

Coordinated School Health Policy

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The coordinated school health program model consists of eight interactive components, organized in a set of procedures and activities designed to promote and sustain the health of student, staff, parents, and community members. The approach is coordinated to improve student's health and their capacity to learn through the support of families, schools, and communities united efforts.

Key Strategies for building a strong foundation for nutrition and physical activity

Address physical activity and nutrition through a Coordinated School Health Program (CSHP)

Designate a school health coordinator and maintain an active school health council and develop a plan for improvements.

Assess the school's health policies and procedures.

Strengthen the school's nutrition and physical activity policies.

Implement a high-quality health promotion program for school staff.

Implement a high-quality course of study in health education.

Implement a high-quality course of study in physical education.

Increase opportunities for students to engage in physical activity.

Implement a quality school meals program

Ensure that students have appealing, healthy choices in foods and beverages offered outside of the school meals program.

Component 1: Health Services

Goal: Services will provide for students to appraise, protect, and promote health. These services are designed to ensure access to primary health care services or both, foster appropriate use of primary health care services, prevent and control communicable disease and other health problems, provide emergency care for illness or injury, promote and provide optimum sanitary conditions for a safe school facility and school environment, and provide educational and counseling opportunities for promoting and maintaining individual, family, and community health.

1. The district will have a school health committee in place. This committee will meet at least 2-times/school year to assess school wellness.
2. All students K-5 will participate in annual vision/hearing/height/weight screenings.
3. Scoliosis screenings will be offered to all students in grades 6-8 with parental consent.
4. All students with a medical condition requiring school accommodations will have a written 504 plan, which will be reviewed annually as long as accommodations are necessary. Examples are, but not limited to: asthma, severe food allergies, diabetes, seizures
5. A minimum of, but not limited to, 2 employees per building will be trained in first aid/cpr/aed, and bloodborne pathogens annually.
6. All employees will be trained in bloodborne pathogens annually.
7. All students presenting to the front office ill/injured will be assessed by a trained staff member who has been trained in first aid. An injury/illness report will be completed. Parents will be notified for temperature above 100, vomiting, communicable disease, injuries requiring more than simple first aid, all head injuries, and anything else that the trained staff member feels the need to communicate to the parent/guardian.
8. All students presenting ill to the front office will be assessed for fever and communicable disease. Student will be sent home for temperature at or above 100.4, vomiting with illness, diarrhea with illness, contagious process, and as deemed necessary by trained office staff.
9. The School Health Coordinator will be informed of all injuries requiring more than simple first aid. Examples include: possible musculoskeletal injuries, need for skin sutures, fainting episodes, seizure activity, and any other situation that the front office staff deems necessary to communicate.
10. Automated External Defibrillators (AEDs) will be accessible within the 4 schools at all times if needed in the event of a cardiac arrest.
11. 911 is to be notified immediately for any life threatening events.
12. Principal and Central Office will be communicated to on as needed basis regarding serious illnesses/injuries.
13. All medication administered to students will be done so by a trained staff member only and district medication policy must be followed at all times.
14. Medical equipment will be assessed annually and as needed for calibration.
15. A safe physical environment will be maintained. Employees, students, and parents are encouraged to report unsafe conditions to the Principal.

16. All head athletic coaches will be trained in CPR/First Aid/AED every 2 years.
17. A standardized Wellness Policy evaluation documenting policy compliance will be completed annually by each building Principal and forwarded to the Superintendent. This report will be due June 30 of every school year. The Superintendent will report to the board annually at the November board meeting.
18. SBDM minutes need to reflect a consideration of the importance of access to breakfast and lunch in the decisions regarding the school day schedule.
19. KY immunizations must be current on all students enrolled. Expiration notices will be sent out by attendance clerks or the district health coordinator. All students who fail to bring in updated certificates by notice deadline will be sent home until updated records are received.
20. KY physicals must be on file for all students enrolled. All preschool and P1 certificates are due upon enrollment. Transferring students have 30 days from time of enrollment. Enrolling employees will track 30-day deadlines and report status to School Health Coordinator.
21. Certified birth certificates must be on file for all students upon enrollment. The certified birth certificate must be presented by the parent. A copy will be made by the enrolling employee. The employee will mark that the certified birth certificate was presented. If the parent does not have the original birth certificate, the enrolling employee will assist the parent by applying for the birth certificate. The application will be sent in from the school to ensure that the application process has been completed.
22. All teachers grades k-5 will complete a standardized physical activity report for all students. This report will consist of a 1-page classroom activity chart that the teacher will submit as physical activity documentation for the year. All students will be listed on the report and the teacher will place a check mark in the column to indicate what planned activities the student does on a daily or weekly basis. This 1-page teacher prepared report will be presented to the principal for completion of the annual report.
23. The Board will hold a public forum every year in January to form a plan to improve nutrition and physical activity.

