



NEW MEXICO SCHOOL FOR THE ARTS

2025 WELLNESS PLAN

Revised January 2025

NMSA, a public private partnership comprised of School for the Arts – NM and the New Mexico School for the Arts, admits students of any race, color, national and ethnic origin, gender, sexual orientation, culture and religion or with any disability to all of the rights, privileges, programs and activities generally accorded or made available to its students. NMSA does not discriminate on the basis of race, color, national or ethnic origin, gender, sexual orientation, culture, disability and religion in administration of its educational policies, admission policies, financial aid programs and arts and other programs.

Contents

Introduction	3
Section 1: Wellness Policy Process	5
Section 2: School Health Advisory Council	7
2.1 Committee Role and Membership	7
2.2 Leadership	8
Section 3: Wellness Policy Implementation, Monitoring, Accountability, and Community Engagement	8
3.1 Implementation Plan	8
3.2 Recordkeeping	8
3.3 Annual Progress Report	9
3.4 Triennial Progress Assessments	9
3.5 Revisions and Updating the Policy	9
3.6 Community Involvement, Outreach, and Communications	9
3.7 Evaluation	10
Section 4: Health Education	10
4.1 Requirement	10
4.2 PED Required Activities	10
4.3 Health Education Standards and Benchmarks are met	12
4.4 Lifelong Habit and Healthy Choices	16
Section 5: Nutrition	17
5.1 School Meals	17
5.2: Staff Qualifications and Professional Development	18
5.3: Water	18
5.4: Competitive Foods and Beverages	19
5.5: Fundraising	19
5.6: Nutrition Promotion	19
5.7: Essential Healthy Eating Topics in Health Education	19
5.9: Food and Beverage Marketing in School	21
5.10: Other Activities the Promote Student Wellness	21
5.11: Food Safety Inspections	21
Section 6: Physical Activity	22
6.1: Environmental Design	22
6.2: Essential Physical Activity Topics in Health Education	22

6.3: Physical Activity Breaks	23
6.4: Active Academics	23
6.5: Before and After School Activities	24
6.6: Physical Education	24
Section 7: Healthy and Safe Environment	24
Section 8: Social and Emotional Well-Being	25
Section 10: Child Abuse and Neglect	26
Section 11: Student Counseling	26
Section 12: Health Services	26
Section 13: Staff Wellness	28
Appendix A: NMSA School Advisory Council	30
Appendix B: Evaluation Rubric	32
Appendix C: Approval Letter for Safe School Plan	

Introduction

New Mexico School for the Arts (hereto referred to as NMSA) is committed to the optimal development of every student. We believe that for students to have the opportunity to achieve personal, academic, developmental, and social success, we need to create positive, safe, and health-promoting learning environments at every level, in every setting, throughout the year.

Developing and implementing a comprehensive school district wellness policy is essential to enhance the wellness culture of each individual school. The overall health of school staff also has a profound effect on the academic success and well-being of all New Mexico students. Developing and maintaining a Wellness Policy enables each charter school or district to meet the Public Education Department Wellness Policy rule 6.12.6 NMAC. An approved Wellness Policy also meets the requirements of section 204 of the Healthy, Hunger-Free Kids Act of 2010 (the Act), Public Law 111-296, which added Section 9A to the Richard B. Russell National School Lunch Act (NSLA) (42 U.S. code § 1758b - local school wellness policy. The amendment expanded upon the previous local wellness policy requirements from the Child Nutrition and Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Reauthorization Act of 2004 (Public Law 108-265).

NMSA wellness policy includes the components of a coordinated School Health Model approach to student health and well-being. Each school district and state chartered charter school is required to:

- A. Designate one or more persons within the school district, or at each school, as appropriate, charged with operational responsibility for ensuring that each school fulfills the district's wellness policy;
- B. Establish school health advisory councils (SHAC);
- C. Develop goals for each of the following areas:
 - a. nutrition and nutrition education;
 - b. physical activity;
 - c. physical education;
 - d. health education;
 - e. behavioral health;
 - f. school safety;

- g. health services; and
- h. staff wellness and professional learning

D. Develop a plan for measuring the implementation and evaluation of the wellness policy.

Section 1: Wellness Policy Process

Step 1: Formation and Purpose of the School Health Advisory Council (SHAC)

- A. The NM School for the Arts Charter School has established a district/charter SHAC that consists of: parent(s), school food authority personnel, Governing Council member(s), school administrator(s), school staff, student council, and the parent association.
- B. The SHAC will meet a minimum of two times annually for the purpose of making recommendations to the Governing Council in the development or revision, implementation, and evaluation of the wellness policy.
- C. The SHAC will work with the designated school Wellness Policy liaison to assist in the wellness policy development and facilitation.

Step 2: The NMSA SHAC and liaison have created a Wellness policy that addresses the following areas:

- A. Family, school and community involvement guidelines;
- B. Nutrition guidelines for school meals, fundraisers, nutrition education, food and beverage marketing in school, and school nutrition staff qualification and professional standards requirements.
- C. Physical activity guidelines for before, during and/or after school;
- D. Guidelines for a planned, sequential physical education curriculum that provides the optimal opportunity for all students to learn and develop skills, knowledge and attitudes that encourage a lifetime of physical activity, consistent with the Physical Education Content Standards with Benchmarks and Performance Standards set forth in 6.29.9.NMAC.
- E. Guidelines for a planned, sequential, health education curriculum that addresses the physical, mental, emotional, and social dimensions of health and is aligned to the Health Education Content Standards with Benchmarks and Performance Standards as set forth in Standards for Excellence (6.29.6.8 NMAC);
- F. Establish course instructions for all students in grades 9-12 to receive instruction in health education and to require all students to complete a course in health education prior to graduation from high school that is aligned to high school Health Education Standards with Benchmarks and Performance Standards (22- 13-1.1 NMSA (1978));
- G. Develop a plan that addresses the behavioral health needs of all students in the educational process by focusing on the social and emotional well-being of students;
- H. Provide and submit a Safe School Plan, focused on healthy, safe

environments, including but not limited to policies, procedures and an all-hazards emergency operations plan (EOP) that is inclusive of: prevention, protection, mitigation, response and recovery, and is aligned with the National Response Framework, the U.S. Department of Education Guide for Developing High-Quality School Emergency Operations Plans (2013), See Safe School tab in the NMPED website.

