Administration Guidelines
Wellness, Physical Activity and Nutrition

Revised 3/4/2020
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In 2005, Pinellas County Schools established School Wellness Policy and the Pinellas County Schools Administrative Guidelines for Wellness, Physical Activity and Nutrition. Since that time, the School Health Advisory Committee annually reviews these Administration Guidelines and updates them to reflect new laws and regulations, changing health trends, and input from healthy school teams and the Pinellas County School Board.

Please communicate these Administration Guidelines with your staff and periodically remind all employees about the importance of these school wellness procedures. Many of the Guidelines are restatements of procedural requirements that must be followed. Other Guidelines reflect best practices in school wellness that are encouraged by the District. The appendixes at the end of this document were created for schools to use when communicating a specific issue to parents and/or staff. Please share these single topic handouts as frequently as possible.

The Pinellas County Schools Administrative Guidelines for Wellness, Physical Activity and Nutrition, 2019-2020 is the framework for all Pinellas County Schools to become healthier places to learn and work.

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INTRODUCTION

The Child Nutrition and WIC Reauthorization Act of 2004 established into law a local school wellness policy provision. This policy has been further strengthened by the Healthy, Hunger-Free Kids Act of 2010 (HHFKA) and provisions of the USDA final rule. https://fns-prod.azureedge.net/sites/default/files/tn/LWPsummary_finalrule.pdf. The wellness policy provision requires every school district that participates in the federal school meals programs to enact a wellness policy which includes the following:

1. Specific goals for nutrition promotion and education, physical activities and other school-based activities that promote student wellness.
2. Standards and Nutritional Guidelines for all foods and beverages sold to students on the school campus during the school day that are consistent with Federal regulations for school meal nutrition and smart snacks standards.
3. Standards for all foods and beverages provided, but not sold, to students during the school day (including classroom parties, classroom snacks brought by parents, or other foods given as incentives).
4. Policies for food and beverage marketing that allow marketing and advertising of only those foods and beverages that meet the Smart Snacks in School nutrition standards.
5. Description of public involvement, public updates, policy leadership, and evaluation plan.

Since 2006, Pinellas County Schools has annually published the Administration Guidelines for Wellness, Physical Activity and Nutrition. Since 2007, Pinellas has used the Alliance for a Healthier Generation’s Healthy Schools Program Framework of Best Practices and assessment tools for schools to review their progress toward the District’s Wellness Guidelines. Beginning in the 2015-2016 school year, these Wellness Guidelines were reorganized to mirror the Healthy School Program Framework of Best Practices. This revised format will make it easier for schools to review the Wellness Guidelines and then assess their progress on the Alliance for a Healthier Generation’s website.

In addition to the Annual Summary Report on Administrative Guidelines on Wellness, Physical Activity and Nutrition, Pinellas County Schools will monitor progress toward specific goals within in Pinellas County Schools District Strategic Plan, Strategic Direction: Safe Learning Environment, Goal 3: The District will improve the safety, security, health, and management of the work and learning environment.

Pinellas County Schools acknowledges the importance of diversity and culturally inclusive practices in all school wellness efforts.
SCHOOL HEALTH AND SAFETY POLICIES AND ENVIRONMENT

A. School Health Advisory Committee (F.S. 381.0056)

1. The school district and/or individual schools within the district will create, strengthen or work within existing School Health Advisory Committee (SHAC) to develop, implement, monitor, review and, as necessary, revise school nutrition, physical activity, social/emotional wellness policies, and all other components of the Whole School, Whole Community, Whole Child Model (WSCC).

2. SHAC will serve as a resource to school sites for implementing those policies.

3. A School Health Advisory Committee (SHAC) consists of a group of individuals representing the WSCC Model.

4. The WSCC model, is CDC's framework for addressing health in schools. The WSCC model is student-centered and emphasizes the role of the community in supporting the school, the connections between health and academic achievement and the importance of evidence-based school policies and practices. The WSCC model consists of ten components representing: physical education and physical activity, nutrition environment and services, health education, social and emotional school climate, physical environment, health services, counseling, psychological and social services, employee wellness, community involvement, and family engagement.

B. Monitoring and Evaluation

1. The superintendent or designee will ensure compliance with established district wide nutrition and physical activity.

2. In each school, the principal or designee will ensure compliance with those policies in his/her school.

3. All schools are registered with the Alliance for Healthier Generation’s Healthy School Program and may use its resources to establish effective practices that promote wellness. On an annual basis, schools will use the Healthy School Assessment instrument to assess their school’s nutrition and physical activities environment and policies.

4. School food services staff members, at the district or school level, will ensure compliance with nutrition policies within school food services areas and will report on this matter to the superintendent (or at the school level, to the school principal). The school district will report to the superintendent and school board on the most recent USDA Administrative Review, review findings, and any resulting changes.

5. The superintendent or designee will write an annual summary report on district-wide compliance with the district’s established nutrition and physical activity wellness policies and guidelines based on aggregated data from all schools’ Healthy School Assessment. The report will be provided to the school board and distributed to the School Health Advisory Committee, parent/teacher organizations, school principals, school health services personnel, and posted on the district’s website.
6. The district in conjunction with SHAC will revise, as necessary, the wellness policies, administrative guidelines, and develop work plans to facilitate implementation.

