



Los Angeles Unified School District



BLUEPRINT FOR WELLNESS



2014-2015

HEALTHY CHOICES FOR LIFELONG HEALTH

The students and families in the Los Angeles Unified School District (LAUSD) face increasing health risks that can affect their wellness and ultimately their quality of life and possibly their life span. LAUSD is committed to providing an environment where students can learn to make healthy choices for lifelong health. The Blueprint for Wellness is designed to encompass student, parent, staff, and community wellness and should serve to further advance wellness throughout the District. We hope the Blueprint will be helpful to all school sites and District offices.

FOREWARD

The students and families in the Los Angeles Unified School District (LAUSD) face increasing health risks that can affect their wellness, quality of life, and possibly their life span. LAUSD is committed to providing an environment where students can learn to make healthy choices for lifelong health. LAUSD recognizes the critical relationship between student health and academic achievement – “students must be healthy to be educated and be educated to be healthy.”¹

The Local School Wellness Policy requirement was established by the Child Nutrition and Women, Infants, and Children (WIC) Reauthorization Act of 2004 and was further strengthened by the Healthy, Hunger-Free Kids Act of 2010. The Healthy, Hunger-Free Kids Act requires all school district wellness policies to include involvement of stakeholders, goals for nutrition guidelines for all foods available on school campus, nutrition education and promotion, physical education and activity, notification to the public, and monitoring and evaluation of the policies.

The Healthy, Hunger-Free Kids Act of 2010 resulted in the expansion of the wellness policy that was adopted by the Board of Education on June 27, 2006. The Blueprint for Wellness supplements and serves as a model for establishing the components that are necessary for implementing a comprehensive District wellness policy. It will serve as a guide to assist schools and the District in implementing a comprehensive wellness plan for students, families, and staff.

The blueprint is the result of many dedicated hours of work by District staff, students, parents, teachers, administrators, governmental agencies, and community-based organizations.

The Blueprint for Wellness is designed to encompass student, parent, staff, and community wellness and should serve to further advance wellness throughout the District. We hope the Blueprint will be helpful to all school sites and District offices.

Dr. John E. Deasy, Superintendent

ACKNOWLEDGMENTS

The LAUSD Blueprint for Wellness is a result of the tireless work of District staff, students, parents, teachers, administrators, governmental agencies, and community-based organizations on behalf of the students, schools, and employees of our District. This Blueprint would not have been accomplished without the innovation, hard work, and dedication of each individual and organization involved in every step of the process.

Our deepest appreciation goes to the original Central Coordinated School Health District Council of 2006, whose members worked vigorously to begin to set the foundation of this work for the District. The following are members of the District's current Central Coordinated Health and Safety Committee:

Central Coordinated Health and Safety Committee

David Binkle
Food Services Division, Director

Walter Flores
Office of School Operations, Administrator

Koresha Bell-Johnson
Atwater Elementary School, Parent

Matthew French
Academic Leadership Community at Miguel Contreras Learning Complex, Health Teacher

Dechele Byrd
Washington Prep High School, Principal

Eloisa Gonzalez, MD, MPH
L.A. County Department of Public Health, Director, Cardiovascular and School Health

Maria Castro
Student Health and Human Services, Coordinator

John Han
Beyond the Bell, Operations Coordinator

Trenton Cornelius
Interscholastic Athletics, Coordinator

Maryjane Puffer
The L.A. Trust for Children's Health, Executive Director

Daisy Esqueda
Office of the Chief Operating Officer, Program & Policy Development Specialist

Michael Romero
Office of the Chief Operating Officer, Administrator

Chad Fenwick
Physical Education, Advisor

Roberto Ulloa
Edward Roybal High School, Student

We are thankful for the support and leadership of Enrique Boull't, Chief Operating Officer, Debra Duardo, Executive Director of Student Health and Human Services, and Earl Perkins, Assistant Superintendent of School Operations.

We are especially grateful to Michelle King, Senior Deputy Superintendent of School Operations, for her continued guidance and leadership.

TABLE OF CONTENTS

Background	4
Nutrition Services	7
Physical Education.....	11
Health Education	16
Health Services	19
School Mental Health, Psychological and Social Services	23
Safe Environment	27
Staff Wellness	31
Parent and Community Involvement	33
Fundraising	35
Implementation and Evaluation of the Wellness Policy	37
References.....	38
Contact Information	39

BACKGROUND

The students and families in the Los Angeles Unified School District (LAUSD) and general community members in the District's catchment area face increasing health risks that can affect their wellness and ultimately their quality of life and possibly their life span. LAUSD is committed to providing an environment where students can learn to make healthy choices for lifelong health and achieve in school. Therefore, the LAUSD Board of Education adopted the Policy on Wellness that addresses student wellness for every school in the District. This [Blueprint expands on the Policy on Wellness](#). The following research statistics in the areas of Nutrition Services, Physical Education, Health Education, Health Services, School Mental Health, Psychological and Social Services, and Safe Environment reflect the need for a strong and achievable wellness policy.

NUTRITION SERVICES

Studies show that good nutrition increases student achievement. However, studies also show that food insecurity of low-income adults in California has increased from 29.1% in 2001 to 40.0% in 2011.² Children in food-insecure households have increased absences and tardiness and demonstrated poorer cognitive functioning resulting in lower test scores.³ Furthermore, food insecurity may be related to overall poor diet quality⁴ and many of the leading causes of death in the United States such as diabetes, heart disease, stroke, obesity, hypertension, and cancer have a nutrition-related component.

PHYSICAL EDUCATION

Children participating in daily physical activity have shown superior academic performance and a more positive attitude toward school. Exercise has been shown to improve scores on short-term memory, reaction time, and creativity. In addition, young persons who exercised daily outperformed other students on exams as stated by the California State Board of Education. Furthermore, considering that lack of physical activity can contribute to obesity, research showed that severely obese children missed more school days than normal-weight children. The mean number of school days missed was 4.2 days for severely obese children and 0.7 days for healthy children over a 30 day period.⁵

HEALTH EDUCATION

The use of illegal substances can negatively impact a student's academic achievement. It should be noted that 29.5% of students were offered, sold, or given an illegal drug on school property during the past 12 months in LAUSD, according to the 2013 Youth Risk Behavior Survey (YRBS). As to the need of violence-prevention curriculum within health education, harassment and bullying have been linked to 75% of school-shooting incidents according to the U.S. Secret Service Report in May 2002.

HEALTH SERVICES

In LAUSD 10% of elementary and 19% of secondary students are identified with visual acuity problems that make reading difficult, and 40% of those will not receive any treatment by the end of the school year. In regard to the impacts of asthma, 27,000 students in LAUSD are taking medications for asthma while in school. It is estimated that over 10% of the children living within LAUSD boundaries have asthma, that many are receiving substandard treatment, and that many are undiagnosed. It is estimated that children with poorly controlled asthma will miss at least 10 school days annually due to their asthma.

Being the number one chronic childhood illness, dental disease is the most prevalent unmet health need of children in the United States. Students served by LAUSD have a high burden of dental disease and unmet oral health needs that affect their attendance. On average LAUSD students miss two days of school per year due to dental disease. Of 2491 children screened from 6 LAUSD elementary schools,

only 24% had a normal exam with no visible evidence of decay. Twenty-nine percent had fillings, demonstrating a history of caries. Approximately 30% students had early, reversible, signs of tooth decay (white spots and brown spots), 30% of students had visible dental caries, and 6% had severe dental disease requiring emergent attention. The number of caries per child ranged from 1-13. These findings suggest an extremely large burden of dental disease among those served.

SCHOOL MENTAL HEALTH, PSYCHOLOGICAL AND SOCIAL SERVICES

Studies over the last twenty years have identified a critical link between exposure to community violence and other Adverse Childhood Experiences (ACES) with lower grade-point average (GPA), higher school absenteeism, increased incidences of suspension and expulsion, decreased rates of high school graduation, decreased reading ability, and greater involvement with the criminal system than that of their peers. Furthermore, a single adverse experience or traumatic event can cause anger, mood swings, social withdrawal, concentration and memory difficulties, intrusive thoughts, interrupted sleep, and nightmares. When students are exposed to traumatic or stressful events, brain functioning is impacted, which leads students to “fall behind in school, fail to develop healthy relationships with peers, or create problems with teachers and principals.”

Research indicates that there is more to student success than cognitive ability, curriculum, and instruction. A student’s social emotional character and overall school climate can powerfully affect whether students learn and thrive in schools and in their communities.

