BOSTON Public Schools Focus on Children	**Superintendent's Circular** **School Year 2013-2014**	**NUMBER:** FNS–5 **DATE:** September 1, 2013

WELLNESS POLICY

Background

Understanding that physical and mental health, emotional well-being, and positive development are inextricably linked with academic success, Boston Public Schools (BPS) has worked to transform the district's capacity to meet the health needs of Boston children. Improving overall student health is a key factor in reaching the ambitious academic targets set forth in the Superintendent's Acceleration Agenda. Beyond the academic imperative however, school, civic and community leaders have a responsibility to help Boston's children overcome health barriers that may prevent them from successfully meeting the challenges of reaching adulthood and assuming their roles as the eventual leaders and stewards of our community. Our vision for the BPS graduate in the five-year Acceleration Agenda challenges us to develop young people who are more than scholars. It calls for graduates who are healthy in both mind and body, prepared to make wise choices to ensure their own physical, mental, and emotional well-being.

To create a healthy school environment where the healthy choice is the easy choice, we have developed this policy regarding wellness initiatives in Boston Public Schools. This policy will take effect September 1, 2013.

First passed on June 30, 2006, the District Wellness Policy was implemented in September, 2006. It was updated during the 2012-2013 school year, taking into consideration the needs and perspectives expressed by members of the Boston School community,[1] and responding to both the Healthy, Hunger-Free Kids Act[2] and Massachusetts Standards for School Wellness Advisory Committees.[3] This document is intended to assist Administrators and Wellness Council Members in implementing these guidelines in their schools.

This District Wellness Policy reflects the comprehensive approach stated in the District's Strategic Plan for Health and Wellness, *Healthy Connections: Strengthening Coordination and Capacity in the Boston Public Schools to Advance Student Health and Wellness*, and brings together content areas recommended in the Centers for Disease Control and Prevention's Coordinated School Health Model. A subcommittee of the District Wellness Council formed into seven work groups, representing these topic areas:

- Cultural Proficiency
- School Food and Nutrition Promotion
- Comprehensive Physical Activity
- Comprehensive Health Education
- Healthy School Environment
- Health Services
- Safe and Supportive Schools
- Staff Wellness

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[1] *BPS Wellness Policy Revision Process Community Discussions Summary Report* Found online at www.bpshealthandwellness.org
[2] PUBLIC LAW 111–296—DEC. 13, 2010
[3] MGL 105 CMR 215

These work groups consulted the perspectives of the Boston School community as well as evidence-based national recommendations, and wrote specific policy language and implementation guidelines that reference other relevant District policies and further develop policy language regarding wellness for all students. This comprehensive approach seeks to advance Boston Public School's strategic aims to: improve coordination across programs and departments; improve and integrate data collection; establish guidelines for accountability appropriate to the group's location within the organization; support building noncompeting partnerships internally and externally; and build sustainability.

Policy

The Boston Public Schools (BPS) aims to actively promote the health and wellness of **all students** to advance both their healthy development and readiness to learn. Student wellness is a core value of the Boston Public School District.

This policy is inclusive of all students, staff and families. This includes but is not limited to individuals' identities that are related to culture, race, ethnicity, sexual orientation, gender, and ability.

A Wellness Council shall be established and/or maintained both for the district and for each school. These councils shall consist of members who are representative and inclusive of the Boston school community. They shall recommend, review, and implement school district policies addressing wellness-related issues that affect student health.

All Boston Public Schools shall establish and/or maintain a school-based Wellness Council. School-based Wellness Councils shall act as a shared leadership team to implement wellness-related district policies; assess the wellness of the school environment; and create and implement an annual Action Plan as a part of the Whole School Improvement Plan [renamed Quality School Plan]. School-based Wellness Councils shall annually communicate wellness-related policies so that all staff, parents and students are aware of and follow policy guidelines.

The Boston Public School District shall maintain a Superintendent-Appointed Wellness Council. This advisory group shall recommend, review and advise on implementation of school district policies that address student wellness. The Boston Public Schools shall take a comprehensive approach to reviewing and incorporating changes in policy, curriculum, and operating procedures to promote healthy lifestyles and sustainable wellness practices for all students and staff. The District Wellness Council shall seek ongoing feedback from the Boston school community. This Boston Public Schools Wellness Policy shall be reviewed once yearly by the Boston Public Schools (BPS) District Wellness Council.

<u>Cultural Proficiency</u>

> School Wellness Councils shall examine their school's learning environment and organizational traditions to identify inclusive practices and opportunities to celebrate diverse cultures and identities. This includes the physical environment, the academic environment, classroom curriculum, and promotional materials.
>
> Cultural Proficiency-related policies include those regarding race, ethnicity, gender, sexual orientation, gender identity, disabilities, and policies that promote family and student engagement.

