

Whole School, Whole Community, Whole Child Summer 2017 e-Bulletin

Topics

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Local School Wellness Policy

Federal law requires that all districts participating in the National School Lunch Program (NSLP) and School Breakfast Program (SBP) have a local school wellness policy (LSWP). The United States Department of Agriculture (USDA) defines LSWP as a comprehensive, written district-level policy that helps to promote student health by addressing goals and strategies that contribute to healthy eating and physical activity.

The Healthy, Hunger-Free Kids Act of 2010 (HHFKA) expanded and strengthened the requirements for LSWPs. Requirements were added to content, leadership, assessment, and public involvement. Local educational agencies (LEAs) must fully comply with the requirements by June 30, 2017. For more information, refer to the USDA's Summary of the Final Rule.

As explained in USDA policy memo SP 24-2017, Local School Wellness Policy: Guidance and Q&As, LEAs have the flexibility to customize their individual local school wellness policy based on their own specific circumstances to best improve the health of their students. Health and physical education coordinators, teachers, and school nurses can play a key role in the development, implementation, updating, and assessment of LSWPs.

What is required to be included in local school wellness policies?

- Defined goals for nutrition promotion and education, physical activity, and other schoolbased activities that are designed to promote student wellness (7 CFR 210.31(c)(1)).
- Standards and nutrition guidelines for all foods and beverages that are sold to students on the school campus during the school day.
- Standards and nutrition guidelines for all foods and beverages available at no cost to students on the school campus during the school day (for example classroom parties or rewards). While these standards and nutrition guidelines are not required to be consistent with Smart Snacks standards as stated in 7 CFR 210.31(c)(3)(iii), local jurisdictions have the discretion to adopt standards that are consistent with Federal school meals and Smart Snacks in school nutrition standards or to adopt more or less stringent standards.



- For foods and beverages sold to students during the school day, the local school
 wellness policy must include standards and nutrition guidelines that are consistent with
 the National School Lunch Program meal requirements and Smart Snacks nutrition
 standards.
- Policies that allow marketing or advertising of only those foods and beverages that may
 be sold on the school campus during the school day, i.e., those foods and beverages that
 meet the Smart Snacks nutrition standards (7 CFR 210.31(c)(3)(iii)).

LEAs are also required to:

- review and consider evidence-based strategies in determining local school wellness goals (7 CFR 210.31(c)(1));
- involve, inform, and update the public (including parents, students, and other stakeholders) about the content and implementation of the local school wellness policy (7 CFR 210.31(d)(2) and (3));
- conduct an assessment, at least once every three years, to determine compliance, progress, and the extent to which the policy compares to model local school wellness policies (7 CFR 210.31(e)(2)); and
- update or modify the local school wellness policy as appropriate (7 CFR 210.31(e)(3)).

Who is responsible for developing the local school wellness policy?

The LEA is responsible for developing a local school wellness policy (7 CFR 210.31(a)). Additional information regarding Connecticut's requirements for developing school wellness policy can be found on the Connecticut State Department of Education's (CSDE) School Wellness Policies webpage. The responsibility of developing a school wellness policy is at the local level so that LEAs have flexibility to address the unique needs of each school under their jurisdiction. In an effort to foster transparency and inclusion, LEAs are required to allow parents, students, student food service authority representatives, teachers of physical education, school health professionals, school board members, school administrators, and members of the general public to participate in the development, implementation, and periodic review and update of the local school wellness policy (7 CFR 210.31(c)(5)).

While the LEA is ultimately responsible for developing the local school wellness policy, best practice includes having each school within the LEA customize the policy at the building level. In addition, each district must appoint a compliance designee. This person is responsible for periodically determining the extent to which all schools in the district are in compliance with the LSWP and the extent to which the district's LSWP compares with a model LSWP, such as the one provided for Alliance for a Healthier Generation.



What are action steps for school staff?

Suggested action steps include the following:

- access and review the LEA's LSWP;
- identify the compliance designee and Wellness Team leader (with contact information);
- know the food and beverage programs that are in place in your school and their related restrictions;
- become aware of LSWP resources; and
- Identify the role you can play to support LSWP activities.

What are the LSWP Guidelines for Food Marketing at School?

All schools participating in the federally funded NSLP or SBP must have a local school wellness policy in place that addresses the marketing and advertising of unhealthy foods and beverages to students on the school campus during the school day. At a minimum, schools must only allow the marketing of foods and beverages that meet the USDA Smart Snacks nutrition standards. The resources below provide information on how to assist districts in meeting the marketing requirement.

