

Business Operations
Ofelia San Pedro, Deputy Superintendent

SUBJECT: REQUEST THAT THE SCHOOL BOARD ADOPT AND IMPLEMENT AN ESTABLISHED SCHOOL WELLNESS POLICY IN ALIGNMENT WITH THE DISTRICT'S APPROVED SYSTEM OF HEALTH AND WELLNESS ADDRESSING HEALTH ISSUES FACING OUR STUDENTS AND PER THE REQUIREMENTS OF THE CHILD NUTRITION AND WIC REAUTHORIZATION ACT OF 2004

COMMITTEE: INNOVATION, EFFICIENCY & GOVERNMENTAL RELATIONS

Last spring, the Child Nutrition and WIC Reauthorization Act of 2004 required local educational agencies to adopt a School Wellness Policy by June, 2006. Additionally, at the November 16, 2005 Board Meeting, The School Board approved Agenda Item A-3, authorizing the Superintendent to establish healthy beverage and food guidelines for all food sales before, during and 1-hour after school, mandate physical education at all elementary/middle schools, implement the Fitness Lifestyle Design course at all unserved high schools, establish a Middle School Athletics/Activity coordinator supplement, commit to hold the Division of School Athletics/individual school Athletic programs harmless for any revenue lost from the change in food sale guidelines, and develop and implement a comprehensive Health Literacy curriculum to ensure that students meet the National Health Education Standards. These efforts began the process of creating a coordinated, comprehensive local School Wellness Policy which incorporates and integrates nutrition, physical education, health literacy and school-based healthcare.

The Child Nutrition and WIC Reauthorization Act of 2004 mandates that all local educational agencies adopt a School Wellness Policy that at a minimum: includes goals for nutrition education, physical activity, and other school based activities designed to promote student wellness; includes nutrition guidelines for all foods available on the school campus during the school day; provides the assurance that the guidelines for school meals are not less restrictive than those set by the federal government; establishes a plan for measuring implementation of the local wellness policy; involves parents, students, and representatives from the school food authority, the school board, school administrators and the public in the development of the wellness policy; and includes a plan for measuring and evaluating the implementation of the policy and reporting the effectiveness and recommended revisions, if necessary, to the School Board.

E-37

With the November 16, 2005 authorization of the School Board for the Superintendent to adopt the outlined System of Health and Wellness and Healthy Beverages and Food Guidelines, together with the recommendations of the district's Food and Nutrition and Physical Education Advisory Committee, a district School Wellness Policy meeting the required criteria for the Child Nutrition and WIC Reauthorization Act of 2004 has been developed and is attached hereto.

A copy of the November 16, 2005, School Board approved Agenda Item A-3, will be transmitted to the Board under separate cover and placed on file in the Citizen Information Center and the Office of the Board Recording Secretary.

RECOMMENDED: That The School Board of Miami-Dade County, Florida, adopt and implement the attached School Wellness Policy effective July 2006, in alignment with the District's Approved System of Health and Wellness and per the requirements of the Child Nutrition and WIC Reauthorization Act of 2004.

WELLNESS POLICY

Preamble

The Miami-Dade County Public School District (M-DCPS) is committed to providing a healthy environment for students and adults within the school environment, recognizing that people must be physically healthy in order to achieve academic success.

M-DCPS also recognizes that there is a link between academic performance and the food served in schools, health literacy and nutrition education, physical education and physical activity, and environmental awareness.

The District will focus on achieving four goals:

- Nutrition – all students will have access to and take advantage of high-nutrient food options
- Physical Activity – all students will engage in the daily recommended levels of physical activity
- Health Literacy – all students will be educated on how to make ‘health-enhancing’ choices
- School-based Healthcare – all students will have access to physical and mental healthcare

Together, these objectives set the foundation for a coordinated, comprehensive wellness program that enables students to succeed academically.

Introduction

To promote wellness and address current health issues facing our students, including childhood overweight and obesity, the M-DCPS will provide:

1. Nutritious foods, available on campus during the school day, to promote student health;
2. Physical education and physical activity, to enable students to develop healthy lifetime habits conducive to cardiovascular conditioning, flexibility, coordination, balance and physical strength;
3. Health literacy and nutrition education to equip students to make the most health-enhancing decisions about the food choices available to them, and to understand health-related influences in the environment; and
4. School-based healthcare to protect students' physical, mental, social and emotional health.

The M-DCPS Wellness Policy establishes objectives in each of these areas, and sets guidelines for how to meet them successfully in a coordinated, comprehensive wellness program that enables students to succeed academically.

