**Rochester City School Board Policy Manual**

**5405**

**WELLNESS POLICY**

**Statement of Purpose**

The Board of Education considers student and staff wellness to be essential to the ability to realize individual potential and to contribute to the larger community. Wellness is affected by many different factors which also influence the nature and extent of individual development: nutrition, physical exercise and activity, preventive health care, factual and accurate health information, health education and contextual decision-making in making healthy choices. The most critical aspect of wellness is having factual information, an understanding of the choices available, the consequences of each option, and the impact on oneself and others.

Consequently, this Wellness policy has been designed and structured to address many different aspects of healthy development:

5405.20: Safe &Healthy Learning Environment

5405.30: Nutritional Standards

5405.40: Guidelines for Sale of Food Items Outside of School Meal Program

5405.50: Physical Education and Physical Activity

5405.60: Health Education

5405.65: Reproductive Health Education

5405.70: Health Services

5405.80: Counseling, Psychological and Social Services

5405.90: Family and Community Involvement

5405.100: Health Promotion for Staff

# [5405.10 Wellness Task Force](#Wellness_Task_Force)

A Wellness Task Force led by one or more Commissioners of the Board of Education shall convene a meeting at least semi-annually with representatives of the Administration and parents, community representatives, teachers, and principals to review the implementation of this policy and to make recommendations to the Administration with regard to issues impacting student and employee health, nutrition, physical education and wellness.

**[5405.20 Safe & Healthy Learning Environment](#Safe_Healthy_Learning_Environment)**

The District and its schools are committed to make their best efforts to ensure that:

* 1. All schools in the District provide physical surroundings that meet the current accepted federal and state standards for healthy school buildings.
  2. Each school community will ensure that reasonable security procedures and protocols are in place to promote a safe and secure environment.
  3. The school climate reflects the District Values Policy (4311.2) by fostering self-esteem and positive interpersonal relationships among both students and staff.
  4. Students and staff utilize good hygiene habits (such as hand-washing) to reduce disease transmission.

**IMPORTANCE OF NUTRITION & PHYSICAL EXERCISE**

Nutrition and physical exercise play essential roles in the health and development of every child and employee, and are vital to the academic and personal development of our students and staff. Numerous studies have established the correlation between good nutrition and exercise, and academic performance as measured by test scores, attendance rates and school behavior. Given that our students attend school for a substantial portion of their young lives, the Rochester City School District (“District”) must play a critical role in helping students to learn healthy eating habits and to engage in physical exercise on a daily basis. Healthy nutritional standards will help our students to make healthy choices in their selection of foods both in and outside of school. The promotion of regular physical exercise will enhance the overall health and academic performance of our students.

The maintenance of a healthy weight, starting in childhood, is a strong factor in avoiding health risks associated with obesity. Obesity increases the risks of Type 2 diabetes, cardiovascular disease, cancer, and high blood pressure and cholesterol. Obesity can trigger mental health problems such as low self-esteem and depression, impact attendance, and interfere with academic performance.

The District promotes the development and implementation of healthy food standards and expects that it will serve its students food of high nutritional quality through its breakfast and lunch school meals program (“School Meals Program”). In order to meet these objectives, this policy outlines the nutritional standards of its School Meals Program, imposes restrictions on the sale of snack foods made available to students, and promotes increased physical activity for all students.

Finally, the District recognizes that food is part of the cultural fabric and used to celebrate holidays, birthdays and other memorable events in the lives of children and the school community. This policy seeks to honor and balance the different, and at times competing, roles of food in our society.

**[5405.30 Nutritional Standards for all School Meals](#Nutritional_Standards_for_School_Meals)**

The Superintendent of Schools shall develop regulations to establish nutritional standards that promote the consumption of fresh fruits and vegetables, foods low in fat and sodium, and the preparation of school meals that reflect the current science in public health and progressive thinking among national experts in the development of healthy and successful school meal programs.

**5405.35 Adequacy of Time for School Meals**

School principals shall ensure that students are provided adequate time to eat meals at breakfast and lunch times.

