

Introduction:

This policy is for the development of a comprehensive school district wellness policy essential to the academic success and lifelong well-being of the students. It is intended to develop and implement a wellness policy that creates a learning environment that allows students to achieve their full academic potential and enjoy lifelong health, while meeting the Public Education Department Wellness Policy rule 6.12.6.6 NMAC and the requirements of Section 204 of the Healthy, Hunger - Free Kids Act of 2010 (Public Law 111--296), Local School Wellness Policy Implementation.

Requirement:

The school board of education shall establish a district school health advisory council that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), school staff, student(s), and community to establish goals for and oversee school health and safety policies and programs, including development, implementation and periodic review and update of this district-level wellness policy.

Additionally, the school health advisory council will be given the responsibility to make recommendations to the school board in the development or revision, implementation, and evaluation of the wellness policy. The committee shall meet a minimum of two times annually for this purpose.

Finally, the school health advisory council should work with the school district to designate one or more persons within the school district, or at each school, as appropriate, charged with operational responsibility for ensuring that each school fulfills the district's wellness policy.

Nutrition and Nutrition Education

Goal: Our school district is committed to serving healthy meals to children, with plenty of fruits, vegetables, whole grains, and fat-free and low-fat milk; that are moderate in sodium, low in saturated fat, and have zero grams trans fat per serving; and to meeting the nutrition needs of school children within their calorie requirements. The school meal programs aim to improve the diet and health of school children, help mitigate childhood obesity, model healthy eating to support the development of lifelong healthy eating patterns and support healthy choices while accommodating cultural food preferences and special dietary needs

Definition: Nutrition means programs that provide access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students.

Nutrition 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.

General	All schools in the District participate in USDA child nutrition programs, including the National School Lunch (NSLP), and the School Breakfast Program (SBP), and the Fresh Fruits and Vegetables Program. All schools within the District are committed to offering school meals through the NSLP and SBP programs and other applicable Federal child nutrition programs that are accessible to all students,are appealing to children and served in clean and pleasant settings ,meet or exceed current nutrition requirements established by state and Federal requirements and promote healthy food and beverage choices.
PED Requirements	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. <ol style="list-style-type: none">1. Whole, sliced or cut fruit is available daily.2. Daily fruit options are displayed in line of sight and reach of students.3. Daily vegetable options available to students.4. White milk is placed in front of other beverages in the cooler.5. Alternative entree options (e.g. salad bar) are highlighted within all service and dining areas.

The wellness policy shall include nutrition guidelines for school fundraisers during the normal school hours minimally meeting guidelines set forth in Paragraph (1) of Subsection C of 6.12.5.8 NMAC and the “National School Lunch and Breakfast Program: Nutrition Standards for All Foods Sold in School as Required by the Healthy, Hunger - Free Kids Act of 2010”.

The wellness policy shall include nutrition guidelines for school sponsored fundraisers 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 and the “National School Lunch and Breakfast Program: Nutrition Standards for All Foods Sold in School as Required by the Healthy, Hunger - Free Kids Act of 2010”.

Competitive Foods and Beverages

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

<http://www.fns.usda.gov/healthierschoolday/tools-schools-smart-snacks>. The Alliance for a Healthier Generation provides a set of tools to assist with implementation of Smart Snacks available at www.foodplanner.healthiergeneration.org.

To support healthy food choices and improve student health and well-being, all foods and beverages outside the reimbursable school meal programs that are sold to students on the school campus during the school day will meet or exceed the USDA Smart Snacks nutrition standards . These standards will apply in all locations and through all services

Fundraising

	<p>Foods and beverages that meet or exceed the USDA Smart Snacks in Schools nutrition standards may be sold through fundraisers on the school campus* during the school day*. The District will make available to parents and teachers a list of healthy fundraising ideas [<i>examples from the Alliance for a Healthier Generation and the USDA</i>].</p> <p><i>§ Schools will be encouraged to use only non-food fundraisers, and encourage those promoting physical activity (such as walk-a-thons, Jump Rope for Heart, fun runs, etc.).</i></p> <p><i>§ Fundraising during <u>and outside</u> school hours will be encouraged to sell only non-food items or foods and beverages that meet or exceed the Smart Snacks nutrition standards.</i></p>
Goals	<ul style="list-style-type: none"> ● Create guidelines for foods sold in schools minimally meeting guidelines set forth in the Subsection B of 6.12.5.8. NMAC and the “National School Lunch and Breakfast Program: Nutrition Standards for All Foods Sold in School as Required by the Healthy, Hunger - Free Kids Act of 2010”. ● 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 and the “National School Lunch and Breakfast Program: Nutrition Standards for All Foods Sold in school as Required by the healthy, Hunger- Free Kids Act of 2010”. ● Create nutrition guidelines to promote student health and reduce childhood obesity for all foods sold in schools as stated in the competitive food sales rule and the “National School Lunch and Breakfast Program: Nutrition Standards for All Foods Sold in School as Required by the Healthy, Hunger- Free Kids Act of 2010”. ● Create guidelines for school sponsored fund raisers during normal school hours minimally meeting guidelines as stated in the competitive food sales rule.