- I. A plan that addresses the health service needs of students in the educational process:
- J. A plan that addresses the wellness needs of all staff that minimally ensures an equitable work environment that meets the Americans with Disabilities Act, Part III;
- K. The implementation and evaluation of all guidelines. Evaluation Rubric in Appendix B.

Step 3: The Governing Council adopts the school district wellness policy;

Step 4: The district/charter school maintains the following:

- A. The local Governing Council adopted school wellness policy that contains the required guidelines and includes language that meets their current needs and also supports growth over time
- B. An evaluation plan
- C. Public updates, including public access to the wellness policy, summary of changes made on an annual basis, annual assessments, and triennial assessments.

Step 5: The district/charter school submits wellness policy documents to the Public Education Department on a date to be determined and communicated to every school on a three-year rotating cycle.

Districts are required to keep documentation demonstrating the district and/or school wellness policy has been made available to the public, documentation of efforts to review and update the wellness policy, including an indication of who is involved in the update.

This policy outlines our approach to ensuring environments and opportunities for all students to practice healthy eating and physical activity behaviors throughout the school day. Specifically, this policy establishes goals and procedures to ensure that:

- Students at NMSA have access to healthy foods throughout the school day, both through reimbursable school meals and other foods available throughout the school campus such as snacks provided.
- Students receive quality nutrition education that helps them to develop

lifelong healthy eating behaviors.

- Students have opportunities to be physically active during the school day.
- The school engages in nutrition and physical activity promotion and other activities that promote student wellness such as the annual health and wellness fair.
- The school community is engaged in supporting the work of NMSA in creating a bridge between school and other settings for students and staff to practice lifelong healthy habits through community clubs and student council.
- NMSA establishes and maintains an infrastructure for management, oversight, implementation, communication about, and monitoring of the policy and its established goals and objectives.

In consideration of requirements governing possible food allergies, NMSA will:

- Provide students alternate options for food selection at breakfast and lunch.
- Keep documentation of any food allergies in the clinic and with the Food Program Manager.
- Adhere to instructions under 7.30.12 NMAC: Emergency Medications in Schools in the potential case of anaphylaxis that may affect breathing and/or potentially affect other major life activities of students due to an allergic reaction.

This policy applies to all students and staff at NMSA. NMSA will coordinate the wellness policy with other aspects of school management.

Section 2: School Health Advisory Council

2.1 Committee Role and Membership

NMSA convenes a representative school health advisory council (SHAC) that meets at least two times per year to establish goals and oversee school health and safety policies and programs, including development, implementation, and periodic review and update of this wellness policy.

The SHAC membership will be inclusive as much as possible as follows:

Parents and caregivers; students; representatives of the school nutrition program (ex., school nutrition director or school food authority); physical education teachers; health education teachers; special education teachers; classroom teachers; school health professionals (ex., health education teachers, school health services staff, and mental health and social services staff; school administrators, school board members; health professionals (ex., dietitians, doctors, nurses, dentists); and the general public. To the extent possible, the SHAC will reflect the diversity of the community.

2.2 Leadership

The Head of School or designee(s) (AKA School Wellness Liaison) will convene the SHAC and facilitate development of and updates to the wellness policy, and will ensure compliance with the policy. NMSA will designate a school wellness policy leader, who will ensure compliance with the policy.

Section 3: Wellness Policy Implementation, Monitoring, Accountability, and Community Engagement

3.1 Implementation Plan

NMSA will develop and maintain a plan to implement, manage, and coordinate the execution of this wellness policy. The plan delineates roles, responsibilities, actions, and timelines, as well as specific goals and objectives for nutrition standards for all foods and beverages available on the school campus, food and beverage marketing (per USDA Food & Beverage Marketing and Advertising policies), nutrition promotion and education, physical activity, physical education, and other school-based activities that promote student wellness. The wellness plan will be posted on the school's website.

3.2 Recordkeeping

NMSA will retain records to document compliance with the requirements of the wellness policy. Documentation maintained in this location will include but will not be limited to:

- The printed wellness policy.
- Documentation demonstrating compliance with community involvement

such as PA (parent association meeting) agendas.

- Documentation of the triennial assessment of the policy for the school
- Documentation demonstrating compliance with public notification requirements, including: (1) methods by which the wellness policy, annual progress reports, and triennial assessments are made available to the public; and (2) efforts to actively notify families about the availability of wellness policy.

3.3 Annual Progress Report

NMSA will compile and publish an annual report to share basic information about the Wellness Policy and report on the progress of our charter school toward meeting wellness goals.

3.4 Triennial Progress Assessments

At least once every three years, NMSA will evaluate compliance with the wellness policy including:

- The extent to which the school is in compliance with the wellness policy; and
- A description of the progress made in attaining the goals of the district's wellness policy.

NMSA will notify households/families of the availability of the triennial progress report.

3.5 Revisions and Updating the Policy

The SHAC will update or modify the wellness policy based on the results of the annual progress reports and triennial assessments, and/or as: priorities change; community needs change; wellness goals are met; new health science, information, and technology emerges; and new Federal or state guidance or standards are issued. The wellness policy will be assessed and updated as indicated at least every three years, following the triennial assessment.

3.6 Community Involvement, Outreach, and Communications

NMSA is committed to being responsive to community input, which begins with

awareness of the wellness policy. The school will actively communicate ways in which representatives of SHAC and others can participate in the development, implementation, and periodic review and update of the wellness policy through a variety of means appropriate to our community.