**[5405.40 Guidelines for Sale of Food Items Outside of School Meals Program](#Sale_of_Food_Items)**

The Superintendent of Schools shall develop regulations to establish specific guidelines for the sale or offering of foods, snacks and beverages in vending machines, school stores and elsewhere on school property. All District contracts with supplemental educational service (“SES”) providers shall contain provisions such that the nutritional requirements of the Federal Department of Education for schools, as well as the terms of this policy and the corresponding Superintendent’s regulation, shall apply to such SES contracts.

**[5405.50 Physical Education and Physical Activity](#Physical_Education_Physical_Activity)**

1. **Daily Physical Education for Students K-12**

The District shall comply with the physical education requirements set forth in the State Education Law and Chapter 11 of the Regulations of the Commissioner of Education, including but not limited to Section 135.4, as the same may be amended by the State from time to time. The Commissioner’s Regulations require that elementary students in grades kindergarten through six receive at least 120 minutes of physical education in each calendar week. Students in kindergarten through 3rd grade are required to participate in physical education on a daily basis, and students in 4th through 6th grade are to participate at least three times per week.

The Commissioner’s Regulations require that students in grades seven through twelve receive physical education at least three periods per week in one semester and two periods per week in the other semester of each school year.

The District strongly encourages all principals to provide appropriate physical education to all students on a daily basis, including students with disabilities, special health care needs, and in alternative educational settings. Consistent with the Commissioner’s Regulations, the District shall employ a director of physical education who must be certified in both physical education and in administration. Elementary physical education instruction may be provided by elementary classroom teachers as long as they are under the direction and supervision of a certified physical education teacher. Certified physical education teachers are required for secondary school physical education classes. If feasible, and to the extent appropriate to the individual needs of students, students should spend at least 80 percent of physical education class time participating in moderate to vigorous physical activity.

Students who are temporarily or permanently unable to participate in the regular physical education program for their grade level will be provided with adapted activities. Short-term or temporary adaptations will be developed in consultation with appropriate medical personnel. Long-term or permanent adaptations will be based on the recommendations of the family physician.

Students with disabilities who are unable to participate safely or successfully in the regular physical education program for their grade level will be provided adaptive physical education. The Individualized Education Program (IEP) shall include this adaptive physical education program, and the physical education teacher shall be involved in developing the IEP.

1. **Physical Activity**
2. The District strongly supports and encourages principal initiatives to integrate physical activity into the regular classroom settings of their schools. Toward that end, principals shall:

* Require the teaching of health education in the classroom that complements physical education by reinforcing the knowledge and self-management skills needed to maintain an active lifestyle and reduce time spent on sedentary activities, such as watching television and playing videogames.
* Require opportunities for physical activity as part of other subject lessons. For example, classroom teachers may provide short physical activity breaks between lessons or classes, as appropriate.

1. Daily Recess

Given the strong connection between physical exercise and academic achievement, in addition to physical education classroom time, the District requires that all elementary school principals provide students with at least 20 minutes a day of supervised recess during which staff should promote moderate to vigorous physical exercise as appropriate to individual student needs. Outdoor play is encouraged when weather conditions are appropriate. In the event that an elementary school principal believes that the school is unable to provide daily, supervised recess to all school students, the principal shall provide a written statement to the chief of schools no later than the end of the first full week of classes in September, describing the reasons why daily recess cannot be provided to all school students. As a pre-condition of the waiver, the principal shall confirm to the chief of schools that the school is complying with the Regulations of the Commissioner of Education with regard to the minimum amount of physical education required for elementary school students (currently 120 minutes of physical education in each calendar week). The chief of schools shall determine whether to grant the school principal’s request to waive the recess requirement for the school year. The Superintendent or designee shall report to the Board of Education and to the Wellness Task Force annually the schools receiving such waivers and shall post notice of such waivers on the District website.

