001. Online at www.surgeongeneral.gov/topics/obesity/.
 16. U.S. Department of Health and Human Services. *The Surgeon General's call to promote sexual health and responsible sexual behavior*. Rockville, MD.: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General, 2001. Online at www.surgeongeneral.gov/library/seualhealth/default.htm.
 17. U.S. Department of Health and Human Services. *The Surgeon General's call to action to prevent suicide*. Rockville, MD.: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General, 1999. Online at www.surgeongeneral.gov/library/calltoaction/default.htm.
 18. Health is Academic: www.edc.org/HealthIsAcademic.
 19. The American School Health Association (ASHA): <http://www.ashaweb.org>.

HEALTHY AND SAFE ENVIRONMENT

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Passed by the SDIS GC 05-18-2016

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: HEALTHY AND SAFE ENVIRONMENT

Definition: “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.

Requirement: The wellness policy shall include school safety plans at each school building focused on supporting healthy and safe environments and including, but not necessarily limited to, prevention, policies and procedures and emergency response plans.

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 supports academic achievement. SDIS promotes holistic student development and positive behavior approaches.

Activities:

I. PED Required Activities:

- Create school safety plans at each school building focused on supporting healthy and safe environments and including, but not necessarily limited to, prevention, policies and procedures and emergency response plans.
- 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 at the intervals set forth in subsection M of 6.30.2.10 NMAC.

II. Other Activities:

- SDIS will provide safety procedures and appropriate training for students, teachers and staff that support personal safety and a violence/harassment-free environment.
- All school buildings and grounds, structures, buses and equipment will strive to meet current safety standards and are kept inviting, clean, safe and in good repair.
- SDIS will adopt policies that create an environment free of tobacco, alcohol and other drugs. • The Leadership team will maintain and update the school safety and emergency response plans. • SDIS will use a restorative justice school discipline plan to encourage and support positive behavior choices
- Advisory period will supply built-in peer groups for students and give students an adult who knows them well and who can offer advocacy and support in difficult social, emotional, and academic. situations,

Evaluation

See Appendix B

Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.
5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265): http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.

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Passed by the SDIS GC 05-18-2016

6. Team Nutrition: Local Wellness Policy. A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.
7. Fit. Healthy and Ready to Learn. National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School

- Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.
8. U.S. Department of Education: Safe and Drug Free Schools Office:
www.ed.gov/offices/OESE/SDFS/inde.html.
 9. Federal Emergency Management Agency: www.fema.gov.
 10. American Red Cross: www.redcross.org.
 11. American School Counselors Association: www.schoolcounselor.org.
 12. New Mexico Homeland Security Office:
www.governor.state.nm.us/homeland.php?mm=4.
 13. National School Safety and Security Services: www.schoolsecurity.org.
 14. U.S. Department of Homeland Security: www.ready.gov.
 15. Meyer, L. H. & Evans I, M. (2012). The Teacher's Guide to Restorative Classroom Discipline.
London, UK: SAGE Publications Ltd.
 15. The Centers for Disease Control and Prevention, Division of Adolescent and School Health.
<http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.

SOCIAL AND EMOTIONAL WELL-BEING

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Passed by the SDIS GC 05-18-2016

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: SOCIAL AND EMOTIONAL WELL-BEING

Definition: "Social and emotional well-being" means services provided to maintain and/or improve

students' mental, emotional, behavioral, and social health.

Requirement: The wellness policy shall include a plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well being.

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.

Activities:

I. PED Required Activities:

Create a plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well-being.

II. Other Activities

- SDIS will provide an environment in which students are able to request assistance when needed. • SDIS will use PBL strategies including group work protocols and ongoing reflective practices. • SDIS has a sociocultural critical consciousness strand that helps students to focus on and develop personal and interrelationships
- SDIS will provide a supportive school environment that links to community resources. • Professional development/training for staff around community-building circles, restorative practices, and mental health.
- The school emphasis will be around personal and community responsibility, social justice. • Each student is assigned a staff advisor to address the social and emotional well-being on a daily basis through advisory.

Evaluation

See Appendix B

Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.
5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265): http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health: <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
7. Team Nutrition: Local Wellness Policy. A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.