C. Healthy Environment

1. The school environment is supported by programs and policies that nurture positive behavior, ensure environmental and physical safety, and promote a feeling of belonging and respect for all students, staff and families. (Safe and Healthy Schools Florida)

2. Each school shall incorporate a student health, wellness, or fitness goal (or objective that supports another goal) into their School Improvement Plan. (School Wellness, eLearning Center)

3. All schools should convene a Healthy School Team (F.A.C. 5P-1.003) that meets regularly with members representing the ten components of the Whole School, Whole Community, Whole Child (WSCC) Model. The Model is made up of the following:
   - Health Education
   - Physical Education & Physical Activity
   - Nutrition Environment and Services
   - Health Services
   - Counseling, Psychological & Social Services
   - Social and Emotional Climate
   - Physical Environment
   - Employee Wellness
   - Family Engagement
   - Community Involvement

   The Healthy School Team will convene to address the health concerns of the school and to annually update the school’s Healthy Schools Program Assessment. All members should receive an electronic communication when unable to attend.

4. All Healthy School Teams shall:
   a. Be responsible for ensuring all competitive food and beverages sold to students on a school campus meet or exceed the USDA’s Smart Snacks in School nutrition standards (including vending, fundraising, snack carts, and school stores).
   b. Ensure that all fundraisers both within and outside the school day are in accordance with the Smart Snacks in Schools standards.
   c. Report compliance to the School Wellness Office for overall compliance with the District’s wellness policy/guidelines.
   d. Annually, complete the Healthy School program twice a year (pre and post assessment)

5. All Healthy School Teams are encouraged to utilize resources from:
   a. Alliance for a Healthier Generation “Healthy Schools Program,”
6. All Healthy School Teams are encouraged to apply for recognition with:
   a. Alliance for a Healthier Generation “Healthy Schools Program,”
      http://www.healthiergeneration.org/

7. Schools are encouraged to allow family and community members to have access to indoor and outdoor school facilities outside school hours to participate in or conduct health promotion and education programs. (Healthy School Program & Safe and Healthy Schools Florida)

8. All school cafeterias and dining areas should be healthy nutrition environments. Pinellas County Schools should ensure that all students have daily access to school meals (breakfast and lunch.) Schools are strongly encouraged to have lunch within the school day with equal access throughout the day for all students.
   a. (USDA 7 CFR 210 Subpart C, 210.10 [f]) requires that school lunch periods must be between 10:00am and 2:00pm. Adequate time should be allowed for students to receive and consume meals, and cafeterias should provide a pleasant dining environment. The minimum recommended eating time for each student after being served is at least 10 minutes for breakfast and 20 minutes for lunch.
   b. Each elementary, middle, and high school shall make a breakfast meal available if a student arrives at school on the school bus less than 15 minutes before the first bell rings and shall allow the student at least 15 minutes to eat the breakfast. (F.S. 1006.06).
   c. Free potable water will be available to students where meals are served (Healthy, Hunger-Free Kids Act of 2010; Sec. 203)

9. Schools should provide student’s access to hand washing or hand sanitizing throughout the school day.

10. Schools should not advertise or market foods and beverages that do not meet Smart Snack criteria to students. (e.g., signs or marketing materials promoting these foods are not visible to students on the school campus during the school day).
a. School-based marketing should be consistent with nutrition education and health promotion. Examples: vending machine covers that promote water, pricing structures that promote healthy options in a la carte lines or vending machines, sales of fruit for fundraisers and coupons for discount gym memberships.

11. Food and Beverages sold to students on the school campus at events outside of the school day should offer and promote water, fruits and vegetables as an option.

12. Schools may not give students food as a reward and may not withhold food as punishment. (Healthy Schools Program)

NUTRITIONAL GUIDELINES

For purposes of these guidelines:

A. Elementary Schools are schools providing regular or other instruction at one or more grade levels from PK through grade 5. This category includes schools serving grade 6 if also serving one or more grades PK through 5 (e.g., a K-6 school).

B. Middle Schools are schools providing regular or other instruction at one or more grade levels from 6 to 8.

C. High Schools are schools providing regular or other instruction at one or more grade levels from 9 to 12.

D. Schools containing K-12 grade levels should follow elementary school guidelines and schools containing 6-12 grade levels should follow middle school guidelines.

Part One: Nutrition Services

a. The Healthy, Hunger-Free Kids Act of 2010 required USDA to establish nutrition standards for all foods and beverages sold in schools, beyond the National School Lunch and Breakfast Programs. This new rule, known as the “Smart Snacks” standards, carefully balances science-based nutrition guidelines with practical and flexible solutions to promote healthier eating on campus. USDA published an Interim Final Rule that takes effect on July 1, 2014 as a revision to the Regulations Governing Federally Funded School Meals Programs USDA 7 Code of Federal Regulations Parts 210,220,245. These rules apply to all foods or beverages sold to students as in a la carte in the cafeteria, in school stores, snack bars, vending machines and/or fundraisers.

i. The law specifies that the nutrition standards shall apply to all foods sold:
   1. outside the school meal programs;
   2. on the school campus; and
   3. at any time during the school day.

ii. For the purposes of this rule USDA has established that the School Campus is all areas of the property under the jurisdiction of the school that are accessible to students during the school day. USDA has also established the School Day as the period from the midnight before, to 30 minutes after the end of the official school day.

b. The Food Services Department has established communication systems to inform
students and their families of the school menus, nutritional information of foods, and food pricing information.

c. The school meals program reflects the diversity of the student population by posting the lunch menus at minimum in both English and Spanish for each month’s menu on the district’s website.

d. School nutrition staff shall be offered annual professional development. (Healthy Schools Program)

e. Standards for Foods; these apply to all grade levels

The following specific nutrition standards pertain to all food and beverages served or made available to students that are not sold on school campuses. School meals and all foods sold to students are governed by federal regulations. (7 CFR Parts 210 & 220)

i. Any food sold in schools must:
   1. Be a “whole grain-rich” grain product; or
   2. Have as the first ingredient a fruit, a vegetable, a dairy product, or a protein food; or
   3. Be a combination food that contains at least ¼ cup of fruit and/or vegetable.