1. Physical Activity Opportunities Before and After School

All schools are encouraged to offer extracurricular physical activity programs, such as physical activity clubs and intramural programs. All high schools, and middle schools, are encouraged to offer interscholastic sports programs. Schools are encouraged to offer a range of activities that meet the needs, interests, and abilities of students, including students with disabilities and those with special health care needs.

1. **Use of School Facilities Outside of School Hours**

Wherever practicable, principals should allow school spaces and facilities to be available for school-sponsored activities that promote fitness for its students during non-school hours.

**[5405.60 Health Education](#Health_Education)**

The District shall comply with the health education requirements set forth in the State Education Law and Chapter 11 of the Regulations of the Commissioner of Education, including but not limited to Section 135.3, as the same may be amended by the State from time to time.

The District and its schools shall ensure that:

* 1. Health education in the elementary schools.

The elementary school curriculum shall include a sequential health education program for all pupils, grades K-6. In the kindergarten and primary grades, the teacher shall provide for pupil participation in planned activities for developing attitudes, knowledge and behavior that contribute to their own sense of self-worth, respect for their bodies and ability to make constructive decisions regarding their social and emotional, as well as physical, health. Personal health guidance shall also be provided according to the individual needs of pupils. This guidance shall include the development of specific habits necessary to maintain good individual and community health. In addition to continued health guidance, provision shall be made in the school program of grades 4-6 for planned units of teaching which shall include health instruction through which pupils may become increasingly self-reliant in solving their own health problems and those of the group. Health education in the elementary school grades shall be taught by the regular classroom teachers.

* 1. Health education in the secondary schools.

The secondary school curriculum shall include health education as a constant for all pupils. In addition to continued health guidance in the junior high school grades, provision shall also be made for a separate one-half year course. In addition to continued health guidance in the senior high school, provision shall also be made for an approved one-half unit course. Health education shall be required for all pupils in the junior and senior high school grades and shall be taught by teachers holding a certificate to teach health. A member of each faculty with approved preparation shall be designated as health coordinator, in order that the entire faculty may cooperate in realizing the potential health teaching values of the school programs. The health coordinator shall insure that related school courses are conducted in a manner supportive of health education, and provide for cooperation with community agencies and use of community resources necessary for achieving a complete school -community health education program.

The curriculum shall focus on health promotion to enhance each student’s independent thinking skills and decision-making. Each student is empowered to enhance personal responsibility for healthy living.

**[5405.65 Reproductive Health Education](#Reproductive_Health_Education)**

The Board of Education believes that a comprehensive health education program assists students in acquiring factual knowledge, skills, attitudes and values which will result in behavior that contributes to the well-being of the individual, the family, and society.

Aiding students to attain a mature and responsible attitude toward human sexuality is a continuous task of each generation. The Board recognizes that parents have primary responsibility for assisting their children in developing moral values. Programs must respect and reinforce the role of the parent. The schools’ function is to support and supplement parents’ efforts in these areas by offering students factual information and opportunities to discuss concerns, issues and attitudes.

1. The following requirements shall apply to any course(s) dealing with family life and sex education offered by the District:
2. Instructional materials will be available for review by the parent or guardian prior to the beginning of the school year and during school hours.
3. Teachers who provide instruction in family life education will have professional preparation in the subject area.
4. Programs shall give adolescents factual information regarding sex-related issues, sexual, physical, emotional and psychological development. Programs shall expand achievement activities for adolescents in order to help them develop self-esteem.
5. Human sexuality education shall be accompanied by identification of and sensitivity to values and responsibilities from cultural and religious perspectives and opportunities for values clarification.
6. Programs designed to resolve problems related to adolescent pregnancy shall be sensitive to and respectful of the various interpretations about the beginnings and development of life.
7. Programs shall aim to improve family communications around common concerns of adolescents.
8. Outside (resource people) individuals may be used to supplement District personnel with prior approval of the administration. Programs may take a multifaceted approach by using a wide variety of agencies and resources which represent the range of philosophies and values within our community.
9. Adolescents shall have the right to follow through on an informed choice, without coercion or influence by community agencies.