Component 2: Health Education

Goal: A planned, sequential, K-12 curriculum that addresses the physical, mental, emotional and social dimensions of health will be utilized. The curriculum is designed to motivate and assist students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors. Students will develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices. The curriculum will include a variety of topics such as personal health, family health, community health, consumer health, environmental health, sexuality education, mental and emotional health, injury prevention and safety, nutrition, prevention and control of disease, and substance use and abuse.

1. Health education will be provided by the classroom teacher at the elementary level and by the science/health/PE teacher at the middle and high school level

- meeting the requirements of the KY Dept. of Education Practical Living Curriculum which includes instruction in individual well-being, consumer decision, personal wellness, mental wellness, consumer resources, psychomotor, and lifetime activity.
2. Health education requirements will be addressed utilizing the KY Dept. of Education Practical Living Curriculum, which includes instruction in individual well-being, consumer decision, personal wellness, mental wellness, consumer resources, psychomotor, and lifetime activity.
 3. The Take 10! Curriculum will be utilized in grades K-5. 1- Take 10! Lesson will be completed daily by the classroom teacher.
 4. Additional health education will be provided by FRYSC and Coordinated School Health via assemblies, guest speakers, handouts, posters, displays, etc.
 5. Essential health education topics will include age appropriate- healthy eating, physical activity, preventing unintentional injuries, violence, suicide, abstinence, growth/development, and preventing tobacco abuse.

Component 3: Staff Wellness

Employees will have the opportunity to improve their health status through activities such as health assessments, health education and health-related fitness activities. These opportunities will 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 health program. This personal commitment often transfers into greater commitment to the health of students and creates positive role modeling. Health promotion activities have improved productivity, decreased absenteeism, and reduced health insurance costs.

1. All employees will have the opportunity to participate in a variety of annual health screenings as available.
2. On-site mammography (must be physician ordered) and osteoporosis screenings may be made available to employees pending hospital participation. Employee will be responsible for payment.
3. All employees will participate in an annual safety/health training program.
4. All employees will have the opportunity to receive flu vaccine as available.
5. 5 All employees may use their lunch to participate in physical activity.
6. The District Health Coordinator subject to availability and schedule may administer allergy injections with a physician's order to employees.
7. All employees will be encouraged to model healthy behaviors to students, parents, and community members as evidenced by encouraging healthy food choices and physical activity.
8. All employees who are injured on the job will follow proper procedure for reporting incidents, completing required Worker's Compensation documents, and following procedures for returning to work.

Component 4: Physical Education

Goal: A planned, sequential K-12 curriculum that provides cognitive content and learning experiences in a variety of activity areas such as basic movement skills; physical fitness; rhythms and dance; games; team, dual, and individual sports; and tumbling and gymnastics will be utilized. Quality physical education should promote, through a variety of planned physical activities, each student's optimum physical, mental, emotional, and social development, and should promote activities and sports that all students enjoy and can pursue throughout their lives. Physical activity reduces the risk of premature mortality in general and of coronary heart disease, hypertension, colon cancer, and diabetes mellitus in particular. Regular physical activity in childhood and adolescence improves strength and endurance, helps build healthy bones and muscle, helps control weight, reduces anxiety and stress, increases self-esteem, and may improve blood pressure and cholesterol levels.

1. Physical education is mandatory for all elementary, middle, and one semester during high school.
2. Physical Education teachers will utilize the Physical Best Curriculum and Fitnessgram to assess fitness levels annually. The physical education curriculum will be consistent with KY standards.
3. Elementary physical activity will include 1-Take 10! Lesson per day, vigorous physical activity in PE classes once/week, and recess each day, resulting in a total of up to 150 minutes of vigorous physical activity/week.
4. Additional physical education classes will be offered for grades 9-12.
5. Instruction will be modified for special need students.
6. Physical activity facilities will meet state and federal safety standards.
7. Athletic safety requirements will meet KHSAA standards.
8. Community physical activities will be encouraged.
9. Physical education classes will be health-related physical fitness.
10. Teachers will avoid practices that result in student inactivity.
11. Extracurricular physical activity programs will be highly encouraged.
12. Students will be physically active in PE class at least 80% of class time.
13. Fitnessgram reports will be sent home to parents by the PE teacher once/year.
14. Physical activity may be incorporated into classroom instruction.
15. Playgrounds will be assessed daily for potential hazards.

Component 5: Nutrition Services

Students will have access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students. School nutrition programs will reflect the U.S. Dietary Guidelines for Americans and other criteria to achieve nutrition integrity. The school nutrition services offer students a learning laboratory for classroom nutrition and health education, and serve as a resource for linkages with nutrition-related community services.