ii. Accompaniments
   1. Accompaniments such as ketchup, mayonnaise, cream cheese, salad dressing and butter must be included in the nutrient profile as part of the food item sold

iii. Foods must also meet several nutrient requirements:
   1. Calorie limits:
      a. Snack items: ≤ 200 calories
      b. Entrée items: ≤ 350 calories

   2. Sodium limits:
      a. Snack items: ≤ 200 mg
      b. Entrée items: ≤ 480 mg

   3. Fat limits:
      a. Total fat: ≤ 35% of calories
      b. Saturated fat: < 10% of calories
      c. Trans fat: zero grams
         i. Exemptions include:
            1. Reduced fat cheese
            2. Nuts and seeds and nut/seed butters
            3. Dried fruit with nuts and/or seeds with no added nutritive sweeteners or fat
            4. Seafood with no added fat; and
            5. Part-skim mozzarella

   4. Sugar limit:
      a. ≤ 35% of weight from total sugars in foods
         i. Exemptions include:
1. Dried/dehydrated fruits or vegetables (no added nutritive sweeteners)

2. Dried fruits with nutritive sweeteners for processing and/or palatability (e.g., dried cranberries, tart cherries, and blueberries)

3. Exempt dried fruit with only nuts/seeds (no added nutritive sweeteners or fat)

4. Exemptions from meeting all nutrient standards:
   a. Fruits that are fresh, frozen or canned packed in water, 100% juice, light syrup or extra light syrup
   b. Vegetables that are fresh, frozen or canned with no added ingredients except water and a small amount of sugar for processing
   c. Entrees that are served as part of the National School Lunch program are exempt the day of service and the school day after

f. Nutrition Standards for beverages; vary by grade level:

   i. All schools may sell:
      1. Plain water (with or without carbonation)
      2. Unflavored low-fat milk
      3. Unflavored or flavored fat free milk and milk alternatives permitted by National School Lunch Program/School Breakfast Program (NSLP/SBP)
      4. 100% fruit or vegetable juice and
      5. 100% fruit or vegetable juice diluted with water with no added sweeteners

   ii. Portion Sizes: The following maximum portion size restrictions pertain to all foods and beverages served or made available to students that are not sold on school campuses. School meals and all foods sold to students are governed by USDA regulations.

      1. Elementary schools may sell up to 8-ounce portions. There is no portion size limit for plain water.
      2. Middle schools may sell up to 12-ounce portions of milk and juice.
      3. There is no portion size limit for plain water.
      4. High schools may sell up to 12-ounce portions of milk and juice. There is no portion size limit for plain water.
      5. Additionally, for high schools the standards allow “no calorie” and “lower calorie” beverage options for high school students.
      6. No more than 20-ounce portions of Calorie-free, flavored water with or without carbonation) and other flavored and/or carbonated beverages that are labeled to contain < 5 calories per 8 fluid ounces or ≤ 10 calories per 20 fluid ounces.
      7. No more than 12-ounce portions of beverages with ≤ 40 calories per 8 fluid ounces, or ≤ 60 calories per 12 fluid ounces.
iii. Caffeine:
   1. Elementary and Middle Schools: foods and beverages must be caffeine-free with the exception of trace amounts of naturally occurring caffeine substances.
   2. High Schools have no caffeine restrictions.

**Part Two: Competitive Foods and Beverages (Smart Snacks)**

a. **Healthy Fundraising -** All foods and beverages sold as a fundraiser outside of the school meals program during the regular and extended school day must meet the USDA Smart Snack Standards. School-sponsored food fundraisers which meet the nutrition standards as defined and required in 7 CFR 210.11 are permitted to occur on any school day provided it is (30) minutes after the conclusion of the last designated meal service period. (FDACS 5P-1.003) The Alliance Smart Snack Calculator can be used for a resource. [https://foodplanner.healthiergeneration.org/calculator/](https://foodplanner.healthiergeneration.org/calculator/)

b. **Unless being sold by the district school food service program, it is impermissible for any competitive food item sold to students as a fundraiser or otherwise during the school day to consist of ready-to-eat combination foods of meat or meat alternate, as defined in (7 CFR 210.10, and grain products as defined in 7 CFR 210.11). For example, pizza or hot dog on bun.**

c. **Classrooms:** Elementary classrooms may allow one nutritious, Smart Snack compliant snack per day under the teacher’s supervision. The snack may be in the morning or afternoon but may not be at the same time as meal periods for that class. The snack may be provided by the school food services, the teacher, parents or other groups and must be at no cost to students.

d. **School Nurses:** These guidelines do not apply to school nurses during the course of providing health care to individual students.

e. **School Events:** Students may be given Smart Snack compliant foods and beverages during the school day. Beginning 2019-2020 school year, there will be no exempted days to the guideline.

f. **Athletic, Band and Other Competitions:** The nutrition guidelines do not apply to students who leave campus to travel to athletic, band or other competitions. The school day is considered to have ended for these students. School activities, athletic functions, etc. that occur after the normal school day are not covered by these guidelines.

g. These guidelines do not restrict what parents may provide for their own child’s lunch or snacks.