	<ul style="list-style-type: none"> ● Create guidelines for school sponsored fundraisers 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. ● Ensure that students receive consistent nutrition messages throughout the school’s cafeteria. ● All schools in the district will support the school breakfast and lunch program. ● All schools will create a plan to provide collaboration between the cafeteria and the classroom to provide healthy selections and reinforce nutrition education. ● All schools will consider scheduling recess before lunch so that children are less distracted and ready to eat a healthy meal.
Evaluation	See page 34-40

Resources:

1. Nutrition: Competitive Food Sales rule [6.12.5.8 NMAC](#).
2. [USDA’s Team Nutrition](#) provides free nutrition education and promotion materials, including standards-based nutrition education curricula and lesson plans, posters, interactive games, menu graphics, and more
3. Dietary Guidelines for Americans 2015 - 2020: <http://health.gov/dietaryguidelines/2015/>
4. Healthier US School Challenge: Smarter Lunchrooms <http://www.fns.usda.gov/hussc/healthierus-school-challenge-smarter-lunchrooms>
5. USDA Best Practices Share Center: School Nutrition Environment and Wellness Resources - <http://healthymeals.nal.usda.gov/best-practices>

6. USDA Healthier School Day Tools for Schools:
<http://www.fns.usda.gov/healthierschoolday/tools-schools>
7. USDA Guide to Professional Standards for School Nutrition Programs:
<http://www.fns.usda.gov/guide-professional-standards-school-nutrition-programs>
8. SmartSnacksinNutritionstandards:
<http://www.fns.usda.gov/healthierschoolday/tools-schools-smart-snacks>.
9. The Alliance for a Healthier Generation provides a set of tools to assist with implementation of Smart Snacks available at www.healthiergeneration.org/smartsnacks.
10. New Mexico State Standards and Benchmarks for Health Education
<http://ped.state.nm.us/standards/Health/Health%20Education%20StandardsK-4.pdf>
<http://ped.state.nm.us/standards/Health/Health%20Education%20Standards%205-8.pdf>
<http://ped.state.nm.us/standards/Health/Health%20Education%20Standards%209-12.pdf>
11. Action for Healthy Kids Nutrition Education
<http://www.actionforhealthykids.org/tools-for-schools/find-challenges/classroom-challenges/1212-nutrition-education>
12. Snap-EdHealthEducation
<https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program-education-snap-ed>
13. Accepting Body Size Difference [Dove Self-Esteem Project](#)
14. Center for Disease Control and Prevention regarding water consumption
https://www.cdc.gov/healthyschools/npao/pdf/water_access_in_schools_508.pdf
15. USDA Fund Raisers Facts
<https://www.fns.usda.gov/sites/default/files/cn/fundraisersfactsheet.pdf>
16. Eat Smart Move More [Eat Smart, Move More](#)

Health Education

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.

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 Standards for Excellence.

General	The wellness policy shall include a planned, sequential, K-12 health education curriculum that addresses the physical, mental, emotional and social dimensions of health.
PED Required Activities	<p>In the 2010 Regular legislative session, Section 22-13-1.1(J) NMSA 1978 was amended to include health education as a requirement for graduation. Specifically:</p> <p><i>Beginning with students entering the eighth grade in the 2012-2013 school year, a course in health education is required prior to graduation. Health education may be required in either middle school or high school. As determined by the school district. Each school district shall submit to the department by the beginning of the 2011-2012 school year a health education implementation plan for the 2012-2013 and subsequent school years, including in which grade health education will be required and how the course aligns with the department content and performance standards.</i></p> <p>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.</p> <p>B. The health education curriculum will be aligned to the</p>

	<p>health education content standards with benchmarks and performance standards as set forth in NM PED Standards and Benchmarks.</p> <p>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.</p> <p>D. All school districts/charter schools shall implement an “opt-out” policy that will ensure that parents have the ability to request their child to be exempted from the health education curriculum components that focus on the sexuality performance standards. The policy includes but is not limited to the process for parents to request an exemption of health education curriculum components that address the sexuality performance standards and how alternative lessons are established for the exempted parts of the curriculum.</p> <p>E. All school district/charter schools shall provide instruction about HIV and related issues found in the curriculum of the required health education content area to elementary, middle/junior high, and senior high school grades as set forth in 6.12.2.10 NMAC.</p> <p>F. Section 22-13-1 NMSA 1978, Section H was amended in 2016 to include a require lifesaving skills training for hands-on (compression only) psychomotor skills cardiopulmonary resuscitation training including training to recognize the signs of a heart attack, training on the use of an automated external defibrillator, and training on how to perform the Heimlich maneuver for choking victims. Section K (2) of this same rule further states that this training must be included as part of the Health Education course that is required by all students to graduate.</p>
Goals	<ul style="list-style-type: none"> ● Provide a health curriculum at the ninth grade level that meets the content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC, and in compliance with language in Section 22-13-1.1 (J), NMSA; the latter establishes a health course as a graduation requirement. This curriculum is

Evaluation	<p>available for public review. JMPS policy includes: The process for parents to request an exemption from any parts of the health education curriculum that address the sexuality performance standards; and 2) that alternative lessons will be provided.</p> <p>See page 34-40</p>
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Resources:

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

Physical Activity

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.