In recognition of the religious tenets of certain students, the Board, subject to the regulations of the State Board of Regents, shall excuse a student from those aspects of the required study of Health, Hygiene, or other areas which conflict with the religious beliefs of the student.

Ref: 20 USC §§1681 et seq.; 34 CFR §106.34€

Rules of the Board of Regents §16.2

8 NYCRR §135

*Mozert v. Hawkins County Public Schools,* 827 F.2d 1058 (6th Circuit, 1987)

*Smith v. Ricci,* 89 N.J. 514, 446 A.2d 501 (1982), app. Dism. 459 U.S. 962

103 S. Ct. 286 (1982)

*Medeiros v. Kiyosaki,* 52 Haw. 436, 478 P.2d 314 (1970)

Note: Former Family Life Education policy (4312.1) adopted August 20, 1998 pursuant to Resolution No. 1998-99: 136.

1. AIDS Instruction

In compliance with the Regulations of the Commissioner of Education, the District will provide classroom instruction concerning Acquired Immune Deficiency Syndrome (AIDS) as part of a sequential and comprehensive health program for all students, K-12. Instruction must be offered during regularly scheduled classes. Such instruction will be age-appropriate, and include the following information:

1. The nature of the disease;
2. Methods of transmission of the disease; and
3. Methods of prevention of the disease (stressing abstinence as the most effective and appropriate protection against AIDS)

A student may be excused from that segment of AIDS instruction regarding methods of prevention of the disease if his/her parent/guardian files a request with the Superintendent of Schools. The request must give assurance that such instruction will be given at home.

The Board shall establish an advisory council which shall be responsible for making recommendations on content, implementation, and evaluation of the AIDS instructional program. The advisory council must consist of Board members, appropriate school personnel, parents and community representatives, including representatives from religious organizations.

AIDS instruction for students in grades 9-`12 may include reproductive health education as provided by §135.3(2)(ii) of the Commissioner’s Regulations. Any such program must be reviewed by the advisory council, which shall make appropriate recommendations. No student shall be permitted to participate in such program if: (1) the student’s parent(s) has submitted a written request to opt out; (2) the student has not participated in appropriate AIDS instruction; or (3) the student has not received accurate and complete personal health guidance by personnel trained and supervised by competent health professionals or health educators.

The Superintendent shall be responsible for developing regulations consistent with this policy.

Cross-ref: Advisory Bodies policy (2260)

Students with HIV-Related Illness policy (5191)

Ref: Education Law §3204(5)

8 NYCRR §§16.2; 135.3

*Ware v. Valley Stream High School District,* 75 NY2d 114 (1989)

*New York State School Boards Association v. Sobol,* 168 AD2 188 (1991)

*Matter of Ware,* 28 EDR 415 (1989)

Note: Former AIDS Instruction policy (4315.1): Adopted August 20, 1998; Amended January 26, 2012 pursuant to Resolution No. 2011-12: 483.

**[5405.70 Health Services](#Health_Services)**

The District and its schools shall make their best efforts to provide:

* 1. Services for students in a school setting to evaluate, protect, and promote health; and in collaboration with community partners, parents/guardians, and other constituencies. Each school has comprehensive health services that are provided by qualified community partners and qualified District and school staff who acknowledge health service mandates and N.Y.S. Education Department Regulations.
  2. The Superintendent‟s designee is responsible for program development, consistency/standardization of service delivery, meeting current standards, and utilizing quality assurance methods.
  3. Parents and guardians are informed of the availability and variety of health services for their children.

**[5405.80 Counseling, Psychological and Social Services](#Counseling)**

The District and its schools shall make their best efforts to provide:

* 1. Student support services include individual and group assessment, interventions and referrals that address the social, emotional, and mental health needs of students. Each school has comprehensive student support services that are provided by qualified community partners and qualified District and school staff. Each member of the school community for whom the District bears responsibility to provide services has access to appropriate support services.
  2. District staff and qualified community partners provide prevention education training and support to students that involve skills-based learning opportunities that address the physical, emotional, mental, behavioral, and social dimensions of health.
  3. The District will use early identification and intervention to ensure all children are prepared for success.