**Part Three: Celebrations and Rewards**

a. All foods and beverages offered on the school campus during the school day and the
extended school day will meet or exceed the USDA Smart Snacks in School nutrition standards. This includes celebrations and parties, classroom snacks, and rewards and incentives.

b. Foods and beverages will not be used as a reward, or withheld as punishment for any reason, such as for performance or behavior. Using food as a reward or as a punishment, undermines healthy eating habits and interferes with children’s ability to self-regulate their eating.

iv. The district will provide:
   1. A list of healthy and non-food ideas for parents and teachers, [https://www.healthiergeneration.org/take-action/schools/wellness-topics/smart-snacks/celebrations](https://www.healthiergeneration.org/take-action/schools/wellness-topics/smart-snacks/celebrations)
   2. A list of alternative ways to reward children for teachers and other school staff. [https://www.healthiergeneration.org/take-action/schools/wellness-topics/nutrition-services/non-food-rewards](https://www.healthiergeneration.org/take-action/schools/wellness-topics/nutrition-services/non-food-rewards)

HEALTH EDUCATION

A. All teachers of health education use an age-appropriate sequential health education curriculum that is consistent with state or national standards for health education. (Healthy Schools Program and Safe and Healthy Schools Florida)

B. Pinellas County Schools shall implement the Florida Standards for Health Education that are based upon established health behavior theories, models, and evidence-based research, as well as "best practices." The Florida Standards for Health Education correspond to the National Health Education Skills and corresponding standards. (Safe and Healthy Schools Florida)

   a. Core Concepts- Comprehend concepts related to health promotion and disease prevention to enhance health.

   b. Internal and External Influence- Analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

   c. Accessing Information- Demonstrate the ability to access valid health information, products, and services to enhance health.

   d. Interpersonal Communication- Demonstrate the ability to use interpersonal-communication skills to enhance health and avoid or reduce health risks.

   e. Decision Making- Demonstrate the ability to use decision-making skills to enhance health.

   f. Goal Setting- Demonstrate the ability to use goal-setting skills to enhance health.

   g. Self-Management- Demonstrate the ability to practice advocacy, health-enhancing behaviors, and avoidance or reduction of health risks for oneself.
h. Advocacy- Demonstrate the ability to advocate for individual, peer, school, family, and community health.

C. Professional Development for Health Education

a. All elementary teachers are encouraged to participate in professional development in health education. (Healthy School Program and Safe and Healthy Florida)

b. All secondary teachers of health education participate at least once a year in professional development. (Healthy School Program and Safe and Healthy Florida)

D. Pinellas County Schools aims to teach, encourage and support healthy eating by students. Nutrition education shall be aligned to national guidelines identified by the Alliance for a Healthier Generation: http://www.healthiergeneration.org/. Schools shall provide nutrition education and engage in nutrition promotion that:

a. Is provided at each grade level as part of a sequential, comprehensive, standards-based health education program designed to provide students with knowledge and skills necessary to promote and protect their health. Nutrition lessons are posted in eLearning Center under Health Education.

b. Is not only part of health education classes but also classroom instruction in subjects such as math, science, language arts, social sciences and elective subjects.

c. Includes enjoyable, developmentally appropriate, culturally relevant, participatory activities, such as contests, promotions, taste testing, farm visits and school gardens.

d. Promotes fruits, vegetables, whole grain products, low-fat and fat-free dairy products, healthy food preparation methods and health-enhancing nutrition practices.

e. Emphasizes caloric balance between food intake and energy expenditure (physical activity/exercise.)

f. Involves a collaborative and coordinated effort between food services and the school faculty.

g. Teaches media literacy with an emphasis on food marketing.

h. Includes training for teachers and other staff.

i. Involves sharing information with families and the broader community to positively impact students and the health of the community (e.g., district website and newsletters).
PHYSICAL EDUCATION AND OTHER PHYSICAL ACTIVITY PROGRAMS

Pinellas County Schools encourages regular physical activity as a personal behavior; students need opportunities for physical activity and physical education.

A. The K-12 Physical Education Program shall implement the Florida Standards for Physical Education aligned with the SHAPE (Society for Health and Physical Educator’s) America’s National Standards and the Florida State Standards: (Safe and Healthy Schools Florida)

1. The physically literate individual demonstrates competency in a variety of skills and movement patterns.
2. The physically literate individual applies knowledge of concepts, principles, strategies and tactics related to movement and performance.
3. The physically literate individual demonstrates the knowledge and skills to achieve and maintain a health-enhancing level of physical activity and fitness.
4. The physically literate individual exhibits responsible personal and social behavior that respects self and others.
5. The physically literate individual recognizes the value of physical activity for health, enjoyment, challenge, self-expression and/or social interaction.

B. K-12 physical education students will have their Body Mass Index (BMI) measured and recorded in the FitnessGram software. All physical education students’ grades 3-12 will be measured in all remaining health related fitness assessments; PACER, Sit & Reach, Curl Ups, Trunk Lift, and Push Ups. Physical education teachers will record this data using the FitnessGram software. Pre and Post assessment data for physical education students must be recorded electronically by the annually announced deadlines. Prior to conducting the FitnessGram assessments, parents will be notified and given the option to “opt out” of the BMI assessment. Following the completion of the Pre and Post assessment, the Parent/Student Fitness Report shall be provided to parents and students.

C. All teachers of physical education are encouraged to participate at least once a year in professional development in physical education.

D. Physical education programs are encouraged to promote student participation in a variety of community physical activity options.

E. Physical Education programs shall provide appropriate practices inclusive of students with special needs.

F. Physical activity shall not be used as a deprivation or punishment.
   Students shall not be deprived of physical education to complete an academic assignment.

Elementary School Physical Education Programs and Physical Activity

A. Physical Education is part of the required curriculum in elementary school and MUST be scheduled for 150 minutes per week and MUST be scheduled for a minimum of 30 minutes
for any day that physical education is provided.

