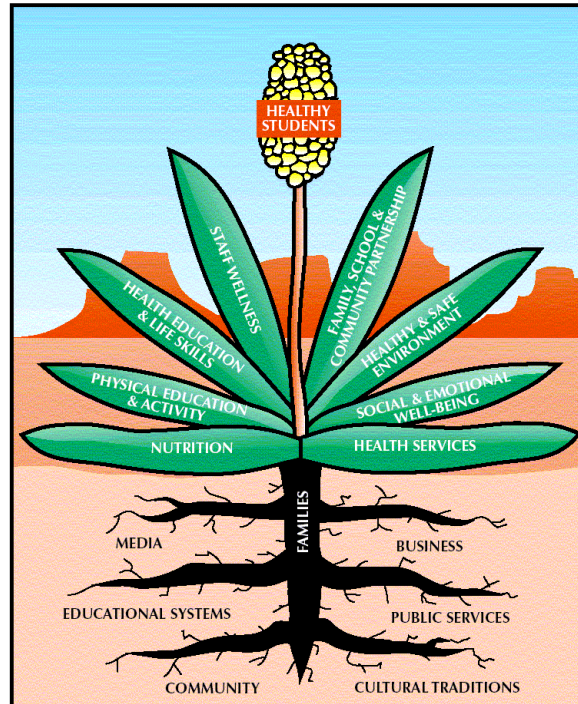


BLOOMFIELD SCHOOLS

DISTRICT WELLNESS POLICY

HEALTHIER SCHOOLS - NEW MEXICO



January 2020

**Family, School & Community Involvement, Nutrition, Physical Activities,
Health Education, Physical Education, Healthy & Safe Environment, Health Services,
Social and Emotional Well-Being and Staff Wellness**

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DISTRICT WELLNESS POLICY

The Bloomfield School District recognizes that students, families, schools, and communities benefit when schools provide a coordinated school health program linking health and academic success. As such, the Bloomfield School District is committed to meeting the needs of the whole child by fostering health and wellness, through the model of coordinated school health. These components include health education and life skills; nutrition, physical education and activity; family, school and community partnership; social and emotional well-being; healthy and safe environment; health services; and staff wellness.

It shall be the policy of the district to implement a coordinated district wellness plan that incorporates Public Education Department regulations and requirements. The Board shall establish a district School Health Advisory Council (SHAC) that consists of parents, school food authority personnel, school board members, school administrators, school staff, students, and community members.

The School Health Advisory Council 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 coordinated school health program will be successful through the combined efforts of the Bloomfield School District and the broader community.

Bloomfield Schools Wellness Policy is available on our district's website at <http://www.bsin.k12.nm.us> .

SCHOOL HEALTH ADVISORY COUNCIL (SHAC) MEMBERS

As per Public Education Department Wellness Policy rule 6.12.6.1 NMAC, all New Mexico local board of education shall establish a district School Health Advisory Council (SHAC) that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), school staff, student(s) and community member(s).

Name	Role	Phone	Email
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Lavette Quintana	Social & Emotional Well-Being	505-634-3628	lquintana@bsin.k12.nm.us
Dale Maes	Board Member		dmaes@bsin.k12.nm.us
Sadie Smith McDaniels	Community Member	505-947-4384	sadieloye@gmail.com
Claracy Harrington	Student		
Garryth Harrington	Student		
Rachael H-Sanchez	Parent		
Twila Becenti-Fundark	Department of Health	505-566-0515	twila.becenti-funda@state.nm.us
Patience Williams	San Juan County Partnership		williamsp@sjcpartnership.org

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.

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

Requirements:

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 staff, student(s), and community member(s).

The SHAC will update or modify the wellness policy based on the result of the annual progress reports and triennial assessments, and/or as District priorities change; and new Federal or state guidance or standards are issued. All Principals and directors are charged with operational responsibility for ensuring that each school fulfills the district's wellness policy.

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.

The school health advisory council 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. Effective partnerships between families, schools, and communities support the development and the maintenance of this comprehensive learning environment.

Activities:

I. PED Required Activities:

- a. Principals and directors will submit an evaluation of the wellness policy from their school or department.
- b. All principals and directors are charged with operational responsibility for ensuring that each school fulfills the district's wellness policy.

II. Other Activities:

- a. Contracts with outside vendors will be reviewed to encourage healthful eating and reduction of school/district dependence on profits from foods with little nutritional value.
- b. Community awareness of student health needs will increase.
- c. The district/schools will seek to partner with community to support policies and programs.

Evaluation:

See Appendix B.

Resources:

1. New Mexico Public Education Department, School and Family Support Bureau – Online at <http://www.ped.state.nm.us> or by phone: 505.827.1804
2. School District Wellness Policy rule 6.12.6.5 NMAC
3. Action for Healthy Kids: www.actionforhealthykids.org/resources.php Select Topics
4. Model Policies – Model School Wellness Policies: www.schoolwellnesspolicies.org/WellnessPolicies.html
5. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC
6. Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265)
7. Dietary Guidelines for Americans 2005: www.fns.usda.gov
8. Choose MyPlate: www.choosemyplate.gov
9. [Wellness School Assessment Tool \(Wellsat 2.0\)](#)
10. “Healthy, Hunger-Free Kids Act of 2010” (Sec. 204 of Public Law 111-296):
<http://www.fns.usda.gov/tn/local-school-wellness-policy>
11. USDA Memorandum on wellness policies:
http://www.fns.usda.gov/sites/default/files/SP42-2011_os.pdf
12. 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>

NUTRITION

Definition:

Nutrition means programs that provide access to a variety of nutritious and appealing meals that accommodate the health and nutrition of all students. Meals served through the National School Lunch and Breakfast Programs will:

- be appealing and attractive to children;
- be served in clean and pleasant settings;
- meet, at a minimum, nutrition requirements established by local, state, and federal statutes, and regulations;
- offer a variety of fruits and vegetables;
- serve New Mexico Grown fruit and vegetables when available
- serve only low-fat (1%) and fat-free milk – white or flavored
- strive to serve only whole grains or at least 80% whole grains

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

Requirement:

The wellness policy includes nutrition guidelines for a la carte offerings minimally meeting the guidelines set forth in 7 CFR 210.11 and Subsection B of 6.12.5.8 NMAC

The wellness policy includes 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 A fund raiser may be conducted during school hours a maximum of one time per semester or trimester per school.