- Local School Wellness Policy: Guidance and Q&As (SP 24-2017): A USDA Food and Nutrition Service policy memo providing specific details regarding the marketing requirements.
- Start Smart: Making the Most of Wellness Policy Changes in this School Year: The Rudd Center for Food Policy and Obesity's checklist with resources to address marketing in schools.
- Food and Beverage Marketing in School Wellness Policies: Model school wellness policy language for limiting unhealthy food and beverage marketing to students.
- Restricting Food and Beverage Marketing in Schools: A fact sheet that discusses policy options for school districts that choose a comprehensive approach to marketing.
- Model Statute Limiting Food Marketing at Schools: A state-level tool for state boards of education, state policymakers, and school health advocates supporting healthy school food environments.

To request LSWP technical assistance, contact Donna Heins, Education Consultant at the CSDE.

Supporting Daily Recess

All schools should be implementing Comprehensive School Physical Activity Programs (CSPAP). CSPAP is a multi-component approach by which school districts and schools use all opportunities for students to be physically active. CSPAP components include quality physical education and physical activity programming before, during, and after school. Important



activities during the school day include recess and classroom activity breaks. Before or after school activities might include walk/bicycle to school, physical activity clubs, and intramural sports.

According to Shape America, the Society for Health and Physical Educators, and the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC), recess can help students increase their daily physical activity and contribute to getting the recommended 60 minutes of physical activity each day. Recess also is an essential part of students' school experience that contributes to their normal growth and development. Recess benefits students by:

- increasing their level of physical activity;
- improving their memory, attention, and concentration;
- helping them stay on-task in the classroom;
- reducing disruptive behavior in the classroom; and
- improving their social and emotional development (e.g., learning how to share and negotiate).

What are some considerations for recess?

School staff should work with the principal or other school administrators to examine how the school addresses recess. As part of the recess planning process, perceived barriers should be discussed and all stakeholders—teachers, administrators, parents, and students—should be educated about how recess will support the school's primary goals of keeping children safe and healthy and meeting their learning needs. Using the Whole School, Whole Community, Whole Child (WSCC) model as a guide will help schools to promote a comprehensive and coordinated approach to daily recess. Schools can support daily recess by:

- prohibiting the replacement of physical education with recess or using recess to meet time requirements for physical education policies;
- providing schools and students with adequate spaces, facilities, equipment, and supplies for recess;
- ensuring that spaces and facilities for recess meet or exceed recommended safety standards;
- prohibiting the exclusion of students from recess for disciplinary reasons or academic performance in the classroom;
- prohibiting the use of physical activity during recess as punishment;
- providing recess before lunch; and
- providing staff members who lead or supervise recess with ongoing professional development.



Individual school districts and schools should determine which strategies are most feasible and appropriate based on the needs of the school, school level (elementary, middle, or high school), and available resources. Schools also should assess their efforts to improve or enhance recess and physical activity periods in schools to learn which strategies might have the greatest impact. A great new resource from the CDC is *Strategies for Recess in Schools*. There is also a companion document, *Recess Planning in Schools*, *A Guide to Putting Strategies for Recess into Practice*, to assist schools with the development of a recess plan. The main audience for this guide is school staff that are responsible for leading recess in schools.

Increasing Access to Drinking Water in Schools

Drinking water contributes to good health and schools are in a unique position to promote healthy behaviors, including drinking water throughout the school day. Access to safe, free drinking water throughout the school campus helps increase water consumption and maintains adequate hydration, which may improve cognitive function. Access to free water before, during, and after school hours enables students to make a healthy choice an easy choice. Schools can encourage students to drink tap water by adding comprehensive language to their wellness policies that emphasizes safe, free drinking water as an essential component of student health and wellness.

The Healthy, Hunger-Free Kids Act of 2010 (HHFKA) requires schools participating in the NSLP and SBP to make free water available to students during meal times where meals are served. While potable water is required to be made available to students, it is not considered part of the reimbursable meal and students are not required to take water. The HHFKA requires potable water be in the food service area or immediately adjacent to meal service area. The water fountain must be operational and able to provide potable water to students during their meal period. Students should have sufficient time to use the water fountain during their meal period. It is important to consider the amount of time it takes for students to obtain water; children should not have to wait in long lines. For more information regarding water availability requirements for the NSLP during meal service, refer to CSDE Operational Memorandum No. 31-11, Child Nutrition Reauthorization 2010: Water Availability during National School Lunch Program Meal Service.

In addition to the requirements, schools should use a variety of strategies to:

- ensure that water fountains are clean and properly maintained;
- provide access to water fountains, dispensers and hydration stations throughout the school; and
- allow students to have water bottles in class or to go to the water fountain if they need to drink water.



What are some important next steps to increasing student access drinking water in your school?