Passed by the SDIS GC 05-18-2016

8. Fit, Healthy and Ready to Learn: National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.

Passed by the SDIS GC 05-18-2016

HEALTH SERVICES

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: *HEALTH SERVICES

Definition: “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.

Requirement: The wellness policy shall include a plan addressing the health services needs of students in the educational process.

Goal: The goal of health services is to provide coordinated, accessible health and mental health services for students, families and staff.

Activities:

I. PED Required Activities:

Create a plan addressing the health services needs of students in the educational process.

II. Other Activities:

- Services provide a linkage to school and community health resources (e.g., primary care, public health, community health agencies and faith based groups, school-based health centers).
- Services include but are not limited to preventive services, behavioral health services, screenings and referrals; evaluations and assessments; first aid and emergency care; follow-up care; school safety; health education and ancillary services (e.g., speech therapy or physical therapy and or occupational therapy).
- Services are provided in partnership with students, parents, staff and community (see family and community involvement)
- Health service programs shall strive to meet all reporting, record-keeping and confidentiality requirements

Evaluation

See Appendix B

Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.
5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265): http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.

Passed by the SDIS GC 05-18-2016

7. Team Nutrition: Local Wellness Policy: A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.
8. Fit, Healthy and Ready to Learn: National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.
9. American School Counselors Association: www.schoolcounselor.org.
10. National Mental Health Association: www.nmha.org.
11. National Association of School Psychologists: www.nasponline.org/inde2.html.
12. National Association of School Nurses: <http://nasn.org/positions/positions.htm>
13. Crisis Response Team: www.healthinschools.org/sh/CrisisResponse.pdf or www.healthinschools.org/sh/schoolresponse.asp.

Passed by the SDIS GC 05-18-2016

STAFF WELLNESS

District: SIX DIRECTIONS INDIGENOUS SCHOOL

Component: STAFF WELLNESS

Definition: “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. [6.12.6.7 NMAC - N, 02-28-06] **6.12.6.8**

Requirement: The wellness policy shall include a plan addressing the staff wellness needs of all school staff that minimally insures an equitable work environment and meets the Americans with Disabilities Act, Part III.

Goal: The goal of staff wellness is to promote activities for staff that are designed to promote the physical, emotional and mental health of school employees as well as to prevent disease and disability.

Activities:

I. PED Required Activities:

- Create a plan addressing the staff wellness needs of all school staff that minimally insures an equitable work environment and meets the Americans with Disabilities Act, Part III.

II. Other Activities:

- SDIS will provide staff and faculty the opportunity to participate in a health promotion program focusing on exercise, stress management and nutrition (i.e. health fairs, fun runs, walks etc).
- SDIS professional development will include a bi-monthly component that takes staff wellness into account
- The wellness of SDIS staff is enhanced with nutritional expectations that align with the positive, healthy choices and nutrition expected of students
- SDIS will provide staff and faculty with accurate, evidence based information or activities related to exercise, stress management and nutrition (i.e. newsletters, yoga, Pilates, menopause information, weight lifting, cardio improvement classes, etc).

Evaluation

See Appendix B

Resources:


1. New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.
2. Youth Risk and Resiliency Survey – online at <http://www.health.state.nm.us/pdf/YRRS2003FinalReport.pdf> or <http://hsc.unm.edu/chpdp/projects/pyrrs.htm>.
3. School District Wellness Policy rule 6.12.6.6 NMAC.
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC.
5. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265): http://www.fns.usda.gov/cnd/Governance/Legislation/PL_108-265.pdf.
6. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
7. Team Nutrition: Local Wellness Policy. A team of community members must be involved in the development of each local wellness policy. Parents, students, representatives of the school food

Passed by the SDIS GC 05-18-2016

authority, the school board, school administrators and the public must be a part of the development process: www.fns.usda.gov/tn/Healthy/wellnesspolicy.html.

8. Fit, Healthy and Ready to Learn: National Association of State Boards of Education, provides detailed guidance for development of school health policy following the Coordinated School Health Program model: www.nasbe.org/HealthySchools/fithealthy.html.