School Food and Nutrition Promotion

The Boston Public Schools supports lifelong healthy eating habits for all students and staff, and is committed to addressing the increasing rates of diet-related health consequences among these groups. BPS shall promote healthy lifestyles and appropriate nutritional practices for all students. Components of this approach include:

- Constantly reviewing and assessing the food available in school meals to ensure safety, quality, visual appeal, cultural proficiency and accessibility, and that it is consistent with recommendations from the Dietary Guidelines for Americans and USDA School Meals Initiative for Healthy Children in nutritional content
- Identifying opportunities to teach healthy eating habits in health education, physical education, integrated into the Common Core, and through cafeteria, and other school-wide promotions;
- Identifying opportunities to provide support to all students around appropriate nutritional practices for meals and snacks;
- Identifying opportunities to support teachers, school staff, and parents around modeling healthy eating habits and the appropriate nutritional standards and encouraging non-food alternatives for school fundraisers, student rewards and reinforcement, school parties, and classroom celebrations;
- Promoting health and nutrition messages that encourage the consumption of fruits and vegetables, whole grains, healthy fats, low-fat dairy products, and water and other messages consistent with research-based findings that indicate a positive impact on health;
- Establishing policy guidelines for food and beverage sales within school environments that meet or exceed those required by federal, state, and local laws and regulations.

For school meals, competitive foods & beverages, and all foods sold or provided outside of the school meals program, schools shall follow standards outlined in federal, state, and local policies; and at a minimum follow Bronze status standards for the Alliance for a Healthier Generation, and work toward Bronze status standards for the Healthier US School Challenge.[4] School Food and Nutrition Promotion-related policies shall be followed by all Boston Public Schools.

Boston Public schools shall undertake a constant review of school food and the food environment to ensure safety, quality, visual appeal, and cultural accessibility. Boston Public School shall reduce material used for packaging, sourcing recyclable or compostable materials when possible and working to promote best practices around recycling and composting

Comprehensive Physical Activity and Physical Education

The Boston Public Schools is committed to a district-wide, strategic effort to increase all students' physical activity and fitness by bringing *more* physical education and physical activity to schools; improving the *quality* of physical education and recess and increasing the *equity of* physical activity programs and resources across our schools.

Numerous studies indicate that regularly engaging in moderate-to-vigorous exercise contributes to overall physical and mental health and that nurturing an exercise habit among children lays the foundation for lifelong fitness. Research also shows that

[4] Alliance for a Healthier Generation Standards:
https://schools.healthiergeneration.org/_asset/l062yk/Healthy-Schools-Program-Framework.pdf

Healthier US School Challenge Standards: http://www.fns.usda.gov/hussc

increased physical activity increases children's cognitive function, ability to concentrate in class, and academic performance. Thus, as a part of a strategic effort to improve academic performance, BPS recognizes and promotes the benefits of a Comprehensive Physical Activity Program, where quality physical education is the cornerstone and additional physical activity is integrated throughout the school day and into before and after school programs.

The Boston Public Schools is committed to a strong athletics program that offers a variety of programs and is accessible to all students. Athletics participation can contribute to student fitness, wellness, character development and a lifelong commitment to a physically active lifestyle. Additionally, by establishing a safe, supportive and engaging school environment, athletic programs encourage school connectedness and create a climate where healthy competition and support fill the school with spirit and a sense of community. Research shows that healthy children are better learners and connected students are more likely to stay in school. In this way, athletics contributes to the academic success of students.

In accordance with state law, all schools must provide all students in all grades with opportunities for physical activity. Schools should aim to offer at least 150 minutes of in-school physical activity weekly in grades PreK-8, including required physical education, movement breaks, recess, or lessons involving movement. In grades PreK-8, students are expected to have daily recess.

All schools must offer standards-based physical education (PE) for all students in all grades. Schools are required to offer at least 45 minutes of weekly PE in grades PreK-8 and at least one semester of PE per grade in grades 9-12. We recommend that schools provide at least 80 minutes of weekly PE in grades PreK-8. In order to help schools work toward this recommendation, Boston Public Schools will develop an implementation plan with input from current principals and headmasters. This implementation plan will be shared with the School Committee.

Activities will be inclusive to meet the needs, interests, abilities and cultural diversity of all students, including students of all gender identities, students with disabilities and students with special healthcare needs.

Extended day programs and out of school time, which includes before and after school programs, are expected to offer an array of physical activity opportunities to ensure all students are able to participate.

