# District Wellness Plan

## Introduction

The Cleveland Metropolitan School District is committed to the optimal development of every student. The District believes that for students to have the opportunity to achieve personal, academic, developmental, and social success, it must create positive, safe, and health-promoting learning environments at every level, in every setting, throughout the academic school year.

Ohio Department of Education's strategic plan, *Each Child, Our Future*, directs schools to put the whole child at the center of all school activities, including wellness. Engaging the whole child ensures that students are healthy, safe, engaged, supported, and challenged and sets the standard for comprehensive, sustainable school improvements and long-term student success.

The District embraces the Whole School, Whole Community, Whole Child Model (WSCC) approach to wellness. This model provides a student-centered and evidence-based framework for addressing wellness in schools. It also emphasizes the role of the community in supporting the school. With this model, the District focuses on seven areas of whole school wellness:

* Physical education and physical activity
* Nutrition environment and services
* Health education
* Social and emotional climate
* Health services
* Community involvement
* Family engagement

The District is committed to instructing students and their families about the importance of healthy schools and lifestyles, providing a learning environment that enhances the development of lifelong healthy habits in wellness, nutrition, and regular physical activity.

## Policy

The Chief Executive Officer adopts this District Wellness Plan in compliance with Board Policy EFG (Comprehensive Wellness Policy), Federal law, and Ohio Revised Code.

The District reviews and approves proposals for wellness programs, events, and activities from community partners. The Executive Director of Health, Physical Education, Athletics, and Student Activities or designee convenes all required committees and facilitates revising and evaluating the District Wellness Plan and related policies. In addition, the Executive Director is responsible for all non-core curriculum standards, implementation, and training.

For more information on the Comprehensive Wellness Policy and District Wellness Plan, including assessment and goals, please contact:

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## Organizational Priorities

The following priorities guide the development and implementation of the District Wellness Plan:

* Students in the District have access to healthy foods throughout the school day-both through reimbursable school meals and other foods available throughout the school campus following Federal and State nutrition standards.
* Students have access to quality nutrition education that helps them develop lifelong healthy eating behaviors.
* Students have opportunities to be physically active before, during, and after school.
* Schools engage in nutrition, physical activity, and other activities that promote student wellness.
* Schools promote a positive school climate where respect is encouraged, and students can seek help from trusted adults.
* Students have access to integrated health services at all schools, including but not limited to clinical care and support for students with chronic conditions.
* The community is engaged in supporting the work of the District in creating continuity between school and other settings for students and staff to practice lifelong healthy habits.
* The District establishes and maintains an infrastructure for management, oversight, implementation, communication, and plan monitoring.

## Physical Activity

Children and adolescents should participate in 60 minutes of physical activity every day. Schools may provide a substantial percentage of students' physical activity through a comprehensive, school-based physical activity program (CSPAP). A CSPAP reflects strong coordination and synergy across all components:

* Quality physical education as the foundation
* Physical activity before, during, and after school
* Staff involvement
* Family and community engagement

A CSPAP provides varied physical activity opportunities in addition to, not as a substitute for, physical education.

The District is committed to providing these opportunities. In conjunction with each elementary principal, the Chief Academic Officer and designee(s) supports efforts and opportunities for daily physical activity lasting at least 20 minutes for all elementary children. In addition, the District provides physical activity resources to students, families, and the community to positively impact health.

The District encourages schools to utilize resources from the Alliance for a Healthier Generation's Healthy Schools Program for physical activity resources. In addition, the District shares other resources as available and encourages schools to follow best practices to address all CSPAP components successfully.

### Classroom Physical Activity Breaks

The District recognizes that students are more attentive if provided with periodic breaks when they can be physically active or stretch. As a result, the District encourages and supports building principals to offer students opportunities to be active or stretch throughout the day on all or most days during a typical school week. For example, the District supports and encourages teachers to provide short (3-5 minute) physical activity breaks to students during and between classroom times. These physical activity breaks complement, not substitute, physical education class, recess, and class transition periods. The District provides physical activity resources and links to resources, tools, and technology with ideas for classroom physical activity breaks.

Physical activity during the school day (including but not limited to recess, classroom physical activity breaks, or physical education) will not be used as punishment or withheld as punishment. However, schools may prevent students from participating in sports teams with specific academic requirements. The District provides teachers and other school staff with alternatives for using or withholding physical activity as punishment.