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

<p>General</p>	<p><u>PED Physical Activity Requirement:</u> All schools will meet the requirements that are outlined in the School District Wellness Policy rule (6.12.6 NMAC).</p> <p>Children and adolescents should participate in 60 minutes of physical activity every day (http://www.cdc.gov/physicalactivity/basics/children/index.htm). A substantial percentage of students physical activity can be provided through a comprehensive, school-based physical activity (CSPAP) that includes these components: physical education, recess, classroom-based physical activity, walk and bicycle to school, and out-of-school time activities, and the district is committed to providing these opportunities. Schools will ensure that these varied opportunities are in addition to, and not as a substitute for, physical education (addressed in “Physical Education” subsection).</p> <p>Physical activity during the school day (including but not limited to recess, physical activity breaks, or physical education) will not be withheld as punishment for any reason in accordance with the Three-Tier Model of positive behavioral intervention per the PED’s Response to Intervention (RtI) framework. <i>“This does not include participation on sports teams that have specific academic requirements.</i> The district will provide teachers and other school staff with a list of ideas for alternative ways to discipline students.</p>
<p>PED Required Activities</p>	<p><u>Federal Final Rule Requirements:</u> At a minimum, policies are required to include:</p> <ul style="list-style-type: none"> ● Specific goals for nutrition promotion and education, physical activity, and other school-based activities that

	<p>promote student wellness. LEAs are required to review and consider evidence-based strategies in determining these goals.</p> <p>A. Create guidelines to provide physical activity opportunities to students before, during and/or after school.</p> <p>B. All schools will provide education on the benefits of physical activity that align with the New Mexico Health Education Content Standards using benchmarks and performance standards as set forth in 6.29.9 NMAC.</p>
Goals	<ul style="list-style-type: none"> ● 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 standards with benchmarks and performance standards set forth in 6.30.2.19 NMAC. ● Elementary and Middle Schools in the district will provide daily recess for all students. (Exceptions: Recess may be replaced with Physical Education) ● All schools in the district prohibit withholding physical activity (i.e. physical education class, recess, etc.) as a means/method of punishment. (Exception may be made by parent and/or principal). ● All schools plan to promote community-based physical activities (i.e. sports clubs, hiking-walking club). ● All schools in the district will provide physical activity opportunities before and after school (i.e. intramurals, club activities, interscholastic sports, etc.) ● All schools in the district will encourage the use of school facilities outside of school hours.
Evaluation	See Page 34-40

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Resources:

1. [CDC: Comprehensive School Physical Activity Program](#)
2. [Action for Healthy Kids](#): includes “Tools for Schools” resources.
3. [US Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity](#)
4. [Let's Move! Active Schools](#)
5. [Change Lab Solutions](#)
6. [Presidential Youth Fitness Program](#) - Includes Fitness Program Checklist
7. [USDA Healthy Meals Resource System on Physical Activities](#)
8. [Alliance for a Healthier Generation Physical Activity Resources](#)
9. [American Academy of Pediatrics: The Crucial Role of Recess in School](#)
10. [Environmental Protection Agency](#) Resources for school environmental health program

Physical Education

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

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

Physical education is the instructional program that provides cognitive content and learning experiences in a variety of activity areas. It also provides the opportunity for all students to learn and develop the skills, knowledge and attitudes necessary to choose a lifetime of healthy physical activity. It meets the Content Standards with Benchmarks and Performance Standards as set forth in Section [6.29.6 NMAC](#). New Mexico Physical Education Content Standards with Benchmarks and Performance Standards are mandated for students in grades K-12. All instruction must be aligned with [6.29.1 NMAC Primary and Secondary Education Standards for Excellence General Provision](#). Further The New Mexico Legislature passed a law in 2014 that allows “one unit in physical education, as determined by each school district, which may include a physical education program that meets state content and performance standards or participation in marching band, junior reserve officers' training corps or interscholastic sports sanctioned by the New Mexico activities association” ([SB122](#)).reference is available in the [NM Content Standards with Benchmarks and Performance Standards](#).