SAFE ENVIRONMENT

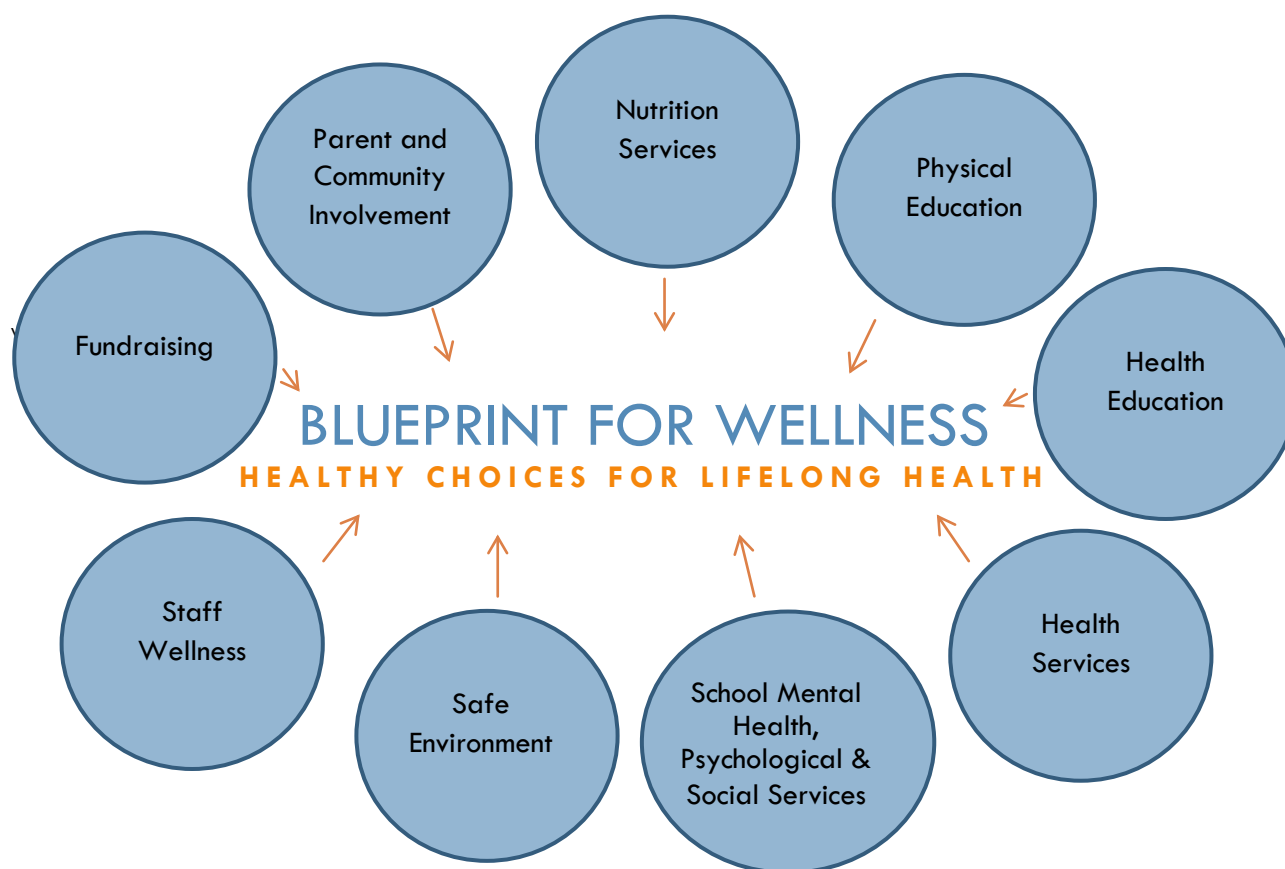
Students who received the Second Step curriculum in elementary schools showed 70% fewer physically aggressive incidents by the end of the school year than students who did not receive the curriculum.⁶ In addition, the California Healthy Kids Survey in 2013 showed a direct correlation between students’ perceived level of school safety and Academic Performance Index. In schools where proper safe school policies are implemented, such as crisis and threat assessment teams, students reported less bullying, felt more comfortable seeking help, and possessed more positive perceptions of school climate. In addition, these schools had fewer long-term suspensions. Consistent enforcement of school discipline and availability of caring adults are associated with school safety.

This blueprint is a model for establishing the components that are necessary for implementing a comprehensive wellness policy and supplements and expands on the wellness policy that was adopted by the Board of Education on June 27, 2006. It will serve as a guide to assist schools and the District in implementing a comprehensive wellness plan for their students, families, and staff.



COMPONENTS OF THE BLUEPRINT FOR WELLNESS

In response to the previous statistics and the needs of our students, families, and staff and in accordance with the federal Child Nutrition and WIC Reauthorization Act of 2004 (which requires recipients to address both obesity and wellness) and directives in 2005 from the California Department of Education, the District formalized a wellness policy that addresses student wellness for every school in the District. The policy and blueprint, which addresses parent, staff, and community wellness in addition to student wellness, are based on the following nine areas that govern wellness:



COMMITTEES FOR POLICY IMPLEMENTATION

To implement the wellness policy, the District requires all schools to have a school-site **Coordinated Health and Safety Committee** to address the health needs of their students and ensure a coordinated approach in addressing the wellness and safety of students, parents, staff, and communities. The District ensures that there are Educational Service Centers (ESC), Coordinated Health and Safety Committees, and a Central Coordinated Health and Safety Committee to address ESC and District-wide health and safety.

The asterisks (*) found in sections of this blueprint represent areas that are the responsibility of central District offices and divisions (not school sites).

NUTRITION SERVICES

OVERVIEW

The National School Lunch Program was created in 1946 as a measure to prevent malnutrition by providing nutritious lunches to school-aged children: “It is declared to be the policy of Congress, as a measure of national security, to safeguard the health and well-being of the Nation’s children....”⁷ USDA research shows that children who participate in the school lunch program have superior nutritional intake compared to those who do not. This intake helps to improve students’ wellness.

In addition to the current concern regarding childhood obesity, food insecurity and hunger continue to impact many children. According to the Los Angeles County Department of Health Services, Public Health, and the Office of Health Assessment and Epidemiology, *food insecurity* involves the “limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire foods in socially acceptable ways.”⁸ Although the National School Lunch and Breakfast Programs were developed to protect children from the harmful effects of hunger, these programs are underutilized.

Food insecurity and hunger pose substantial risks to the health of our children in that food insecurity and hunger can lead to malnutrition. Even moderate malnutrition can have lasting effects on the cognitive development of children.⁹

LAUSD recognizes the connection between academic achievement and good nutrition as demonstrated by being a leader in providing school meals of high nutritional quality. Foods available on school premises provide for the nutritional well-being of children and serve as a model for healthy eating. Well-nourished children have a better opportunity to achieve academic success.

The District provides healthy foods and beverages based on nutrition standards established by the scientific community, such as the National Academy of Sciences and the United States Department of Agriculture (USDA), California Department of Education (CDE), Institute of Medicine and recommendations made by the American Dietetic Association, the American Heart Association, Centers for Disease Control and Prevention, and other recognized organizations. These nutrition standards and recommendations are applied to foods served on student campuses in cafeterias, student stores, vending machines, as well as foods used for fundraising during the school day. It is important to note that a balanced diet consisting of a variety of foods is more likely to ensure adequate nutrient intake compared to individual food items. The ultimate goal is to positively impact children’s lifelong eating habits.

The LAUSD Improving Food and Nutrition (December 2012) and Good Food Procurement (November 2012) Obesity Prevention and Healthy Beverage Resolutions are two examples of policies that have had a positive impact on reducing competitive food sales and increasing student participation in the School Lunch and School Breakfast programs.



NUTRITION STANDARDS

The Food Services Division has adopted the mission of *“Nourishing Children to Achieve Excellence.”* Menus comply with federal, state, and local regulations and are developed utilizing student input. Menus provide the appropriate combination of foods to promote good health associated with improved academic performance. Meals served under the provisions of the National School Lunch Program (NSLP) and the School Breakfast Program (SBP), Child and Adult Care Food Program (CACFP), Summer Food Service Program (SFSP), and After School Snack Program must comply with nutrition standards mandated by the USDA. These standards include breakfast and lunch meals that provide the Recommended Dietary Allowances consistent with the US Dietary Guidelines for Americans.

In regards to nutrition standards, it is important to understand that all foods are not created equal. When evaluating the quality of a diet, everyone should consider the following:*

- ✓ The **nutrient composition** of the food item: food served in LAUSD schools is typically low in fat, sodium, and sugar and high in fiber.
- ✓ The **variety** of all foods consumed: LAUSD provides meals that include foods from all food groups.
- ✓ The **portion sizes** of foods served: the serving sizes of entrees offered in school cafeterias are appropriate and do not provide excess calories.
- ✓ The **frequency** of foods eaten: all foods can fit into a nutritionally balanced diet provided that foods that are high calorie and low in nutrients are consumed infrequently, and foods that are appropriate in calories and high in nutrients are consumed regularly.

INCREASE STUDENT ACCESS TO HEALTHY AND BALANCED BREAKFAST

Since studies indicate that students who participate in school meal programs are better nourished than students who do not, it is incumbent upon the District to increase student access to healthy and balanced breakfast in several ways.

MARKETING EFFORTS

Marketing strategies are used to improve student participation. Foods served in the cafeteria must achieve student acceptance to be considered for placement on the menu. Campaigns are used to encourage students to choose balanced and nutritious meals including a la carte items. This includes collaboration with Network for a Healthy California, Kaiser Permanente’s HEAL (Healthy Eating Active Living) program and other city, county, and state programs to promote breakfast and lunch in schools and increase consumption of fruits and vegetables. In addition, improving indoor serving and dining areas to create a pleasant dining experience encourages student participation in the meal program.

The Food Services Division communicates program goals to parent-teacher associations and community organizations through meetings, newspapers, the Food Services website at <http://cafe-la.lausd.net>, demonstrations, and other promotions. These communication avenues give parents and other stakeholders a means of communicating their concerns.*



“I’M IN” campaign is an all-inclusive program designed to raise awareness about LAUSD’s wellness initiatives to fight childhood obesity, as well as to encourage student attendance and dropout prevention. The initiative invites the entire community to make healthy choices and support educational proficiency for all students.

INSTANT ACCESS TO MEALS

LAUSD offers the following opportunities to nourish children: implementing student-involved breakfast programs (Breakfast after the Bell) to ensure the consumption of healthy meals for learning; addressing food insecurity by offering supper to students after school and extended summer programs at eligible locations; recommending provision of adequate time for students to obtain and consume their meals; and reasonable lunch schedules allowing students at least 20 minutes to eat after they arrive at the table with their food.¹⁰

REDUCING COMPETITIVE FOOD SALES

Reducing competitive food sales helps to maximize participation in the school meal program for students to have access to full meals, such as breakfast and lunch; these meals consist of all the food groups and provide the greatest nutrient density in order to maximize students’ cognitive development.