- 1. Determine how accessible water is in your district's school buildings. The CDC has a very user-friendly tool kit to assist with this process. The tool kit includes background information, needs assessment tools, implementation strategies, and evaluation guidance.
- 2. Implement school-wide activities with a focus on water. Some activities to consider include:
 - posting signage promoting water;
 - identifying a "Water Champion" in each school;
 - implementing a "Rethink Your Drink" campaign; and
 - incorporating a water theme into health observances and events.

Additional resources to support access to drinking water in your school are listed below:



- Increasing Access to Drinking Water in Schools (CDC)
- Water Access in Schools (CDC)
- Rethink Your Drink (CDC)
- Events Through the Year (USDA)
- National Health Observances (NIH)
- 10 Tips: Make Better Beverage Choices (USDA)
- Parent tips: How Much Sugar and Calories are in Your Favorite Drink?

Healthy School Communities Success Stories



Whole School, Whole Community, Whole Child (WSCC) in Action

The Whole School, Whole Community, Whole Child (WSCC) e-Bulletin provides an opportunity to highlight Healthy School Communities Success Stories. The success story highlighted for the Summer 2017 e-Bulletin comes from the Capitol Regional Education Council (CREC), Montessori Magnet School. The CREC Montessori Magnet School has personalized their WSCC approach to fit the Montessori model of learning.

CREC Montessori Magnet School has strived to incorporate physical activity throughout the school day. The school believes that students learned better when given breaks to move and then refocus. Montessori does this in several ways. Each classroom has a door that



opens into a shared courtyard, which was recently certified as a wildlife habitat. This easy access to a safe outdoor area provides many opportunities to teach students in a space that allows them be physically active. All teachers have been trained on Physically Active School Systems (PASS). "PASS is a program by which school districts and schools utilize opportunities for school-based physical activity that enhance overall fitness and cognition, which can be broken down into four integral parts consisting of connecting, communicating, collaborating, and cooperating (PASS: Creating Physically Active School Systems, Carol M. Ciotto and Marybeth H. Fede, Journal of Physical Education, Recreation & Dance. Vol. 85, Iss. 8, 2014)." Montessori teachers are encouraged to allow brain breaks during each class period. Montessori School showcases student activities. The school has a prominently placed bulletin board called *Caught Being Healthy*. The bulletin board demonstrates photographs of students participating in healthy activities, such as taking part in team sports, hiking with family or participating in a community walkathon.

For the Montessori model, parent involvement is essential throughout every child's education. Parents are involved in implementing the school's LSWP. The CREC Montessori Magnet School promotes opportunities for parents to attend events and be involved in their student's learning throughout the school year. Parents are encouraged to join the Parent Teacher Association and participate in year-round activities. Parents are encouraged to accompany their child to before and after school programs that promote physical activity. Activities for primary students include extended use of Montessori materials, outside play, arts and crafts, music and social play. Elementary age students are provided choices for enrichment activities such as art, dance, karate, sports, tutorial services or science exploration.

The Montessori Magnet school promotes healthy fundraising. In 2016, the sixth grade class opted to sell craft project kits to be made by students as a fundraiser, rather than the traditional bake sales. The creative fundraiser was a big hit with students and parents. Other healthy fundraisers conducted after school included the sale of yogurt parfaits and popcorn during early release days.

CREC Montessori Magnet School participates in the NSLP. Unlike other NSLP settings, students eat their meals together in the classroom and the meals are served family style. Teachers shared that when eating family style, students encourage their classmates to make positive food choices. Upper elementary students (ages 9 to 12) participated in a month-long unit studying nutrition. During the nutrition unit, students were taught to read and analyze nutrition labels and were encouraged to keep a food log. Since each Montessori classroom has a full kitchen, students worked in groups to create a shopping list of ingredients and prepare healthy meals in the classroom. Another student assignment included research on websites, such as USDA's Choose MyPlate and the National Heart, Lung, and Blood Institute's Slow, Go, and Whoa foods and Portion Distortion. Students shared healthy nutrition presentations and put into practice what they learned.



For more WSCC success stories from other states, access the National Association of Chronic Disease Directors' (NACDD) PowerPoint Presentation (March 15, 2016), "Implementing the Whole School, Whole Community, Whole Child (WSCC) Model: Local School District Examples to Promote Learning and Health." To share your school's WSCC success story, please contact Terese Maineri, Education Service Specialist at the CSDE.

Stay in Touch!

This is the second of a series of e-Bulletins to be published to support district and school implementation of the WSCC Model. New information, resources, and success stories are some of the items to be featured in the e-Bulletins. What's going on in your school? Let us know if you have a success story that you would like to share.

The Chronic Disease Prevention State Team, identified below, is funded in part through the Centers for Disease Control and Prevention Cooperative Agreement, "State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health" (CDC-RFA-DP13-1305). Feel free to contact the State Team if you would like technical assistance or additional resources to support the work you do to keep students healthy and ready to learn.

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