B. Physical education classes should be staffed by a certified physical education teacher and, when appropriate, with additional physical education assistants. Schools are encouraged to consider national guidelines for the student/teacher ratio of 1:25 (Safe and Healthy Schools Florida); PreK-1: 20, K-3 1:28, 4-5:35 (PCS).

C. Physical education shall consist of physical activities of at least a moderate intensity level and for duration sufficient to provide a significant health benefit to students, subject to the differing capabilities of students.

D. All elementary schools will offer physical activity EVERYDAY through physical education, recess or both.

E. Schools shall provide opportunities to participate in classroom physical activity breaks daily.
   1. Schools shall discourage extended periods (i.e., periods of two or more hours) of inactivity.
   2. Classroom physical activity break resources are posted in the eLearn center under health education.

F. Teachers and other school personnel will not use physical activity (e.g. running laps, push-ups etc.) as punishment.

G. Physical activity during the school day (including, but not limited to recess, classroom physical activity breaks or physical education) will not be withheld as punishment for any reason.

H. All elementary schools will offer 20 minutes of recess, daily.
   1. Recess will be safe, supervised, unstructured, daily and consecutive free-play.
   2. The school shall determine the logistics for implementing the recess requirement including, but not limited to the development of master schedules, designation of spaces that will be used, and establishing weather guidelines.

Elementary After-School Child-Care Programs

A. By contract, Before and Afterschool Care Providers will align their programs to the guidelines of the Alliance for a Healthier Generation.

Elementary After-School Tutoring Programs

A. Tutoring programs offered on school campuses should meet the “Administrative Guidelines on Wellness, Physical Activity and Nutrition.”

Middle School Physical Education and Activity
A. Middle School Physical Education

1. Students in 6th through 8th grade will participate in a minimum of one semester of physical education.

2. A certified physical education teacher should staff physical education classes.

3. Schools are encouraged to consider national guidelines for the student/teacher ratio of 1:30 (Safe and Healthy Schools Florida); 1:37 (PCS).

4. Middle School Physical Education teachers should use the following weighting components for each marking period: Participation (25%), Skill (25%), Knowledge (25%), and Fitness Goal Completion (25%) based on Fitness Improvement Rubric (School Board Policy 5420.02).

5. The physical education requirement for middle school students shall be waived for a student who meets the following criteria: (FLDOE 1003.455)
   a. The student is enrolled in a remedial course
   b. The student’s parent indicates in writing to the school that:
      i. The student will enroll in another course from among those offered as options by the school district, OR
      ii. The student is participating in physical activities outside the school day which are equal to or in excess of the mandated requirement.

6. Schools must notify the parents of the options available prior to scheduling a student into physical education.

B. Middle School Interscholastic Sports

1. The middle school sports programs include:
   a. Boys and Girls Volleyball
   b. Boys and Girls Basketball
   c. Boys and Girls Track and Field
   d. Cheerleading (non-competitive)

C. Middle School After-School Child-Care Programs

1. By contract, Before and After-School Care Providers will align their programs to the guidelines of the Alliance for a Healthier Generation.

D. Middle School After-School Tutoring Programs
1. Tutoring programs offered on school campuses should meet the “Administrative Guidelines on Wellness, Physical Activity and Nutrition.”

High School Physical Education and Activity

A. High School Physical Education

1. Students are required to have one credit in Health Opportunities through Physical Education (HOPE). A school may not require that the course be taken in 9th Grade.

2. A certified physical education teacher shall staff Physical Education classes.

3. Schools are encouraged to consider national guidelines for the student/teacher ratio of 1:35 (Safe and Healthy Schools Florida) 1:37 (PCS).

B. High School Physical Education Waivers

1. Athletics
   a. Participation in an interscholastic sport at the junior varsity or varsity level for two full seasons shall satisfy the one-credit requirement in physical education.

2. Marching Band
   a. One semester of marching band with a grade of C or better waives the 0.5 credit requirement of a physical education elective. The student must still earn 0.5 credit in the Personal Fitness Course.
   
   b. Students in marching band should complete the athletic physical examination each year by a licensed physician before participation in band activities.

3. JROTC
   a. Completion of 2 Years in a Reserve Officer Training Corps (ROTC) class, a significant component of which is drills, shall satisfy the one-credit requirement in physical education and the one-credit requirement in performing arts.
   
   b. This credit may not be used to satisfy the personal fitness requirement or the requirement for adaptive physical education under an individual education plan (IEP) or 504 plan.

High School 18-Credit Graduation Option Requirements

Health and physical education are not required in this option.

High School Interscholastic Sports and Academic Eligibility

A variety of Florida High School Activities Association and Department of Education-sanctioned athletics are offered for high school students. All students are encouraged to take part in these activities.
High school academic eligibility is a privilege, and it is based upon state guidelines, academic standing and citizenship. Transferring from one school to another and changing residence from one parent or guardian to another all have a bearing on athletic eligibility. Students and parents having individual questions about their child’s eligibility should contact their school athletic director or principal.

After-School Tutoring Programs

Tutoring programs offered on school campuses should meet the “Administrative Guidelines on Wellness, Physical Activity and Nutrition.”

Safe Routes to School Program

Elementary schools are encouraged to work with the Pinellas County Health Department, local health organizations, public works, public safety, and police personnel to implement a Safe Routes to School program (a comprehensive SRTS program includes all 5 E’s: education, encouragement, enforcement, engineering, and evaluation). Schools and PTAs are encouraged to partner together to assess walking and biking routes for safe access to elementary schools, address areas and routes that may need improvement to assure safety for the parent and student groups, and to assist parents in organizing adult supervised walking and biking groups. If funding is available for Safe Routes to Schools, the district encourages schools to apply for funds to further improve their programs.