The wellness policy includes 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 foods and beverages sold separate from school meals on the school campus during the school day are required to meet Smart Snacks standards.

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

All schools must meet or exceed local, state, and federal nutrition requirements and/or USDA nutrition standards.

The Bloomfield School District will model and encourage healthy eating by all students by engaging in nutrition education and promotion by: a) Nutrition education will be integrated within the comprehensive health education curriculum and other instructional areas, as appropriate, and taught at every grade level, K through 12. Nutrition education will follow

applicable New Mexico Health Education Content Standards with Benchmarks and Performance Standards as set forth in 6.29.6 NMAC and be designed to help students acquire: 1. Nutrition knowledge, including, but not limited to: the benefits of healthy eating; essential nutrients; nutritional deficiencies; principles of healthy weight management; the use and misuse of dietary supplements; and safe food storage, handling, and preparation. 2. Nutrition-related skills, including, but not limited to: planning healthy meals; understanding and using food labels; critically evaluating nutrition information, misinformation, and commercial food advertising; assessing personal eating habits; and setting and achieving goals related to these concepts.

All schools will ensure free drinking water is readily available during the school day and where meals are served.

All schools are committed to providing a safe and nurturing environment for students. We understand the risk of accidental exposure to allergens can be reduced in the school setting, we are committed to working in cooperation with parents, students, and physicians, to minimize risks and provide a safe educational environment for all students. The food service staff in each school is aware of the allergies and food restrictions for students in their building, based on information given to them by the nursing staff. Building nursing staff develops individualized healthcare plans and/or individualized emergency plans, as appropriate, for students with severe food allergies and/or restrictions. In addition, the United States Department of Agriculture regulations require substitutions or modifications in school meals for children whose disabilities restrict their diets. When in the licensed physician's assessment, food allergies may result in severe, life-threatening (anaphylactic) reactions, the child's condition would meet the definition of "disability," and the substitutions. The United States Department of Agriculture regulations require substitutions or modifications in school meals for children whose disabilities restrict their diets prescribed by the licensed physician must be made. The school nutrition program must receive a signed statement by a licensed physician that identifies: *the child's disability; *an explanation of why the disability restricts the child's diet; * the major life activity affected by the disability; and * the food or foods to be omitted from the child's diet and the food or choice of foods that must be substituted.

Encourage parents and staff to bring foods that meet the district's nutrition guidelines for school celebrations and snacks.

To ensure that only foods that have been prepared and held under safe food handling procedures, "hot cooked" potentially hazardous foods will not be allowed to be served to students during school hours. This does not apply to foods that a student brings from home for his or her own consumption (lunches, snacks).

Goal:

The goal of nutrition 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 nutrition opportunities.

Activities:

- I. **PED required activities:**
- a. Create nutrition guidelines for a la carte offerings minimally meeting guidelines set forth in Subsection B of 6.12.5.8 NMAC
 - b. Create 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
 - c. 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
 - d. All schools will provide nutrition education activities that align with the New Mexico health education content standards with benchmarks and performance standards set for in 6.30.2.19 NMAC
 - e. The district's Student Nutrition Program will accommodate students with special dietary needs. Parent will take a doctor's statement to the school nurse. The nurse verifies it with the doctor and then sends it to Student Nutrition. Student Nutrition then works with parent and nurse to create a special diet per student's needs and provides labels as needed.
- II. **Other activities:**
- a. The Student Nutrition Program will develop a plan and guidelines for implementation of the nutrition component.
 - b. All schools in the district support the school breakfast program.
 - c. All schools will collaborate with the cafeteria and the classroom to provide healthy selections and reinforce nutrition education.
 - d. All elementary schools are encouraged to schedule recess before lunch so that children are less distracted and ready to eat a healthy diet.

Guidelines:

See Appendix A.

Evaluation:

See Appendix B.

Resources:

1. New Mexico Public Education Department, –Student Success and Wellness Bureau-online <http://www.ped.state.nm.us> or phone: 505.827.1821
2. School District Wellness Policy rule 6.12.6.5 NMAC
3. Game On Action for Healthy Kids: www.actionforhealthykids.org Select Tools For Schools
4. Nutrition: Competitive Food Sales Rule 6.12.5.6 NMAC
5. Child Nutrition and WIC Reauthorization Act of 2015 (Public Law 108-265)

6. Team Nutrition: Local Wellness Policy:
www.fns.usda.gov/th/Healthy/wellnesspolicy/html
7. Dietary Guidelines for Americans 2015-2020: www.fns.usda.gov
8. My Plate Food Guidance System: www.fns.usda.gov
9. The Alliance for a Healthier Generation provides a set of tools to assist with implementation of Smart Snacks www.healthiergeneration.org/smartsnacks
10. Smart Snacks in Nutrition standards:
<http://www.fns.usda.gov/healthierschoolday/tools-smart-snacks>
11. USDA Team Nutrition for Nutrition education materials:
www.fns.usda.gov/tn/team-nutrition
12. USDA Guide to Professional Standards for School Nutrition Programs:
<http://www.fns.usda.gov/guide-professional-standards-school-nutrition-programs>

PHYSICAL ACTIVITIES

Definition:

Physical activity means body movement of any type that includes recreational, fitness, and sport activities. Physical education is one source, but should not be the only source of physical activity before, during and/or after school.