The District ensures that its grounds and facilities are a safe physical activity environment for students, staff, and families to the extent practicable. In addition, the District conducts necessary inspections and repairs.

## Physical Education Instruction

### Overview and Staffing

The physical education curriculum promotes the benefits of a physically active lifestyle. In addition, the curriculum helps students develop skills to engage in lifelong healthy habits and incorporate essential health education concepts. The Chief Academic Officer or designee(s) ensures that the District scope and sequence reflect physical education and responsible sexual behavior instruction.

The Chief Academic Officer and designees ensure that a comprehensive, sequential physical education and responsible sexual behavior program are taught at each school by a licensed physical and health education teacher. The District hires certified and licensed health and physical education teachers and supports their ongoing professional development.

The District provides a minimum of two District-wide professional development opportunities per the union contract for all Physical Education Teachers. In addition, the District provides physical education and activity professional development opportunities for all District staff to enhance personal and professional growth.

The District expects physical and health education teachers to implement all District collaborated and approved programs, events, or experiences from external partners.

### Responsible Sexual Behavior

Schools incorporate the responsible sexual behavior curriculum into health and physical education class sessions. The curriculum comprises lessons from the following topic areas specified in the National Sexuality Education Standards as essential for effective K-12 sexuality education:

* Anatomy and Physiology
* Puberty and Adolescent Development
* Gender Identity
* Pregnancy and Reproduction
* Sexually Transmitted Diseases and HIV
* Healthy Relationships and Personal Safety

Schools must teach a minimum of three responsible sexual behavior lessons in grades K-4. In addition, schools must conduct five to six lessons in grades 5-12.

The District provides appropriate training for all staff members involved in program implementation.

Sexual health education instructors and/or principals submit attendance reports for all students receiving sexual health instruction within the school year. Principals submit this information by the first Friday in May.

### Compliance

Schools provide all students with equal opportunity to participate in physical education classes. Therefore, the District makes appropriate accommodations to allow for equitable participation for all students and will adapt physical education classes and equipment as necessary. In addition, the time allotted for physical education is consistent with state standards. Principals confirm that physical education instruction is listed on their master schedule and taught to their students. Students will be moderately to vigorously active for at least 50% of class time during most or all physical education class sessions.

### Assessment

The District physical education program promotes student physical fitness through individualized fitness and activity assessments (via Welnet or the Ohio Department of Education's Physical Education Assessments) and uses criterion-based reporting. In addition, the District promotes and supports the Ohio Department of Education's formal Physical Education required Assessment for School Districts.

### Facilities

Principals shall ensure that physical education facilities (gymnasiums, playgrounds, fields, courts, etc.) on school grounds are safe. The school provides a physical and social environment that encourages safe and enjoyable activity for all students, including offering opportunities for non-competitive physical activity.

## Recess

All elementary schools will provide at least twenty minutes of recess on all days during the school year, except for early dismissal or late arrival days. If a school offers recess before lunch, the school must have appropriate hand-washing facilities or hand-sanitizing mechanisms located near the cafeteria to ensure proper hygiene before eating. Students are required to use these mechanisms before eating.

Schools accommodate outdoor recess when weather is feasible for outdoor play as determined by District guidelines. If a school must conduct indoor recess, the school and supervising staff should encourage physical activity for students to the extent practical.

Recess should complement, not substitute, physical education class. Staff members encourage students to be active and serve as role models by being physically active alongside the students whenever feasible.

## Health Education

The District ensures that schools teach a comprehensive, sequential health education curriculum and that the time allotted is consistent with state standards. In addition, the Chief Academic Officer or designee(s) ensures that the District scope and sequence reflect health education.

Schools align and implement health education within the science curriculum in elementary schools. Certified health education teachers are responsible for teaching health education in high schools. High school principals confirm that health education instruction is listed on their master schedule and taught to their students.

In all schools, health education includes nutrition education. In addition, the District utilizes a registered dietician to develop nutrition education.

The Chief Academic Officer and designees ensure that health education is taught at each high school by a licensed health education teacher. The District hires certified and licensed health teachers and supports their ongoing professional development.

The District expects health education teachers to implement all District collaborated and approved programs, events, or experiences from external partners.

### Cardiopulmonary Resuscitation and Automated External Defibrillator Instruction

In compliance with Ohio Revised Code Section 3313.6021, all high schools must provide instruction on cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) usage.