We will inform parents of the improvements that have been made to school meals and compliance with school meal standards, availability of child nutrition programs and how to apply.

NMSA will use different means to notify parents with updates to the wellness policy and how to get involved and support the policy.

We will ensure that communications are culturally and linguistically appropriate to the community and accomplished through means similar to the mechanisms used to communicate other important school information to parents.

NMSA will actively notify the public about the content of or any updates to the wellness policy annually

3.7 Evaluation

See Appendix B for evaluation rubric. Evaluations will be performed every semester.

Section 4: Health Education

Health education provides the opportunity to motivate and assist all students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors. It allows students to develop and demonstrate increasingly sophisticated health-related knowledge, attitudes, skills, and practices. NMSA Health Education meets the content standards with benchmarks and performance standards as set forth in 6.29.1 NMAC Standards for Excellence.

4.1 Requirement

NMSA's course curriculum includes a health education course that aligns with the Public Education content and performance standards.

4.2 PED Required Activities

Requirement/Required Activity:	Current ACS Practice:	Goal:	Timeline:
Beginning with students entering the 8th grade, a course in health education is required prior to graduation. Health education may be required in either middle school or high school, as determined by the school district.	NMSA requires all students entering 9 th grade to complete 1 semester of health education, unless they completed health education in 7 th or 8 th grade at a previous school.	All graduating 12 th grade students will successfully complete 1 semester of health education.	Currently in place
A sequential aligned K-8 health education curriculum that addresses the physical, mental, emotional, and social dimensions of health.	NA	NA	NA
All school district/charter schools shall provide instruction about HIV and related issues found in the curriculum of the required health education content area to elementary, middle/junior high, and senior high school grades as set forth in 6.12.2.10 NMAC.	NMSA directly instructs students about HIV and related issues.	NMSA students receive developmentally appropriate HIV instruction.	Currently in place
All school districts/charter schools shall implement an “opt-out” policy that will ensure that parents have the ability to request their child to be exempted from the health education curriculum components that focus on the sexuality performance standards. The policy includes but is not limited to the process	NMSA has an opt-out policy that is provided in the Parent-Student Handbook. NMSA sends home a letter to inform parents of health education curriculum that focuses on sexuality performance standards, and provides the process	The opt-out letter will be sent home prior to the onset of instructional curriculum that focuses on sexuality.	Currently in place

for parents to request an exemption of health education curriculum components that address the sexuality performance standards and how alternative lessons are established for the exempted parts of the curriculum	for receiving alternative curriculum for the exempted components.		
As of school year 2016-17, in compliance with NMSA 1978, Section 22-13-1.1, Health Education includes compulsory lifesaving skills training for hands-on (compression only) psychomotor skills cardiopulmonary resuscitation (CPR) training.	NMSA's Health course includes training on: how to recognize the signs of a heart attack; the use of an automated external defibrillator (simulation training); and how to perform the Heimlich maneuver for choking victims.	Students will learn lifesaving skills.	Currently in place

4.3 Health Education Standards and Benchmarks are met

The charts below demonstrate NMSA Curriculum alignment to the NM Health Education standards.

Standard I: Students will comprehend concepts related to health promotion and disease prevention.	
Benchmarks - Students will:	
<ul style="list-style-type: none"> analyze how behavior can impact health maintenance and disease prevention; 	Health Course
<ul style="list-style-type: none"> describe the interrelationships of mental, emotional, social and physical health throughout life; 	Health Course

<ul style="list-style-type: none"> • explain the impact of personal health behaviors on the functioning of body systems; 	Health Course
<ul style="list-style-type: none"> • analyze how the family, peers and community influence the health of individuals; 	Health Course
<ul style="list-style-type: none"> • analyze how the environment influences the health of the community; 	Biology
<ul style="list-style-type: none"> • describe how to delay onset and reduce risks of potential health problems during adulthood; 	Health Course
<ul style="list-style-type: none"> • analyze how public health policies and government regulations influence health promotion and disease prevention; 	Government
<ul style="list-style-type: none"> • analyze how the prevention and control of health problems are influenced by research and medical advances. 	Biology

Standard 2: Students will demonstrate the ability to access valid health information and health promoting products and services.	
Benchmarks - Students will:	
<ul style="list-style-type: none"> • evaluate the availability and validity of health information, products and services; 	English I
<ul style="list-style-type: none"> • demonstrate the ability to evaluate and utilize resources from home, school and community that provide valid health information; 	English I
<ul style="list-style-type: none"> • evaluate factors that influence personal selection of health products and services; 	English I

<ul style="list-style-type: none"> demonstrate the ability to access school and community health services for self and others; 	Health Course
<ul style="list-style-type: none"> analyze the cost and accessibility of health care services; 	Algebra 1
<ul style="list-style-type: none"> analyze situations requiring professional health services. 	Health Course

Standard 3: Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.

Benchmarks - Students will:

<ul style="list-style-type: none"> analyze the role of individual responsibility for enhancing health; 	Health Course
<ul style="list-style-type: none"> evaluate a personal health assessment to determine strategies for health enhancement and risk reduction; 	Health Course
<ul style="list-style-type: none"> analyze the short-term and long-term consequences of safe, risky and harmful behaviors; 	Health Course
<ul style="list-style-type: none"> develop management strategies to improve or maintain personal, family, peer and community health; 	Health Course
<ul style="list-style-type: none"> develop injury prevention strategies for personal, family, peer and community health; 	Arts
<ul style="list-style-type: none"> demonstrate ways to avoid and reduce threatening situations 	Health Course
<ul style="list-style-type: none"> evaluate strategies to manage stress. 	Arts

Standard 4: Students will analyze the influence of culture, media, technology and other factors on health.