HEALTH SERVICES

A. Purpose and scope of the school health program outlined in Sections 381.0056 and 381.0057, F.S., are defined by written policies and other documentation.
   a. A district-wide procedure/policy manual that describes specific written school health procedures and incorporates approved state guidelines for crucial areas (e.g., diabetes, asthma, epi-pens) should be available in all schools.

   b. Policies and procedures are in place for mandatory reports of child abuse, abandonment, or neglect; mandatory reports of death; per Section 39.201, F.S.

   c. Responsibilities of different classifications of school health personnel are clearly defined, applied and available to appropriate individuals in accordance with the Florida Nurse Act, Sections 464.001 -464.027, F.S.

   d. Community health resources to provide consultation and referral by the school health program must be in place. Section 381.0056 (5)(a)(14), F.S.

   e. Community referral processes to include dental, medical, vision, hearing, social work, mental health and parenting.

   f. The School Health Advisory Committee, Florida Department of Health in Pinellas County and Pinellas County Schools shall develop a School Health Services Plan each year. Section 381.0056 (5)(a), F.S.,

   g. The district school board includes health services and health education as part of the comprehensive plan for the school district. Section 381.0056 (7)(a), F.S.
h. At the beginning of each school year, the district school board provides parents and guardians with information concerning ways that they can help their children to be physically active and to eat healthful foods. Section 381.0056 (6)(g), F.S.,

i. At the beginning of each school year, the district informs parents or guardians in writing that their children will receive specified health services as provided for in the district health services plan and notifies parents of the protocol for exemption.

j. Adequate physical facilities are available for health services in each school in accordance with DOE State Requirements for Educational Facilities. Section 381.0056(6)(b), F.S.

B. The number of health personnel is adequate to meet the standards of the Task Force on Standards of School Health Nursing Practice.

a. There is an adequate staffing ratio of nurses to students according to national standards. *Florida average: 1:2251. Staffing ratio of registered nurses to students in Pinellas County is: 1:1758.

b. PCS must continue to strive to meet the recommended ratio of at least one nurse in every school building as recommended by the Centers for Disease Control and Prevention and the American Academy of Pediatrics. Currently, a school nurse or LPN is present at each K-12 school at least one day each week.

c. The school nurse or other health services provider promotes effective management of asthma, diabetes and food allergies with students and their families. Schools nurses are encouraged to promote physical activity, healthy eating, tobacco use prevention and quitting tobacco use, and prevention of unintentional injuries, violence, suicide, HIV, other STDs, and unintended pregnancy.

d. The school nurse or other health services provider should collaborate with other school staff members to promote student health and safety in at least six of the following ways:

   i. Develop plans to address student health problems (e.g., individual health care plans, individual education plans, 504 plans, school team plans)
   ii. Provide professional development
   iii. Develop and revise policy to meet accepted medical standards
   iv. Identify, revise or develop curricula or units/lessons
   v. Develop and implement school-wide and classroom activities

e. Develop School Improvement Plans

C. Establish communication systems with other school staff

a. The school nurse should adhere to a District-developed system to identify and monitor students with chronic health conditions.

b. The system for referring students, as needed, to appropriate school-
community-based health services includes:

c. Contact parents of students identified as potentially needing additional health services and recommend that the students be evaluated by their primary health care provider or specialist.
d. Contact parents of students without a primary health care provider and give information about child health insurance programs and primary care providers.
e. Referral information is distributed widely (e.g., through flyers, brochures, website, student handbook, health education class) so that students, staff, and families can learn about school and community services without having to contact school staff.
f. Staff members are given clear guidance on referring students to school counseling, psychological and social services.
g. Referral forms are easy for staff members to access, complete, and submit confidentially.
h. A designated staff person (e.g., school nurse, counselor) regularly reviews and sorts referral forms and conducts initial screening.
i. With written parental permission, additional information (e.g., questionnaires, relevant records, brief testing) is gathered as necessary and in compliance with FERPA.
j. Written consent is obtained, in compliance with HIPAA, to gather relevant records from other professionals or agencies, if applicable.
k. A list is kept and regularly updated of youth-friendly referral providers along with basic information about each (e.g., cost, location, language, program features, previous client feedback).
l. Meetings are held with all relevant parties to discuss referral alternatives.
m. Potential barriers (e.g., cost, location, transportation, stigma) and how to overcome them are discussed.
n. Follow-up (e.g., via telephone, text messaging, email, personal contact) is conducted to evaluate the referral and gather feedback about the service.
o. A status report is provided to the person who identified the problem, if applicable and in compliance with FERPA and/or HIPAA.

D. Professional development is provided to all staff members regarding the referral process.

E. Adequate numbers of staff are trained and currently certified to provide first aid and CPR at all school sites. Average number of staff per school trained and currently certified in First Aid and CPR ___3____.

F. There is a written policy and procedure to ensure timely and proper disposal of expired medications.

G. All schools should follow a system for collecting student health information prior to school entry and every year thereafter and communicate that information in writing to all appropriate staff members.

H. The district and/or county health department conduct training and evaluation to ensure that health staff is qualified and adequately trained. Staff is trained in medication administration at all school sites.
1. In-service training is available and a reasonable amount of time is allowed for health personnel to attend.

2. Background screening is performed for applicable non-instructional school district or county health department employees and contractors in accordance with Sections 1012.465 and 381.0059, F.S.

3. In-Service training is available that supports the safe delivery of health services and a reasonable amount of time is allowed for health personnel in all schools to attend.