PROVIDING SPECIAL DIETS FOR STUDENTS WITH SEVERE ALLERGIES AND/OR DISABILITIES

The USDA’s nondiscrimination regulation from The Code of Federal Regulations, 7 CFR, Part 15b, as well as the regulations governing the NSLP and SBP, requires substitutions or modifications in school meals for children whose disabilities restrict their diets. Food Services modifies menus to meet the special dietary needs of the student once it receives a signed medical statement from a licensed physician verifying a student’s disability and need for a special diet.

SERVING SAFE FOOD*

Serving safe food is the foundation to providing quality food service to our students. Food Services employees are committed to following strict sanitation practices:

- Every cafeteria has at least one person on staff that is certified in food safety and sanitation and that person must be recertified every five years.
- All cafeteria staff members receive monthly sanitation training.
- In-house, certified food-safety instructors provide food safety and sanitation training on a continuous basis.
- The District uses the Hazard Analysis Critical Control Point (HACCP) system in all schools, the central production kitchen, and in the foods warehouse.
- For the safety and security of the food and facility, access to the food service operations is limited to child-nutrition staff and authorized personnel.
- Cafeteria sanitation and food safety inspections are conducted regularly by the following:
 - ✓ The Los Angeles County Health Department inspects twice a year.
 - ✓ Cafeteria Managers self-inspects on a monthly basis.
 - ✓ Area Food Services Supervisors inspects at least twice a year at each cafeteria.
 - ✓ Maintenance and Operations provides Integrated Pest Management visits and inspects all cafeterias monthly.

- ✓ The Food Services Division inspects sanitation and food safety annually on vendor food-processing plants.
- Product specifications exceed federal, state, and local standards for product safety.
- The Food Services Division conducts bacteriological testing on food items regularly.
- The Food Services Division's Quality Control Unit investigates quality, safety, and service concerns.

FINANCIAL RESOURCES*

Nationwide, the most pressing issue facing school meal programs is adequate funding. To assure financial stability, the Food Services Division uses a three-pronged approach, which includes the following components:

- Containment of food costs
- Containment of labor costs
- Optimal revenue from student participation

NUTRITION EDUCATION

The Food Services Division employs highly qualified Registered Dietitians who assist in planning menus that meet meal requirements for students. Furthermore, the team supports nutrition education for students, parents, and the community at events such as back to school night, parent summits, parent meetings, and career days. Nutrition education for students should be age-appropriate, sequential, and taught in grades K-12 as part of a required health element whenever possible.¹¹

PHYSICAL EDUCATION

OVERVIEW

A strong correlation exists between physical fitness and academic achievement. Physical education has been part of the required school curriculum in California for decades due to the consensus among the community and legislators that physical activity is essential for children's healthy growth and development. Physical education is the only subject identified in the *California Education Code* with a mandated number of minutes for instruction. It is our responsibility to ensure that quality physical education instruction is provided for all students and complies with state and federal mandates governing physical education.



First Lady Michelle Obama stated in her Let's Move launch on physical and emotional health in February of 2010: "The physical and emotional health of an entire generation and the economic health and security of our nation is at stake. This isn't the kind of problem that can be solved overnight, but with everyone working together, it can be solved. So, let's move!"

Additionally, research shows that providing recess breaks throughout the day can improve students' classroom behavior and attentiveness, that students can accumulate up to 40 percent of their total daily physical activity during recess, and that students who are obese or at increased risk for obesity are least likely to have recess.¹² Therefore, schools should protect recess time from disciplinary measures and from any school activities that would impinge upon recess time.

Therefore, it is imperative for our District to build and provide quality physical education programs that will ensure a strong foundation for students to make good lifestyle choices. Furthermore, our District should proactively seek opportunities to provide physical activity programming at its school sites when schools are not in session for youth and adults within its catchment area as a means of increasing access to safe places for physical activity.

MEANS USED TO PROMOTE WELLNESS

Physical Education Opportunities and Physical Activity

Students in all grades should experience quality physical education in a sequential and comprehensive manner and in an enjoyable, safe, and secure learning environment. An optimum, quality physical education program has the following components:

- Adequate space to maximize practice opportunities for each child.
- Adequate equipment for students to be actively engaged individually, with partners, or in small groups to maximize practice opportunities.
- Physical education time shall be protected from school activities that would impinge on physical education class time.
- Physical fitness development activities with testing provided in the Grades 4–12 with mandated testing for all students in the Grades 5, 7, and 9 and students with disabilities as conditions permit.

- Annual professional development provided for all administrators and teachers of physical education on the appropriate protocols in administering the *FITNESSGRAM* physical performance test.*
- Physical Education Instructional Guides that support a written comprehensive and sequential standards-based physical education curriculum provided for all teachers of physical education for use in their classes.
- Physical education programs ensuring that students will spend at least 50% of the physical education class time participating in moderate-to-vigorous physical activity, whether or not students have dressed-out.
- Physical education class sizes comparable to class sizes in other subject areas.
- Annual professional development for all administrators and teachers of physical education on standards-based instructional practices with instructional unit development and sample lessons.*
- Comprehensive physical education professional development provided for each supervising Educational Service Center and school-site administrator.*
- *FITNESSGRAM* results posted on the District and individual school-site *School Accountability Report Card* (EC 51223), and the District's Performance Meter.
- Certification that all coaches have completed First Aid, CPR, coaching education, and concussion training.

Elementary Physical Education

When basic movement skills are developed at an early age and expanded during childhood and early adolescence, children will gain access to and have more success in a wide variety of physical activities. To promote lifetime activity habits early in life, teachers must select developmentally appropriate activities for elementary-age students. The following are important components of elementary physical education programs:

- Teacher selection of developmentally appropriate activities for elementary-aged students to ensure student success in a wide variety of physical activities and to promote lifetime activity habits early in life.
- *FITNESSGRAM* physical performance test administered correctly in the Grades 5, 7, and 9 by qualified staff during the month of February, March, April, or May with results reported to the CDE. (EC 60800)
- Physical education facilities designed, developed, and constructed according to the California Department of Education Guide to School Site Analysis and Development.
- Physical education instruction at the elementary level to include 200 minutes of instruction each 10 school days. (EC 51210)
- *FITNESSGRAM* practice test administered correctly in the Grade 4 by qualified staff during the month of February, March, April, or May without reporting the results to the CDE.
- It is **recommended** that a physical education adviser be provided at each Educational Service Centers/ISIC to provide assistance of physical education programs.*

- It is **recommended** that a single-subject physical education credentialed teacher provide quality physical education instruction for each 300 students at the elementary school level to provide release time for elementary classroom teachers.
- Elementary teachers are **encouraged** to provide information to their students to take home to their parents on the Ask, Advise, and Refer (AAR) protocol for tobacco cessation. AAR information can be found at <http://achieve.lausd.net/Page/5643>.
- One physical education teacher may not teach more than one classroom of students during the 30-minute physical education instructional period.

Daily Recess

Recess is an important part of the school day for children. Activity breaks enhance participation and learning in the classroom and promote student wellness. Not only does recess provide opportunities for needed physical activity, but this unstructured time also provides opportunities for student decision making and contributes to creativity and social learning. The following are important components of recess:

- Twenty minutes a day of supervised recess is provided with adequate outdoor space and equipment where moderate-to-vigorous physical activity is verbally encouraged and provided for students.
- Recess time is protected from disciplinary measures and school activities that would impinge on recess time.
- Extended periods of inactivity (two or more hours) is discouraged for such activities as mandatory school wide testing where students are provided with periodic activity breaks during which they are encouraged to stand and be moderately active (example, juggling scarves).
- The environment is supportive of all students and promotes developing a positive self-concept. Students are free from criticism or harassment from other students.

Secondary Physical Education 6-12

A developmentally and instructionally appropriate physical education program promotes a physically active lifestyle and student wellness. Physical education provides the physical component of a total education facilitating optimal physical development and student wellness. Physical education focuses on physical development while also integrating the emotional, social, and intellectual components that develop the whole child. Good physical education programs prepare the adolescent to safely meet the physical demands of daily life, to use activity for health benefits for a lifetime, and to enjoy physical activity during leisure time. Safely engaging in physical activity is critical. Between 2005 and 2011, the rate of Los Angeles County residents treated for concussions in emergency departments (ED) increased by 58%. Youth and young adults ages 15-24 years had the highest rates of ED visit for concussions, particularly males, whites, and African-Americans. Among injuries that had an associated activity reported, team sports accounted for nearly half of all concussions.¹³ The following components delineate the physical education program for secondary students:

- Physical education instruction at the secondary level includes 400 minutes of instruction each 10 school days, all year long, for students in middle and high school, including students with disabilities and special health-care needs and those in alternative education settings. (EC 51222)
- The optimum physical education class size average is equal to the norm chart average of the “all other category” identified in BUL-1123-4 and 1123.
- A variety of electives (minimum of 3 to 4) are offered to students currently exempted from 2 of the 4 years of physical education core content classes. (EC 51222(b))
- Physical Education Course One content, identified in the *Physical Education Model Content Standards for California Public Schools*, includes mechanics of movement, effects of physical activity upon dynamic health, aquatics, dance, and individual and dual activities.
- *FITNESSGRAM* physical performance test is administered correctly to all students in Grade 9 by qualified staff during the months of February, March, April, or May with results reported to the CDE. (EC 60800)
- In order to facilitate standards-based instruction, middle school physical education classes are **recommended** to be articulated by grade level.
- All students in Grade 9 must meet five of six assessments (In Healthy Fitness Zone) on the *FITNESSGRAM* test to earn the right to exempt themselves from Physical Education for two years in Grades 10-12 within the mandated testing window. (EC 51241)
- Tools are in place to monitor and provide assistance for K–12 physical education programs to
- A comprehensive and sequential physical education program is provided for students in Grades 9–12 with exposure to the eight core content areas as described in the *California Code of Regulations, Title 5, §10060*.
- A secondary physical education class size does not exceed the maximum of 52+/-3 students.
- Physical education core-content classes are provided for all students in Grade 9 except those students enrolled in and competing in athletic programs.
- Physical Education Course Two content, identified in the *Physical Education Model Content Standards for California Public Schools*, includes mechanics of movement, effects of physical activity upon dynamic health, combatives, gymnastics/tumbling, and team activities to students for their second year of physical education in Grades 10-12.
- Physical education classes are conducted in a coeducational manner. (Title IX, 106.00, 106.34; 5CCR4930.4931,4940) (EC 200, 201, 220,221.5, 235, 260)
- Senior High Schools would be articulated **whenever possible** to ensure that each student receives the CCR Title 5 content.
- Secondary physical education teachers are **encouraged** to provide information to their students on the Ask, Advise, and Refer (AAR) protocol for tobacco cessation. AAR information can be found at <http://achieve.lausd.net/Page/5643>.
- Meals for athletes are **encouraged** to be made available to schools when students have night games.

maintain compliance with the Education Code and ensure adequacy of physical education facilities and equipment.