Benchmarks - Students will:

<ul style="list-style-type: none"> analyze how cultural practices can enrich or challenge health 	World History
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behaviors;	
<ul style="list-style-type: none"> • evaluate the effect of media and other factors on personal, family, peer and community health; 	English I
<ul style="list-style-type: none"> • evaluate the impact of technology on personal, family, peer and community health. 	Health Course

Standard 5: Students will demonstrate the ability to use interpersonal communication skills to enhance health.	
Benchmarks - Students will:	
<ul style="list-style-type: none"> • demonstrate skills for communicating effectively with family, peers and others; 	English I, II, III, IV
<ul style="list-style-type: none"> • analyze how inter personal communication affects relationships; 	English II
<ul style="list-style-type: none"> • demonstrate positive ways to express needs, wants and feelings; 	English II
<ul style="list-style-type: none"> • demonstrate ways to communicate care, consideration and respect of self and others; 	English III
<ul style="list-style-type: none"> • demonstrate strategies for solving interpersonal conflicts without harming self or others; 	English III
<ul style="list-style-type: none"> • demonstrate refusal, negotiation and collaboration skills to avoid potentially harmful situations; 	English III
<ul style="list-style-type: none"> • analyze the possible causes of conflict in schools, families and communities; 	Health Course

<ul style="list-style-type: none"> demonstrate strategies to prevent conflict. 	English III
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Standard 6: Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.	
Benchmarks - Students will:	
<ul style="list-style-type: none"> demonstrate the ability to utilize various strategies when making decisions related to health needs and risks of young adults; 	Health Course
<ul style="list-style-type: none"> analyze health concerns that require collaborative decision-making; 	Health Course
<ul style="list-style-type: none"> predict the immediate and long-term impact of health decisions on the individual, family, peers and community; 	Government
<ul style="list-style-type: none"> implement a plan for attaining a personal health goal; 	Arts
<ul style="list-style-type: none"> evaluate progress toward achieving personal health goals; 	Arts
<ul style="list-style-type: none"> formulate an effective plan for lifelong health; 	Arts

Standard 7: Students will demonstrate the ability to advocate for personal, family, peers and community health.	
Benchmarks - Students will:	
<ul style="list-style-type: none"> evaluate the effectiveness of communication methods for accurately expressing health information and ideas; 	English II
<ul style="list-style-type: none"> express information and opinions about health issues; 	English III
<ul style="list-style-type: none"> utilize strategies to overcome barriers when communicating information, ideas, feelings and opinions about health issues; 	English III

<ul style="list-style-type: none"> • demonstrate the ability to work cooperatively when advocating for healthy communities; 	English I
<ul style="list-style-type: none"> • demonstrate the ability to adapt health messages and communication techniques to the characteristics of a particular audience; 	English I

4.4 Lifelong Habit and Healthy Choices

NMSA Health Education curriculum is organized around health topic areas taught as independent instructional units designed to increase knowledge and impact the decisions our students make now and in the future regarding their health and the health of others.

Our Health Education curriculum addresses a number of risky behaviors, including, but not limited to:

- the use of tobacco, alcohol and other drugs
- poor dietary patterns
- sedentary lifestyles
- behaviors that result in sexually transmitted diseases and unintended pregnancy
- behaviors that result in unintentional injuries
- violent and other antisocial behaviors

Our life skills approach to Health Education is embedded in our curriculum throughout the disciplines and grade levels. As noted in the chart (above) Health Education at NMSA is sequential and integrated throughout the curriculum in 9-12 instructional units designed to develop life skills based on essential knowledge.

Our Health Education curriculum, aligned to the New Mexico Health Education Content Standards with Benchmarks and Performance Standards, will provide the opportunity for a fully integrated approach to increasing understanding of concepts and critical thinking as well as developing practices that will ensure healthy choices and life-long practices.

A life skills educational approach allows for health education to be taught as

planned, sequential K-12 instructional units, designed to develop life skills, based on essential knowledge. These skills are:

- communication
- non-violent conflict resolution
- decision-making
- goal setting
- stress management
- resisting negative social pressure
- negotiation skills

Section 5: Nutrition

5.1 School Meals

NMSA is committed to serving healthy meals to children, with plenty of fruits, vegetables, whole grains, and fat-free, flavored, and low-fat, unflavored milk; moderate in sodium, low in saturated fat, and zero grams trans-fat per serving (nutrition label or manufacturer's specification), and to meet the nutrition needs of school children within their calorie requirements. The school meal programs aim to improve the diet and health of school children, help mitigate childhood obesity, model healthy eating to support the development of lifelong healthy eating patterns, and support healthy choices while accommodating cultural food preferences and special dietary needs.

NMSA participates in the National School Breakfast and Lunch Program (NSLP). We also operate additional nutrition-related programs and activities including school gardens (outdoors and hydroponic). We are committed to offering school meals through the NSLP program that:

- are accessible to all students;
- are appealing and attractive to children;
- are served in clean and pleasant settings;
- meet or exceed current nutrition requirements established by local, state, and federal statutes and regulations.
- Promote healthy food and beverage choices, following Smarter Lunchroom techniques:
 - whole, sliced or cut fruit is available daily
 - all available vegetable options have been given creative or descriptive names
 - all staff members, especially those serving, have been trained to

politely prompt students to select and consume the daily vegetable options with their meal.

- flavored milk is allowed if non-fat
- student surveys and taste testing opportunities are used to inform menu development, dining space décor, and promotional ideas (in progress)
- student artwork is displayed in the service and/or dining areas
- report on the most recent food safety inspection is provided to any member of the public upon request.

Additionally,

- Students are allowed at least 20 minutes to eat lunch, counting from the time they have received their meals and are seated (Note: School lunch periods must be a minimum of 30 minutes per day – 6.29.1.9(I)6 NMAC.)
- Students are served lunch at a reasonable and appropriate time of day
- Participation in federal child nutrition programs is promoted among students and families to help ensure that families know what programs are available in their children's school.

5.2: Staff Qualifications and Professional Development

All school nutrition program directors, managers, and staff meet or exceed hiring and annual continuing education/training requirements in the USDA professional standards for child nutrition professionals. These school nutrition personnel refer to USDA's Professional Standards for School Nutrition Standards website to search for training that meets their learning needs.