Policies

1. **Nutrition Policy:** All students will have access to high-nutrient food options and to nutrition information about them.

The Department of Food and Nutrition will serve food that is high in fiber, low in added fats, sugar, and sodium, respectful of cultural diversity and served in appropriate portion sizes consistent with USDA standards with adequate time allotted for meal consumption and in an environment conducive to making nutritional choices.

WELLNESS POLICY

2. Physical Education and Physical Activity Policy: All students will engage in daily recommended levels of physical activity.

(2a) Physical Education is required for all students following national recommendations by grade level. If additional periods are added to the current six-period day in senior high schools, then physical education requirements may be increased beyond the current minimums, which are:

Elementary, grades K–5: 150 minutes per week, preferably at least 20 minutes daily.

Secondary, grades 6–12: 225 minutes per week, preferably at least 50 minutes daily, except for students whose academic program does not provide adequate time in the schedule.

Recess for students in grades PK – 5 is required to take place either three times a week for 15 minutes each time or two times a week for 20 minutes each time in all grades. Recess is defined as unstructured playtime that is supervised by adults, but not directed by adults.

(2b) Physical education will be taught by a certified specialist and be an essential part of every school's instructional program, subject to differing abilities of students. The program will stress the importance of physical fitness and encourage healthy lifestyles.

(2c) Physical education will include training in skills needed for enhancing health, such as:

- Comprehension of concepts related to health promotion, disease prevention, and reduction of health risk
- Ability to access valid health information
- Ability to analyze the influences of culture and technology on health
- Effective interpersonal communication skills
- Setting goals and making decisions
- Advocacy skills for personal, family and community health.

3. Health Literacy Policy: In addition to health and fitness taught in physical education programs, all students will be taught comprehensive principles of nutrition and health implications, media literacy, an appreciation of healthy food and other competencies essential to making health-enhancing choices. Strategies employed will include, but not be limited to:

(3a) Incorporating health literacy education into classroom instruction in all core curriculum areas including comprehensive concepts on health –enhancing behaviors and risk factor reduction for lifestyle disease prevention.

(3b) Providing nutrition education at all grade levels which includes lessons and experiential learning opportunities that enhance health:

- Emphasize the importance of goal-setting and positive decision-making strategies that enhance health including those related to food intake and energy expenditure.
- Analyze the influence of culture, media and other factors on food choices and preferences in personal health practices including food preparation methods that enrich and challenge healthy living.

WELLNESS POLICY

- (3c) Training students to differentiate between marketing messages and substantive health information.
- (3d) Promoting healthy food choices on school premises by making relevant nutrition information available as close as possible to the point of choice.
- 4. **School-based Healthcare Policy:** All students will have access to physical, mental, social and emotional healthcare.
- (4a) School Health Connect will provide every school with a school-based health team to ensure that a coordinated level of healthcare is consistently available at every school, including but not limited to:
 - Link to medical home
 - Mandated screenings and assessments with appropriate follow-up
 - System for dealing with crisis medical situations
 - Appropriate administration of medications
 - Social histories
 - Mental health counseling and primary care as appropriate
- (4b) Each team will be composed of a school nurse, school social worker, and two health technicians. Currently, it is estimated that each team will serve two schools. Each team will be associated with one or more community health providers, who will provide health services to students and/or link students to medical homes.
- (4c) Staff Wellness
 - Information on health literacy, nutrition and physical activity will be provided to all school district staff.

Monitoring and Evaluation


The Superintendent's Wellness Advisory Committee is responsible for reviewing and monitoring the District's Wellness Policy in accordance with the District's goals and initiatives to ensure high academic achievement through enhanced wellness curriculum and programs to improve the health of all students.

The goals, objectives and guidelines of the M-DCPS Wellness Policy will be reviewed annually. Recommendations to the Superintendent by the Wellness Advisory Committee will address responses to changing conditions, more effective techniques and proven strategies, incorporate new objectives if needed, and ensure that the guidelines reflect emerging scientific knowledge relevant to our children's health.