Requirement:

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

Goal:

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

Activities:

I. PED required activities:

- a. Follow guidelines to provide physical activity opportunities to students before, during and/or after school.
- b. All schools will provide education on the health benefits of physical activity that align with the New Mexico health education content standards with benchmarks and performance standards as set forth in 6.29.9 NMAC

II. Other activities:

- a. Elementary schools in the district will provide daily recess for all students.
- b. All schools in the district are encouraged not to withhold physical activity (i.e. physical education class, recess, etc.) as a means/method of punishment.
- c. All schools in the district will provide physical activity opportunities before and after school in collaboration with the community (i.e., intramurals, club activities, interscholastic sports, etc.)
- d. All schools in the district will encourage the use of school facilities outside of school hours.
- e. All schools are encouraged to incorporate physical activity into the academic curriculum (i.e. brain breaks, transition activities, warm-ups etc.).
- f. All schools should plan for school-wide physical activities (i.e. fun days, family fitness nights, and field days).

Guidelines:

Recess in Elementary Schools - Recess provides opportunities for physical activity, which helps students stay alert and attentive in class and provides other educational and social benefits. School principals shall develop schedules that provide time within every school day for preschool, kindergarten and elementary school students to enjoy supervised recess. Every school shall have playgrounds, other facilities, and equipment available for free play. Staff is encouraged not to deny a student's participation in recess or other physical activity as a form of discipline punishment, and encouraged not to cancel it for instructional make-up time.

School/Community Collaboration – Schools shall work with recreational agencies and other community organizations to coordinate and enhance opportunities available to students and staff for physical activity during their time out of school. Use of school facilities shall support

such activities, providing proper scheduling and assuring the use of facility form and certificate of liability insurance is provided.

Integrating Physical Activity into the Classroom Setting – It is recommended that schools provide brief exercise breaks throughout the school day to enhance student focus and attention. Frequency and type of activity should be developmentally appropriate, for example: PK-K: 3 minutes for every 15 minutes of instruction, grades 1-3: 3 to 5 minutes for every 20 minutes, grades 4-12: 5 minutes for every 30- 35 minutes on content instruction.

School-wide Physical Activities – Each school should have a plan for a school-wide physical activity such as a fun day, fitness day, or field day. Such events should be scheduled on an annual basis.

Evaluation:

See Appendix B.

Resources:

New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505.827.1804

1. School District Wellness Policy rule 6.12.6.5 NMAC
2. Action for Healthy Kids: www.actionforhealthykids.org/resources.php Select Topics
3. Model Policies – Model School Wellness Policies:
www.schoolwellnesspolicies.org/WellnessPolicies.html
4. [CDC: Comprehensive School Physical Activity Program](#)
5. [Action for Healthy Kids](#): includes “Tools for Schools” resources.
6. [US Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity](#)
7. [Let's Move! Active Schools](#)
8. [Change Lab Solutions](#)
9. [Presidential Youth Fitness Program](#) - Includes Fitness Program Checklist
10. [USDA Healthy Meals Resource System on Physical Activities](#)
11. [Alliance for a Healthier Generation Physical Activity Resources](#)
12. [American Academy of Pediatrics: The Crucial Role of Recess in School](#)
13. [Environmental Protection Agency](#) Resources for school environmental health program

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 6.29.1 NMAC Standards for Excellence.

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.

Activities:

I. PED Required Activities:

- a. The wellness policy shall include a planned, sequential, K-12 health education curriculum that addresses the physical, mental, emotional and social dimensions of health.
- b. 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.
- c. All schools will provide activities in comprehensive health education that align with the New Mexico health education content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.
- d. All school districts 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:
 1. The process for parents to request an exemption from the parts of the health education curriculum that address the sexuality performance standards and
 2. How alternative lessons are established for the exempted parts of the curriculum.
- e. All school districts 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.
- f. All high school student will receive 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 as set forth in

Section 22-13-1 NMSA 1978, Section H.

- g. Beginning with students entering the seventh grade, a course in health education is required for both middle and high school students. High school students are required to have 0.5 credits in Health education prior to graduation, as determined by the school district.

II. Other Activities:

- a. Health education lessons will be taught in a manner that is culturally sensitive.
- b. Health education lessons are taught using a variety of instructional strategies (i.e. role playing, projects, media literacy, etc.).

Evaluation

See Appendix B.

Resources:

New Mexico Public Education Department, School and Family Support Bureau – online <http://www.ped.state.nm.us> or phone: 505-827-1804.

1. School District Wellness Policy rule 6.12.6.6 NMAC.
2. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
3. 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/.
4. 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.
5. www.edc.org/HealthIsAcademic
6. The American School Health Association (ASHA): <http://www.ashaweb.org>.
7. [National Health Education Standards](#)
8. [CDC: Whole School, Whole Community, Whole Child](#): A Collaborative Approach to Learning and Health
9. [Coordinated Approach to Child's Health \(CATCH\)](#)
10. [Sexual Risk Behavior Guidelines & Resources: CDC](#)
11. [National Sexuality Education Standards and Tools](#)
12. [6.12.4 NMAC: Tobacco, Alcohol and Drug Free Schools](#)
13. [Project Heart Start](#)
14. [CSHWB Tools for Schools](#) – Lifesaving Skills/CPR Resources

PHYSICAL EDUCATION

PED 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 healthy physical activity. It meets the content standards with benchmarks and performance standards as set forth in Section 6 [6.29.6 NMAC](#). New Mexico Physical Education Content Standards with Benchmarks and Performance Standards are mandated for students in grades K-12. All instruction must be aligned with [6.29.1 NMAC Primary and Secondary Education Standards for Excellence General Provision](#). Further reference is available in the [NM Content Standards with Benchmarks and Performance Standards](#).

Note: Physical activity is a component of, but is not a substitute for, quality physical education. Physical education is an instructional program taught by a certified physical educator and focuses on developing skills, knowledge, and attitudes necessary to personally decide to participate in a lifetime of healthful physical activity. Districts should align health education curriculum to the health education content standards with benchmarks and performance standards.

Requirement:

A planned, sequential, K-12 physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes necessary to personally decide to participate in lifetime healthful physical activity and is aligned to the physical education content standards with benchmarks and performance standards as per 6.29.6 NMAC.