These meals could be consumed before or after contest depending on time of day.

Physical Activity Opportunities Before and After School

Whereas recess is unstructured time, physical education is a structured instructional program with specific goals and objectives, and after-school programs vary between structured and unstructured. The programs after school should provide more opportunities for students to extend and refine the skills that were learned in the physical education programs.

- Extracurricular physical activity programs for elementary, middle, and high school students are offered before and after school in a variety of supervised activities in physical activity clubs or intramural programs.
- Interscholastic sports programs are offered, as appropriate for high school and middle schools, with a wide range of activities that meet the needs, interests, and abilities of all students, including boys, girls, students with disabilities, and students with special health-care needs.
- After-school childcare and enrichment programs are provided with adequate outdoor space and equipment where moderate-to-vigorous physical activity is encouraged and provided for all participants.

Physical Activity and Punishment

Physical education should be taught as a positive experience to motivate students to be engaged in lifelong fitness and physical activity, not as a negative experience with punishment (e.g. running laps, doing push-ups, etc.) being forced upon them and serving as a detriment toward reaching fitness goals.

- Physical activity (imposing or withholding of) shall not be used as a disciplinary measure.

Shared Use Facilities

The District recognizes that many of its students and their families live in park-poor areas^{14, 15}, are disproportionately impacted by obesity, and that school sites offer the only available safe place for physical activity in certain neighborhoods. Research indicates that shared use agreements are a promising strategy for increasing moderate to vigorous physical activity among adults and children in under-resourced communities. Providing physical activity programs may substantially increase after-hours use of school facilities by community members.¹⁶ Therefore, afterschool programs should be made available to the general public, particularly those over 18 years for whom this programming is currently very limited, through any of the District's existing mechanisms for accessing school facilities in order to promote increased physical activity among families and the general public, which can provide youth with positive role-modeling for healthy, life-long physical activity behaviors.

- Schools are **encouraged** to proactively seek opportunities that allow parents and community members to use school facilities for physical activity via youth and adult programming.
- Parent groups and organizations in LAUSD are encouraged to engage in moderate to vigorous physical activity with adequate equipment and within adequate space.

HEALTH EDUCATION

OVERVIEW

LAUSD recognizes the critical relationship between a healthy student and academic achievement. An increasing number of our students are coming to school with a variety of health problems that make it more difficult for them to learn at an optimal level and achieve academically. The District has adopted a comprehensive health education model for our schools. The District monitors health behaviors of our students by implementing and analyzing the findings of the California Healthy Kids Survey (CHKS), School Health Profiles Survey (SHEP), Youth Risk Behavior Survey (YRBS), and any other supplemental surveys. The LAUSD



School Board of Education formally adopted California health standards and California Education Code that are in accordance with all legal mandates of the board, state, and federal entities.

Students study six content areas: alcohol, tobacco, and other drugs; growth, development, and sexual health; injury prevention and safety; mental, emotional, and social health; nutrition and physical activity; and personal and community health. These content areas are studied in-depth when students receive a 90-hour full semester course of Health Education, separate from Science, in Grades 7 and 9 using a credentialed health teacher. The California Health Standards and CA Education Code determine what is required to be covered in Grades K-12. The overall goal is to have students achieve health literacy and ultimately lifelong wellness by mastering the knowledge, skills, and behaviors in the following key areas critical to healthy living:

- Acceptance of personal responsibility for lifelong health.
- An understanding of the process of growth and development.
- Respect for and promotion of the health of others.
- Informed use of health-related information, products, and services.

MEANS USED TO PROMOTE WELLNESS

Collaboration

Health Education Programs collaborate actively with Student Health and Human Services, School Operations, the Office of Environmental Health and Safety, the Office of Human Relations, and the Office of the Chief Operating Officer to compare and coordinate activities to reduce duplication of services within LAUSD and efforts to support student wellness and developing safe and supportive schools. In addition, the District will build relationships with community agencies to offer continued supplemental educational campaigns for health, safe schools, and HIV/AIDS education with constant evaluation of best practices for our support services to schools and students. These relationships are also key to implementing a linkage to care protocol in each school. Where LAUSD has a school-based health center or wellness center, staff and faculty are encouraged to promote the use of this resource on the campus.

Mandates from Title IV, Part A: Safe & Drug-Free Schools & Communities Act and Other Means

To maintain a safe and drug-free environment, LAUSD continues to comply with mandates for Title IV, Part A: Safe and Drug-Free Schools and Communities Act. The District has adopted the following science-based and research-validated curriculums (evidence-based interventions) and programs that meet the federal requirements:

- Comprehensive Violence-Prevention Curriculum and Character Development (*Second Step*, K–8).
- Alcohol, tobacco, and other drug programs (*Too Good for Drugs*, K–6; *Project Alert*, 7–8; *Make Yours A Fresh-Start Family*, 6–12; *Tobacco-Free Generations*, 6–8; *Project Towards No Drug Abuse*, 9; and *Class Action*, 10–12).

Also, in relation to student wellness and social-emotional learning, the District supports these programs with the IMPACT program (6–12), the *Bully Prevention Reference Guide*, and resiliency-building programs, such as, the 40 Developmental Assets. As funding permits, the District will continue professional development and/or technical assistance for employees who are using these programs to ensure fidelity and sustainability.

In some schools, an IMPACT program may be sustained by a school site to provide a referral process for themed support groups facilitated by IMPACT trained staff. A selected number of schools also have IMPACT coordinators to facilitate student support groups in a variety of health topic areas specific to school-site needs and problems involving student wellness.

State Mandates Related to Wellness

The District will continue to follow all tenets of the state law requiring additional compliances, including nutrition and alcohol/tobacco/other drug requirements. The required comprehensive sexual health and HIV/AIDS prevention education is taught in our schools. The District has adopted a textbook and/or supplemental resources to be in compliance with the requirements for comprehensive sexual health for elementary, middle, and high schools. The District-adopted program and evidenced-based intervention, *Positive Prevention*, is taught in the school health class to meet the HIV prevention-education mandate. A variety of supplemental health materials continue to be reviewed and approved by the LAUSD HIV Prevention Program Review Panel to support the education on HIV/AIDS and other sexual risk behaviors, both of which bear heavily on student wellness. As an evidence-based core strategy, LAUSD will continue its condom availability policy District-wide for each high school.

Board Mandates on Laws, Curriculum, and Staffing Related to Health Education and Wellness

Using the California Health Standards and California Education Code, the LAUSD School Board has mandated a comprehensive health education program that follows all tenets of the State law regarding health education. As required by Board policy, a 90-hour full-semester course of Health Education is required in middle school and high school taught by a credentialed health teacher. A health textbook has been adopted and purchased for every student in LAUSD. A matrix and pacing guide is developed for K-12 to be consistent with the expectations of the California Health Standards and California Education Code. Staff development will be conducted to support the health educator in all areas of health education, especially student wellness. Health assessments are developed for the school site to ensure that students are effectively learning the six content areas of health education in our K-12 plan. The District is developing an active campaign to recruit teachers credentialed in health education and is working with local universities on a health credential focus for future teachers.

Promote the Use of Materials on Nutrition

Schools will use the District-adopted health textbooks to promote healthy eating and teach appropriate, long-term eating habits and practices.

Nutrition and Activity Education

In addition to the required segments of nutrition and physical activity during secondary school health courses, the District should expand use of additional resources for educating students about nutritional habits and physical activity patterns via the following:

- The District should offer the USDA-funded LAUSD Network for a Healthy California and HEAL Programs at all eligible school sites.*
- Schools are **encouraged** to pursue strategies to incorporate additional nutrition education and physical activity promotional resources from government and nonprofit partners, such as 5-A-Day, Dairy Council of California, American Cancer Society, American Diabetes Association, Students for Nutrition and eXercise (SNaX), Alliance for a Healthier Generation, and others.

HEALTH SERVICES

OVERVIEW

LAUSD has a long history of providing health services to students and the larger school community. The District recognizes that good health among its students, staff, and school community helps to improve student attendance, fosters a more cohesive school culture, and ultimately improves student achievement. The delivery of health services (including medical, dental, vision, and mental health) is an important concern, particularly when students may lack access to basic, quality health care. As the prevalence of chronic disease increases, including those associated with childhood overweight and obesity, schools can play an important role in disease prevention and health promotion activities. With the rapid changes in health care delivery, ushered in by the Affordable Care Act, the District is continuing to increase access to health care services and focus on health promotion among students, staff, and families.



The following provides information regarding health-related state mandates and the dedicated resources that the District provides in order to accomplish these directives and promote wellness for its students and communities.

MEANS USED TO PROMOTE WELLNESS

State Mandates for Health Screenings in Schools

Vision: Upon first enrollment of a child at a California elementary school, and at least every third year thereafter until the child has completed the eighth grade, the child's vision shall be appraised by the school nurse or other authorized person.