Comprehensive Health Education

The Boston Public Schools requires Comprehensive pre-K through grade 12 Health Education that is medically-accurate, age and developmentally appropriate, culturally inclusive, and implemented in safe and supportive learning environments where **ALL** students feel valued. All Boston Public Schools shall take a skills-based approach to teach comprehensive health education that addresses a variety of topics, such as tobacco, alcohol, and drug abuse, healthy eating/nutrition, mental and emotional health, personal health and wellness, physical activity, safety and injury prevention, violence prevention, and comprehensive sexual health education that is LGBTQ inclusive. It shall promote healthy lifestyle habits, healthy relationships and health literacy for all students. Health education curricula will align with the BPS Health Education Frameworks, which integrate the Massachusetts Comprehensive Health Curriculum Framework and National Health Education Standards, as well as the National Sexuality Education Standards. It will be implemented by qualified and trained teachers.

All schools will follow relevant promotion and graduation requirements that include: Health education, inclusive of HIV education in grade 4; two semesters of health education in grades 6 to 8 taught by a certified health teacher; and one semester course of health education in total in grades 9 to 12 taught by a certified health teacher. In addition, health education will be integrated into the Common Core curricula where possible.

Healthy School Environment

The Boston Public Schools is committed to providing high-performing school buildings and grounds that are in good repair, have superior indoor air quality, are clean, use resources efficiently, provide opportunities for physical activity, and provide accessible and culturally inclusive learning environments that positively impact the productivity, health, and wellness of all students and staff. To meet these standards, the Boston Public Schools shall maintain a Healthy Schools Taskforce (HST) to promote and raise awareness of the health of the built environment and ensure continuous improvement of BPS healthy school environment policies and programs.

District departments and all schools, through an Environmental Committee or school-based Wellness Council, shall comply with existing city ordinances and District policies related to promoting and managing healthy school environments, including but not limited to Green Cleaners, Integrated Pest Management, Recycling, Infection Prevention & Control, Tobacco Free Environmental Policy, Environmental Inspection/Audit, Student Safety/Health in School Shops, Water Policy, and Laboratories and Chemical Inventory "Right to Know" Law.

Schools shall regularly assess the quality and quantity of BPS facilities for physical activity and physical education, including schoolyards, and report maintenance needs for these facilities.

Safe and Supportive Schools

The Boston Public Schools shall create a safe and supportive school environment for **all students** that is culturally proficient, engaging, and inclusive, provides skills-based education to promote healthy relationships, and provides access to support services. All Boston Public School students will value healthy relationships and environments, possess the necessary knowledge and skills to use safe health practices, and access resources and services to support their health. Prevention and intervention-based work will address and integrate social health, emotional health, mental health, behavioral health, physical health, suicide prevention, safe inclusive climates for LGBTQ students, violence prevention, including intimate partner violence, sexual harassment & assault prevention, bullying & cyber bullying prevention, emergency preparedness, school safety, substance use, and pregnant & parenting students. These efforts will create a safe and supportive learning environment that optimizes academic outcomes for all students. Boston Public Schools shall put in place systems that align to the district-accepted framework to ensure that all students have access to key resources and services that support health in a safe and supportive environment.

Schools shall implement the Comprehensive Behavioral Health Model (CBHM) to equip all students with the skills, and provide supports and services needed to address the multitude of challenges they face in our schools and communities. It provides a system-wide approach to promote positive behavioral health and reduce barriers to learning for optimal academic success for all students, based on tiered interventions and data to determine effectiveness. CBHM incorporates the six elements of the Safe and Supportive Schools Framework, including:

- Leadership

- Professional development
- Academic and non-academic strategies
- Access to resources and services
- Policies and protocols
- Collaborations with families.

In addition, schools shall follow the code of conduct and related policies. Schools shall also promote healthy relationships and follow policies related to sexual harassment, discrimination, and assault.

Health Services

School-based health care removes the health obstacles to learning by ensuring access and/or referral to primary health care services, managing chronic disease conditions during school hours, providing emergency care for illness or injury, identifying communicable diseases, and enacting practices and systems to ensure that all students have access to key resources and services that are developmentally appropriate and support sexual and reproductive health in a safe and supportive environment. BPS High Schools shall provide access to condoms, with appropriate health education and counseling services, for students. Condoms will be accessible from community health service partners, the Boston Public Health Commission (BPHC) or, when neither community health service partners nor BPHC staff are available, from appropriate school staff. Schools will adhere to Massachusetts state confidentiality laws. Boston Public Schools encourages communication and involvement with family regarding health services, and parents and legal guardians may exempt their children from receiving condoms by notifying the school when they complete the family information forms at the beginning of the school year.

Staff Wellness

The Boston Public Schools care about the well-being of staff members and understand the influence that staff actions have on all student health behaviors. All staff shall promote a school environment supportive of healthy behaviors. Adults are encouraged to model healthy behaviors, especially on school property and at school-sponsored meetings and events. Schools are encouraged to support staff wellness initiatives.