Passed by the Six Directions Indigenous School Governing Council this 18th day of May 2016.

President: _____ 

Date: 05-18-2016

Passed by the SDIS GC 05-18-2016
APPENDIX A

SCHOOL HEALTH ADVISORY COUNCIL (SHAC) MEMBERS

As per the Public Education Department Wellness Policy rule 6.12.6.1 NMAC, 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). 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 is to identify a wellness policy champion(s) within the school district, or at each school, as appropriate, charged with the operational responsibility for ensuring that each school fulfills the school district's wellness policy.

NAME ROLE PHONE NUMBER E-MAIL Wellness Policy lead

- School administrator
- School board member
- School staff
- School food authority personnel
- Parent
- Student
- Community member
- Other (indicate)
- Other (indicate)
- Other (indicate)
- Other (indicate)
- Other (indicate)

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- Other (indicate)
- Other (indicate)

Appendix B

EVALUATION

As per the school district wellness policy rule 6.12.6.6 NMAC each school district must develop and submit 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.

Component/Activity Outcome Measures

School Health Advisory Council. The local school board adopts ____% of the recommendation from the School Health Advisory Council

Physical Activity. ____% of students participated in physical activity offerings.

100% of the offerings in al la carte meet the guidelines set forth in subsection B of 6.12.5.8 NMAC.

Nutrition 100% of the clubs/sports/etc are following the guidelines for school sponsored fund raisers during normal school hours minimally meeting 6.12.5.8 NMAC. 100% of the clubs/sports/etc are following the guidelines for school sponsored fund raisers before and after school hours ensuring that at least fifty percent of the offerings shall be healthy choices in accordance with the requirements set forth in paragraph (2) of subsection C of 6.12.5.8 NMAC.

Health Education
guidelines set forth in paragraph (1) of subsection C of

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____% of students meet the health education content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.

Physical Education ____% of students meet the physical education content standards with benchmarks and performance standards as set forth in 6.30.2.20 NMAC.

Behavior Health ____% reduction in discipline protocols due to behavioral health problems. 100% of teachers and other school staff are aware of and know how to

School Safety implement the school level safety plans.

Health Services ____% reduction in student absenteeism. ____% of students who have been screened for vision/hearing

Staff Wellness ____% reduction in staff absenteeism.

School Climate ____ student Perception of safety
____ student identification of a positive relationship with an adult at school

Appendix C

SDIS Competitive Food Rules

“Competitive food means a food or beverage sold at school other than one served as part of the United States Department of Agriculture school meal program. The term includes any item sold in vending machines, a la carte or through other school fundraising efforts during the normal school hours.

Vended Beverages and Foods-means a beverage or food product sold in vending machines to student in schools.

Middle (Vended Beverages) High (Vended Beverages)

No vended item may be sold prior to or during lunch

Allowed after last lunch period only:

- Milk 2% or less
- Soy milk
- Water
- 100% fruit juice that has:
 - no added sweetener
 - no more than 125 calories/container and
 - a service size not to exceed 20 oz.

No vended items may be sold during breakfast or lunch periods

Middle (Vended Food) High (Vended Food)

No vended items may be sold prior to or during meals

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Allowed after the last lunch period.

Foods meeting the following guidelines ****with the exception of nuts, seeds, cheese, yogurt, and fruit:**

- No more than 200 calories per container or per package or amount served, **and**
- No more than 8 grams fats per serving with no more than 2 grams from saturated and trans fats combined per container or per package or amount served **and**
- No more than 15 grams of sugar per container or per package or

Allowed after meal periods, but not during:

- Milk 2% or less Soy milk
- Water
- At least 50% fruit juice that has: no added sweeteners a serving size not to exceed 20 oz.

The following items may only be sold after the last lunch period:

- Non-carbonated flavored water with no added sweeteners
- Sports drinks

No vended items may be sold prior to or during meals

amount served

Allowed after the last lunch period.