Hearing: Hearing screening is mandated in kindergarten/first grade and in second, fifth, eighth, tenth/eleventh grade and upon first school entry (California Code of Regulations, Title 17, Section 2952 (c)(1)). Hearing screening in California public schools must be conducted by a credentialed school audiometrist.

Scoliosis: All girls in grade 7 and boys in grade 8 will be screened for possible scoliosis (unnatural curvature of the spine) by the school nurse or other authorized person.

Parents will be notified of any findings as a result of the mandated screening tests that require further attention. Parents are given possible no-cost or low-cost resources to address any health issues detected through screening.

Disease Prevention and Early Detection Services

The District will continue to use medical, mental health, social service, health education, nutrition, and physical education staff and community partners to provide programs to promote good nutrition, healthy lifestyles, and physical activity and to prevent obesity and related health problems for students and staff and to a certain extent for families and the community. School entry physicals (including immunizations) and assessments help ensure that students are healthy and able to attend and participate fully in school activities. The District requires the following physical assessments prior to, or while enrolled in school:

Immunization Requirements: Under the California School Immunization Law (California Health and Safety Code, Sections 120325-120375), children are required to receive certain immunizations in order to attend elementary and secondary schools. Besides Kindergarten entry requirements, all students entering, advancing or transferring into 7th grade need proof of an adolescent whooping cough booster immunization (called “Tdap”).

First Grade CHDP Examination Requirement: A comprehensive physical examination and health assessment consistent with Child Health and Disability Prevention (CHDP) guidelines are required for all first grade students within 18 months prior to entry or up to 3 months after admission to the first grade. A CHDP or equivalent examination may be done by a private health care provider, health department clinic, or the District CHDP staff.

Oral Health Assessment: Kindergarten students enrolled in a public school, or first grade students not previously enrolled in a public school, must present evidence of having received an oral health assessment by May 31st of the school year. This assessment may be performed no earlier than 12 months prior to the date of the initial enrollment of the student into a public school. The assessment may be performed by a licensed dentist or other licensed or registered dental health professional.

Pre-Participation Physical Examination for Athletics: Each student in grades 9 through 12 planning to participate in interscholastic athletic or certain auxiliary units must pass a comprehensive physical examination yearly by a licensed health provider that complies with current District policy.

Condom Availability Program: The district-wide condom availability program is found in all high schools, providing students access to condoms, which reduce the incidence of sexually transmitted infections, including HIV and teen pregnancy.

School physicians, nurse practitioners, and mental health providers are able to provide some of the above physical health care to our student population, free of charge and compliant with Medi-Cal and the Child Health Disability and Prevention program. Schools are also able to help coordinate care for students and families who do not have a regular health care provider (see below – School-Based Health Centers and Health Insurance Access).

Wellness Centers and School-Based Health Centers

LAUSD has invested significantly in the development and maintenance of school-based health centers. In 2011, \$36 million was appropriated to build state of the art full service community clinics, called Wellness Centers, on 14 LAUSD’s highest need campuses. They are operated by community clinic providers and are open to our students, their families, and the community. Staff and faculty on wellness center campuses must participate in an orientation to the wellness center system at the beginning of the school year. Each wellness center provides physical and mental health and most provide oral health services as well. Most of the mandated health assessment requirements can be met by referring student directly to the wellness center.

As of May 2014, the District allocated \$50 million of funds from the School Upgrade Program (SUP) for the development and expansion of these wellness centers. This represents a significant infrastructure investment that will leverage additional health and wellness services for students, families, and the general LAUSD school community.

The current facilities are already making an impact as quoted by a mother of a Hollywood High Junior: “The Wellness Center at Hollywood High has been wonderful for our family and my daughter has used the services on multiple occasions. For example, when she needed to get medical clearance to run on the school’s track team, she made a quick, convenient – and free! – trip to the Wellness Center on campus. Not

only did my daughter get checked out for track, but the doctor gave her a full physical exam and offered recommendations to help my daughter avoid recurring joint pain she had been experiencing while she was working out. Every high school should have a facility like this!”

District Nursing Services Oral Health Program

The District Nursing Services Oral Health Program helps to improve the health, attendance, and academic achievement of all students by reducing dental disease through educating students, parents, and staff, helping to provide preventative care opportunities, assisting in the management of dental disease, and providing resources to students and families. This program works closely with The LA Trust for Children’s Health, Universities, Dental Providers, and Grantors to help increase the number of Oral Health Services that can be provided to LAUSD students. The overall strategic plan is to increase Oral Health Services for LAUSD students with the focus being on prevention and treatment of dental disease.

Health Insurance Access

District staff provides students and their families with information about how to enroll in no-cost or low-cost health insurance plans, including Medi-Cal. The District Child Health Access and Medi-Cal Program (CHAMP) unit, Healthy Start Program, and other health care partners provide staff to assist families in the application process in order to obtain medical, dental, and vision insurance programs. In addition, the District works with funders and partners to create a barrier-free insurance application process, including use of the California health insurance exchange (Covered California).

Health Care Treatment and Special Education Services in Schools

The District ensures that students with serious conditions—such as asthma, diabetes, severe allergies, seizure disorders, other medical problems, and emotional disorders—have access to their prescribed medications, special diets, treatments, and emergency care as needed during school hours. These include health assessments and treatments required for students with disabilities, as indicated by a student’s Individualized Education Program (IEP) and as outlined in IDEA. School nurses, school psychologists, physical, occupational, and speech therapists, and other health professionals may be involved in special education health assessments, as well as indicated treatments. Case management services for students with chronic medical or mental health conditions will be fully coordinated with all relevant school staff, parents, and community programs.

Health Promotion and Education

The District promotes health education and parent training programs to reduce health disparities due to poverty, culture, or language and improve healthy behaviors for students, staff, families, and communities. The District promotes health education to assist students, parents, and families to be better consumers of health care and improve their wellness. The District also supports participation of school staff in Health and Career Fairs to help further educate students and families on health and wellness and career pathways in health.

Staff Training in Health and Wellness Services

The District provides a sufficient number of health personnel to provide staff trainings for designated personnel who assist students with medication, first aid, and specialized physical healthcare services. In addition, the District has offered the following trainings to meet State mandates, District policy or best practice:

- Nursing Services offers CPR/AED training to staff, and all schools should have at least one staff member trained in CPR and AED use. Ideally all schools would have at least one AED present, maintained and compliant with District policy.

- The District works to ensure prevention of disease exposure to staff and students by providing training and information regarding HIV, hepatitis B, influenza, and blood-borne pathogens and ensuring the use of universal precautions.
- The District promotes programs to improve indoor air quality for students and staff, such as the Environmental Protection Agency's "Tools for Schools" program.

Collaboration

The District encourages partnerships and joint use agreements with community agencies to provide health and mental health services at school for students, families, and staff. This includes services rendered through school-based health centers, wellness centers, school-based mental health programs, mobile health clinics, mobile vision programs, and dental vans. The District also encourages joint use projects that allow students, staff, families, and communities access to physical activity, nutrition, and health programs after school hours at schools or in adjoining recreation facilities.

As of June 2014, over 50 school-based health centers and school wellness centers, located in low income areas throughout the District, are operated by community clinical partners. These centers provide an array of medical, mental health, and dental care for students, as well as to the community. The District collaborates closely with mobile programs, such as the Breathmobile from LAC-USC, which provides asthma care services for students at over 100 LAUSD schools; mobile vision care and dental care programs; and primary care services through partnerships such as Queenscare, Cedars-Sinai COACH for Kids, and Little Company of Mary/Providence Hospital. The District will continue to explore opportunities for joint use of school facilities, such as school health and wellness centers, in order to improve student and community health.

The District partners with over 150 community agencies and programs to bring health care and health programs to schools. Staff within the District is responsible for convening collaborative groups of partners at the school-, region- and Educational Services Center- levels in order to address the local needs of students and communities. The District has a specific MOU with the County of Los Angeles, which delineates the intention of the two parties to work together around mutual goals of health and wellness for the communities in Los Angeles.



SCHOOL MENTAL HEALTH, PSYCHOLOGICAL AND SOCIAL SERVICES

OVERVIEW

LAUSD affirms the importance of teaching students to be both physically and mentally healthy and creating and maintaining a school environment that promotes academic achievement and helps promote a healthy community. LAUSD recognizes the connection between academic achievement and student wellness.

Recent research indicates that:

- Of the population ages 9-17, an estimated 21% experienced the signs and symptoms of a Diagnostic and Statistical Manual of Mental Disorders (DSM V) during the course of a year, 11% experienced significant impairment, and 5% experienced extreme functional impairment.
- On average, only one-fourth of children in need of mental health care get the help they need.
- Use of mental health services for children and youth has increased sharply to \$8.9 billion spent in 2006 for these services.
- Doctor's offices and schools are important settings in which children's mental disorders can be recognized and addressed.



Some disparities include:

- Under-represented students have less access to mental health services and are less likely to receive needed care.
- Under-represented students in treatment often receive a poorer quality of mental health care.

The role of schools:

- Research suggests that schools may function as the de facto mental health system for children and adolescents.
- Only 16 % of all children receive any mental health services. Of those receiving care 70-80% receive that care in a school setting.
- Eighty-three percent of schools report providing case management for students with behavioral or social problems.
- About 60% of the nation's 1500 school-based health centers have mental health professionals on staff and 50-60% of all school based health center visits have mental health issues as their primary need of services.

Student social-emotional wellness is the critical building block of student overall well-being. A student's positive perception of self and their ability to positively interact with peers, adults and the community has a direct effect on the student's sense of well-being and academic achievement. All school programs must be integrated within the context of the school environment, family, and community at large.