Goal:

To provide students with planned sequential k-12 physical education program with a certified physical educator who utilizes 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 which aligns with the content standards with benchmarks and performance standards.

Activities:

I. PED Required Activities:

- a. The wellness policy shall include a planned, sequential, K-12 physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes necessary to personally decide to participate in lifetime healthful physical activity.
- b. The physical education curriculum will be aligned to the physical education content standards with benchmarks and performance standards as per 6.29.6 NMAC
- c. One unit of PE, or allowable alternative, is a requirement for graduation.

II. Other Activities:

- a. Schools hire certified physical educators to teach physical education and plan additional opportunities for physical activity.
- b. Bloomfield School District Physical Education teachers will implement a uniform, consistent K – 12 Physical Fitness Assessment Tool.
- c. Schools limit physical education class sizes so they are consistent with those of other subject areas and/or self-contained classes. Classes of similar grade levels are scheduled back-to-back to maximize teaching efficiency.
- d. Physical educators promote academic achievement by helping classroom teachers incorporate physical education concepts in classroom activities.
- e. Physical educators are provided 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 physical education classes.

Evaluation

See Appendix B.

Resources:

1. School District Wellness Policy rule 6.12.6.6 NMAC.
2. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
3. 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.
4. PE Central: www.pecentral.org.
5. [NM Content Standards with Benchmarks and Performance Standards](#) K-12 Standards and benchmarks in 3 age-group sets: K-4; 5-8; 9-12
6. [National Association of Sport and Physical Education](#) – Largest of 5 professional organizations within the American Alliance for Health, Physical Education, Recreation and Dance
7. American Alliance for Health, Physical Education, Recreation, and Dance: <http://www.shapeamerica.org/>, click on: Media and Advocacy and/or Publication.
8. National Association of State Boards of Education: School Health Policy Database - http://www.nasbe.org/healthy_schools/hs/index.php.
9. [6.29.9 NMAC, Standards for Excellence](#)
10. [SHAPE America: National PE Standards](#)
11. [School Athletics Equity Act Summary Report 2015](#)

HEALTHY & SAFE ENVIRONMENT

Definition:

Healthy and safe environment means the physical and aesthetic surrounding 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 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 the healthy and safe environment is to promote a climate and culture before, during and after school for students, teachers, staff, parents and community members that support academic achievement.

Activities:

I. PED Required Activities:

- a. 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.
- b. Perform 12 emergency drills in each public school in New Mexico. Emergency drills shall consist of 9 fire drills, 2 shelters in place drills and one evacuation drill as outlined in subsection N of 6.29.1 NMAC.
- c. Create and maintain a Bullying Prevention Policy, which is established and communicated as outlined in [6.12.7 NMAC Bullying Prevention](#). Such bullying prevention policies must contain an absolute prohibition against bullying and must also be inclusive of cyber bullying prevention with specific requirements as set forth in 6.12.7.8 (D) NMAC.

II. Other Activities:

- a. The district will formulate a district level crisis plan that integrates with the school sites, school departments, and the larger county emergency response plans.
- b. All schools will standardize their Safe School Plan to integrate with the district community response plans to crisis or emergency.
- c. The district and all schools and departments will annually review their safety plans, update the plan, practice the plan and revise as necessary.
- d. All school buildings and grounds, structures, buses and equipment will strive to meet current safety standards and will be kept inviting, clean, safe and in good repair.
- e. Health and environmental procedures will follow the health services plan in collaboration and under the direction of the NM Department of Public Health.
- f. Occupational safety practices will comply with Occupational Safety and Health Administration requirements and other governing regulations, as well as district procedures.

- g. All schools will abide by district policies which create an environment free of violence, tobacco, alcohol and other drugs.
- h. All schools will provide opportunities for appropriate training, sharing information, and direct teaching that support family, staff, and student personal emotional/social safety. These provisions will include and not be limited to the development, implementation, and oversight of a violence/harassment-free environment based on the concepts of practicing tolerance of differences.

Evaluation

See Appendix B.

Resources:

1. Federal Emergency Management Agency: www.fema.gov
2. National School Safety and Security Services: www.schoolsecurity.org
3. New Mexico Public Education Department, School and Family Support bureau – online <http://www.ped.state.nm.us> or phone 505 827-1804
4. Hildebrand, Verna, Lillian, A. Phenice, Mary A. Gray, Rebecca P. Hines (2000) *Knowing and Servicing Diverse Families*, New Jersey: Prentice Hall
5. National Resource Center for Family Centered Practice: <http://www.uiowa.edu/~nrcfcp/>
6. York, Stacey (1991) *Roots & Wings: Affirming Culture in Early Childhood Settings*, St. Paul, Minnesota: Redleaf Press
7. Four Worlds Centre for Human and Community Development. Phil Lane. <http://www.fourworlds.ca/>
8. Middleton-Moz, Jane (1989). *Children of Trauma: Rediscovering You Discarded Self*. Deerfield Beach, Florida: HCI Books
9. US Department of Education Office of Safe and Healthy Students
10. For a list of current resources and trainings, visit the PED’s Safe Schools tab.
11. [American Red Cross](http://www.americanredcross.org) (Training for Employees)
12. [NM Department of Homeland Security and Emergency Management](http://www.nm.gov)
13. Youth Risk and Resiliency Survey (YRRS) – online at <http://youthrisk.org>

HEALTH SERVICES

Definition:

Health services means services 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, foster appropriate use of primary health care services, 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 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 Bloomfield School District Health Services is to collaborate in the development, implementation, coordination, and evaluation of a school health services program that promotes optimal health and students, who are healthy and ready to learn, and thereby facilitates the learning process and student academic success.

Activities:

I. PED Required Activities

The following is the plan for delivery of health services to the students, staff and the larger community of Bloomfield School District as required by NMAC 6.12.6.8.