5.3: Water

To promote hydration, free, safe, unflavored drinking water will be available to all students throughout the school day (*defined as midnight the night before to 30 minutes after the end of the instructional day) and throughout every school campus (** defined as areas that are owned or leased by the school and used at any time for school-related activities that are accessible to students). Drinking water is available where school meals are served during meal times. The school has a water fountain in each building. One of them is located in the Cafeteria.

5.4: Competitive Foods and Beverages

NMSA is committed to promoting that all foods and beverages available to students on the school campus during the school day support healthy eating. The Head of School and Principal have stated explicitly during the last two parent association meetings that the snacks donated by parents should be healthy and nutritious. NMSA does not sell snacks for school events, during the lunch period or before/after school. Food sales are prohibited anytime during the school day unless it is two of the exempt fundraisers per semester.

5.5: Fundraising

Foods and beverages that meet or exceed the USDA Smart Snacks in Schools nutrition standards may be sold through fundraisers on the school campus during the school day. NMSA permits two fundraiser exemptions per semester.

5.6: Nutrition Promotion

NMSA promotes healthy food and beverage choices by encouraging participation in school meal programs. Information about the lunch program is shared with families at the beginning of the school year. The lunch menu is posted on our website each month.

5.7: Essential Healthy Eating Topics in Health Education

NMSA includes in the Health Education curriculum the following essential topics on healthy eating:

- The relationship between healthy eating and personal health and disease prevention
- Food guidance from [MyPlate](#)
- Reading and using USDA's food labels
- Eating a variety of foods every day
- Balancing food intake and physical activity

- Eating more fruits, vegetables, and whole grain products
- Choosing foods that are low in fat, saturated fat, and cholesterol and do not contain trans fat
- Choosing foods and beverages with little added sugars
- Eating more calcium-rich foods
- Preparing healthy meals and snacks
- Risks of unhealthy weight control practices
- Accepting body size differences
- Food safety
- Importance of water consumption
- Importance of eating breakfast
- Making healthy choices when eating at restaurants
- Eating disorders
- The Dietary Guidelines for Americans
- Reducing sodium intake
- Social influences on healthy eating, including media, family, peers, and culture
- How to find valid information or services related to nutrition and dietary behavior
- How to develop a plan and track progress toward achieving a personal goal to eat healthfully
- Resisting peer pressure related to unhealthy dietary behavior
- Influencing, supporting, or advocating for others' healthy dietary behavior

5.9: Food and Beverage Marketing in School

NMSA does not advertise food or beverages in any of its functions or material.

5.10: Other Activities the Promote Student Wellness

NMSA will integrate wellness activities across the entire school setting, not just in the cafeteria, but in other food and beverage venues, and physical activity facilities. NMSA will coordinate and integrate other initiatives related to physical activity, physical education, nutrition, and other wellness components, so all efforts are complementary, not duplicative, and work towards the same set of goals and objectives promoting student well-being, optimal development, and strong educational outcomes.

Staff are encouraged to coordinate content across curricular areas that promotes student health, such as teaching nutrition concepts in other content areas.

All efforts related to obtaining federal, state, or association recognition or grants/funding opportunities for healthy school environments will be coordinated with and complementary of the wellness policy, including but not limited to ensuring the involvement of the SHAC.

All school-sponsored events will adhere to the wellness policy. All school-sponsored wellness events will include physical activity opportunities.

5.11: Food Safety Inspections

NMSA will conduct two annual food safety inspections (FSI) per USDA regulations and state rules. Any findings will be addressed within the set time allocated with verifiable proof of completion.

5.12: Food Allergies

NMSA staff are required to complete Anaphylaxis and Anaphylactic Shock training annually through GCN. The training reviews life threatening allergic reactions to allergens. We are proactive in finding out if students have food allergies and accommodating them.

Section 6: Physical Activity

Objective: Children and adolescents should participate in 60 minutes of physical activity every day. <http://www.cdc.gov/physicalactivity/basics/children/index.htm>

A substantial percentage of students' physical activity can be provided through a comprehensive, school-based physical activity program (CSPAP) that includes these components: physical education, classroom-based physical activity, walk and bicycle to school, and out-of-school time activities, and NMSA is committed to providing these opportunities. Schools will ensure that these varied opportunities are in addition to, and not as a substitute for, physical education (addressed in "Physical Education" subsection).

Physical activity during the school day (including but not limited to outdoor activities, physical activity breaks, or physical education) will not be withheld as punishment for any reason. NMSA will provide teachers and other school staff with a list of ideas for alternative ways to discipline students.

6.1: Environmental Design

NMSA ensures that its grounds and facilities are safe and that equipment is available to students to be active. We will conduct scheduled safety checks to include regular inspections of playing fields, using an approved checklist. Monitoring of building and grounds procedure also includes steps to complete necessary inspections and repairs in a timely manner.

6.2: Essential Physical Activity Topics in Health Education

NMSA will include in the health education curriculum the following essential topics on physical activity:

- The physical, psychological, or social benefits of physical activity
- How physical activity can contribute to a healthy weight
- How physical activity can contribute to the academic learning process
- How an inactive lifestyle contributes to chronic disease
- Health-related fitness, that is: cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition

- Differences between physical activity, exercise and fitness
- Phases of an exercise session, that is: warm up, workout and cool down
- Overcoming barriers to physical activity
- Decreasing sedentary activities, such as TV watching and video games
- Opportunities for physical activity in the community
- Preventing injury during physical activity
- Weather-related safety, for example: avoid heat stroke, hypothermia, and sunburn while being physically active
- How much physical activity is enough, that is: determining frequency, intensity, time, and type of physical activity
- Developing an individualized physical activity and fitness plan
- Monitoring progress toward reaching goals in an individualized physical activity plan
- Dangers of using performance-enhancing drugs, such as steroids
- Social influences on physical activity, including media, family, peers, and culture
- How to find valid information or services related to physical activity and fitness
- How to influence, support, or advocate for others to engage in physical activity
- How to resist peer pressure that discourages physical activity

6.3: Physical Activity Breaks

Students are more attentive and ready to learn if provided with periodic breaks when they can be physically active or stretch. Thus, students will be offered periodic opportunities to be active or to stretch throughout the day on all or most days during a typical school week. NMSA recommends teachers provide short (3-5 minute) physical activity breaks to students during and between classroom times. These physical activity breaks will complement, not substitute, for physical education class, recess, and class transition periods.