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

GENERAL	A planned, sequential, K-12 physical education curriculum
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	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.
PED Required Activities	<ul style="list-style-type: none"> A. The wellness policy shall include a planned, sequential, K-12 physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes needed to decide to participate in a lifetime of healthful physical activity. B. The physical education curriculum will be aligned to the Content Standards with Benchmarks and Performance Standards as outlined in the NM Public Education Department Content Standards with Performance Standards and Benchmarks: K-4; 5-8; 9-12.
Goals	<ul style="list-style-type: none"> A. All elementary students in each grade will receive physical education for at least 60-89 minutes per week throughout the school year. B. All secondary students (middle and high school) are required to take the equivalent of one academic year of physical education. C. Students will be moderately to vigorously active for at least 50% of class time during most or all physical education class sessions. D. All physical education classes in JMPS are taught by licensed teachers who are certified or endorsed to teach physical education.
Evaluation	See page 34-40

Resources:

- 1. [NM Content Standards with Benchmarks and Performance Standards](#)

K-12 Standards and benchmarks in 3 age-group sets: K-4; 5-8; 9-12

2. [National Association of Sport and Physical Education](#) – Largest of 5 professional organizations within the American Alliance for Health, Physical Education, Recreation and Dance
3. American Alliance for Health, Physical Education, Recreation, and Dance: <http://www.shapeamerica.org/>, click on: Media and Advocacy and/or Publications
4. National Association of State Boards of Education: School Health Policy Database - http://www.nasbe.org/healthy_schools/hs/index.php.
5. [6.29.9 NMAC, Standards for Excellence](#)
6. [SHAPE America: National PE Standards](#)
7. [School Athletics Equity Act Summary Report 2015](#)
 - i. In compliance with *School Athletics Equity Act*, each public school with athletics for grades 7-12 is required to collect and submit prior year data on team enrollment, information on coaches, and income and expenditures among others to PED. The PED prepares and submits a report to the Governor’s office and the New Mexico Legislative Education Study Committee (LESC) identifying those schools that submitted the required data. ii. This Act is inclusive of the requirement for schools to submit an Assurance of Compliance with [Title IX](#) through the [WebEPPS](#) system.
8. [NM Activities Association](#) – Important resource for NMAA schools to include rules, statutes, athletic waiver procedures and best practice guidance
9. [NMAA Sports Medicine Page](#)
10. [NMAA Sports Regulations Master Calendar](#)
11. [Physical Education Curriculum Analysis Tool \(PESAT\)](#)
12. [Appropriate Instructional Practice Guidelines, K-12: A Side-by-Side Comparison](#)
13. Society of Health and Physical Educators: [SHAPE America](#)
14. [PE Central](#)
15. [National Association of State Boards of Education](#)

Social and Emotional Well-Being

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.

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

General	<p><u>PED Required Activities:</u> includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule (6.12.6.8-6 NMAC). The PED required activities are expected to be included in every wellness policy submitted to the PED.</p>
PED Required Activities	<ul style="list-style-type: none"> · Create a plan addressing the behavioral health needs of all students in the educational process by focusing on students’ social and emotional well-being. · 6.29.1 NMAC Standards for Excellence General Provisions require districts and charter schools to provide or make provisions for support service programs, which strengthen the instructional program. Required support service programs include school counseling. Support services must: (1) have a written, delivered, and assessed program, K-12; (2) provide licensed staff to develop and supervise the program; (3) be assessed as part of the educational plan for student success (EPSS) process (see 6.29.1.8 NMAC); and (4) support the local curriculum and EPSS. · School personnel are required by law to report substance

	<p>abuse, child abuse and neglect.</p> <ul style="list-style-type: none"> · Substance Abuse: Section 22-5-4.4 NMSA 1978 <ul style="list-style-type: none"> o “A. A school employee who knows, or in good faith suspects, any student of using or abusing alcohol or drugs shall report such use or abuse pursuant to procedures established by the local school board. o B. No school employee who in good faith reports any known or suspected instances of alcohol or drug use or abuse, shall be held liable for any civil damages as a result of such report or his efforts to enforce any school policies or regulations regarding drug or alcohol use or abuse.” · Child Abuse and Neglect: Section 22-10A-32 NMSA 1978 <ul style="list-style-type: none"> o A. All licensed school employees shall be required to complete training in the detection and reporting of child abuse and neglect, including sexual abuse and assault, and substance abuse. Except as otherwise provided in this subsection, this requirement shall be completed within the licensed school employee's first year of employment by a school district. Licensed school employees hired prior to the 2014-2015 school year shall complete the sexual abuse and assault component of the required training during the 2014-2015 school year. · Section 32A-4-3 NMSA 1978. Duty to report child abuse and child neglect; responsibility to investigate child abuse or neglect; penalty.
Goals	<ul style="list-style-type: none"> ● All schools will provide a Student Handbook to students and parents. ● A Safety Plan will be created and provided to the crisis response team members. ● Provide yearly opportunities to train staff in Suicide Prevention/Self injury behaviors. ● Provide yearly training for staff in detecting and reporting child abuse and neglect
Evaluation	See page 34-40

Resources:

1. [American School Counselor Association.](#)
2. [NM Department of Health Office of School & Adolescent Health](#)
3. [NM Suicide Prevention](#) Coalition
4. [Mental Health America](#)
5. [National Institute of Mental Health](#)
6. [National Association of School Psychologists](#)
7. [Breaking the Silence](#) - Lesson plans, games and posters to address/create safe discussion and de-stigmatize mental illness
8. [Responding to Crisis at a School](#) – white paper to assist schools in preparing for recovery due to loss, grief and other crises
9. Training module from a prevention perspective: [Addressing Barriers to Learning: New Directions for Mental Health in Schools](#)
10. [National Indicators of Child Well-Being](#)
11. [Mental Health: Suicide Behavior](#)
12. [UNM Department of Psychiatry and Behavioral Sciences](#)
13. [Reporting Child Abuse and Neglect: An E-Learning for School Personnel and Health Providers](#)
14. [Positive Behavioral Interventions & Supports](#)

[Functional Behavioral Assessment and Behavior Intervention Plan](#) – School Psychologist Files

Healthy and Safe Environment

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

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

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

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

General	<p><u>PED Required Activities:</u> includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule (6.12.6 NMAC). The PED required activities are expected to be included in every wellness policy submitted to the PED.</p>
PED Required Activities	<p>A. Develop a safe schools plan at each school building that is focused on supporting healthy and and safe environments, including, but not necessarily limited to: prevention, policies and procedures and an all-hazards emergency response plan, as described in the Safe Schools Guidance Document as found the NMPED website’s Safe Schools tab within the Coordinated School Health & Wellness Bureau. The plan must be submitted to the PED once every three years for review and approval, beginning in the 2013-2104 School year.</p> <p>B. Perform 12 emergency drills in each public school in New Mexico. Emergency drills shall consist of 9 fire</p>

	<p>drills, 2 Shelter-in Place drills and one evacuation drill with specific guidance as outlined in subsection N of 6.29.1. NMAC Standards for Excellence General Provisions.</p> <p>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 cyberbullying prevention with specific requirements as set forth in 6.12.7.8 (D) NMAC.</p>
Goals	<ul style="list-style-type: none"> ● A Safety Plan will be created and provided to the appropriate team members.
Evaluation	See page 34-40

Resources:

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

Health Services

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

Definition: Health services are provided for students to apprise, protect and promote health. These services are designed to ensure access or referral to primary health care or behavioral health services, or both. The services also foster appropriate use of primary health care services and behavioral health services; prevent and control communicable disease and other health problems; provide emergency care for illness or injury; promote and provide optimum sanitary conditions for a safe school facility and school environment; and provide educational and counseling opportunities to improve individual, family and community health.

General	<p><u>PED Required Activities:</u> includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule (6.12.6 NMAC). The PED required activities are expected to be included in every wellness policy submitted to the PED.</p>
PED Required Activities	<ul style="list-style-type: none"> ● District Wellness Policy includes plan for addressing the health service needs of students in the educational process; ● Per the U.S. Office of Special Education (OSEP), students with health care needs that may “affect or have the potential to affect safe and optimal school attendance and academic performance requires the professional school nurse to write and Individualized Health Plan (IHP) in collaboration with the student, family, educators, and healthcare providers” NASN POSITION Statement: Individualized Healthcare Plan. The IHP should be reviewed annually at a minimum. The need for an IHP is based upon each child’s required health care, not upon “educational entitlement such as special education or Section 504 of the Rehabilitation Act of 1973.” OSEP Considers that the IHP should be a separate document from the Individualized Education Program (IEP) and should be

	<p>attached to the student’s IEP or 504 plan based upon the student’s needs. (See the PED School health Manual, Section V: Individualized Healthcare Plans for instructions.)</p> <ul style="list-style-type: none"> • District policy is included to ensure all students with HIV/AIDS have appropriate access to public education and that their rights to privacy are protected as set in 6.12.2.10 NMAC Human Immunodeficiency Virus (HIV); • District policy acknowledges that all students enrolled in the public, nonpublic, or home schools in the state must present satisfactory evidence of commencement or completion of immunization in accordance with the immunization schedule and rules and regulations of the Public Health Division (PHD/Department of Health (DOH), with an allowance for exemption by the PHD/DOH if certain conditions are met. Statute 6.12.2.8 NMAC makes it unlawful for any student to enroll in school unless the student is properly immunized or in the process of being properly immunized and can provide satisfactory evidence of such immunization, unless the child is properly exempted: 7.5.3 NMAC: Vaccinations and Immunizations Exemptions. An exception is provided to a student experiencing homelessness. Pursuant to the McKinney-Vento Homeless Assistance Act (42 USC 11432(g)(3)(C)), children experiencing homelessness must be able to enroll in school immediately, even if they are unable to produce records normally required for enrollment, such as previous academic records, medical records, proof of residency, or other documentation. If the child needs to obtain immunizations, or medical or immunization records, the enrolling school must immediately refer the parent or guardian of the child or youth to the designated local educational agency (LEA) homeless education liaison, who must assist in obtaining necessary immunizations, or immunization or medical records. • District policy acknowledges all public and non public schools must grant to any student in grades kindergarten through 12 authorization to carry and self-administer health care practitioner prescribed asthma treatment medications and anaphylaxis
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	<p>emergency treatment medication as well as the right to self-manage their diabetes care in the school setting and to develop mechanisms that support safe diabetes self-management in the school environment as long as certain conditions are met. Such rules are established in 6.12.2.9 NMAC Students Rights to Self-Administer Certain Medications and 6.12.8 NMAC Diabetes Self-Management by Students in the school setting. More information on medications in the school may be found in Section VI. of the New Mexico School health manual .</p> <ul style="list-style-type: none"> ● District policy acknowledges that all schools are required to ensure that vision screening tests are administered to students enrolled in the school in pre-kindergarten, kindergarten, first grade and third grade and for transfer and new students in those grades, unless a parent affirmatively prohibits the visual screening. The Save our Children’s Sight Fund, created in 2007, through 7.30.10 NMAC further allows DOH to promulgate rules for the award of money for certain eligible students and to establish vision screenings test standards.
Goals	<ul style="list-style-type: none"> ● JMPS students shall adhere to the student handbook and safety plan procedures for over the counter medications and/or prescription medications.
Evaluation	See page 34-40