Implementation Guidelines

The following guidelines will ensure the implementation of the Boston Public Schools Wellness Policy:

District Wellness Council

This superintendent-appointed council will:

- Follow bylaws that are aligned with Massachusetts Standards for School Wellness Advisory Committees.[5]
- Annually review, and if needed recommend, district-wide policies to promote student wellness
- Annually set Council goals and objectives

[5] M.G.L. 105 CMR 215

- Annually report progress on Council goals, objectives, policies, and monitoring & evaluation of Wellness Policy implementation

School-based Wellness Councils

Schools will establish and maintain a school-based wellness council. School-based Wellness Councils on an annual basis shall:

- *Convene at least 4 times per school year*. School-based wellness councils shall, where possible, consist of:
    - Cafeteria staff
    - Community partners
    - Custodians
    - Family and Community Outreach Coordinator
    - Guidance Counselor
    - Individual proficient in LGBTQ issues
    - Integrated Pest Management Coordinator
    - Parents
    - Recycling Coordinator
    - School Administration
    - School Nurse and other School-based Health Care Professionals
    - Schoolyard or Outdoor Classroom Staff
    - Students
    - Teachers, including Physical Education and Health Education
- *Implement district-level policies related to wellness*. School Wellness Councils will annually review District policies related to wellness. If applicable, the school wellness council will apply strategies to implement these policies. See the Index of Federal, State, and Boston Public School wellness-related Policies & Guidelines section on page 14.
- *Assess the school's wellness status*. Schools will use the following surveys and audits to assess the wellness status of school:
    - Healthy Schools Program Inventory, Alliance for a Healthier Generation.
    - Environmental Health Inspection Audit
    - School Health Profiles, Centers for Disease Control and Prevention
    - District data, such as the Youth Risk Behavior Survey
    - Other District priorities

  The Health and Wellness Department will determine on an annual basis the exact timeline and process for completing these assessments.
- *Create and Implement a Wellness Action Plan.* Schools will complete a BPS Wellness Action Plan template and provide this Plan to the District by the end of June of each year. Principals are ultimately responsible for the implementation of the Wellness Action Plan. The Health and Wellness Department will determine on an annual basis the exact timeline and process. The school will complete this Plan as a part of the Whole School Improvement Plan, Quality School Plan, or other academic improvement plans. Wellness Action Plans must include goals and school-based activities designed to promote student wellness based on the results of the school's Healthy Schools Program Inventory, Environmental Health Inspection/Audit, annual District priorities, and other appropriate assessment tools. A Roster of each school's Wellness Council will be submitted as a part of the Wellness Action Plan template. Instructions and a template for the Wellness Action Plan can be found online at: http://www.bpshealthandwellness.org/healthy-school-environment/wellness-councils/

Associated Boston Public Schools District departments will provide professional development, toolkits, resources, and technical assistance to support the implementation of district-level policies related to wellness. Schools will be able to access professional development using the district-supported My Learning Plan. Wellness related trainings will be culturally proficient by

addressing race, ethnicity, and nationality; sexual orientation and gender identity; special needs; language and dialect; and practical skills in mediating intercultural conflict.

Monitoring and Evaluation

The Boston Public Schools Health and Wellness Department, in collaboration with appropriate District Departments, will be designated to ensure that each school, including out of school time programs, complies with this policy. Other wellness-related policies will be monitored, evaluated, and supported by the District departments that currently oversee these policies. The District will collect additional data than listed in this section to monitor compliance. During the 2013-2014 school year, the District Wellness Council will develop an evaluation plan to further measure compliance, including avenues for feedback from the school community.

The District Wellness Council on an annual basis shall provide to the superintendent, school committee, and the public a copy of an annual report that includes the extent to which schools are in compliance with the local school wellness policy, an assessment of the accomplishments of the previous year, and identification of work still needed to be done, the extent to which the Boston Public School wellness policy compares to model local school wellness policies, and goals & objectives for the coming year.

The District will annually track school-based implementation of the District Wellness Policy regarding the annual assessment and Wellness Action Plans. Principals are ultimately responsible for the implementation of the Wellness Action Plan. The District will also provide annual feedback on and suggest resources related to school-based Wellness Action Plans as a part of the Quality School Plan. All school Wellness Action plans, and the associated assessment, will be made public.