I. Policies and procedures regarding cumulative health records insure that they are maintained on all students, available to appropriate personnel, confidentiality is maintained and elements included meet requirements outlined in DH Form 3041 and are in accordance with Section 100.22, F.S.

   1. The cumulative health record contains major health problems that may be significant educationally or pertain to a child's safety or the safety of others.

   2. Health Services staff receives training on policies related to creating, managing, and confidentially securing student health records.

J. In-service training provided to teachers and staff to help them identify, refer, and manage students with special health needs.

   1. Health Services staff provides developmental activities related to health services for non-instructional personnel. Training should include district policy and procedure, and should be student-specific if applicable. Trained personnel must be periodically monitored for adherence to policy and procedure, and retrained if necessary.

   2. There is an established process by which school personnel can refer students to the school nurse.

K. The district has created a procedure to standardize the scope and quality of health screening.

   1. A policy/procedure is in place to monitor referral and follow-up for all students failing screenings.

   2. Procedures are in place to monitor adherence to compulsory school entrance requirements for immunizations and physical exams pursuant with Section 1003.22 F.S. and 64D-3.011 (3) Florida Administrative Code.
COUNSELING, PSYCHOLOGICAL & SOCIAL SERVICES

A. Qualified professionals (e.g. school psychologists, school social workers, school counselors, and school nurses provide student support services for behavioral, mental, physical, social, emotional and academic issues to all students.

1. The district has a comprehensive, written Student Services Strategic Plan.

2. Student support services are provided by certified and/or licensed professionals who are employed or contracted by the district.

3. The National Association of School Psychologists recommendation is 1 per 500 students in a comprehensive service delivery model; School Social Workers Association of America recommends 1 per 250 students; American School Counselor Association recommends 1 per 250 students.

   a. The ratio of licensed and/or certified school psychologist per student in the district is 1:1,262.
   b. The ratio of licensed and/or certified school social worker per student in the district is 1:990.
   c. The ratio of licensed and/or certified school counselors per student in the district is 1:476.

B. Student Support Services provide school-wide, prevention supports to students for behavioral, mental, physical, and academic issues, career assistance, and crisis intervention.

1. Schools have policy/procedures in place to provide students with learning supports such as counseling.

2. Schools provide both individual and group learning supports for students.

3. Schools provide academic advisement and career counseling to all students.

4. The district has crisis intervention policy and training for crisis intervention providers.

5. The district offers all schools 2 hours or more of school-wide training with one of the FDOE-approved youth suicide prevention training. Health Education teachers are provided with suicide prevention training. This is included as part of both the middle and high school health curriculum.

C. Student Support Services collaborate with community organizations and other school staff to promote student health and safety.

1. Counseling psychological, or social services collaborate with other school staff members in the following ways:
1. Develop plans to address student health problems (e.g., individual health care plans, individual education plans, 504 plans, school team plans)
b. Provide professional development
c. Develop policy
d. Identify, revise or develop curricula or units/lessons
e. Develop and implement school-wide and classroom activities
f. Develop School Improvement Plans
g. Establish communication systems with other staff members

2. The district has procedures for community referral processes that include:
   a. Mental Health
   b. Social Services
c. Counseling
d. Medical
e. Dental

3. Student Support Services identify and monitor students with emotional, behavioral and mental health needs.

4. Student Services staff work within a school’s existing Multi-tiered System of Supports (MTSS) and are often members of the School Based Leadership Team (SBLT). MTSS is a systematic, data-based, problem-solving framework used to identify students who may be in need of increasingly intensive school-based supports and/or referral to a community agency.

   a. School Based Leadership Teams (SBLTs) review school-wide data on a regular basis to identify the effectiveness of core (Tier 1) strategies related to critical indicators of student success (e.g., grades and academic assessment, attendance, referrals and suspensions, etc.).
   b. If a significant percentage of students (i.e. >20%) do not meet the desired outcome then SBLTs plan for modifications of core strategies to impact all students while also considering the need for supplemental (Tier 2) and intensive (Tier 3) support for those students with the most severe and intense performance discrepancies.
   c. If core success is evident (i.e. <20% do not meet the desired outcome) then SBLTs plan for supplemental and intensive support for those students demonstrating additional need.
   d. Student Services staff are trained to provide parents with information on referring to community agencies if, at any point, it is determined appropriate for students in any tier.
   e. Student Services staff are trained to follow-up and obtain a release of information to determine if community agency referrals are followed through upon and if so to facilitate coordinated support to students between community agencies and schools.

5. Schools should provide a process to aid students during school and life transitions.

6. Schools should have a system in place to identify and refer students involved in violence (e.g., child abuse, dating violence, sexual assault, bullying, harassment,
fighting, suicide and self-harm behaviors).

7. Schools should identify and address tobacco use by taking the following actions with students who use tobacco:
   a. Provide a strong message regarding the importance of totally abstaining from tobacco use
   b. Provide self-help materials
   c. Provide referral to tobacco-use cessation counseling

8. The district has a procedure to assess the effectiveness of strategies to involve parents and guardians in interventions.

D. Safe and Supportive School Environment

1. Schools should follow district policy and procedure to promote student involvement in activities that foster the student’s sense of belonging and connectedness.

2. Schools should use consistent positive teaching and reinforcement strategies to reduce the occurrence of violence and bullying as required by 1006.147 F.S.