## Nutrition

### Program Participation

All schools within the District commit to offering school meals through the United States Department of Agriculture (USDA) Child Nutrition Programs and other applicable Federal child nutrition programs that:

* Are accessible to all students, including students with special dietary needs
* Are appealing and attractive to children
* Are served in clean and pleasant settings
* Meet or exceed nutrition requirements established by local, state, and Federal statutes and regulations under the USDA nutrition standards
* Meet all local health code standards for the quality of purchased, prepared, and delivered foods

### Non-USDA Program Food

The foods and beverages sold and served outside of the school meal programs meet the USDA Smart Snacks in School nutrition standards and follow Ohio Department of Education guidance, including:

* Food sold at vending machines, snack bars, school stores, school-sponsored fundraising activities, and concession stands on school campuses during the school day
* Food served but not sold at classroom parties, school celebrations, and school meetings before, during, or after school hours
* Food brought in by parents, staff members, and community members

Schools may not sell food until one hour after the end of the last lunch period. In addition, schools must turn off vending machines from the beginning of the breakfast program to one hour after the end of the lunch period.

The District provides a list of celebration ideas and Smart Snack Standard snacks to families and teachers, including non-food celebration ideas. Schools should purchase Smart Snack foods through CMSD School Nutrition Catering Services. If CMSD School Nutrition Services are unavailable, schools must purchase food through a licensed vendor.

### Food Marketing

The District and schools only market the foods and beverages that meet the Smart Snacks in School nutrition standards. The District and schools promote participation in Federal child nutrition programs among students and families.

### Meal Timing

Principals ensure that students are allowed at least ten minutes to eat breakfast and at least twenty minutes to eat lunch. This time begins from the time students receive their meal and are seated. Schools serve lunch at a reasonable and appropriate time of day.

### Rewards and Punishment

Schools cannot use food as a punishment or reward before, during, and after the school day.

### Water

Schools provide unflavored drinking water to all students during mealtimes. Water may come from a drinking fountain, water jug, or another source. In addition, schools regularly maintain water sources and containers in the cafeteria to ensure good hygiene standards.

## Humanware and Social-Emotional Learning

Humanware is an initiative of the District supporting the commitment to providing safe and supportive schools where scholars can succeed and thrive. Humanware advocates for evidence-based best social-emotional learning (SEL) practices.

### Student Quality Standards Service Process (SQS.)

The Student Quality Standards Service Process (SQS) is a system that collects and provides information about community organizations offering programs to students. The SQS system gathers data on types of programming, evidenced-based curriculum utilized, and program concentration areas. The District expects all community organizations providing services and programs to schools to complete the SQS document.

### Promoting Alternative Thinking Strategies (PATHS)

Promoting Alternative Thinking Strategies (PATHS) is an evidence-based curriculum designed to facilitate children's social emotional development from Pre-K through Grade 5. The program provides skill-building for students and teachers. In addition, the program has a strong parent component to encourage family involvement.

### Second Step

The Second Step initiative is an evidence-based classroom program designed to facilitate social and emotional development in grades 6-8. The program provides skill-building for students and teachers in the positive use of social and emotional learning abilities for everyday situations.

### Facing History

Facing History offers an interdisciplinary model for high schools that integrates social-emotional learning, academic rigor, and attention to equity. Facing History's teaching strategies develop students' self-awareness, social awareness, and relationship skills. The District offers and supports this curriculum in grades 9-12.

### Winning Against Violent Environments (WAVE)

The District implements the Winning Against Violent Environments (WAVE) program in every school. The District encourages de-escalation techniques to deter and calm students from situations that might otherwise escalate into violent behaviors.

### Student Support Team (SST)

The Student Support Team (SST) is a problem-solving group of school staff located at each site. The SST addresses students' academic, behavior, and attendance problems through evidence-based interventions.

### K-12 Planning Centers

K-12 Planning Centers are located in each building and managed by trained paraprofessionals. The Planning Center focuses on keeping students in school by providing support and interventions to students, teachers, and families. In addition, the Planning Center promotes social emotional learning in individual or small group evidence-based interventions.

### Rapid Response Team

The District Rapid Response Team addresses all student concerns related to their mental health needs. Crisis Coordinators staff the District Crisis Desk and consult, manage, and deploy resources to all schools and District sites. If they are needed, school counselors, nurses, and psychologists provide stabilization, intervention, and resources to de-escalate the reported crisis.