NMSA will provide resources and links to resources, tools, and technology with ideas for physical activity breaks. Resources and ideas are available through USDA and the Alliance for a Healthier Generation

6.4: Active Academics

Teachers will incorporate movement and kinesthetic learning approaches into "core" subject instruction when possible (e.g., science, math, language arts,

social studies, and others) and do their part to limit sedentary behavior during the school day.

NMSA will support classroom teachers incorporating physical activity and employing kinesthetic learning approaches into core subjects by providing annual professional development opportunities and resources, including information on leading activities, activity options, as well as making available background material on the connections between learning and movement.

Teachers will serve as role models by being physically active alongside the students whenever feasible.

6.5: Before and After School Activities

NMSA offers opportunities for students to participate in physical activity during the school day through basketball club, pickleball, volleyball and walking.

6.6: Physical Education

NMSA will provide students with physical education, using an age-appropriate, sequential physical education curriculum, consistent with national and state standards for physical education. The physical education curriculum will promote the benefits of a physically active lifestyle and will help students develop skills to engage in lifelong healthy habits, as well as to incorporate essential health education concepts (discussed in the "Essential Physical Activity Topics in Health Education" subsection).

All students will be provided equal opportunity to participate in physical education classes. We will make appropriate accommodations to allow for equitable participation for all students and will adapt physical education classes and equipment as necessary.

NMSA high school students are required to take the equivalent of one academic year of physical education.

Section 7: Healthy and Safe Environment

NMSA provides a healthy and safe environment (surroundings, psychosocial climate, and the culture of the school). We support a total learning experience that

promotes personal growth, healthy interpersonal relationships, wellness and freedom from discrimination and abuse.

We promote a healthy and safe environment before, during and after school for students, teachers, staff, parents and community members.

NMSA has developed a Safe School Plan that is focused on supporting healthy and safe environments, including, prevention, policies and procedures and an all-hazards emergency response plan.

NMSA performs at least 8 emergency drills each school year: 4 fire drills, 2 Shelter-in-Place and Active Shooter Preparedness drills and two evacuation drills, in accordance with the guidance in subsection N of 6.29.1 NMAC Standards for Excellence General Provisions.

NMSA Bullying Prevention Policy contains an absolute prohibition against bullying and provides guidelines for cyberbullying prevention, as per 6.12.7.8 (D) NMAC.

Section 8: Social and Emotional Well-Being

NMSA has created a plan addressing the behavioral health needs of all students in the educational process by focusing on students' social and emotional well-being.

6.29.1 NMAC Standards for Excellence General Provisions require districts and charter schools to provide or make provisions for support service programs that strengthen the instructional program. Support services at NMSA include school counseling. Our contractors provide licensed staff to develop and supervise the services as part of the educational plan for student success (EPSS) process (see 6.29.1.8 NMAC); and in support of curriculum and EPSS.

School personnel are required by law to report substance abuse, child abuse and neglect.

Section 22-5-4.4 NMSA 1978 A school employee who knows, or in good faith suspect, any student of using or abusing alcohol or drugs shall report such use or abuse pursuant to procedures established by the NMSA Governing Council.

No school employee who in good faith reports any known or suspected instances of alcohol or drug use or abuse shall be held liable for any civil damages as a result of such report or efforts to enforce any school policies or regulations

regarding drug or alcohol use or abuse.

Section 10: Child Abuse and Neglect

Section 22-10A-32 NMSA 1978. All licensed school employees are required to complete training in the detection and reporting of child abuse and neglect, including sexual abuse and assault, and substance abuse. Except as otherwise provided in this subsection, this requirement shall be completed within the licensed school employee's first year of employment by a school district. Licensed school employees hired prior to the 2014-2015 school year shall complete the sexual abuse and assault component of the required training during the 2014-2015 school year.

Section 32A-4-3 NMSA 1978. Duty to report child abuse and child neglect; responsibility to investigate child abuse or neglect; penalty.

NMSA shall endeavor to provide a positive, supportive environment in which students are able to request assistance when needed. NMSA has an anonymous reporting number.

We will endeavor to ensure that school personnel know how to recognize and respond to a student who is showing signs of suicidal ideation. Our **Suicide Prevention Plan** can be found in our School Safety Plan (pp. 33-35). It outlines the appropriate steps to take when a student threatens suicide.

NMSA has student counselor contractors who are available to students, and we maintain a current local referral list with clear guidelines on steps in the referral process

Section 11: Student Counseling

Student counseling is critical in creating an emotionally and psychologically safe environment. Addressing emotional, social, spiritual, mental, and physical well-being are vital to the education of the whole student. There is no other area where the need is greater than helping the student process and cope with all the adjustments necessary when something traumatic happens and/or when a student faces an emergency/disaster event.

Section 12: Health Services

Health services provide, protect and promote student health. These services are

designed to ensure access or referral to primary health care or behavioral health services, or both. The services also foster appropriate use of primary health care services and behavioral health services; prevent and control communicable disease and other health problems; provide emergency care for illness or injury; promote and provide optimum sanitary conditions for a safe school facility and school environment; and provide educational and counseling opportunities to improve individual, family and community health.

The goal of health services is to provide coordinated, accessible primary health and behavioral health services for students, families and staff.