Foods meeting the following guidelines ****with the exception of nuts, seeds, cheese, yogurt, and fruit:**

- No more than 200 calories per container or per package or amount served, **and**
- No more than 8 grams fats per serving with no more than 2 grams from saturated and trans fats combined per container or per package or amount served **and**
- No more than 15 grams of sugar per container or per package or amount served

A La Carte (only during lunch period)-means a beverage or food product sold in schools to students during the lunch period that is not part of the United States Department of Agriculture school meal program.

Middle (A La Carte Beverages) High (A La Carte Beverages)

Allowed only during lunch period:

- Milk 2% or less Soy milk
- Water
- 100% fruit juice that has:
 - no added sweetener
 - no more than 125 calories/container and size not to exceed 20 oz.

Allowed only during lunch period:

- Milk 2% or less Soy milk
- Water
- At least 50% fruit juice that has: no added sweeteners a serving size not to exceed 20 oz.

Middle & High (A La Carte Foods)

Foods products sold in Elementary, Middle and High School only during the lunch period as a la carte sales must meet the following guidelines

*****with the exception of nuts, seeds, cheese, yogurt, and fruit.***

- No more than 400 calories per container or per package or amount served; **and** • No more than 16 grams of fat (no more than 2 grams from saturated and trans fats combined) per container or per package or amount served **and**
- No more than 30 grams of total sugar per container or per package or amount served.

Fundraisers-means beverages or food products sold to raise money that are not sold in vending machines, a la carte sales or part of the United States Department of Agriculture school meal program.

Middle (Fundraiser, during normal school hours, Beverages)

High (Fundraiser, during normal school hours, Beverages)

Beverages Allowed as fundraiser except during **Beverages Allowed as fundraiser except during**

Passed by the SDIS GC 05-18-2016
meal periods

- Milk 2% or less Soy milk Water
- 100% fruit juice that has:
 - no added sweeteners
 - no more that 125 calories/container and
 - a serving size not to exceed 20 oz.

Middle (Fundraiser, during normal school hours, Food)

Allowed as fund raiser except during meal periods

Foods meeting the following guidelines *****with the exception of nuts, seeds, cheese, yogurt, and fruit:***

- No more than 200 calories per container or per

- package or amount served, and
- No more than 8 grams fats per serving with no more than 2 grams from saturated and trans fats per container or per package or amount served and
- No more than 15 grams of sugar per container or per package or amount served

meal periods

Milk 2% or less Soy milk Water
 At least 50% fruit juice that has: no added sweeteners no more that 125 calories/container and a serving size not to exceed 20 oz.

Food)

Allowed as fund raiser except during meal periods

Foods meeting the following guidelines ****with the exception of nuts, seeds, cheese, yogurt, and fruit:**

- No more than 200 calories per container or per package or amount served, and
- No more than 8 grams fats per serving with no more than 2 grams from saturated and trans fats per container or per package or amount served and
- No more than 15 grams of sugar per container or per package or amount served

High (Fundraiser, during normal school hours,

Beverages and food products may be sold as fundraisers outside of normal school hours for Middle and High Schools provided that at least 50 per cent of the offerings meet the following requirements:

Beverages Food

Beverages:

- Milk 2% or less
- Soy milk
- Water
- At least 50% fruit juice that has: •no added sweeteners •no more that 125 calories/container and •a serving size not to exceed 20 oz.

with the exception of nuts, seeds, cheese, yogurt, and fruit:

- No more than 200 calories per container or per package or amount served, and
- No more than 8 grams fats per serving with no more than 2 grams from saturated and trans fats per container or per package or amount served and
- No more than 15 grams of sugar per container or per package or amount served

COMPETITIVE FOOD RULES

All New Mexico public schools are under federal and state requirements to implement a school Wellness Policy. As a part of the Wellness Policy, procedures are being implemented to improve the nutrition of all foods served at school and sold during and after school in fundraisers. Following the rules, policies and procedures is mandatory and there are no exceptions per PED and federal mandates. All policies, procedures, guidelines and rules are for the purpose of reducing the obesity rates in American children, teens and adults.