MEANS USED TO PROMOTE WELLNESS

Every school should institutionalize school-wide systems and supports that address student wellness, student achievement, social emotional character traits, positive school climate, and attendance. By implementing the following eight interdependent resiliency- and asset-building techniques, schools will create an educational system that is safe, welcoming, and supportive for all students.

High Expectations

All staff should believe that every student is capable of meeting the highest behavioral and academic expectations. Students must be encouraged to set their own high expectations and be confident that they can reach their goals by:

- Developing a culture that all members of the school community will be held to high expectations and clearly communicate those expectations.
- Encouraging all staff to expect that all students have the potential to be successful.
- Treating all students as learners, providing encouragement, and expecting students to meet their fullest potential.
- Treating staff as professionals and expecting staff to meet the highest standards for their profession.

Social Competence and Connectedness

Students and families must feel welcomed and included in order to be successful. Through mentoring, unconditional caring and connectedness, schools can build relationships. Schools should increase bonds between staff, students and their families by:

- Creating opportunities for every student to build significant relationships with adults on campus through positive communication and mentoring.
- Implementing culturally and linguistically relevant strategies to promote student connectedness and cultural competence.
- Encouraging and nurturing parents' involvement and participation in their children's education through collaboration, volunteerism, and membership on school councils.
- Helping parents understand their critical role in the development of their child's sense of value within the home, school, and community.
- Teaching LAUSD Human Relations, Diversity and Equity strategies to facilitate staff's, students' and families' cultural understanding.
- Teaching students to understand that there are multiple ways to communicate and interact depending on the setting.

Opportunities for Meaningful Participation

Students that feel part of the school and community are more engaged in learning. Opportunities for meaningful participation foster intrinsic motivation and a sense of ownership with the school and community. Schools can create opportunities by:

- Creating opportunities for all students to participate in leadership, clubs, sports, and/or other school activities.
- Promoting service learning through flexible scheduling options, opportunities offered in the curriculum and community partnerships.
- Encouraging students to contribute to the school and community through volunteerism, service learning, and teamwork.
- Recognizing, promoting, and rewarding student contributions to the school and community.

Helping Students Develop a Sense of Purpose and Future

Students need to understand the connection between education and their future. Schools must support students in setting guided short- and long-term goals. Schools should promote sense of purpose and future by:

- Encouraging an optimistic outlook for the future of all students.
- Utilizing advisory periods for goal setting and giving examples of success through motivational speakers and alumni success stories.
- Providing opportunities for students to participate in leadership, college visitations, and career and vocational planning.
- Ensuring all secondary students have the opportunity to meet with grade-level counselors a minimum of two times per year for the purpose of academic and career planning.

Clear and Consistent Boundaries

School rules are clearly established, communicated, and consistently enforced in school policies, guiding principles as established by the Discipline Foundation Policy, staff follow through, and school- wide positive support. Schools can establish clear and consistent boundaries by:

- Ensuring all members of the school community have a clear understanding of school policies, guiding principles, and positive behavior supports.
- Developing a partnership with staff, parents, and the community to support school rules, policies, and guiding principles.
- Posting developmentally appropriate District, school, and classroom guiding principles throughout the campus and clearly communicate these to all stakeholders.
- Implementing research-based Positive Behavior Intervention and Support (PBIS) strategies.

Teaching and Reinforcing Social-Emotional and Life Skills

Promote the well-being of students and the development of their sense of self by teaching them the necessary skills required to be successful in life by:

- Incorporating opportunities to build social-emotional skills within the core curriculum.
- Helping students understand the link between physical fitness, good health practices, positive body image, and self-esteem.
- Providing students with opportunities to practice learned skills, advocate among their peers, and have leadership opportunities in the school and community.
- Providing professional staff development to educators and support service providers about the preventive and therapeutic benefits of 40 Developmental Assets and resiliency-based programs.
- Teaching social-emotional skills and nonviolent conflict resolution skills.
- Educating teachers and administrators about the impact of social-emotional challenges on academic performance and behavior.

School-wide Screening and Early Identification of Problems

In order to prevent the escalation of social-emotional problems, schools should have methods and procedures for screening and early identification of behavioral problems. Schools should promote early identification by:

- Establishing a multidisciplinary team that is charged with identifying students needing support, developing intervention strategies, monitoring, implementing school and community resources, and evaluating the effectiveness of support services.
- Developing systems to assess the wellness of all students.
- Conducting mental health screenings and assessments of students for classroom preferred behaviors, trauma, and/or Adverse Childhood Experiences (ACE).
- Helping staff become more aware of behaviors and health conditions that may require mental health or medical interventions and/or support.
- Utilizing referral systems as well as District data systems such as MiSiS and MyData Elementary and Secondary Alert Reports.
- Implementing a process for the identification of students with chronic health conditions (such as asthma, diabetes, and obesity) that are known to have co-occurring social-emotional issues.

Coordination of School and Community Resources

Schools should establish community-based partnerships to coordinate and provide support to all students. Supports should meet the individual needs of students who are struggling with academic, attitude (behavior), and/or attendance problems by:

- Utilizing community-based resources to supplement student support services that promote student wellness.
- Participating on local Resource Coordinating Councils.
- Collaborating with Organizational Facilitators to foster the development of community partnerships.
- Assuring that support service personnel have sufficient time to communicate and collaborate in order to ensure the best use of available resources and the delivery of services.
- Utilizing existing funding sources, including LCFF, to promote and expand health and mental health programs and services.
- Utilizing staff development time to discuss students' academic, social, and emotional needs across grade levels and during transitions between schools to ensure coordinated support.

Comprehensive Student Support Programs

Schools should develop programs to offer comprehensive student support that addresses student achievement, attitude (behavior), and attendance utilizing established screening and early identification processes. The Pupil Services Unit provides a variety of programs, services, and strategies to increase student attendance and implement evidence-based strategies for school dropout prevention and re-entry, including early identification of at-risk youth, intensive case management, support for transitions, enrollment in appropriate educational programs, and parent engagement. Every school shall have a formal, written, proactive Attendance and Dropout Prevention Plan E.C. 48340. The principal shall designate an Attendance and Dropout Prevention Team and convene with them at least twice a year to develop, review, and implement a school-wide Attendance and Dropout Prevention Plan consistent with the policy set forth in BUL-4926.2 Attendance Manual: Policy and Procedures for Elementary, Secondary, and Option Schools.

SAFE ENVIRONMENT

OVERVIEW

The health and well-being of our students, and in turn their academic achievement can be greatly influenced by the physical and social-emotional environment. Incidents of violence and other factors related to school climate can often impact the ability of students to feel safe and fully engage in the learning process.

The District is committed to providing schools with climates that focus on safety, teaching, learning, and interpersonal relationships that enhance student learning and well-being. Every student and staff member has the right to an environment that is safe, respectful, welcoming, and free from disruption and obstacles that impede learning and teaching.



MEANS USED TO PROMOTE WELLNESS

Social-Emotional Climate

Connectedness to School

The extent to which students feel connected to their school has a direct impact on their level of participation and engagement in the learning process. School stakeholders must create an environment that promotes a sense of connectedness among staff, students, and their families. This may be facilitated through:

- Promoting respect for and appreciation of individual and cultural differences.
- Engaging parents in school activities.
- Communicating frequently and positively between all staff and students.
- Responding to student and parent concerns.
- Promoting activities that help create a sense of school ownership and pride.

Safe School Climate

Students who feel safe and secure at school are more likely to attend school and engage in the learning process. Schools may foster a safe school climate through various methods, such as:

- Intervening when bullying occurs, consistent with the District's Bullying and Hazing Policy, Bulletin No. 5212.1, and using appropriate resources including the District's *Bully Prevention Reference Guide* to address the bullying.
- Developing a positive behavior discipline plan in accordance with the Discipline Foundation Policy: School-Wide Positive Behavior Intervention and Support Bulletin 6231.0.

- Implementing the LAUSD-adopted violence-prevention curriculum “Second Step” to meet the NCLB, Title IV mandates for Safe and Drug-Free Communities Single Plan in all elementary and middle schools. In regards to senior high schools, staff should be encouraged to teach students social-emotional skills through programs that are available.
- Implementing Restorative Justice practices and the LAUSD Student Bill of Rights.
- Training adult supervisors on conflict resolution techniques consistent with the District’s adopted social-emotional skills curriculum so that all staff and students speak a common language in identifying and resolving conflicts.
- Participating in human relations/diversity training.
- Communicating District policies on safety and equity through the prominent posting of such policies in visible locations.
- Connecting with an existing safe-school collaborative within the school’s area.

Safe School Plan

California public schools are required to comply with California Education Code (CEC), Section 35294, dealing with the preparation of “safe school plans.” These plans address violence prevention, emergency preparedness, traffic safety, and crisis intervention. The District will ensure compliance with the CEC Section 35294 through the following means:

- Site administrators will prepare and annually update a Safe School Plan for their respective school using the District’s *Model Safe School Plan, Volumes*:
 1. Prevention - Coordinated Safe and Healthy School Assessment/Practices
 2. Response – Emergency Procedures/ Practices
 3. Recovery – Intervention and Recovery Procedures/Practices
- Establishing an active crisis intervention team at each school site and ensuring that the team receives appropriate and ongoing training as offered by the District.
- The District shall **encourage** partnerships with local law enforcement agencies and community stakeholders to foster safer communities and support safe school passages for students.

Safe and Healthy Physical Environment

School Inspection Safety Scorecards

Maintaining a safe physical environment for students and staff requires the commitment and active participation of school administrators, plant managers, central support staff, and an informed school community. At the core of such efforts are periodic assessments to evaluate school conditions and measure compliance with the many federal, state, and local requirements dealing with school safety. This will be accomplished through:

- A periodic inspection of all District schools by the Office of Environmental Health and Safety (OEHS) to review environmental conditions, assess compliance, and determine the need for corrective actions. A written record of the inspections including necessary corrective actions will be issued to the site administrator and other appropriate parties.