Per the U.S. Office of Special Education (OSEP), students with health care needs that may "affect or have the potential to affect safe and optimal school attendance and academic performance requires the professional school nurse to write an **Individualized Health Plan (IHP)** in collaboration with the student, family, educators, and healthcare care providers" NASN Position Statement: Individualized Healthcare Plan). The IHP should be reviewed annually at a minimum. The need for an IHP is based upon each child's required health care, not upon "educational entitlement such as special education or Section 504 of the Rehabilitation Act of 1973." OSEP considers that the IHP should be a separate document from the Individualized Education Program (IEP) and should be attached to the student's IEP or 504 plan based upon the student's needs. (See the PED School Health Manual, Section V: Individualized Healthcare Plans for instructions.)

NMSA ensures that all **students with HIV/AIDS** have appropriate access to public education and that their rights to privacy are protected as set in 6.12.2.10 NMAC Human Immunodeficiency Virus (HIV).

NMSA policy acknowledges that all students enrolled in the public, nonpublic, or home schools in the state must present satisfactory **evidence of commencement or completion of immunization** in accordance with the immunization schedule and rules and regulations of the Public Health Division (PHD)/Department of Health (DOH), with an allowance for exemption by the PHO/DOH if certain conditions are met. Statute 6.12.2.8 NMAC makes it unlawful for any student to enroll in school unless the student is properly immunized or in the process of being properly immunized and can provide satisfactory evidence of such immunization, unless the child is properly exempted: 7.5.3 NMAC: Vaccinations and Immunizations Exemptions. An exception is provided to a student experiencing homelessness.

Pursuant to the McKinney-Vento Homeless Assistance Act [42 USC§ 11432(g)(3)(C)], children experiencing homelessness must be able to enroll in school immediately, even if they are unable to produce records normally required for enrollment, such as previous academic records, medical records, proof of residency, or other documentation. If the child needs to obtain immunizations, or medical or immunization records, the enrolling school must immediately refer the parent or guardian of the child or youth to the designated local educational agency (LEA) homeless education liaison, who must assist in obtaining necessary immunizations, or immunization or medical records.

NMSA policy acknowledges all public and nonpublic schools **must grant to any student in grades kindergarten through 12 authorization to carry and self-administer health care** practitioner prescribed asthma treatment medications and anaphylaxis emergency treatment medication as well as the right to self-manage their diabetes care in the school setting and to develop mechanisms that support safe diabetes self-management in the school environment as long as certain conditions are met. Such rules are established in 6.12.2.9 NMAC Students Rights to Self-Administer Certain Medications and 6.12.8 NMAC Diabetes Self-Management by Students in the school setting.

NMSA provides a connection to community health services. Services include but are not limited to preventive services, behavioral health services, screenings and referrals; evaluations and assessments; first aid and emergency care; follow-up care; school safety; health education and ancillary services including speech therapy and occupational therapy.

Section 13: Staff Wellness

NMSAs endeavors to increase staff knowledge and skills about promoting healthy behaviors in the classroom and school (e.g., increasing the use of kinesthetic teaching approaches or incorporating nutrition lessons into math class). Professional learning will help NMSA staff understand the connections between academics and health and the ways in which health and wellness are integrated into ongoing district reform or academic improvement plans/efforts. Such learning will also assist school staff to develop current and lifelong habits that optimize their personal health.

NMSA shall provide opportunities for school staff to improve their health status through health assessments, health education, wellness education, nutrition

education, fitness education and health-related fitness activities. These offerings encourage school staff to pursue a healthy lifestyle that improves health status and morale and provides a greater personal commitment to the school's overall coordinated school health approach.

A staff wellness program allows the staff to learn and practice skills that help them to make personal decisions about healthy daily habits.

The goal of staff wellness is to promote activities for staff designed to promote the physical, emotional and mental health of school employees along with disease and disability prevention activities.

Our staff Wellness plan shall address the (PED) requirements outlined in the school district wellness policy rule (6.12.6 NMAC Section K: Staff Wellness).

Our School Health Advisory Council shall create a plan to address the staff wellness needs of all school staff that minimally insures an equitable work environment and meets the Americans with Disabilities Act, Title III.

The SHAC shall ensure that the NMSA Governing Council approves and the school implements a policy that will ensure that the rights to privacy of all school employees infected with HIV are protected.

NMSA provides staff and faculty the opportunity to participate in a health promotion program focused on exercise, stress management and nutrition (e.g., yoga, dance, health fairs, fun runs, walks, etc.).

NMSA will implement strategies to support staff in actively promoting and modeling healthy eating and physical activity behaviors.

When feasible, NMSA will offer annual professional learning opportunities and resources for staff to increase knowledge and skills about promoting healthy behaviors in the classroom and school (e.g., increasing the use of kinesthetic teaching approaches or incorporating nutrition lessons into math class). Professional learning will help District staff understand the connections between academics and health and the ways in which health and wellness are integrated into ongoing district reform or academic improvement plans/efforts. Such learning will also assist school staff to develop current and lifelong habits that optimize their personal health.

Per the Public Education Department Wellness Policy rule 6.12.6 NMAC, all New Mexico local school boards of education shall establish a district/charter

School Health Advisory Council (SHAC) that consists of parent(s), school food authority personnel, school board member(s), school administrator(s), other school staff, student(s), and community member(s).

The SHAC members are responsible to meet at least two times annually and to make recommendations to the NMSA Governing Council re: the development or revision, implementation, and evaluation of the wellness policy (Healthy Schools Report Card).

Membership of the NMSA SHAC, and their roles and contact information are identified below.

Each school district/charter school is to identify a wellness policy champion(s) within the school district/charter school who is charged with the operational responsibility for ensuring that each school fulfills the school district's/charter school's wellness policy.