1. Vending machines or any other products sold and accessed by students will include only items approved on the KDE “Healthy Food” list or in accordance with 702 KAR 6:090, and only be available 30 minutes after the last lunch period.
2. All snacks and foods for rewards must be from the KDE “Healthy Food” list or in accordance with 702 KAR 6:090. In addition to this requirement, all foods sold must comply with the Competitive Food Regulation (CFR).
3. Foods used for fundraisers sold to students during the school day must be from the KDE “Healthy Food” list or in accordance with 702 KAR 6:090. Fundraisers sold after the school day will not be limited to this list.
4. Classroom parties will be limited to 2 per year, and parents and teachers are encouraged to use foods from the “Healthy Food” list or those foods in compliance with 702 KAR 6:090 for these 2 parties.
5. Birthday celebrations will be at the discretion of the building principal. Teachers are encouraged to incorporate physical activity into parties in place of food. If food is allowed, it must comply with the “Healthy Food” list or those foods in compliance with 702 KAR 6:090. Parties shall not inhibit the educational process. This shall be communicated with parents at the beginning of the school year.
6. All beverages and food items accessible for purchase by students beginning thirty minutes after the last lunch period will be in compliance with 702 KAR 6:090. No items food and beverage items will be available for sale until thirty minutes after the last lunch period.
7. All schools will participate in the federal breakfast/lunch program.
8. All cafeterias will be safe, clean, and pleasant.
9. The Food Service Director, Managers and staff will obtain and maintain required certifications in accordance with Kentucky Revised Statutes.
10. Food purchasing and preparation practices will be aimed at reducing fat content.
11. Retail fast food may not be served more than 1 day per week in a school cafeteria.
12. A’ la carte items made available in the cafeteria will comply with 702 KAR 6:090 and must comply with the following standards:
13. The Food Service Director and Cafeteria Managers will establish productivity standards.
14. A coordinated data collection system will be maintained in regards to menu development, meal pricing, and staffing levels.
15. The Food Service Program will maintain membership in the SNA and KSNA.
16. Menus will be analyzed for nutritional content. This will be available on the district website.

17. Professional development opportunities for classroom teachers will be provided regarding nutrition education.
18. Teachers will be encouraged to utilize the cafeteria ~~and kitchen~~ as a resource for introducing new content and reinforce classroom instruction content.
19. Students will have sufficient time (minimum of 20 minutes) for meals.
20. A Hazard Analysis Critical Control Point Plan will be implemented.
21. A marketing plan will be implemented by the cafeteria manager and food service director.
22. Communication regarding nutrition practices will occur via newsletter and website.

Component 6: Counseling and Psychological Services

Services will be provided to improve students' mental, emotional, and social health. These services will include individual and group assessments, interventions, and referrals. Organizational assessment and consultation skills of counselors and psychologists contribute not only to the health of students but also to the health of the school environment. Professionals such as certified school counselors, psychologists, and social workers provide these services.

1. All students and employees will have access to counseling services.
2. Counseling services will promote the mental health and safety of students and families.
3. Counselors will collaborate with school staff.
4. Counselors will establish strong community links for referral.
5. Counselors will address the importance of good nutrition and physical activity in counseling classes.

Component 7: Healthy School Environment

The physical and aesthetic surroundings and the psychosocial climate and culture of the school will be supportive of a healthy environment. Factors that influence the physical environment include the school building and the area surrounding it, any biological or chemical agents that are detrimental to health, and physical conditions such as temperature, noise, and lighting. The psychological environment includes the physical, emotional, and social conditions that affect the well-being of students and staff.

1. The school facilities will be kept clean and free of obvious hazards at all times.
2. Employees shall report identified hazards to their immediate supervisor.
3. All athletic facilities shall have signs posted requesting that no tobacco products be used in order to model healthy behaviors to athletes.
4. Enforce tobacco-use policies and prohibit tobacco advertising.

5. Written crisis plan will be in place.
6. Active supervision to promote safety will be provided.
7. Community will have access to physical activity facilities outside school hours.
8. Prohibit using physical activity/food with-holding as punishment.
9. Fundraising efforts-are encouraged to be supportive of healthy eating.
10. Encourage employees to abstain from tobacco products during the school day and in the presence of students at school sponsored events.
11. Written health and safety policies will be reviewed as needed.
12. Policies will be communicated to students, employees, and parents.

Component 8: Family/Community Involvement

An integrated school, parent, and community approach for enhancing the health and well-being of students. School health advisory councils, coalitions, and broadly based constituencies for school health can build support for school health program efforts. Schools actively solicit parent involvement and engage community resources and services to respond more effectively to the health-related needs of students.

1. Allow families and community members to have access to school facilities.
2. Communicate health and wellness information to families and community members via newsletters & website.
3. Promote community based wellness programs.
4. Support effective parenting strategies to promote nutrition and physical activity.
5. Collaborate with community agencies to enhance educational process regarding nutrition and physical activity.
6. Utilize volunteers to maximize services in the promotion of health and wellness.