- a. Bloomfield School District Health Services will follow the appurtenant rules and regulations of the New Mexico Departments of Health and Education.
- b. Bloomfield School District Health Services plan will follow the regulations of the New Mexico Board of Nursing.
- c. The Bloomfield School District Health Services plan will follow the National Association of School Nurses Professional Practice Standards.
- d. Bloomfield School District Health Services plan will follow the Bloomfield Board of Education Policies for health related services.
- e. Bloomfield School District Health Services plan will follow the Health Services procedures written or otherwise communicated.
- f. Students with disabilities and/or healthcare needs which may interfere with their school attendance or performance will have an Individualized Healthcare Plan (IHP) as a separate document from their Individual Education Plan (IEP), and the IHP will be reviewed annually at a minimum.
- g. Bloomfield School District policy will ensure that any student with HIV/AIDS has appropriate access to public education and that their right to privacy is protected.
- h. District Policy acknowledges it is unlawful for any student to enroll in school unless they are compliant with and provide satisfactory evidence of the Public Health Division/Department of Health's required immunization schedule, unless that child is properly exempted in accordance with the rules and regulations of the PHD/DOH.

Exceptions are also provided to students who are experiencing homelessness according to the McKinney-Vento Homeless Assistant Act.

- i. The District Wellness Policy includes the provision for any student in grades K - 12 to carry and self-administer health care practitioner prescribed asthma treatment medications and anaphylaxis emergency treatment medications, and the right to self-manage diabetes in the school setting.
- j. At a minimum, vision screening will be administered to students enrolled in Pre-Kindergarten, Kindergarten, 1st and 3rd grades, and for transfer and new students in these grades.

II. Other Activities:

- a. Promote and protect the optimal health status of children.
- b. Develop procedures and provide illness and injury assessments and interventions.
- c. Identify, assess plans, interventions, and evaluate student health concerns.
- d. Perform health assessments and participate in Individualized Education Plan (IEP) development.
- e. Perform nursing procedures such as ventilator care, gastrostomy feedings, tracheostomy care, catheterization, etc.
- f. Provide health assessments, including screening for health factors impacting student education.
- g. Provide health education and counseling to prevent teen pregnancy, sexually transmitted diseases, tobacco use and alcohol and substance abuse.
- h. Maintain, evaluate, and interpret cumulative health data to accommodate individual needs of students.
- i. Provides chronic disease management and education.
- j. Plans and implement Individualized Healthcare Plans (IHP) and services for children with disabilities and/or health conditions that interfere with learning, including medication administration and monitoring.
- k. Provides assessment and interventions for students with mental health concerns.
- l. Participate as the health specialist on school teams.
- m. Promote and assist in the control of communicable diseases through immunization programs, early intervention, surveillance, reporting, and follow-up of contagious diseases.
- n. Recommend provisions for a healthy school environment conducive to learning.
- o. Directly and indirectly provide health education, health resources, and curriculum recommendations.
- p. Provide health counseling for staff.
- q. Provide leadership and/or support for staff wellness programs.
- r. Engage in research and evaluation of school nursing practices.
- s. Assist in the formation of health policies, goals and objectives for the school district.
- t. Coordinate school/community health activities and serve as liaison between school, home, community, and health care providers.
- u. The registered and NMPED licensed professional nurse is the authority and expert within the school system for the delivery of health services. The registered school nurse provides clinical supervision and delegation to unlicensed assistive personnel (UAP, including health assistants) and receives clinical supervision from a registered and NMPED licensed school nurse. Registered and NMPED licensed school nurses regulate themselves,

engage in reflection and review of their practice (self and peer reflection), and take a leadership role in the development and evaluation of school health policies.

Evaluation:

See Appendix B.

Resources:

1. National Association of School Nurses (1999). *The role of the school nurse*. Scarborough, ME: Author. Available at www.nasn.org.
2. National Association of School Nurses (1996). *Position statement. The professional school nurse role and responsibilities, education, certification, and licensure*. Scarborough, ME: Author. Available at www.nasn.org.
3. National Association of School Nurses (2002). *Disaster Preparedness Guidelines for School Nurses*. Doyle, Janice and Loyacono, Thomas R..
4. New Mexico Board of Nursing at www.bon.state.nm.us
5. New Mexico School Health Manual at www.nmschoolhealthmanual.org
6. School District Wellness Policy rule 6.12.6.6 NMAC
7. NMSA 1978 24-23-1.E
8. [NMDOH Secretary Memo: 2-20-2015 Immunization Guidance](#)
9. [Exemption from Immunization Form](#)
10. [NM School Health Manual](#)
11. [NM School Health Manual, Section VI: Medications in the Schools](#)
12. [National Association of School Nurses](#)

SOCIAL AND EMOTIONAL WELL-BEING

Definition:

Social and Emotional well-being means services provided to maintain and/or improve student's 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:

Bloomfield Schools shall create a plan for addressing the behavioral health needs of all students along a three-tiered continuum of student intervention.

Activities:

I. PED Required Activities:

- a. Each school site will create a plan for addressing the behavioral health needs of 100% of building students. The building plan will outline how students in need of social and emotional support will be identified, monitored, as well as ongoing documentation of intervention outcomes. The building plan will identify procedures for:
 - Level I: Prevention and Risk Reduction for 100% of the student population. Prevention and risk reduction plans will specifically identify age appropriate screening, classroom based and building based behavioral management strategies: Level I prevention and risk reduction activities for grades six and above will include, but not be limited to, suicide prevention curricula.
 - Level II: Early Intervention for student identified as at-risk (5-10% of student population) Early intervention plans will specifically identify Level I strategies in addition to individual interventions provided by school based mental health staff. Level II early intervention activities will include, but will not be limited to, the development and maintenance of a Student Assistance Team (SAT).
 - The team will hold the responsibility of identifying, monitoring, and implementing research based intervention for students at-risk of academic and/or social/emotional failure.
 - The team will be comprised of a building administrator, a school counselor and/or school social worker, school nurse, and school psychologist.
 - The team will meet regularly and will maintain an ongoing record of intervention outcomes; and will document collaboration with parents toward shared academic and/or social/emotional goals.
 - Level III: Intervention (1-5%) School based interventions will include Level I and Level II classrooms and building intervention as well as coordinating wraparound services with community mental health providers.
- b. Each school site will develop and maintain a building level crisis intervention team. The team will be comprised of a minimum of four personnel trained in therapeutic de-escalation and restraint techniques. The team will be available for response to crisis

within the school building when necessary. At least one member of the building team will participate in the district level team.

