

POLICY FAMILY	HEALTH AND SAFETY OF STUDENTS	649
Local Wellness	<p>Context</p> <p>Federal Law (PL 108.265 Section 204) requires all schools to develop a local wellness policy and establish a plan for measuring the implementation of the policy. Children need access to healthful foods and educational content and experiences that promote wellness. Good health fosters student attendance and educational success. Obesity rates and chronic diseases continue to increase and challenge maximum academic performance. Participation in vigorous physical activity, quality physical education, nutrition education and balanced food choices foster life long health habits leading to longer healthy lives.</p> <p>The purpose of the policy, to be implemented at the beginning of the 2006-2007 school year, is to insure that each student is provided ongoing opportunities designed to maximize the prospect that the student will make positive decisions throughout life. Health education provides critical content for students to develop and demonstrate health-related knowledge, attitudes and practices. Physical education and regular physical activity is an integral part of the total education of students, which contributes to the physical development of the individual through promotion and appreciation of physical fitness. School food services will provide students with a variety of affordable, nutritious and appealing foods that meet the health and nutrition needs of the students.</p> <p>1. Nutrition Education, Physical Activity, Physical Education and Wellness Promotion</p> <p>A. Nutrition Education:</p> <ul style="list-style-type: none"> •Nutrition instruction will be taught at each level – elementary, middle school and high school - as a sequential, standards-based program designed to provide students with the knowledge and skills necessary to promote and protect health. (MGL Chapter 71, Section 1) •Nutrition instruction will be developmentally appropriate and culturally relevant. •Nutrition instruction will contain Food Pyramid Guidelines, caloric balance, and media literacy. <p>trition Educators will collaborate with the food service staff to strengthen and extend instruction.</p> <p>B. Physical Activity:</p> <p>ortunities for physical activity will be incorporated daily at the elementary and middle school levels, weather permitting.</p> <ul style="list-style-type: none"> •Physical Activities programs, such as intramurals, extended day programs, extra curricular activities and interscholastic sports will be available before and after school for all levels. <p>ysical activity, during the school day, will not be used as punishment (e.g., running laps, pushups) nor is it desirable to routinely restrict physical activity for disciplinary reasons, unless related to violations that occur during the physical activity periods.</p> <p>C. Physical Education:</p> <p>ysical Education shall be taught as a required subject in all grades for all students (MGL Chapter 71, Section 3)</p>	Continued on next page.

- Physical Education will be taught by a certified physical education teacher.
- Student involvement in other activities involving physical activity will not be substituted for physical education class.
- Physical Education should be taught to students throughout the school year to provide the maximum activity exposure and instructional continuity.
- Physical Education instruction will incorporate NASPE's Quality Physical Education guidelines including opportunity to learn, meaningful content and appropriate instruction.
- The Physical Education program should match the MA Health Curriculum Framework and the National Standards for Physical Education (NASPE).

D. Wellness Promotion:

Instruction in health education shall be taught as a sequential, standards-based program and incorporate the MA Health Frameworks standards (MGL Chapter 71, Section 1)

- The Health Education program should match the MA Health Curriculum Framework and the National Health Education Standards.

2. All Foods Available on school campus (during the school day)

A. Beverages:

- With the exception of carbonated water, carbonated beverages without nutritional value will not be available on campus for student purchase.

B. Foods:

- Snacks made available on school property will meet the following Massachusetts Action for Healthy Kids Guidelines:

1. Ensure that healthy snacks and foods are provided in vending machines, school store and cafeteria.
2. Increase the availability of appealing nutritious food and beverages while minimizing the availability of high-caloric/low nutrient counterparts.
3. At least 50% of a la carte items must provide high nutritional value (100% fruit juice, skim and 1% milk, etc.). Foods of high nutritional value will have a significant amount of at least one of the following: calcium, vitamin C, vitamin A, iron or fiber.

- Snacks may be brought from home for children's own consumption, with the understanding that some classrooms may need to restrict some types of recess snacks due to specific allergies that classmates or staff may have, such as peanut allergies. Parents are encouraged to send healthy snacks that will provide the "fuel" for effective learning. Foods of high nutritional value will have a significant amount of at least one of the following: calcium, vitamin C, vitamin A, iron or fiber.

- Parents may not send snacks to be shared because every school has children who have severe, life-threatening allergies of all kinds. No child shall be put at risk of having an allergic reaction to foods brought into school.

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- No fundraising activities or school store sales involving food will occur during the breakfast or lunch period.
- Any corporate sponsor or corporate partnerships shall meet all previously stated guidelines and shall not compromise the Shrewsbury Local Wellness Policy.