Resources:

1. NMDOH Secretary Memo: 2-20-2015 Immunization Guidance
2. Exemption from Immunization Form
3. NM School Health Manual
4. NM School Health Manual, Section VI: Medications in the Schools
5. National Association of School Nurses

Staff Wellness

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

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

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

GENERAL	PED Required Activities: includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule (6.12.6 NMAC Section K: Staff Wellness). The PED required activities are expected to be included in every wellness policy submitted to the PED.
PED Required Activities	<ul style="list-style-type: none">● Create a plan to address the staff wellness needs of all school staff that minimally insures an equitable work environment and meets the Americans with Disabilities Act, Title III.● Ensure that all school boards, districts, and charter schools implement a policy that will ensure that the rights to privacy of all school employees infected with HIV are protected.

Goals	<ul style="list-style-type: none"> • JMPS will support staff in utilizing indoor and outdoor physical activity facilities and spaces for fitness activities.
Evaluation	See page 34-40

Resources:

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

Family, School and Community Involvement

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.

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 for the wellness policy.

Further, it promotes long-term effective partnerships between families, schools, and communities in the planning and implementation for health promotion projects and events both within the school and throughout the community.

General	<u>PED Required Activities:</u> includes the Public Education Department (PED) requirements that are outlined in the school district wellness policy rule (6.12.6.8-6 NMAC). The PED required activities are expected to be included in every wellness policy submitted to the PED.
PED Requirement	<p>The school board of education shall establish a district school health advisory council that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), school staff, student(s), and community members.</p> <p>The school health advisory council (SHAC) will update or modify the wellness policy based on the results of the annual progress reports and triennial assessments, and/or as District priorities change; community needs change; wellness goals are met; new health science information, and technology emerges; and new Federal or state guidance or standards are issued.</p>

Goals	<ul style="list-style-type: none"> ● Inform and update the public (including parents, students, and others in the community) about the content and implementation of local wellness policy. ● Partner with community to support policies and programs.
Evaluation	See page 34-40

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, 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:
teamnutrition.usda.gov/Resources/changing.html.

12. Coordinated Approach to Child Health (CATCH), an intervention based on a trial funded by National Heart, Lung and Blood Institute, supports the need for involvement by school food service and family reinforcement to create an environment that allows children to make necessary changes in health behaviors: www.sph.uth.tmc.edu/catch/.

**SCHOOL HEALTH ADVISORY
COUNCIL (SHAC) MEMBERS**

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

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

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

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

NAME	ROLE	PHONE NUMBER	E-MAIL
	Wellness Policy Lead		
Gerald Garcia	School administrator	(575)638-5419 x 129	garcia_g@jmsd.k12.nm.us
Robert Vigil	School board member	(575)638-5419	
Crystal Gallegos	School staff	(575)638-5419 x 164	gallegos_c2@jmsd.k12.nm.us
Robert Chacon	School food authority personnel	(575)638-5419 x 133	chacon_rob@jmsd.k12.nm.us
Debbie Vigil	School Nurse	(575)638-5419 x 122	vigil_de@jmsd.k12.nm.us
David Fonken	School Counselor	(575)638-5419 x 175	fonken_d@jmsd.k12.nm.us
	Community member		

	Parent		
	Student		
	Other (indicate)		
	Other (indicate)		
	Other (indicate)		
	Other (indicate)		
	Other (indicate)		

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

6.12.6.1 ISSUING AGENCY: Public Education Department.

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

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

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

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

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

6.12.6.4 DURATION: Permanent.

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

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

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

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

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

6.12.6.7 DEFINITIONS:

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

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

C. “Fund raiser” means a sale on a school campus to benefit a school or school organization of beverage or food products limited by a United States department of agriculture school meal program for use,

consumption or sale during the school day in competition with school meals. A fundraiser may be conducted only for up to one school day on two occasions per semester or trimester term in a school that participates in United States department of agriculture school meal programs. The wellness policy implemented through 6.12.6 NMAC shall include annual assurances to the New Mexico public education department of compliance with limitations on “fund raisers” pursuant to this subsection and subject to review as part of the administrative review of a school food authority.