School Health Advisory Council

Name	Role	Phone Number	Email
Lori Ayala	Wellness Policy Lead	505-310-4194	layala@nmschoolforthearts.org
Eric Crites	Head of School	505-310-4194	ecrites@nmschoolforthearts.org
Trina Raper	Governing Council Member	505-310-4194	traper@nmschoolforthearts.org
Brandy Avila	School Health Assistant	505-310-4194	bavila@nmschoolforthearts.org
Lisa Oberteuffer	School Staff/Parent	505-310-4194	loberteuffer@nmschoolforthearts.org
Angela Ortiz	School Food Authority Personnel/Parent	505-310-4194	aortiz@nmschoolforthearts.org
Henry Baca	Facilities Manager	505-310-4194	hbaca@nmschoolforthearts.org
Ruben Desangles	IT Manager	505-310-4194	rdesangles@nmschoolforthearts.org
Maria Tapia	Head of Operations	505-310-4194	mtapia@nmschoolforthearts.org

Appendix B: Evaluation Rubric

- Carefully read and discuss the statements with your school health advisory committee.
- Check the most appropriate box for each activity
- Use suggested supporting document to help you provide rationale for your selected box.

<u>School Year:</u>	<u>Semester</u>	School Name New Mexico School for the Arts	Head of School
School Wellness Lead:		Phone:	Email:

FAMILY, SCHOOL & COMMUNITY INVOLVEMENT

Definition: An integrated family, school and community approach to planning, implementing, and supporting health programs and projects for enhancing the health and well-being of students and staff.

Goal: The goal of family, school and community involvement within a coordinated school health approach is to create a total school environment that promotes student health and supports academic achievement through effective partnerships among families, schools and communities.

Check (✓) One Box Which Best Describes the **Current Level of Implementation**

Notes:

List committee members and title: Brandy Avila, Health Nurse Assistant - Henry Baca, Facilities Manager - Kayla Bolte, Residential Director - Eric Crites, Head of School - Ruben Desangles , IT Manager - Cecile Hemez, Director of Operations and Safety Committee chair - Denise Hinson, Principal - Russell Johnson, Parent - Lisa Oberteuffer, Special Education Coordinator - Angela Ortiz, Lunch Program Manager -Trina Raper, Governing Council Member - Marie Tapia, Asst. Business Manager.

2. NUTRITION

Definition: Integration of programs that provide access to a variety of nutritious, affordable and appealing meals and snacks for students; nutrition education; and an environment that promotes healthy eating behaviors.

Goal: The goal of nutrition is to promote the role of nutrition in academic performance and quality of life, and to ensure the adoption of school policies which provide adequate opportunities to be able to encourage and support healthy eating by students.

Check (✓) One Box Which Best Describes the Current Level of Implementation

Notes: Completed by Lunch Program Manager

3. PHYSICAL ACTIVITY

Definition: Body movement of any type which includes recreational, fitness and sport activities. *Note: physical activity is a component of, but is not substitute for, quality physical education. Physical education is one source, but should not be the only source of physical activity before, during and/or after school.*

Goal: The goal of physical activity within the coordinated school health approach provides students with increased opportunities to engage in moderate to vigorous physical activity before, during and/or after school.

Check (✓) One Box Which Best Describes the Current

Level of Implementation

Notes: Completed by Principal

4. PHYSICAL EDUCATION

Definition: Instructional content, process, and performance standards for physical education based on NM Standards.

Goal: To provide students with physical education using appropriate practices to assure that all students are able to learn and develop the skills, knowledge and attitudes necessary to be physically active.

Check (✓) One Box Which Best Describes the Current

Level of Implementation

Notes: Completed by Principal

5. HEALTH EDUCATION

Definition: Instructional content, process, and performance standards for health education based on NM standards.

Goal: The goal of a comprehensive health education curriculum within a coordinated school health approach is to provide opportunities for students to acquire life skills in order to attain personal, family, community, consumer and environmental health.

Check (✓) One Box Which Best Describes the Current Level of Implementation

Notes: Completed by Principal

6. HEALTHY & SAFE ENVIRONMENT

Definition: The physical and aesthetic surroundings and the psychosocial climate and culture of the school. It supports a total learning experience that promotes personal growth, healthy interpersonal relationships, wellness and freedom from discrimination and abuse.

Goal: The goal of a healthy and safe environment is to promote a climate and culture before, during and after school for students, teachers, staff, parents and community members that support academic achievement.

Check (√) One Box Which Best Describes the Current Level of Implementation

Notes: Completed by Safety Committee Chair

7. SOCIAL & EMOTIONAL WELL-BEING

Definition: Services provided to maintain and/or improve student’s mental, emotional, behavioral and social health.

Goal: The goal of social and emotional well-being is to collaborate with students, staff and community to influence student success by building awareness and promotion strategies to maintain and/or improve student mental health.

Check (√) One Box Which Best Describes the Current Level of Implementation

Notes: Completed by Principal

8. HEALTH SERVICES

Definition: Services provided for students to appraise, protect, and promote individual, family and community health. These include preventative services, education, emergency care, referrals, management of acute and chronic health problems, and services that promote and provide optimum sanitary conditions for a safe school facility and school environment.

Goal: the goal of health services is to provide coordinated, accessible health and mental health services for students, families and staff.

Check (✓) One Box

Which Best Describes the Current Level of Implementation

Notes: Completed by School Health Assistant

9. STAFF WELLNESS

Definition: Activities that help maintain and improve the health of staff, contributing to improved morale and a greater personal commitment to the school's overall coordinated school health approach.

Goal: The goal of staff wellness is to promote the physical, emotional and mental health of employees as well as to prevent disease and disability by providing opportunities for staff to learn and practice skills to make personal decisions about health-enhancing daily habits.

Check (✓) One Box Which Best Describes the Current Level of Implementation

Notes: Completed by Principal

NEXT STEPS...

Submit a copy of completed wellness implementation checklist to cluster assistant, who will forward it on to the wellness coordinator.

Take note of activities "Not in Place."

Based on discussion around activities identified "Not in Place" and "In Planning" and local resources and needs, prioritize activities to focus on.

Create your school wellness implementation plan for each component using Worksheet B