FOOD AND BEVERAGES SOLD TO STUDENTS IN VENDING MACHINES:

Passed by the SDIS GC 05-18-2016

The PED rules are very specific regarding the times that vended products can be sold to students and as to what food and beverages, along with the serving sizes, can and can not be sold to students in vending machines. These times and allowable foods and serving sizes are specified in the attached guidelines (see Central Consolidated Schools-Competitive Food Rules-Nutrition Attachment A). Beverage and food vending machines must be turned off until after lunch in junior high (vending sales are not allowed prior to or during lunch). Beverage and food vending machines must be turned off prior to school starting and during lunch in high schools (vending sales are not allowed prior to school starting or during lunch).

FOOD AND BEVERAGES SOLD AS FUNDRAISERS

The PED rules are very specific regarding what food and beverages can be sold as fundraisers during normal school hours and outside of normal school hours. PED recommends that fundraising opportunities other than those containing food or beverages be used.

This applies to concession stands and field day sales, also.

OTHER ISSUES RELATED TO FOOD AND BEVERAGES IN SCHOOLS

Food and beverages must not be used as a reward. It is well documented that when food or beverages are used to reward behavior, future dysfunctional eating patterns may form as a result and these can contribute to overweight and/or obesity.

Cultural foods cooked in classrooms and served to the students of that class as a teaching tool are allowed if it is part of the curriculum and lesson plans. Foods that are high in fat and sugar should be eliminated, and substituted with lower fat and lower sugar alternatives. Regulations must be followed when any cooking is done in a classroom.

Nutrition Clarification

PARTIES AND SPECIAL EVENTS

All New Mexico public schools are under federal and state requirements to implement a school Wellness Policy. As a part of the Wellness Policy, procedures are being implemented to improve the nutrition of all foods served at school and sold during and after school in fundraisers. This procedure addresses the foods and beverages served at parties and special events.

Requirements: All parties or special events must conform to the following:

Parties or special events may occur only after lunch, not before or during .

BEVERAGES served must meet the following criteria: Milk, 2% or less Soy milk Water 100% fruit juice A serving size not to exceed 20 oz. The following beverages may not be served: Fruit drinks, punches, fruit aides, or powdered drinks Carbonated drinks Non-carbonated flavored water with added sweeteners Sports drinks

FOODS served must meet the following criteria: Nuts, seeds, cheese, yogurt and fruits (fresh, canned, whole or pieces) are allowable foods to be served anytime in moderation; All other foods served at parties or special events must meet the following nutrition criteria (use nutrition facts labels for evaluation-an evaluation form is attached):

- No more than 200 calories per container or per package or amount served, and
- No more than 8 grams of fat per serving with no more than 2 grams from saturated and trans fats combined per container or per package or amount served and
- No more than 15 grams of sugar per container or per package or amount served

Passed by the SDIS GC 05-18-2016

Appendix D

Component/Activity In Planning In Process In Place School Board established a School Health Advisory Council.

School Health Advisory Council contain all required members: 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 reports to the local school board recommendations for development/revision, implementation and evaluation of the wellness policy at least annually.

The School Health Advisory Council has met at least twice this year for the purpose of development or revision, implementation, and evaluation of the wellness policy.

The School Health Advisory council designated 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.

The school board has adopted physical activity guidelines for before, during and/or after school.

Nutrition guidelines for a la carte offerings minimally meeting guidelines set forth in subsection B of 6.12.5.8 NMAC.

Nutrition guidelines for school sponsored fund raisers during normal school hours minimally meeting guidelines set forth in paragraph (1) of subsection C of 6.12.5.8 NMAC.

Nutrition guidelines for school sponsored fund raisers before and after school hours ensuring that at least fifty percent of the offerings shall be healthy choices in accordance with the requirements set forth in paragraph (2) of subsection C of 6.12.5.8 NMAC.

Passed by the SDIS GC 05-18-2016

Guidelines for 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.

Guidelines for 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.

A plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well being.

A school safety plan at each school building focused on supporting health

and safe environments and including but not necessarily limited to prevention, policies and procedures and emergency response. A plan addressing the health services needs of students in the educational process.

A plan addressing the staff wellness needs of all staff that minimally ensures an equitable work environment and meets the American with Disabilities Act Part III.

Passed by the SDIS GC 05-18-2016