D. “Health education” means the instructional program that provides the opportunity to motivate and assist all students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors. It allows students to develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices. It meets the content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC.

E. “Health services” means services provided for students to appraise, protect, and promote health. These services are designed to ensure access or referral to primary health care or behavioral health services or both, foster appropriate use of primary health care services, behavioral health services, prevent and control communicable diseases and other health problems, provide emergency care for illness or injury, promote and provide optimum sanitary conditions for a safe school facility and school environment, and provide educational and counseling opportunities for promoting and maintaining individual, family, and community health.

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

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

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

I. “Physical education” means the instructional program that provides cognitive content and learning experiences in a variety of activity areas. It provides the opportunity for all students to learn and develop the skills, knowledge and attitudes necessary to personally decide to participate in a lifetime of healthful physical activity. It meets the content standards with benchmarks and performance standards as set forth in Section 6.30.2.20 NMAC.

J. “Social and emotional wellbeing” means services provided to maintain or improve students’ mental, emotional, behavioral, and social health.

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

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

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

6.12.6.8 REQUIREMENTS:

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

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

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

(1) Sections of the wellness policy that meet the requirements set forth in Paragraphs (3), (4), (5) and (10) of Subsection D and the requirements set forth in Subsection E of this section shall be submitted to the public education department on or before August 30, 2006.

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

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

(1) a planned, sequential, K-12 health education curriculum that addresses the physical, mental, emotional, and social dimensions of health and is aligned to the health education content standards with benchmarks and performance standards as set forth in 6.30.2.19 NMAC;

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

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

(4) nutrition guidelines meeting standards established by federal rules at 7 CFR 210.11 and 7 CFR 210.11a, the Healthy Hunger-Free Kids Act of 2010, the Richard B. Russell National School Lunch Act and the Child Nutrition Act of 1966;

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

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

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

- (a) introduction;
- (b) school policies and procedures;
- (c) prevention; and
- (d) a school EOP;

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

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

(10) a plan for measuring implementation and evaluation of the wellness policy, including the designation of one or more persons within the school district, or at each school, as appropriate, charged with operational responsibility for ensuring that each school fulfills the district's wellness policy.

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

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

History of 6.12.6 NMAC: [Reserved]

**Evaluation Plan
Appendix C**

Name(s) of Designated Person(s) monitoring the district’s wellness policy development and ongoing assessment: _____

District/Charter School: **Jemez Mountain Public Schools**

Date of most recent review: _____

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

		<p>Each of the following Nutrition components of the policy met:</p> <ul style="list-style-type: none"> <input type="checkbox"/> District Wellness Policy meets requirements of section 204 of Healthy, Hunger-Free Kids Act of 2010, Public law 111-296 <input type="checkbox"/> 6.12.5.8 NMAC Competitive Foods Standards compliance <input type="checkbox"/> Assurance of adherence to requirements re. possible food allergies in schools <input type="checkbox"/> Individualized Healthcare Plan guidelines incorporated <input type="checkbox"/> 6.12.2.9 NMAC, Student's Right to Self-Administer Certain Medications compliance in case of allergic reactions <input type="checkbox"/> USDA Food & Beverage Marketing and Advertising policies compliance <input type="checkbox"/> District schools meet or exceed local, state and federal nutrition requirements and/or USDA nutrition standards <input type="checkbox"/> Compliance with NSLP, SBP, FFVP, SFSP, ASSP and other USDA regulated programs <input type="checkbox"/> The district appropriately operates other programs, including: Farm to School, Breakfast after the Bell, school gardens, etc. <input type="checkbox"/> Smarter Luncheon Techniques are used to encourage students by promoting healthier food and beverage choices <input type="checkbox"/> School nutrition staff meet or exceed hiring and professional development requirements per the USDA standards for child nutrition professionals <input type="checkbox"/> Free, safe unflavored drinking water is made available to all students throughout the school day <input type="checkbox"/> Celebrations, rewards and fundraising in schools meet or exceed nutrition standards for USDA Smart Snacks in Schools <input type="checkbox"/> Nutrition education is included as part of the health education curriculum 	
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			<input type="checkbox"/> Healthy messages and nutrition promotional materials are made available throughout the school and school-related activities <input type="checkbox"/> Food Safety Inspections are conducted twice annually per USDA regulations and state rules, and reports are posted publicly	
			<p>Health Education contents standards with benchmarks and performance standards (6.29.1 NMAC Standards for Excellence) disseminated to each school</p> <input type="checkbox"/> Health Education curriculum for each school validated as comprehensive, per PED standards and benchmarks <input type="checkbox"/> Life skills training is integral part of health education curriculum <input type="checkbox"/> Schools apply PED’s “opt-out” policy, regarding sexuality component of health education curriculum <input type="checkbox"/> Assurance that HIV instruction is provided (6.12.2.10 NMAC) <input type="checkbox"/> Lifesaving skills training is included in Health Education courses	
			<p>Quality physical activity is a component of the district’s wellness policy, which aligns with the NM Health Education Content Standards as set forth in 6.29.9 NMAC</p> <input type="checkbox"/> Schools provide physical activity opportunities before and after school <input type="checkbox"/> Elementary schools provide at least 20 minutes of daily recess for all students <input type="checkbox"/> Playground facilities and equipment are regularly inspected for safety and accessibility <input type="checkbox"/> Schools are restricted from withholding physical activity from students as a form of punishment <input type="checkbox"/> Physical activity is included as a health education topic	