- c. The district will develop and maintain a district level crisis response team. Team membership will include a building site crisis team member from each school site. Team members will be trained in therapeutic de-escalation and restraint techniques, crisis debriefing, crisis triaging, and suicide prevention. The team will be available for response to crisis at building, department and district levels and will provide postvention services.
- d. **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 is required by law to 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.”
- e. **Child Abuse and Neglect:** [Section 22-10A-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.
 - [Section 32A-4-3 NMSA 1978](#). Duty to report child abuse and child neglect; responsibility to investigate child abuse or neglect; penalty.

Evaluation

See Appendix B.

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. NMSU Recognizing & Reporting Child Abuse and Neglect Online Training
<https://swrtc.nmsu.edu/resources/elearning/educators/>
15. New Mexico Public Education Department, – online <http://www.ped.state.nm.us>, *Student Assistance Team and the Three-Tiered Model of Student Intervention*
16. School District Wellness Policy rule 6.12.6.6 NMAC.
17. The Centers for Disease Control and Prevention, Division of Adolescent and School Health: <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.

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 offerings 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.

A staff wellness program allows the staff to learn and practice skills to make personal decisions about health-enhancing daily habits.

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: Includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule ([6.12.6 NMAC Section K: Staff Wellness](#)).

- a. 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.
- b. Ensure that all school boards, districts, and charter schools implement a policy that will ensure that the rights to privacy of all school employees infected with HIV are protected.

II. Other Activities:

- a. Schools in the District will implement strategies to support staff in actively promoting and modeling healthy eating and physical activity behaviors. Examples of strategies that schools will use, as well as specific actions staff members can take, include that all schools 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.).
 - Develop baseline data for a healthy lifestyle through an anonymous Health and Physical Activity Survey which will be distributed to all school employees.
 - Monitor and track the attendance of school employees at the health centers that offer reduced employee rates and use this information to increase attendance.
 - Seek community resources such as Get Fit, Bloomfield Multicultural, Bloomfield pool and local gyms to offer discounted rates to support educators and their families.

- The District promotes staff member participation in health promotion programs and will support programs for staff members on healthy eating and weight management that are accessible and free or a low cost.
- b. All schools 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.).

Professional Learning

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.

Evaluation

See Appendix B.

Resources:

1. New Mexico Public Education Department online <http://www.ped.state.nm.us>.
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. The Centers for Disease Control and Prevention, Division of Adolescent and School Health. <http://www.cdc.gov/HealthyYouth/healthtopics/wellness.htm>.
5. The National Wellness Institute: www.wellnessnwi.org.

Appendix A

BLOOMFIELD SCHOOL DISTRICT – COMPETITIVE FOOD RULES

Competitive food means *all food and beverages other than meals* reimbursed under programs authorized by the Richard B. Russell National School Lunch Act and the Child Nutrition Act of 1966 available for sale to students on the *School campus* during the *School day**.

**The School day is defined as the midnight before to 30 minutes after the end of the school day.*

Vended Beverages and Foods			
<i>“Vended beverages and foods” means a beverage or food product sold in vending machines to students in schools.</i>			
<u>Vended</u>	<u>Elementary</u>	<u>Middle</u>	<u>High</u>
<u>Beverages</u>	<u>Allowed after the last lunch period:</u>	<u>No vended items may be sold prior to or during lunch</u>	<u>No vended items may be sold during breakfast or lunch periods</u>
	<u>Allowed after last lunch periods only:</u>	<u>Allowed after last lunch periods only:</u>	<u>Allowed after meal periods, but not during:</u>
	*Milk Unflavored, Low-Fat (1%), (< 8 fl oz)	*Milk Unflavored, Low-Fat (1%), (< 12 fl oz)	*Milk Unflavored, Low-Fat (1%), (< 12 fl oz)
	*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<8 fl oz)	*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<12 fl oz)	*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<12 fl oz)
	*Plain water(no size limit)	*Plain water(no size limit)	*Plain water(no size limit)
	*100% Fruit/vegetable juice(<8 fl oz)	*100% Fruit/vegetable juice(<12 fl oz)	*100% Fruit/vegetable juice(<12 fl oz)
	*100 Fruit or vegetable juice diluted with water and no added sweeteners.	*100 Fruit or vegetable juice diluted with water and no added sweeteners.	*100 Fruit or vegetable juice diluted with water and no added sweeteners.
	<u>**No Diet Sodas</u>	<u>**No Diet Sodas</u>	Flavored Water, Calorie-free,<20 fl oz
			Other Beverage, <5 calories per 8 fl oz
			Other Beverage <10 calories per 20 fl oz
			Other Beverage< 40 calories per 8 fl oz
			Other Beverage < 60 calories per 12 fl oz
			<u>**No Diet Sodas</u>

Vended Beverages and Foods "Vended beverages and foods" means a beverage or food product sold in vending machines to students in schools.			
<u>Vended</u> <u>Foods</u>	Elementary	Middle	High
		NONE	<p><u>No vended items may be sold prior to or during meals</u></p> <p><u>Allowed after the last lunch period.</u></p> <p>Any food sold in school must:</p> <p>Meet all of the competitive food nutrient standards; and be a grain product that contains 50% or more whole grains by weight or have whole grains as the first ingredient or have as the first ingredient a fruit, vegetable, a dairy product, or a protein food; or be a combination food that contains at least ¼ cup of fruit and/or Vegetable. * If water is the first ingredient, the second ingredient must be one of items above.</p> <p><i>**with the exception of nuts, seeds, cheese, yogurt, and fruit.</i></p> <p>Foods must also meet several nutrient requirements:</p> <p>Calorie limits: Snack items:< 200 calories Entrée items: :< 350 calories</p> <p>Sodium limits: Snack items:< 200 mg Entrée items: :< 480 mg</p> <p>Fat limits: Total fat: :< 35% of calories Saturated fat:<10% of calories Trans Fat: zero grams</p> <p>Sugar limit: <35% of weight from total sugars in foods.</p>

A La Carte
A La Carte means foods and beverages sold separately from reimbursable meals in the USDA School Nutrition Programs. Also known as "competitive foods."