**[5405.90 Family and Community Involvement](#Family_Involvement)**

The District and its schools are committed to making their best efforts to ensure that:

1. The District and schools are empowered to work with parents, students, staff and community members to establish and support a collaborative partnership to enhance the health and well-being of the school community.
2. Parents and guardians have the opportunity for training in key areas of health education.
3. The District encourages and supports, through tools and resources, communication among parents and guardians to better inform students of health opportunities and effective access to care.
4. The District and schools will promote and encourage ongoing community partnerships to support initiatives for health improvement at the school and District-wide level.

**[5405. 100 Health Promotion for Staff](#Health_Promotion_for_Staff)**

The District and its component schools shall make their best efforts, consistent with legal limitations and requirements relating to collective bargaining, to ensure that:

* 1. The District will support and encourage health promotion activities for District employees including, but not limited to heath assessments, health education (including health education intervention training and programs), health-related fitness activities, counseling and psychological services through the Employee Assistance Program, and other programs, such as university and college partnerships, hospital and health care provider partnerships.
  2. The District and schools will encourage and motivate staff to live healthier lives and model their individual commitments to health lifestyles in both a physical and mental capacity. The ultimate goal shall be to establish a culture that promotes health and wellness. Programs and resources that are available within the District as well as within the community and the region shall be promoted.
  3. District staff will promote ongoing education and training opportunities to create and maintain safe learning and workplace environments.

# 5405.110 Administrative Regulations, Guidelines and Implementation

1. Implementation of Policy. The Superintendent shall implement this policy and establish such regulations and guidelines to carry out the requirements and standards set forth in this policy. The Superintendent may designate a District level staff member and/or an advisory team to monitor compliance; and such designee shall report semi-annually, and at such other times as the Superintendent specifies, regarding compliance with this policy and related procedures.
2. S uperintendent‟s R e gulat ions . Consistent with the policy guidelines set forth above, the Superintendent of Schools is authorized to promulgate, revise, maintain and enforce throughout the District administrative guidelines and regulations consistent with constitutional requirements that address particular issues of administration, interpretation and enforcement of any section of this policy. In preparing any such regulations or guidelines, the Superintendent or his designee will engage in the collaborative process outlined by federal law for wellness policies, to assure appropriate input and comment from interested constituencies. The Superintendent may implement the guidelines and standards with regard to the sale of food items outside of the school meals program on a pilot or incremental basis in order to facilitate the acceptance of such new guidelines and standards.

External Regulations. Any regulation relating to the subject matter of this Policy adopted by the United States Department of Education and published in the *Federal Register* or in the *Code of Federal Regulations*; and any regulation relating to the subject matter of this Policy adopted by the New York State Commissioner of Education and published in the *New York Code of Rules and Regulations* shall be deemed to be incorporated by reference into this Policy and the Superintendent’s Regulations, and be given full force and effect without the need for formal adoption or incorporation by the Superintendent.

1. Conflict of Laws. Nothing in this Policy shall be deemed to supersede any inconsistent requirement of federal or State law or regulation, including but not limited to requirements of the General Municipal Law; the Education Law; the Labor Law; or the Civil Service Law.

References: Public law 108-265 – June 30, 2004, *Child Nutrition and WIC Reauthorization Act of 2004*

Education Law § 2801-a “School Safety Plans”

Board Policy 4311.2 “Values Education”

Board Policy 4312.1 “Family Life Education”

Board Policy 4315 “Health Education”

Board Policy 4316 “Physical Education”

Notes: Adopted Resolution No. 2006-2007: 78A (July 20, 2006);

Amended pursuant to Resolution No. 2010-11: 750 on April 28, 2011.

Amended September 26, 2013 pursuant to Resolution No. 2013-14: 245.

NOTE: This policy replaces the following policies:

4312.1 Family Life Education policy

4315 Health Education policy

4315.1 AIDS Instruction policy

4316 Physical Education policy