MEMORANDUM

May 3, 2006

TO: The Honorable Chair and Members of The School Board of Miami-Dade County, Florida

FROM: Rudolph F. Crew, Superintendent of Schools 

SUBJECT: **SUPPLEMENTAL INFORMATION FOR AGENDA E-37, SCHOOL BOARD MEETING OF MAY 10, 2006: REQUEST THAT THE SCHOOL BOARD ADOPT AND IMPLEMENT AN ESTABLISHED SCHOOL WELLNESS POLICY IN ALIGNMENT WITH THE DISTRICT'S APPROVED SYSTEM OF HEALTH AND WELLNESS ADDRESSING HEALTH ISSUES FACING OUR STUDENTS AND PER THE REQUIREMENTS OF THE CHILD NUTRITION AND WIC REAUTHORIZATION ACT OF 2004**

As background information for Agenda Item E-37, attached please find approved Agenda Item A-3 from the November 16, 2005 School Board meeting. This item outlines the cost and timing for the recommended actions in Attachment B of Agenda Item A-3.

If you require additional information, please contact Ms. Ofelia San Pedro, Deputy Superintendent, Business Operations at 305-995-4581.

RFC:jls
M-1442
Attachment

Rudolph F. Crew, Ed.D., Superintendent of Schools

SUBJECT: REQUEST THAT THE SCHOOL BOARD AUTHORIZE THE SUPERINTENDENT TO:

- 1. ESTABLISH HEALTHY BEVERAGES AND FOOD GUIDELINES FOR ALL FOOD SALES BEFORE, DURING, AND 1 HOUR AFTER SCHOOL AS OUTLINED IN ATTACHMENT A**
- 2. MANDATE PE AT ALL ELEMENTARY/MIDDLE SCHOOLS**
- 3. IMPLEMENT FITNESS LIFESTYLE DESIGN COURSE AT ALL UN-SERVED HIGH SCHOOLS**
- 4. ESTABLISH A MIDDLE SCHOOL ATHLETICS/ACTIVITY COORDINATOR SUPPLEMENT**
- 5. COMMIT TO HOLD THE DIVISION OF SCHOOL ATHLETICS/INDIVIDUAL SCHOOL ATHLETIC PROGRAMS HARMLESS FOR ANY REVENUE LOST FROM CHANGE IN FOOD SALES GUIDELINES**
- 6. DEVELOP AND IMPLEMENT A COMPREHENSIVE HEALTH LITERACY CURRICULUM TO ENSURE THAT STUDENTS MEET THE NATIONAL HEALTH EDUCATION STANDARDS**

COMMITTEE: INSTRUCTIONAL EXCELLENCE AND COMMUNITY ENGAGEMENT

Introduction

Over the past several years, School Board members have introduced different initiatives that demonstrate their commitment to the health and wellness of our students. Ms. Perla Tabares Hantman introduced an item that established a cold and flu prevention program. Mr. Agustin J. Barrera introduced an item that established a partnership with the City of Miami Mayor's Task Force on Health and the Cuban-American National Council, Inc. to promote awareness on childhood obesity. Mr. Frank J. Bolaños introduced an item that established a partnership between the City of Miami, the Save a Life Foundation, and the District to implement a first response emergency training program. Dr. Martin Karp introduced an item to investigate the feasibility of having CPR certified staff members at school sites. Dr. Marta Pérez submitted an item to ban carbonated beverages and another item to develop a wellness policy. During the past months, staff has worked to identify a System of Health and Wellness that addresses the health issues facing our students. The following recommendations are focused on achieving four objectives:

- Nutrition – all students will have access to and take advantage of high-nutrient food options
- Physical Activity – all students will engage in the daily recommended levels of physical activity
- Health Literacy – all students will be educated on how to make 'health-enhancing' choices
- School-based Healthcare – all students will have access to physical and mental healthcare

Together, they set the foundation for a coordinated, comprehensive wellness program that enables students to succeed academically.

Background

National statistics on obesity clearly define an epidemic that experts predict will result in perhaps the first generation of Americans that will have a shorter life expectancy than their parents. The majority of American youth are sedentary and do not eat well. Poor nourishment and lack of physical activity can lead to learning problems in school and school-related problems that can continue into adulthood.

A-3

Current status

Miami-Dade County Public Schools (M-DCPS) has instituted a number of initiatives that address the wellness of our students including, but not limited to, the following:

- School menus comply with the Dietary Guidelines for Americans and vendor contracts include provisions to ensure that healthy beverage/snack options are available in vending machines.
- Elementary and secondary schools implement Physical Education, Health Education, and HIV/AIDS education.
- A mandatory screening program is conducted at multiple grade levels for vision, hearing, and scoliosis, as well as, follow-ups for hypertension.
- Nutrition education, as outlined in the Sunshine State Standards Health Curriculum, is provided upon request to all grade levels by nutrition educators who are Registered Dietitians.
- Recess is currently being implemented in PK-5 grades, either three times a week for 15 minutes each time or two times a week for 20 minutes each time.