- Issuing an annual *Health and Safety Scorecard* for each school to reflect the degree of compliance at the school, and how the school's compliance status compares to each of the other schools in the Local District and throughout the LAUSD. The *Health and Safety Scorecards* will be distributed to school administrators and District managers, and will be readily accessible to the public via the OEHS web site.*

Response to Health and Safety Complaints and Concerns

The District will ensure the prompt identification, assessment, and mitigation of school and workplace safety concerns through the following means:

- OEHS, Facilities Services Division, and site administrators will encourage the immediate reporting of deteriorated conditions or other health and safety concerns to the school principal and other appropriate District personnel.
- Site administrators will establish a Safety Committee in each District school pursuant to California Education Code Section 35294.2 (Safe School Planning) and California Code of Regulations, Title 8, Section 3203 (Injury and Illness Prevention Program). The Safety Committee is to be composed of appropriate school personnel and encourage all stakeholders, including parents and students, to participate in the committee. This committee will carry out those activities referenced in the above-mentioned sections and will meet at least quarterly to review employee accident reports, workplace safety concerns, safe school planning efforts, and other relevant health and safety issues. The duties of the Safety Committee may be incorporated into that of the Coordinated Health and Safety Committee.

Environmental Assessment of Proposed New School Sites

OEHS will conduct a comprehensive environmental review of proposed new school sites in order to ensure site conditions will not present a significant risk to future students and staff. The review will include an assessment of on-site conditions consistent with standards and guidance from the California Department of Toxic Substances Control related to the assessment of site soils and underlying groundwater. The review will include an assessment pursuant to the California Environmental Quality Act which examines sources of environmental risk from all off-site facilities within one-quarter mile of the site perimeter, as well as an assessment of traffic and pedestrian risks.*

Design and Construction of Healthy and Sustainable Schools

Students are entitled to a safe and healthy school environment, and studies have shown that student achievement is greater and attendance higher when the learning environment is naturally lit, comfortable, and well maintained. The District is committed to the design of new schools and modernization of existing schools in conformance with the design criteria of the California Collaborative for High Performance Schools (CHPS). In applying these criteria, the District will focus on the following priority areas:*

- Implementing measures such as day lighting, avoiding the use of toxic-emitting materials, and sound insulation or isolation to minimize noise and enhance acoustical quality in the classroom.
- Operating cost minimization through energy and water efficiency.
- Minimizing the impact of District operations on the environment by installing renewable energy resources such as solar power, maximizing the beneficial use of storm water runoff, and implementing other conservation initiatives.

Use of Pesticides on School Grounds

It is the policy of the Los Angeles Unified School District to provide for the safest and lowest risk approach to controlling pests. The District's Integrated Pest Management (IPM) policy emphasizes long-term prevention and gives non-chemical methods first consideration when selecting appropriate pest control techniques. The District will strive to ultimately eliminate the use of toxic chemicals in the control of pests on school grounds.

Emergency Preparedness

The following practices are in place to ensure schools are safe in the event of an emergency:

- Site administrators will annually update school emergency plans using the Model Safe School Plan, Volume 2 – Emergency Procedures, which is updated and reissued annually by School Operations.
- School Operations will establish and annually update a District-wide emergency plan for the purpose of ensuring the effective coordination of the District operating division in providing support to District schools in times of emergencies.*
- School Operations, in conjunction with other District offices, will provide periodic training to site administrators and other personnel to ensure District schools and central operating divisions are prepared for emergencies.*
- Activate the District's Food Defense Plan when and where applicable in the case of food related emergencies.

STAFF WELLNESS

OVERVIEW

LAUSD recognizes that school personnel, administrative staff, and all other employees involved in the educational process set the culture and tone of the educational environment. The District will strive to promote healthy living for staff and students. It should be recognized that in order to promote student wellness, employee wellness must also be emphasized and that there should be a common goal for the entire educational community. The overall goal shall be to improve employee wellness awareness to promote proactive preventive care. The



objectives of this endeavor are to reduce health-care costs, increase productivity, and reduce absenteeism, worker's compensation, and retirement costs due to disability. The District has begun the process of designing a District-wide Wellness and Total Health Management Program. However, in the interim, it is the intent of this blueprint to provide minimal guidelines for schools and offices in promoting healthy living styles for employees that is also compliant with an array of laws and regulations.

MEANS USED TO PROMOTE WELLNESS

Workplace Wellness Strategy

In order for the District to promote student wellness, staff wellness must be stressed. Staff should be aware of wellness information, health care services, and activities available to them such as the following:

- Screening tools, including Health Risk Assessments and clinical tests (e.g. blood pressure measurements or cholesterol checks)
- Lifestyle management (e.g. smoking cessation, stress management, weight management) and disease management (e.g. diabetes management) programs
- Health promotion benefits, such as vaccinations
- Community events (LAUSD 5K, marathons, health fairs, etc.)
- Services at the wellness centers are available to staff

Information can be distributed to staff through the following means:*

- Employee Wellness Program website and links
- Health Care Providers
- Wellness program flyers and posters
- Wellness presentations and events
- Wellness campaigns

The District will develop guidelines and provide resources to schools in order to assist in the implementation of staff wellness at work. The guidelines will include the following:

- Healthy eating (including during staff meetings and events)
- Walking or participation in physical activities during lunch/breaks
- Simple desk exercises
- Stress management tools
- First Aid and CPR classes

Staff Training

The District will work collaboratively with the Organizational Excellence Branch on promoting an Employee Wellness Series. Employees can attend one or more classes in the series. A certificate of completion will be issued to participants who complete all sessions. Topics include:

- Stress & Work/Life Balance
- Dealing with Difficult Behavior
- Tackling Techno-Stress
- Wellness & You (diet, exercise, lifestyle, etc.)

PARENT AND COMMUNITY INVOLVEMENT

OVERVIEW

LAUSD recognizes the importance of parent involvement in a child's education and wellness. When parents are involved, students come to school more regularly, complete homework more consistently, and engage in more positive behaviors. Parents provide their child's diet and daily routine which also affect the child's ability to succeed academically. Hence, parent involvement directly affects a child's health and academic success.



LAUSD recognizes that the schools are part of a larger community. As health and violence issues increase, schools cannot address these issues alone. It is vital that the communities and schools work together to support children as they develop into healthy, responsible, and productive members of society.

MEANS USED TO PROMOTE WELLNESS

Supporting a Healthy Diet

- The schools will support parents' efforts to provide a healthy diet. Parent outreach should emphasize the relationship between student health and academic performance and the need for consistent health messages between the home and the school environment.
- Schools should **encourage** parents to pack healthy lunches and snacks and to refrain from including beverages and foods that do not meet the nutrition standards for individual foods and beverages as mentioned in the Nutrition Services section. The school may provide opportunities for parents to share their healthy food practices with others in the school community.
- The District will promote and provide tips for healthier diets through school and District websites.

Access to Health Insurance and Health Services

- The schools will provide information about free and low-cost health insurance to parents to ensure students have the means to obtain periodic well-child examinations, appropriate immunizations, and other preventative health-care services. Such support will include the District's Children's Health Access and Medi-Cal Programs (CHAMP), schools partnerships with cities, the County of Los Angeles, and other public and private community stakeholders to link and promote family-friendly health and social services that is responsive to the needs of the school community.
- Each Educational Service Center should be **encouraged** to facilitate health and wellness activities and events to engage parents and increase awareness of resources within their communities.*
- Communities can access their local wellness center for health services.

Encouraging Physical Activity

The schools will support parents' efforts to provide daily physical activity for their children. The schools are encouraged to provide information about physical education and other school-based physical activity opportunities before, during, and after the school day and to support parents' efforts to provide their children with opportunities to be physically active outside of school. Such supports can include sharing information about physical activity and physical education through a website, newsletter, or take-home materials, special events, or physical education homework.

Counseling and Psychological Services

- The schools encourage parents to participate in the Student Success Team when relevant to their child.
- The schools encourage parents to work together to implement behavior plans and other recommendations. When parents seek additional mental health services that are not available at the school site, parents are encouraged to utilize services at other appropriate District locations, through their private health providers, or through local community agencies.

Resources

- The school will **encourage** publicizing parent trainings on health and nutrition through the school and District websites.
- Schools are **encouraged** to promote sharing-information and providing resources on nutrition at parent centers. The schools are also encouraged to conduct parent and family workshops that are linked to nutrition and suggestions on how to prepare healthy family meals within the family budget.
- Schools should be **encouraged** to develop and maintain school gardens with the support and participation of parents and children. The District will encourage Farmers' Markets to help parents make healthier choices about nutrition.

Community Involvement

The schools are **encouraged** to work with the city and county to draft joint use agreements in order to increase access to safe spaces for the community. Furthermore, the schools are **encouraged** to partner and collaborate with community-based organizations such as the Healthy School Food Coalition and California Center for Public Health Advocacy in order to provide the community with additional resources and services that promote wellness. These partnerships will also allow us to continue to improve our wellness policies.

FUNDRAISING

OVERVIEW

Most District schools utilize some form of fundraising to raise school spirit and to provide funding for a variety of activities that enhance the school experience for its students. Fundraising can be done by the student body organization (including school clubs), the PTA, approved parent group, or a booster club.