			<input type="checkbox"/> Families are encouraged to assist children in using active means (walking or biking) to go to/from school	
			<p>Physical education (PE) is included in schools' required programs and is based on Section 6.29.6 NMAC, NM Physical Education Content Standards with benchmarks and Performance Standards</p> <input type="checkbox"/> The wellness policy includes a planned, sequential, and developmentally appropriate K-12 physical education curriculum <input type="checkbox"/> PE instruction aligns with 6.29.1 NMAC Primary and Secondary Education Standards for Excellence General Provision <input type="checkbox"/> One unit in physical education is included as a district graduation requirement <input type="checkbox"/> Any alternative course offered by the district in lieu of PE is compliant with state content and performance standards <input type="checkbox"/> Adapted physical education is available to all students where appropriate <input type="checkbox"/> Physical educators are appropriately trained and certified/licensed to teach the subject	

		<p>Each school has an approved Safe School Plan that is compliant with wellness policy rule 6.12.6 NMAC. (A separate Safe School Plan guidance document is provided to schools from the PED, which has detailed information and supplemental materials to guide districts/schools)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Schools perform 12 emergency drills each year, consisting of: 9 fire drills; 2 Shelter-in-Place drills; and one evacuation drill <input type="checkbox"/> A fully developed Bullying Prevention Policy is available at each school, which prohibits bullying/cyberbullying and is made available to students and parents/guardians, according to 6.12.7.8 (D) NMAC <input type="checkbox"/> The school policies include full compliance with 6.12.4 NMAC: Tobacco, Alcohol and Drug Free Schools; communication of such policy includes posting of signs on campuses to prohibit ATOD in all campuses and campus-related activities <input type="checkbox"/> All schools are compliant with 6.11.2 NMAC: Rights and Responsibilities of Public Schools and Public Students in providing schools that are absolutely gun free <input type="checkbox"/> Schools are compliant with 6.29.1.9 NMAC: Standards for Excellence General Provisions, Part O in requiring full implementation of procedures for pest management <input type="checkbox"/> All other Assurance forms have been completed and submitted through WebEPPS to the PED 	
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		<p>District Wellness Policy includes a plan to address the behavioral health needs of students</p> <ul style="list-style-type: none"> <input type="checkbox"/> Support services are available for all students, including a referral system that is clearly conveyed to all members of the school community <input type="checkbox"/> Schools provide licensed staff to develop and supervise the behavioral health program <input type="checkbox"/> Students' behavioral health needs are assessed as part of the education plan process for student success <input type="checkbox"/> Schools adhere to substance abuse reporting per Section 22-5-4, 4 NMSA 1978 <input type="checkbox"/> School staff members are trained in child abuse and neglect detection and reporting, per Section 22-10A-32, NMSA 1978 	
		<p>Students with healthcare needs that may affect their school attendance and/or performance have Individualized Health Plans, which are separated from Individualized Education Program (IEP) plan but attached to the IEP or 504 plan based upon students' needs</p>	
		<p>Schools are compliant with 6.12.2.10 NMAC in reference to students who may be diagnosed with HIV/AIDS</p>	
		<p>Schools enroll students who provide satisfactory evidence of commencement or completion of NM's Public Health Division schedule</p> <p>NOTE: District ensures that students who are identified as homeless are not prevented from entering schools, based on inability to produce records normally required for enrollment, as per the McKinney-Vento Homeless Assistance Act</p>	

			The Wellness Policy includes the provision for any student in K – 12 the authorization to carry and self-administer health care practitioner prescribed asthma treatment and anaphylaxis emergency treatment medications, as well as the right to self-management of diabetes in school settings	
			Vision screenings are administered to students enrolled in pre-K, Kindergarten, 1 st and 3 rd grades at a minimum	
			Schools provide a plan to address staff wellness needs based upon state statute guidelines, 6.12.6 NMAC Section K: Staff Wellness for all school staff, insuring an equitable environment in compliance with the Americans with Disability Act, Title III	
			District and its governing boards and schools, implement policy to ensure rights to privacy of all school employees infected with HIV, keeping these safe and confidential	
			Schools provide staff with the information on activities related to personal health promotion and with the opportunity for every staff member to participate in these as feasible	
			Members of the school staff are included as participants on the district’s SHAC, as per 6.12.6.8 NMAC Section E	