To evaluate the effectiveness of policy implementation, the BPS Health and Wellness Department and appropriate district departments will facilitate school-based surveys measuring changes in school environments over time. Such surveys include:

- Healthy Schools Program Inventory, Alliance for a Healthier Generation.
- School Health Profiles, Centers for Disease Control and Prevention
- District staffing reports
- Essential School Health Services Monthly Activities Report

To evaluate the effectiveness of policy implementation, the BPS Health and Wellness Department and appropriate district departments will facilitate anonymous student surveys measuring changes in student outcomes over time. Such surveys include:

- Youth Risk Behavior Survey (YRBS):
    - Middle School YRBS will be conducted biannually in all schools serving any students in the 6th-8th grades during the Fall semester of even numbered school years (ie: Fall 2013, 2015, 2017, etc…).
    - High School YRBS will be conducted biannually in all schools serving any students in the 9th-12th grades during the Spring semester of odd numbered school years (ie: Spring 2015, 2017, 2019, etc…)
- School Climate Survey is conducted annually by the Office of Data and Accountability.
- FITNESSGRAM in 4th through 9th grade
- Health Services SNAPNurse system

Wellness-related Monitoring and Evaluation include:

School Food and Nutrition Promotion

BPS Food and Nutrition Services and BPS Health and Wellness Department

1. The Food and Nutrition Services Department will annually complete a menu analysis using the School Meals and Competitive Foods sections of the Healthy Schools Program Inventory, and will meet at least Alliance for a Healthier Generation Bronze level status.
2. The District will track schools out of compliance with the competitive foods policy, and School Principals and relevant Network Assistant Superintendent will be notified if a school is found out of compliance. School administration, families, students, and wellness council will be provided information about the policy to engage and support monitoring, enforcement, and compliance.

School leadership and school-based Wellness Councils

3. Schools will complete an annual survey to identify the school-based status of competitive foods, nutrition promotions, and water availability.

Comprehensive Physical Activity and Physical Education

BPS Health and Wellness Department with Other District Departments

1. The BPS Health and Wellness Department will annually assess schools' CSPAP Improvement Plan. This will measure whether schools provides 45 minutes per week/80 minutes per week of PE (grades preK-8), and one semester per year of PE (grades 9-12); and, it will measure whether schools are properly staffed to provide physical education.
2. Schools Non-Compliant with PE & PA Policy: The Principal and relevant Academic Superintendent will be notified by the Health and Wellness Department if a school is found to not be compliant. The Health and Wellness Department will work directly with the school to support the development of a CSPAP Improvement Plan that puts the school on track for compliance with the PE & PA Policy.

School leadership and school-based Wellness Councils

3. Wellness Actions Plans: School Wellness Councils' CSPAP will include their school-based CSPAP Improvement Plan that outlines how all students in all grades will receive weekly physical activity and physical education
4. Schools will complete an annual survey to identify the school-based status of physical activity and education.

Comprehensive Health Education

BPS District Departments

1. The BPS Health and Wellness Department will annually assess each school's compliance with the wellness policy with regard to health education. This includes conducting an annual survey, and assessing each school's Wellness Action Plan.

School leadership and school-based Wellness Councils

2. School Principals/Headmasters and school-based Wellness Councils will complete an annual survey through the Health and Wellness Department, and will ensure that:
   - The health education curriculum meets policy requirements.
   - Health education is taught in grade 4 and is inclusive of HIV education; two semesters of health education is taught in grades 6-8; one semester in total of health education is taught in grades 9-12.
   - A certified health education teacher is responsible for teaching comprehensive health education in the middle and high school grades.
3. School-based Wellness Councils will include an action step in their Wellness Action Plan to improve health education.

Healthy School Environment

BPS Facilities Department & Boston Public Health Commission

The Boston Healthy Schools Taskforce, in collaboration with appropriate District departments, will be designated to ensure all schools comply with healthy school environment policies.

1. The Facilities Management Department and Boston Public Health Commission will comply with City Ordinance (7.12.1-4) by conducting annual Environmental Inspection/Audits of each school. They will present summary results of the Audits to the Healthy Schools Taskforce and City Council as well as to school leaders on an annual basis. Upon completion of the Audit, Facilities Management will immediately address critical health and safety deficiencies by filing a work order with the appropriate division and they will incorporate other needed work at the school sites into the annual budgeting process. On an ongoing basis, Facilities Management will provide technical assistance to Principals/Headmasters on environmental problems and other building-related issues.
2. The Health and Wellness Department, in partnership with Facilities Management Department, will annually assess all schools' Wellness Action Plans to ensure school leaders and school-based Wellness Councils are taking action steps to improve the health and cleanliness of their school building environment.

School leadership and school-based Wellness Councils

School administration and staff must actively participate in ensuring the school is in compliance with District policies and proactively manage environmental health issues for the sake of their students and staff.

1. School Principals/Headmasters and Wellness Councils will be responsible for reviewing their school's annual Environmental Audit/Inspection results and other related building condition resources to develop environmental health priorities for the school. Administrators will engage in a collaborative planning effort with their school-based Environmental Committee or Wellness Council to finalize annual environmental health priorities, goals, action steps and evaluation efforts. Wellness Councils shall track progress of improved school conditions and evaluate annually what efforts worked best.
2. School-based wellness councils must include a custodial staff member on the council, and include this in the Wellness Action Plan roster.