MEANS USED TO PROMOTE WELLNESS

The following are general guidelines regarding fundraising and sources that list approved activities:

- Detailed fundraising guidelines for each of these groups can be found in Publication 465, “Student Body Policies and Accounting Procedures — Secondary Schools” and Publication 464, “Policies and Accounting Procedures for Elementary School Student Body Funds,” and general guidelines on the adult groups can be found in Bulletin 1633, “Policies Governing School Fund-Raising Activities of PTA, Approved Parent Group/PTO, and Booster Clubs” issued by the School Fiscal Services Division.
- There are other types of fundraisers or income-generating activities that are approved. Publications 465 and 464, which were referenced above, provide a listing of common activities. If a proposed fundraiser/activity is not listed, schools should contact their Educational Service Center Coordinating Financial Manager for further assistance.
- School administrators should encourage school staff, students, and parents to opt for fundraisers that promote healthy eating and regular exercise.

As a result of the USDA Smart Snacks in School Rule enacted by the 2010 Healthy, Hunger-Free Kids Act to Federal law, the following are policy changes to competitive food and beverage rules:

- The Food Services Division is the School Food Authority (SFA) required to monitor all foods and beverages sold and/or served on school campuses and ensure compliance with all applicable competitive food and beverage requirements.
- The school day is now defined from midnight to 30 minutes after the school day, and after the last reimbursable meal is served (supper meal).
- No exempted fundraisers are allowed during the school day.
- Food or beverages purchased or exchanged for money during the school day using vouchers, coupons, or orders must meet new regulatory requirements.
- New requirements have been established on competitive food and beverage nutritional standards, caloric intakes and beverage size limits.

Policy

Effective July 1, 2014, the USDA Smart Snacks in School Rule mandates that the SFA of any national school district ensure that foods and beverages authorized to be sold and/or served at District schools outside of the National School Breakfast, Lunch, and Supper Programs meet federal, state, local, and school board nutritional standards and policies. This includes, but is not limited to:

- Student stores
- Vending machines
- Fundraising sales
- Snack bars
- A la carte sales

Criteria for Determining Foods that Can Be Sold on Campus

All foods must meet the following criteria:

- Meet the nutritional standards outlined in the LAUSD Food and Nutrition Policy Motion Implementation Plan, Appendix A.
- Comply with all applicable federal, state, and local regulations including the LAUSD District Wellness Policy.
- Listed on the LAUSD Approved Lists of Snack Foods and Beverages as an authorized food and beverage that can be sold and/or served on school campus.

School-Sponsored Pupil Activities

The USDA Smart Snacks in School Rule only applies to foods and beverages sold to students on the school campus during the school day (timeframe mentioned above). The nutrition standards do not apply to foods and beverages sold at events held after the end of the school day, off campus, or on weekends such as school plays or sporting events.

Associated Student Body Organizations and Other Approved Groups

All competitive food and beverage sales derived from organizations such as Associated Student Body (ASB), student clubs/class, Parent-Teacher Associations (PTA), or other approved parent groups and clubs that sell and/or serve foods and beverages during the school day must meet the above criteria.

Fundraising activities that take place off school campus, such as cookie dough sales, are exempt from the nutrition standards. Distribution of order forms for food or beverages not intended for consumption at school may continue.

Authority

This is a policy of the District as monitored by the Food Services Division under authorization of the USDA and CDE. As the Local Education Agency, the District is held accountable for all compliance regulations during an Administrative Review for proper maintenance of record keeping documentation. The Food Services Division is the regulatory authority over all foods and beverages served and/or sold on school campuses.

IMPLEMENTATION AND EVALUATION OF THE WELLNESS POLICY

The implementation of the wellness policy requires six steps: (1) adoption of the policy by the Board of Education, (2) creation of a bulletin, (3) a timeline for implementation, (4) training on the policy, (5) enactment by schools, and (6) evaluation of the effectiveness of the policy.

REQUIREMENTS FOR SCHOOLS

Every school in LAUSD will implement the wellness policy using the Blueprint for Wellness.

In each school, the principal or designee will ensure compliance with the policy and will monitor the implementation of the wellness policy annually. To begin implementation of the policy, every school must establish a **Coordinated Health and Safety Committee**.

Every School-Based **Coordinated Health and Safety Committee** must, annually:

1. Convene for a minimum of six (6) meetings throughout the school year and maintain records of agendas and sign-ins.
2. Ensure representation from each: nutrition services, physical education, health education, health services, counseling, psychological and social services, safe environment, and parent and community.
3. Dedicate time for the review of one of the nine (9) sections of the Blueprint for Wellness, separately, at each meeting over the course of the school year.
Blueprint for Wellness section included on each agenda.

To monitor the implementation of the policy, each school will complete Chapter 7 of the Coordinated Safe and Healthy School (CSHS) Plan, previously known as the Safe School Plan Volume 1. Schools may use their committee or include additional staff to complete the assessment. It is recommended that schools dedicate one day to complete this assessment; utilizing administrators, teachers, cafeteria managers, nurses, counselors, school psychologists, pupil attendance counselors, psychiatric social workers, and parents to complete the assessment. The school's committee will then complete Chapter 2 of the CSHS Plan and identify goals based on the results from the entire CSHS Plan. The results from this assessment and action plan must then be presented to the School Site Council **by May 30, annually**. Upon completion of the presentation to the School Site Council, the principal and UTLA Chapter Chair will sign off on the Certification form located in the CSHS Plan in Chapter 2 and send the form to the Educational Service Center/ISIC Administrator of Operations or designee **by May 30, annually**.

OVERSIGHT BY STUDENT HEALTH AND HUMAN SERVICES

The implementation of the policy in each school will be monitored on an annual basis by the Student Health and Human Services Division. The designee from this Division will report annually to the Board Health and Safety Committee and periodically to the public with regards to the implementation and status of the policy in the District. In addition, the policy will be assessed yearly to necessary changes to the policy for its effectiveness and to ensure that it continues to address the wellness of the students, families, communities, and staff of LAUSD. Fiscal matters as mentioned in the policy may be subject to availability of funds.

REFERENCES

Foreword

- 1 California Physical Fitness Test: A Study of the Relationship between Physical Fitness and Academic Achievement in California Using 2004 Test Results. California Department of Education. 2005.
<http://www.cde.ca.gov/ta/tg/pf/documents/pft2004resultsv2.doc>.

Background

- 2 California Food Policy Advocates. Nutrition and Food Insecurity Profiles. <http://cfpa.net/county-profiles>.
- 3 Jyoti DF, Frongillo EA, Jones SJ. Food Insecurity affects school children's academic performance, weight gain, and social skills. *J Nutr*. 2005 Dec;135(12):2831-9.
- 4 Hanson KL, Connor LM. Food insecurity and dietary quality in US adults and children; a systematic review. *Am J Clin Nutr*. 2014 Jun 18. pii: ajcn.084525.
- 5 Schwimmer J.B., Burwinkle TM, Varni JW. Health-related quality of life of severely obese children and adolescents. *JAMA*. 2003; 289(14):1813–1819. (USA).
- 6 Grossman, D.C., et al. 1997, *JAMA*, 277, 1605–1611.

Nutrition Services

- 7 United States Department of Agriculture, Code of Federal Regulations, 7, Part 210, Section 210.1.
- 8 Los Angeles, CA; Los Angeles County Department of Health Services, Public Health. Office of Health Assessment and Epidemiology. March 2004.
- 9 Center on Hunger, Poverty and Nutrition Policy. Tufts University School of Nutrition Science and Policy (1998). The Nutrition-Cognition Initiative. "Statement on the Link Between Nutrition and Cognitive Development in Children."
- 10 Conklin, Martha T., Lambert, Laurel G., Anderson, Janet B. (Spring 2002). "How Long Does It Take Students to Eat Lunch?" A Publication of the School Nutrition Association. *The Journal of Child Nutrition & Management*.
- 11 Position of the American Dietetic Association, Society for Nutrition Education, and American School Food Service Association – Nutrition services: An essential component of comprehensive school health programs:
<http://www.sciencedirect.com/science/article/pii/S0002822303001639>.

Physical Education

- 12 Active Living Research. Building Evidence to Prevent Childhood Obesity and Support Active Communities. Research Brief. Jan 2012.
- 13 Sternfeld I, Lieb L, Shih M, Fischer K, Perras N. Concussions: How Sports-Related Injuries Are Impacting Our Youth in Los Angeles County. Los Angeles County Department of Public Health; May 2014.
http://publichealth.lacounty.gov/epi/docs/ConcussionFinal_web.pdf/.
- 14 Health Atlas for the City of Los Angeles, June 2013.
<http://cityplanning.lacity.org/Cwd/framwk/healthwellness/text/HealthAtlas.pdf>.
- 15 Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. Key Indicators of Health by Service Planning Area; March 2013. <http://publichealth.lacounty.gov/docs/keyindicators.pdf>.
- 16 Lafleur M, Gonzalez E, Schwarte L, Banthia R, Kuo T, Verderber J, et al. Increasing Physical Activity in Under-Resourced Communities Through school-Based, Joint-Use Agreements, Los Angeles County 2010-2012. *Prev Chronic Dis* 2013; 10:120270. DOI: http://www.cdc.gov/pcd/issues/2013/12_0270.htm.

CONTACT INFORMATION

To assist in the implementation of this Blueprint for Wellness, the following Health and Wellness Policy Website has been developed with various resources:

<http://achieve.lausd.net/healthandwellness>

For further assistance, please contact:

Food Services Division for **Nutrition Services**: 213-241-2993

Physical Education Offices for **Physical Education**: 213-241-4556

Health Education Office for **Health Education**: 213-241-3570

Student Health and Human Services for **Health Services, School Mental Health, Psychological and Social Services**: 213-241-3840

School Operations Division for **Safe Environment**: 213-241-5337

Benefits Administration for **Staff Wellness**: 213-241-4262

Parent and Community Services Branch for **Parent and Community Involvement**: 213-481-3350

Educational Service Center (ESC) Coordinating Manager for **Fundraising**:

ESC North 818-654-3670

ESC East 323-224-3177

ESC West 310-914-2102

ESC South 310-354-3417

Updated August 11, 2014