### Not on Our Watch (N.O.W.)

Not on Our Watch (NOW) decreases the prevalence of bullying and promotes a safe, welcoming environment in all schools through a prevention model and social emotional learning coordinators. In addition, the District integrates current SEL tools that enable social skill-building, self-control, critical thinking, decision making, and the acceptance of differences.

### Class Meetings

Schools use class meetings as a vehicle for classroom-level problem-solving and decision-making. These meetings are an inclusive, proactive, and community-building approach to promoting the well-being of all students and preventing and reducing negative outcomes for students. Adults and students facilitate class meetings daily for approximately 20 minutes. Class meetings may include planning and problem-solving activities, social-emotional skill development, development of study habits, college and career planning, and individual support.

### Student Advisory Committee

Ohio Revised Code Section 3311.742 requires the District to create and support a Student Advisory Council comprised of students from every high school. The District holds Student Advisory Committee meetings quarterly to allow students to analyze data, suggest areas for improvement, celebrate successes, and receive District updates. Approximately 400 students from all high schools participate in the Student Advisory Committee.

## Nursing

The District promotes, guides, and supports the work of District nurses with the following tasks:

* Provide health education to improve student health through behavior and preventing or reducing risk factors of incurring diseases.
* Encourage staff and family health promotion and provide individual and group information sessions for health maintenance and emergencies.
* Sponsor disease prevention and health promotion programs such as
  + Blood pressure checks
  + Blood-borne pathogen lectures
  + Cancer awareness information
  + Sleep education
* Join a school wellness council.
* Maintain a safe physical and psychological environment to support learning.
* Create and maintain partnerships with families, schools, community groups, and individuals that allow sharing and maximizing resources to support the health and welfare of children.
* Form a nursing assessment of a student by creating a case-finding through screening, observation, and direct and indirect referrals.
* Help parents collect medical information they may need for support in an IEP or 504 meeting.

### Immunizations

Student immunization records should comply with state regulations, and schools should keep a computerized or physical copy on file. If a student is not in compliance, schools refer parents to private physicians, Health Department clinics, or a school-based immunization clinic.

### Referrals and Consultation

Nurses notify parents, teachers, and health professionals of screening results and make referrals as necessary. From these consultations, a nurse may develop an IHP (Individual Healthcare Plan). Assistance is also given to parents and staff to find appropriate healthcare providers and teach parents how to access the healthcare system.

School Nurses attend Student Support Team (SST) and 504 meetings when available and when a health issue is involved that can affect the child's education.

Nurses assist in writing the IEPs (Individual Education Plans) and provide documentation as an intermediary with the healthcare system. Parents might also need assistance with barriers in the educational system concerning a medical or emotional issue.

## 100% Tobacco-Free School Campuses

Ohio Revised Code Section 3313.751 prohibits tobacco use on school campuses. Accordingly, the District prohibits all students, staff members, volunteers, and school visitors from using tobacco in any form, at any time (including non-school hours) on District property, including:

* Any District building or facility, including those leased by the District
* Any school grounds, athletic grounds, or parking lots
* Any vehicle owned, leased, rented, or chartered by the District
* Any District-sponsored events, regardless of whether they occur on or off District property

Tobacco includes any product containing, made, or derived from tobacco or nicotine intended for human consumption, whether smoked, heated, chewed, absorbed, dissolved, inhaled, snorted, sniffed, or ingested by any other means. Tobacco products include cigarettes, cigars, little cigars, chewing tobacco, pipe tobacco, and snuff. In addition, tobacco products include any electronic device and related components that deliver nicotine or other aerosolized liquids to the person inhaling from the device, including, but not limited to, an electronic cigarette, cigar, pipe, or hookah. A tobacco product does not include nicotine replacement therapy or pharmacotherapy products (which may contain nicotine) approved to assist individuals in stopping tobacco use. These tobacco products may consist of over-the-counter nicotine replacement products such as patches and gums or prescription medications.

## District Wellness Council

The District convenes a district wellness council (DWC) that meets at least four times per academic year. The DWC establishes goals for and oversees school health and safety policies and programs, including the development, implementation, and periodic review and update of this District Wellness Plan.