<u>Safe and Supportive Schools</u>

BPS District Departments

1. The District will annually assess the school climate using the School Climate Survey.
2. Measurements will be developed to assess the school climate regarding inclusivity, including inclusivity of LGBTQ youth.
3. District office of partnerships will create a list of preferred partners that comply with district requests such as: effectiveness of program, description of goals and data collection. School-based partnership meetings will occur monthly; District-based partnership meetings will occur quarterly; Annual partner trainings will occur to review goals, rules and procedures and data; Yearly partner program evaluation will be conducted to determine if desired goals and outcomes have been met.

School leadership and school-based Wellness Councils

4. Wellness Action Plan will include action steps to create a safe and supportive school environment. Action steps might include: student, staff and family trainings, a school wide social-emotional learning curriculum, or a collaborative relationship with a community mental health partner.

<u>Health Services</u>

BPS Health Services Department with other BPS Departments

Implementation will require strategies that cut across community and district department to:

1. Monitor school-based compliance with the condom access policy by providing training and support for condom accessibility and sexual health counseling.

School leadership and school-based Wellness Councils

2. Schools will complete an annual survey that includes an assessment of condom access
3. School principals will review monthly the Essential School Health Services Monthly Activities Report

Definitions

All students attend a Boston Public School, and include but are not limited to students with identities that are related to culture, race, ethnicity, sexual orientation, gender, gender identity, and ability.

Bullying is a form of emotional or physical abuse that has three defining characteristics*:

- Deliberate: A bully's intention is to hurt someone.
- Repeated: A bully often targets the same victim again and again.
- Power imbalanced: A bully chooses victims he or she perceives as vulnerable.

*Bullying is different from conflict, fights, or disagreements. It must meet the above criteria.

Boston Public Schools Property includes all properties where student and Boston Public School staff work or attend class.

Comprehensive Health Education is medically-accurate, age and developmentally appropriate, culturally inclusive, implemented in safe and supportive learning environments where all students feel valued, and includes nutrition education.

Comprehensive School Physical Activity Program (CSPAP) is an approach by which school districts and schools utilize all opportunities for school-based physical activity to develop physically educated students who participate in physical activity each day and develop the knowledge, skills, and confidence to be physically active for a lifetime. Quality physical education is the cornerstone of a CSPAP. CSPAP also includes school-based physical activity opportunities; school employee wellness and involvement; and family and community involvement.

Comprehensive Sexual Health Education is a planned, sequential, Pre-K – 12 curriculum that is part of a comprehensive school health approach which addresses age-appropriate physical, mental, emotional and social dimensions of human sexuality. It should allow students to develop and demonstrate developmentally appropriate sexual health-related knowledge, attitudes, skills and practices. The curriculum should be designed to motivate and assist students to maintain and improve their sexual health by delaying sexual initiation, preventing disease and too-early pregnancy and reducing sexual health-related risk behaviors. It should be medically accurate, developmentally appropriate, culturally, including LGBTQ inclusive, and be provided by qualified, trained, and certified teachers *(Future of Sex Education).*

Cultural Proficiency: esteeming culture, interacting effectively in a variety of cultural groups, using inclusive language, committing to continuous learning.

Cyber bullying is bullying that takes place using electronic technology. Examples of cyber bullying include mean text messages or emails, rumors sent by email or posted on social networking sites, and embarrassing pictures, videos, websites, or fake profiles.
Federally –Funded Child Nutrition Programs include the National School Lunch Program, National School Breakfast Program, After School Snack Program, and the Child & Adult Care Food Program.

LGBTQ is an acronym for individuals who identify as Lesbian, Gay, Bisexual, Transgender, Queer or Questioning.
Health Literacy is the capacity of an individual to obtain, interpret, and understand basic health information and services and the competence to use such information and services in ways that are health enhancing *(National Health Education Standards).*

Health Services represents the component of a comprehensive school health program that directly services the individual child and monitors health trends within the district. It includes both the school nurse programs and the school-based health center programs. The goal of health services is to remove the educationally relevant health obstacles to learning by ensuring access and/or referral to primary health care services, managing chronic disease conditions during school hours, preventing and controlling communicable disease and other health problems, providing emergency care for illness or injury, promoting and providing optimum sanitary conditions for a safe school facility and school environment and providing educational and counseling opportunities for promoting and maintaining individual family and community health.

Nutrition Promotions are strategies, social marketing, materials, and oral & written communications that provide methods to shift cultural norms toward healthier foods and beverages.