3. School Meals:

A. Reimbursable school meals must meet, at a minimum, the regulations of the Secretary of Agriculture pursuant to subsections (a) and (b) of section 10 of the Child Nutrition Act (ACT U.S.C. 1779) and sections 9(f)(1) and 17(a) of the Richard B. Russell National School lunch Act (42U.S.C. 1758 (f)(1), 1766(a), the USDA Nutritional Standards and the American Dietary Guidelines

B. Menus will be prepared and foods will be served to incorporate variety, appeal, taste and safety to ensure high quality meals.

C. Nutritional meal data will be available.

D. Meal times and Scheduling:

- Lunch periods will be scheduled as near the middle of the school day as possible.

E. Environment:

- Facility design should be given priority in dining facility renovations and new construction. Creative, innovative construction should be applied to minimize noise level within the eating area. The eating environment should be located such that there is convenient access to hand-washing facilities before meals. The food service area design should minimize the time students are waiting in line.

4. Evaluation of the Local Wellness Policy

- A. The Superintendent is the designated person charged with operational responsibility for ensuring that the schools meet the local wellness policy.
- B. The Health Education Department will administer the Youth Risk Behavior Survey yearly to students in grades 6, 8, 9 and 11. The data will be used to modify and improve the instructional content to meet the changing needs of the student body.
- C. The Health Education Department will administer the District Health Exam yearly to students in grades 4, 8 and 11. The grades will be recorded in the student record and reported to parents.
- D. Body Mass Index (BMI) data will be analyzed at targeted grades (4,7,10) to assess the health of our student population.
- E. The Health Advisory Council will conduct a district assessment utilizing the School Health Index, FITNESSGRAM data and BMI data every three years and report to the School Committee.

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5. Local Wellness Policy Committee

The following school and community positions participated in the development of this local wellness policy. In many cases the participants were also parent representatives as well.

Superintendent of Schools	Assistant Superintendent
Director of Health/PE/FCS	Dir. of Pupil Services/SPED
Paton School Principal	Shrewsbury School Committee
Elementary Health Teacher	Lead Nurse
Shrewsbury Public Health Dept.	Chief of Police Department
St. Mary's Elementary School	St. Mary's Nurse
Shrews. Youth & Family Services	SHS Students
Pediatric Nutritionist	Food Service Director
UMASS Med. Ctr.	HS PE/Health Teacher
CFO Central One Credit Union	HS School Store

SEE ADDENDUM WITH RESOURCES

ADDENDUM

The following is a collection of research and resources used as references and recommendations to develop the Shrewsbury Public Schools Local Wellness Policy.

1. 108th U.S. congress, Child Nutrition and WIC Reauthorization Act of 2004, 729-790
2. 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).
3. U.S. Department of Health and Human Services Centers for Disease Control and Prevention, *Make a Difference at Your School*, (Atlanta, Georgia: U.S. Department of Health and Human Services Public Health Service, Centers for Disease Control and Prevention)
4. Centers for Disease Control and Prevention, "Guidelines for School Health Programs to Promote Lifelong Healthy Eating," *Morbidity and Mortality Weekly Report* 45, no. RR-9 (1996)
5. Centers for Disease Control and Prevention, "Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People," *Morbidity and Mortality Weekly Report* 46, no. RR-6 (1997)
6. Centers for Disease Control and Prevention, *School Health Index: A Self-Assessment and Planning Guide* (Atlanta, GA; U.S. Department of Health and Human Services, Center for Disease Control and prevention, 2004)
7. National Association of State Board of Education, *Fit, Healthy, and Ready to Learn: Part I; Physical Activity Healthy Eating, and Tobacco-Use Prevention* (Alexandria, VA; National Association of State Boards of Education, 2000)

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8. National Association for Sport and Physical Education, *Moving Into the Future: National Standards for Physical Education*”, 2nd ed., (Reston, VA: 2004)
9. Position of the American Dietetic Association, Society for Nutrition Education and American School Food Service Association-Nutrition Services: An essential component of comprehensive school health programs. J AM Diet Assoc. 2003; 103:505-12
10. The Center for Health and Health Care in Schools, *Childhood Overweight, What the research tells us*, (The George Washington University Medical Center, School of Public Health and Health Services, March 2005)
11. Howell Wechsler, Mary L. McKenna, Sarah M. Lee, William H. Dietz, *“The Role of Schools in Preventing Childhood Obesity”*”(Alexandria, VA; National Association of State Boards of Education, December 2004)
12. National Association for Sport and Physical Education, *“Physical Education is Critical to a Complete Education”*, Council of Physical Education for Children, (Reston, VA: 2001)
13. Action for Healthy Kids, *“Building the Argument: Need for Physical Education and Physical Activity in Our Schools”*”2003
14. National Association for Sport and Physical Education, *“What constitutes a Quality Physical Education Program”*, An Association of the American Alliance for Health, Physical Education, Recreation and Dance, (Reston, VA: 2001)