The DWC membership represents all school levels and includes, to the extent possible:

* Parents and caregivers
* Students
* Representatives of the school nutrition program (i.e., school nutrition director)
* Physical education teachers
* Health education teachers
* School health professionals (i.e., nurses, mental health and social services staff )
* School administrators (i.e., superintendent, principal, assistant principal)
* School board members
* General public

The DWC includes representatives from various school buildings and reflects the community's diversity to the extent possible. If school representatives or parents cannot attend DWC meetings in person, the District makes opportunities for regular feedback available through various mechanisms.

Each school within the District establishes a school wellness council that convenes to review school-level issues in coordination with the DWC. In addition, each school should establish a school wellness plan coordinator to ensure compliance with the plan and work with the District to promote the Comprehensive Wellness Policy and District Wellness Plan to staff, students, parents, and the community.

## Evaluation

### District Evaluations

The District manages the implementation of the District Wellness Plan, including the delineation of roles, responsibilities, actions, and timelines specific to each school. The District also establishes goals and objectives for nutrition standards for all foods and beverages available, food and beverage marketing, nutrition promotion and education, physical activity, physical education, and other school-based activities that promote student health and wellness. In addition, the DWC solicits feedback from school wellness councils to establish and monitor goals and objectives for the District's schools.

The District collaborates with local research institutions, universities, external partners, and interns, where feasible, to track, analyze, and report on any correlations between improvements in health-promoting environments with education outcomes, such as absenteeism, disciplinary referrals, test scores, average grades, or health measures such as consumption of whole grains, fruits, or vegetables through the school meal programs or BMI, Fitness gram or psycho-social measures such as self-reported "connectedness," or other school climate measures.

The District will also track and annually report other related information, such as findings from food safety inspections, aggregate participation in school meals programs, income reported from competitive food sales, fundraising revenues, and other such information.

School Evaluation

The District recommends that each school use the [Alliance for a Healthier Generation's Healthy Schools Program online tools](https://www.healthiergeneration.org) to complete a school-level assessment based on the Centers for Disease Control and Prevention's School Health Index. The school should create an action plan that fosters implementation and generates an annual progress report following the school-level assessment.

### Triennial Progress Assessments

At least once every three years, the District evaluates compliance with the Comprehensive Wellness Policy and District Wellness Plan, and includes:

* The extent to which schools comply with policy and plan
* The extent to which the policy and plan compare to the Alliance for a Healthier Generation's model wellness policy
* The description of the progress made in attaining the goals of the District's Wellness Plan

The District makes all reports, including the triennial report, accessible via the District website.

## Recordkeeping

The District retains records to document compliance with the requirements of the Comprehensive Wellness Policy, including:

* A copy of the Comprehensive Wellness Policy and District Wellness Plan
* Documentation demonstrating that the Comprehensive Wellness Policy, District Wellness Plan, and most recent implementation assessment have been made available to the public
* Documentation of efforts to review and update the Comprehensive Wellness Policy, including stakeholders involved and methods used to involve stakeholders in the DWC
* The most recent assessment on the implementation of the District Wellness Plan

## Revisions

The DWC updates or modifies the Comprehensive Wellness Policy and District Wellness Plan based on the annual progress reports and triennial assessments but should make updates at least every three years. The DWC may update the policy and plan as District priorities change, community needs change, the District meets wellness goals, and new health science, information, and technology emerge. If Federal or State authorities issue updated guidance or standards, the DWC should incorporate those changes into the policy and plan.

## Annual Notification

Each year, the District informs families and the public about the Comprehensive Wellness Policy and District Wellness Plan, including its content, any updates, and implementation status. The District makes this information available via the District website and District-wide communications. In addition, the District publicizes the name and contact information of the District staff leading and coordinating the DWC and details on how the public can get involved.

### Community Involvement

The District communicates ways that community members, including representatives of the DWC, can participate in the development, implementation, and periodic review and update of this District Wellness Plan. For example, the District informs families of the improvements made to school meals and compliance with school meal standards, availability of child nutrition programs and how to apply, and a description of and compliance with USDA Smart Snacks in School nutrition standards. The District uses electronic mechanisms, such as email or displaying notices on the District's website, and non-electronic means, such as newsletters, presentations to families, or sending information home to families. In addition, the District ensures that communications are culturally and linguistically appropriate to the community and accomplished through means similar to how the District and individual schools communicate other important school information with parents.

## Last Update

* April 19, 2022