Parent engagement occurs when schools are actively involving parents in an authentic partnerships with aims of improving individual student's outcomes and school wide initiatives.
Emergency management
Physical Education (PE) is a planned, sequential program of curricula and instruction that helps students develop the knowledge, attitudes, motor skills, self-management skills and confidence needed to adopt and maintain physically active lifestyles. PE curricula must align with the BPS PE frameworks. PE activities that focus on a single activity, such as swimming and dance, count as PE *only* if it is part of a CSPAP and aligned with BPS PE Frameworks.

Physical Activity (PA) is a behavior consisting of bodily movement that requires energy expenditure above the normal physiological (muscular, cardio respiratory) requirements of a typical school day. Recess, movement breaks, promotional activities, and cross-curricular incorporation are some examples of PA that should NOT be counted as PE; PA is not PE and it cannot be allocated as PE.

Safe and Supportive Schools create a positive school climate that actively teaches positive behavior and engaging in prevention activities to promote feelings of security and connectedness for students and adults.
Wellness is a process by which individuals move toward optimal physical and mental health, regardless of current health status or disability, by practicing healthy choices within an enabling environment which encourages healthy decision making.

Index of Federal, State, and Boston Public School wellness-related Policies & Guidelines

Relevant and existing school policies, for which school-based Wellness Councils and school staff must comply, are referenced below.

School Food and Nutrition Promotion-related policies shall be followed by all Boston Public Schools:

- Meals served in Boston Public Schools are in accordance with the National School Meals Programs. Federally-funded child nutrition programs must comply with the nutrition standards for school meals, outlined in the Healthy Hunger-Free Kids Act of 2010.
- 105 CMR 225: Nutrition Standards for Competitive Foods and Beverages in Public Schools
- Mayor Menino's Executive Order for Healthy Beverages
- FNS-3: Food and Beverage Guidelines – Vending Machines, A LA CARTE and Competitive Foods.

Comprehensive Physical Activity and Physical Education-related policies shall be followed by all Boston Public Schools:

- HW: Physical Education and Physical Activity Policy

- MA General Laws Chapter 71, Section 3

Comprehensive Health Education-related policies shall be followed by all Boston Public Schools:

- HW: Comprehensive Health Education Policy
- SHS-10: Human Sexuality Education-Parental Notification

Healthy School Environment-related policies shall be followed by all Boston Public Schools:

- FMT: Whole School Health & Wellness: Healthy School Environments Policy
- FMT-10: Integrated Pest Management (IPM)
- FMT-11: Green Cleaners Policy
- FMT-08: Mandatory System wide Recycling Program
- SHS-20: Asthma in Schools
- SHS-04: Infection Prevention and Control in School Settings
- SHS-18: Tobacco Free Environment Policy
- FMT-15: BPS/Boston Public Health Commission Environmental Inspection/Audit Program (City Ordinance 7.12.1-4)
- FSE-06: Student Safety / Health in School Shops, Laboratories and Classrooms 2012-2013
- FMT-07: Chemical Inventory "Right to Know" Law

Safe and Supportive Schools-related policies shall be followed by all Boston Public Schools:

Federal Legislation

- *Elementary and Secondary Education Act of 1965*, as amended, Title IV, Part A, Subpart 2, Section 4121 - FEDERAL ACTIVITIES; 20 U.S.C. 7131

Federal; Regulations

- Education Department General Administrative Regulations (EDGAR) - 34 CFR Parts 75, 77, 79, 80, 81, 82, 84, 85, 86, 97, 98, 99 (b) The regulation in 34 CFR part 299
- Title VI of the Civil Rights Act of 1964[1] (Title VI), which prohibits discrimination on the basis of race, color, or national origin;
- Section 504 of the Rehabilitation Act of 1973[3] (Section 504); and Title II of the Americans with Disabilities Act of 1990[4] (Title II). Section 504 and Title II prohibit discrimination on the basis of disability,[5] as referenced in the Office of the Assistant Secretary's "Dear Colleague" letter of October 2010.
- Title IX, Education Amendments of 1972 which prohibits discrimination on the basis of sex, including individuals who are pregnant or parenting.
    - **Title 20 U.S.C. Sections 1681-1688**

Massachusetts Legislation

- St.2010, c.92 Bullying in Schools
- MGL c.12, s.11H: Violation of Constitutional Rights
- MGL c.265 s.43: Stalking
- MGL c.265, s.43A: Criminal Harassment
- MGL c.266, s.37E: Identity Fraud
- MGL c.269, s.17: Hazing
- MGL c.269, s.18: Failure to Report Hazing
- MGL c.269, s.19: Schools to provide copy of hazing law to students
- MGL c.119, s.21: Mandated Reporters defined.
- MGL c.119, s.51A: Mandated Reporting explained
- MGL c.76, s. 5 An Act Relative to Gender Identity
- CHAPTER 188 An Act Improving the Public Schools of the Commonwealth