A La Carte	Elementary	Middle	High
<p><u>Beverages</u></p>	<p><u>Allowed only during lunch period:</u></p> <p>*Milk Unflavored, Low-Fat (1%), (< 8 fl oz)</p> <p>*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<8 fl oz)</p> <p>*Plain water(no size limit)</p> <p>*100% Fruit/vegetable juice(<8 fl oz)</p> <p>*100 Fruit or vegetable juice diluted with water and no added sweeteners.</p> <p><u>**No Diet Sodas</u></p>	<p><u>Allowed only during lunch period:</u></p> <p>*Milk Unflavored, Low-Fat (1%), (< 12 fl oz)</p> <p>*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<12 fl oz)</p> <p>*Plain water(no size limit)</p> <p>*100% Fruit/vegetable juice(<12 fl oz)</p> <p>*100 Fruit or vegetable juice diluted with water and no added sweeteners.</p> <p><u>**No Diet Sodas</u></p>	<p><u>Allowed only during lunch period:</u></p> <p><u>*Milk Unflavored, Low-Fat (1%), (< 12 fl oz)</u></p> <p><u>*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<12 fl oz)</u></p> <p><u>*Plain water(no size limit)</u></p> <p><u>*100% Fruit/vegetable juice(<12 fl oz)</u></p> <p><u>*100 Fruit or vegetable juice diluted with water and no added sweeteners.</u></p> <p><u>Flavored Water, Calorie-free, <20 fl oz</u></p> <p><u>Other Beverage, <5 calories per 8 fl oz</u></p> <p><u>Other Beverage <10 calories per 20 fl oz</u></p> <p><u>Other Beverage < 40 calories per 8 fl oz</u></p> <p><u>Other Beverage < 60 calories per 12 fl oz</u></p> <p><u>**No Diet Sodas</u></p>
<p><u>A La Carte Foods</u></p>	<p>Any entrée item offered as part of the lunch program or the breakfast program is exempt from all competitive food standards if it is sold as a competitive food on the day of service or the day after service in the lunch or breakfast program. Exempt entrees that are sold as competitive foods must be offered in the same or smaller portion sizes as the NSLP and SBP, and with the same accompaniments.</p>		

A La Carte			
<i>A La Carte means foods and beverages sold separately from reimbursable meals in the USDA School Nutrition Programs. Also known as “competitive foods.”</i>			
A La Carte	Elementary	Middle	High
<u>Foods</u>	NONE	<p>Any food sold in school must:</p> <p>Meet all of the competitive food nutrient standards; and be a grain product that contains 50% or more whole grains by weight or have whole grains as the first ingredient or have as the first ingredient a fruit, vegetable, a dairy product, or a protein food; or be a combination food that contains at least ¼ cup of fruit and/or Vegetable. * If water is the first ingredient, the second ingredient must be one of items above.</p> <p>**with the exception of nuts, seeds, cheese, yogurt, and fruit:</p> <p>Foods must also meet several nutrient requirements:</p> <p>Calorie limits: Snack items:< 200 calories Entrée items: :< 350 calories</p> <p>Sodium limits: Snack items:< 200 mg Entrée items: :< 480 mg</p> <p>Fat limits: Total fat: :< 35% of calories Saturated fat:<10% of calories Trans Fat: zero grams</p> <p>Sugar limit: <35% of weight from total sugars in foods.</p>	<p>Any food sold in school must:</p> <p>Meet all of the competitive food nutrient standards; and be a grain product that contains 50% or more whole grains by weight or have whole grains as the first ingredient or have as the first ingredient a fruit, vegetable, a dairy product, or a protein food; or be a combination food that contains at least ¼ cup of fruit and/or Vegetable. * If water is the first ingredient, the second ingredient must be one of items above.</p> <p>**with the exception of nuts, seeds, cheese, yogurt, and fruit:</p> <p>Foods must also meet several nutrient requirements:</p> <p>Calorie limits: Snack items:< 200 calories Entrée items: :< 350 calories</p> <p>Sodium limits: Snack items:< 200 mg Entrée items: :< 480 mg</p> <p>Fat limits: Total fat: :< 35% of calories Saturated fat:<10% of calories Trans Fat: zero grams</p> <p>Sugar limit: <35% of weight from total sugars in foods.</p>

Fund Raisers (Beverages/Food)

Fundraisers are any activities during which money or its equivalent (such as tickets, coupons, tokens, and similar items) is exchanged for the purchase of a product in support of the school or school-related activities. This includes any activities that suggest a student donation in exchange for foods and beverages, since funds may be raised as a result.

The standards do not apply during non-school hours, on weekends and at off campus fundraising events.