While the policies and programs instituted have proven to have an impact on health issues, M-DCPS has not yet instituted a comprehensive program to improve the health of our students.

Cost and timing for the recommended actions are outlined in Attachment B.

- RECOMMENDED:** Request that The School Board of Miami-Dade County, Florida, authorize the Superintendent to:
1. Establish Healthy Beverages and Food Guidelines for all food sales before, during, and 1 hour after school as outlined in Attachment A
 2. Mandate PE at all elementary/middle schools
 3. Implement Fitness Lifestyle Design course at all un-served high schools
 4. Establish a Middle School Athletics/Activity coordinator supplement
 5. Commit to hold the Division of School Athletics/individual school Athletic programs harmless for any revenue lost from change in food sales guidelines
 6. Develop and implement a comprehensive Health Literacy curriculum to ensure that students meet the national health education standards

HEALTHY BEVERAGES AND FOOD GUIDELINES

M-DCPS is committed to providing an environment in which all students can make healthful food choices for lifelong health. As such, the following Healthy Food and Beverage Guidelines will be implemented effective July 1, 2006 for all food sales before, during, and 1 hour after school.

Beverage guidelines

- Only fruit-based drinks, composed of no less than 50% fruit juices with no added sweeteners, artificial flavors or colors.
- Drinking water with no additives except those minerals normally added to tap water.
- Electrolyte replacement drinks that do not contain more than 34 grams of added sweetener per 16 ounce serving; 16 ounce maximum volume.
- Milk and flavored milks, all milk should contain Vitamin A and D at levels specified by the Food and Drug Administration.

The following are not allowed:

- Carbonated beverages
- Beverages containing additives such as herbal and non-vitamin supplements
- Food colorings and flavors not proven safe by the Food and Drug Administration
- Beverages containing vitamin and/or mineral supplements
- Beverages in glass containers

Food guidelines

- No more than 35% of total calories from fat
- No more than 10% of total calories from saturated fat, including trans fat
- No more than 35% added sugar by weight

Portion guidelines

- Beverages, except for water: less than 16 oz.
- Snacks and sweets (including but not limited to chips, crackers, popcorn, cereal, trail mix, nuts seeds, dried fruit): 1.5 oz.
- Cookies/cereal bars: 2 oz.
- Bakery items (e.g., pastries, muffins): 3 oz.
- Frozen desserts, ice cream: 3 fluid oz.
- Other items (including, but not limited to, French fries and onion rings) shall be no larger than the portions served by Food and Nutrition Services

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COST AND NEXT STEPS FOR RECOMMENDATIONS

RECOMMENDATION	COST	NEXT STEPS
Establish Healthy Beverages and Food Guidelines for <u>all</u> food sales	<ul style="list-style-type: none"> • Potential loss of revenue in first year of implementation; expected to be no loss of revenue in the longer-term 	<ul style="list-style-type: none"> • New vending machine access bid to be released in Dec. 2005
Mandate PE at all elementary/middle schools	<ul style="list-style-type: none"> • ~\$3.4 million in new PE teacher allocation 	<ul style="list-style-type: none"> • Full implementation by 2008
Establish a Middle School Athletics/Activity coordinator supplement	<ul style="list-style-type: none"> • \$158,000 for Middle School Athletics/Activity Coordinators 	<ul style="list-style-type: none"> • Begin Jan. 2006
Implement Fitness Lifestyle Design course at all un-served high schools	<ul style="list-style-type: none"> • \$700,000 for additional fitness centers – Capital Expense 	<ul style="list-style-type: none"> • Full implementation by 2007
Commit to hold the Division of School Athletics/individual school Athletic programs harmless for any revenue lost from change in food sales guidelines	<ul style="list-style-type: none"> • Cost of replacing any lost revenue from change in food sales guidelines (TBD) 	<ul style="list-style-type: none"> • TBD pending results of vending machine access bid
Develop and implement a comprehensive Health Literacy curriculum to ensure that students meet the national health education standards	<ul style="list-style-type: none"> • To be determined 	<ul style="list-style-type: none"> • To be developed in 2006 for implementation in 2007
Implement School Health Connect Teams	<ul style="list-style-type: none"> • \$7 million in redirected funding, not additional cost 	<ul style="list-style-type: none"> • Final proposal due in January

} REVISSED