Massachusetts Regulations

- 610 CMR 5 Hazing Reporting- Secondary Schools

- 603 CMR 33 Hazing Reporting- Higher Educations
- 603 CMR 49 Notification of Bullying or Retaliation

District Circulars

- EQT-01 Employees with Disabilities - Rights and Responsibilities 2012-2013
- EQT-02 Employee Grievances of Discrimination or Harassment - Uniform Procedures 2012-2013
- EQT-03 Student, Families and Other Third Party Grievances of Discrimination or Harassment - Uniform Procedures 2012-2013
- EQT-05 Non-Discrimination Policy Statement 2012-2013
- EQT-06 Sexual Harassment Policy 2012-2013
- EQT-08 Racial or Ethnic Discrimination / Harassment of Students 2012-2013
- EQT-09 Sexual Orientation - Protection of Students Against Discrimination 2012-2013
- FAM-01 School Parent Councils and School Site Councils: Elections and Procedures 2012-2013
- FAM-02 High School Student Government: Selections, Functions and Responsibilities 2012-2013
- FAM-03 School-Parent Compacts 2012-2013
- FSE-01 School Safety Contingency Plans 2012-2013
- FSE-02 Fire Safety Practices 2012-2013
- FSE-04 Bomb Threat Procedures 2012-2013
- FSE-05 Medical Emergency Management 2012-2013
- FSE-06 Student Safety / Health in School Shops, Laboratories and Classrooms 2012-2013
- FSE-07 Public Health and Workplace Safety 2012-2013
- FSE-08 Teaching Students the Containment Protocol Mini-Session 2012-2013
- Hazing Law 2011-2012
- LGL-04 School Visitors Guidelines 2011-2012
- LGL-06 Religious Holy Days 2011-2012
- LGL-13 Sexual Assault Policy 2011-2012
- LGL-15 Student Surveys 2011-2012
- LGL-17 Religious Expression in Public Schools 2011-2012
- LGL-20 Corporal Punishment 2011-2012
- SAF-01 Student Search Procedures 2012-2013
- SAF-02 Weapons and Objects of No Reasonable Use 2012-2013
- SAF-04 Incident Data Reporting and Release 2012-2013
- SAF-07 Metal Detectors 2012-2013
- SAF-09 Lost Children Procedures 2012-2013
- SAF-11 Sexual Offender Registry Information (SORI) 2012-2013
- SAF-12 School Access Control 2012-2013
- SHS-01Drug and Alcohol Abuse - Update on Procedures 2012-2013
- SHS-16 Suicide Prevention and Intervention 2012-2013
- SPE-03 Physical Restraint Policy 2010-2011
- SPE-14 Counseling Guidelines 2012-2013
- SPE-15 Discipline of Students with Disabilities 2012-2013
- SSS-02 Homeless Students - Guidelines and Procedures 2012-2013
- SSS-07 Persistently Dangerous Schools 2010-2011
- SSS-17 Child Abuse and Neglect 2011-2012
- SUP-05 Code of Discipline

- SHS: Condom Accessibility
- LGL-16: Student Health Information 2011-2012
- SHS-04: Infection Prevention and Control in School Settings 2012-2013
- SHS-05: Tuberculosis Program 2012-2013
- SHS-06: Immunization Law 2012-2013
- SHS-08: Medication Dispensation 2012-2013
- SHS-11: Life Threatening Allergies (LTA or Anaphylaxis) Policy and Implementation 2012-2013
- SHS-12: HIV/AID Policy and Guidelines 2012-2013
- SHS-13: Medical Transportation 2012-2013
- SHS-20: Asthma in Schools 2012-2013
- SHS-21: Diabetes Policy 2012-2013
- SHS-22: Automatic External Defibrillator (AED) Use and Access Policy 2012-2013

Cultural Proficiency-related policies shall be followed by all Boston Public Schools

- EQT-01: Employees with Disabilities - Rights and Responsibilities 2012-2013
- EQT-02: Employee Grievances of Discrimination or Harassment - Uniform Procedures 2012-2013
- EQT-03: Student, Families and Other Third Party Grievances of Discrimination or Harassment - Uniform Procedures 2012-2013
- EQT-04: Non-Discrimination and Zero Tolerance Policy - Please see EQT-05
- EQT-05: Non-Discrimination Policy Statement 2012-2013
- EQT-06: Sexual Harassment Policy 2012-2013
- EQT-08: Racial or Ethnic Discrimination / Harassment of Students 2012-2013
- EQT-09: Sexual Orientation - Protection of Students Against Discrimination 2012-2013
- FAM-0: School Parent Councils and School Site Councils: Elections and Procedures 2012-2013
- FAM-02: High School Student Government: Selections, Functions and Responsibilities 2012-2013
- FAM-03: School-Parent Compacts 2012-2013

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