Fund Raisers	Elementary	Middle	High
<p><u>During Normal School Hours</u></p> <p><u>Beverages</u></p>	<p><u>Beverages Allowed as fund raiser except during meal periods</u></p> <p>*Milk Unflavored, Low-Fat (1%), (< 8 fl oz)</p> <p>*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<8 fl oz)</p> <p>*Plain water(no size limit)</p> <p>*100% Fruit/vegetable juice (<8 fl oz)</p> <p>*100 Fruit or vegetable juice diluted with water no added sweeteners.</p> <p><u>**No Diet Sodas</u></p>	<p><u>Beverages Allowed as fund raiser except during meal periods</u></p> <p>*Milk Unflavored, Low-Fat (1%), (< 12 fl oz)</p> <p>*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<12 fl oz)</p> <p>*Plain water(no size limit)</p> <p>*100% Fruit/vegetable juice(<12 fl oz)</p> <p>*100 Fruit or vegetable juice diluted with water and no added sweeteners.</p> <p><u>**No Diet Sodas</u></p>	<p><u>Beverages Allowed as fund raiser except during meal periods</u></p> <p>*Milk Unflavored, Low-Fat (1%), (< 12 fl oz)</p> <p>*Milk Flavored or Unflavored Nonfat Including nutritionally equivalent milk alternatives such as soy or rice milk (<12 fl oz)</p> <p>*Plain water(no size limit)</p> <p>*100% Fruit/vegetable juice(<12 fl oz)</p> <p>*100 Fruit or vegetable juice diluted with water and no added sweeteners. Flavored Water, Calorie-free,<20 fl oz Other Beverage, <5 calories per 8 fl oz Other Beverage <10 calories per 20 fl oz Other Beverage< 40 calories per 8 fl oz Other Beverage < 60 calories per 12 fl oz</p> <p><u>**No Diet Sodas</u></p>

Fund Raisers (Beverages/Food)			
<u>During Normal School Hours</u>	Elementary	Middle	High
<u>Foods</u>	<p><u>Allowed as fund raiser except during meal periods</u></p> <p>Meet all of the competitive food nutrient standards; and be a grain product that contains 50% or more whole grains by weight or have whole grains as the first ingredient or have as the first ingredient a fruit, vegetable, a dairy product, or a protein food; or be a combination food that contains at least ¼ cup of fruit and/or vegetable. *If water is the first ingredient, the second ingredient must be one of the items above.</p> <p><i>**with the exception of nuts, seeds, cheese, yogurt, and fruit:</i></p> <p>Foods must also meet several nutrient requirements:</p> <p>Calorie Limits: Snack items: <200 calories Entrée items: <350 calories</p> <p>Sodium limits: Snack items: <200 mg Entrée items: <480 mg</p> <p>Fat limits: Total fat: < 35% of calories Saturated fat: <10% of calories Trans fat: zero grams Sugar Limit: < 35% of weight from total sugars in foods</p>	<p><u>Allowed as fund raiser except during meal periods</u></p> <p>Meet all of the competitive food nutrient standards; and be a grain product that contains 50% or more whole grains by weight or have whole grains as the first ingredient or have as the first ingredient a fruit, vegetable, a dairy product, or a protein food; or be a combination food that contains at least ¼ cup of fruit and/or vegetable. *If water is the first ingredient, the second ingredient must be one of the items above.</p> <p><i>**with the exception of nuts, seeds, cheese, yogurt, and fruit:</i></p> <p>Foods must also meet several nutrient requirements:</p> <p>Calorie Limits: Snack items: <200 calories Entrée items: <350 calories</p> <p>Sodium limits: Snack items: <200 mg Entrée items: <480 mg</p> <p>Fat limits: Total fat: < 35% of calories Saturated fat: <10% of calories Trans fat: zero grams Sugar Limit: < 35% of weight from total sugars in foods</p>	<p><u>Allowed as fund raiser except during meal periods</u></p> <p>Meet all of the competitive food nutrient standards; and be a grain product that contains 50% or more whole grains by weight or have whole grains as the first ingredient or have as the first ingredient a fruit, vegetable, a dairy product, or a protein food; or be a combination food that contains at least ¼ cup of fruit and/or vegetable. *If water is the first ingredient, the second ingredient must be one of the items above.</p> <p><i>**with the exception of nuts, seeds, cheese, yogurt, and fruit:</i></p> <p>Foods must also meet several nutrient requirements:</p> <p>Calorie Limits: Snack items: <200 calories Entrée items: <350 calories</p> <p>Sodium limits: Snack items: <200 mg Entrée items: <480 mg</p> <p>Fat limits: Total fat: < 35% of calories Saturated fat: <10% of calories Trans fat: zero grams Sugar Limit: < 35% of weight from total sugars in foods</p>

Appendix B

EVALUATION

As per the school district 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, charge with operational responsibility for ensuring that each school fulfills the district's wellness policy by January 30, 2007.

Process Evaluation: Measuring implementation of Wellness Policy

Component/Activity	In Planning	In Process	In Place
1. School Board establishes a School Health Advisory Council.			X
2. School Health Advisory Council contain all the required members: parent(s), school food authority personnel, school board member, school administrator(s), school staff, student(s), and community member(s).			X
3. 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.		X	
4. 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.			X
5. The School Health Advisory Council designated one or more persons within the school district, or at each school, as appropriate, charged with the operational responsibility for ensuring that each school fulfills the district's wellness policy.	X		
6. The School board has adopted physical activity guidelines for before, during and/or after school.			X
7. Nutrition guidelines for al la carte offerings minimally meeting guidelines set forth in subsection B of 6.12.5.8 NMAC.			X
8. Nutrition guidelines for school-sponsored fundraisers during normal school hours minimally meeting guidelines set for in paragraph (1) of subsection C of 6.12.5.8 NMAC.			X
9. Nutrition guidelines for school-sponsored fundraisers 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.			X
10. 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 standards with benchmarks and performance standards as set forth in 6.29.1 NMAC.			X
11. Guidelines for a planned, sequential K-12 physical education curriculum that provides the optimal opportunities 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 6.29.6 NMAC.			X
12. A plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well-being.			X
13. The district, all school sites and departments will submit a report annually to the Wellness Committee/School Board consisting of: 1) an evaluation of each school site/department's standardized Safe School Plan, 2) practices utilizing and promoting the principal of acceptance of individual differences among staff and students to decrease acts of violence and discrimination, 3) activities and enhancements that contribute to a health and safe environment.			X
14. A plan addressing the health services needs of students in the educational process.			X
15. A plan addressing the staff wellness needs of all staff that minimally ensures an equitable work environment and meets with American with Disabilities Act Part III.			X