3. Schools should consistently monitor and report violence and bullying as required by 1006.147 F.S.

4. Schools should address violence and bullying in their School Improvement Plan.

5. District policies are in place to address social/emotional health for students and staff.

6. The district should implement the following components of a comprehensive tobacco-free school policy:
   a. A statement of rationale for the policy and definitions of tobacco and tobacco use.
   b. The policy that requires that all school buildings, grounds, campuses, housing, property (including vehicles & buses/owned or leased) are tobacco free at all times (24 hours/day, 365 days/year).
   c. Students, school staff and visitors are prohibited from using tobacco products on school grounds and at school events, whether on or off district property.
   d. A plan to communicate the policy to students, employees, and visitors is outlined.
   e. Wearing clothing or using items that advertise or promote tobacco products and/or accepting gifts (including curriculum) from tobacco companies is prohibited.
   f. The policy should include an enforcement plan for students, staff and visitors and outlines cessation resources for students and staff.

7. The district has procedures in place to maintain a drug-free environment for students at all school sites.
8. The district has policy/procedures to require School Climate Surveys of all schools through AAR, which include responses from students, staff and parents.

9. The district provides professional development for staff to ensure a healthy school environment (Risky Sexual Behavior, Violence and Bullying, Alcohol, Tobacco, and Other Drugs, Suicide/Self Injury, Dating and Domestic Violence).

**E. Safe and Healthy Physical School Environment**

1. Schools should have processes in place to monitor compliance with healthy school environment policies.

2. Schools should have processes in place to respond to natural disasters and related emergencies.

3. Schools should have processes in place to ensure safe transport of students to and from school.

4. The district should conduct an annual sanitation inspection and correct deficiencies.

5. The district should provide staff development activities related to school safety for students, school personnel and families.

6. The district has policies related to Universal Precautions for Infection control.

7. The district has policy to assess the general safety conditions (freedom from hazards) of all school facilities and physical plants.

8. The district has policy to report and record health problems and injuries.

**HEALTH PROMOTION FOR STAFF**

A. Pinellas County Schools highly values the health and well-being of every staff member and will plan and implement activities and policies that support personal efforts by staff to maintain a healthy lifestyle.

B. The district shall establish and maintain an Employee Wellness Committee composed of at least one district staff member, School Health Advisory Committee member, dietitian or other health professional, Health Plan representative, Employee Assistant Plan (EAP) representative, and risk management team member.

C. The Employee Wellness Committee shall be a subcommittee of the SHAC. The Employee Wellness Committee is responsible for designing the district’s Strategic Wellness Plan and for developing, promoting and evaluating the annual (operating) Wellness Plan. The plan shall be based on input solicited from school staff members and shall outline ways to encourage healthy eating, physical activity and other elements of a
healthy lifestyle among the school staff.

D. The Employee Wellness Committee shall distribute its operating plan to the SHAC annually.

E. All worksites will select an “Employee Wellness Champion” to facilitate the Be S.M.A.R.T., Pinellas County Schools Wellness Program, offered by Risk Management Department, be a member of a school’s Healthy School Team, and update the Healthy Schools Program Assessment, Employee Wellness section two times each year.

F. Staff Foods

1. Food and beverages available for purchase through staff worksite vending and district and school sponsored staff functions are required to meet the Alliance High School Beverage and Competitive Foods Guidelines.

G. Reasonable Break Time for Nursing Mothers

1. Breastfeeding has been shown to provide multiple health and economic benefits. The health benefits include a lower risk of infection, illnesses and obesity for the baby, and mothers who breastfeed have a decreased chance of breast and ovarian cancer. The economic benefits of breastfeeding include lower rates of absenteeism, better retention of employees, lower health care costs, and higher productivity from employees.

2. Because employees need ongoing support in the worksite to be able to provide breast milk for their babies, the District is committed to providing an environment supporting breastfeeding for their employees.

Section 7 of the Fair Labor Standards Act (29 U.S.C. 207) states the following:

a. An employer shall provide:
   i. a reasonable break time for an employee to express breast milk for her nursing child for 1 year after the child’s birth each time such employee has need to express the milk.
   
   ii. a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk.

b. An employer shall not be required to compensate an employee receiving reasonable break time under paragraph (1) for any work time spent for such purpose.

c. An employer that employs less than 50 employees shall not be subject to the requirements of this subsection, if such requirements would impose an undue hardship by causing the employer significant difficulty or expense when considered in relation to the size, financial resources, nature, or structure of the employer’s business.
Nothing in this subsection shall preempt a State law that provides greater protections to employees than the protections provided for under this subsection.

**FAMILY & COMMUNITY INVOLVEMENT**

**A.** Families and other community members help with school decision making related to healthy nutrition and physical activity. (Healthy School Program & Safe and Healthy Schools Florida)

**B.** Students and family members have opportunities to provide both suggestions for school meals and other foods and beverages sold, served and offered on school campus and feedback on the meal programs and other foods and beverages sold, served and offered on campus. (Healthy School Program & Safe and Healthy Schools Florida)

**C.** Schools are encouraged to allow family and community members to have access to indoor and outdoor school facilities outside school hours to participate in or conduct health promotion and education programs. (Healthy School Program & Safe and Healthy Schools Florida)

**D.** Students and school personnel are encouraged to engage in community service activities. (Safe and Healthy Schools Florida)

**E.** Schools provide ongoing recruitment and training of families and other community members as volunteers at school or other locations to support school programs. (Safe and Healthy Schools Florida)

**F.** The district encourages local business and non-profit organizations as school partners. (Safe and Healthy Schools Florida)

**G.** The district implements strategies to reduce the number of uninsured children. (Safe and Healthy Schools Florida)
GLOSSARY OF TERMS

**A la Carte**: Refers to individually priced food items provided by the school food services department. These items may or may not be part of the reimbursable meal.

**Alliance for a Healthier Generation**: The Alliance for a Healthier Generation, founded by the American Heart Association and the Clinton Foundation, works to reduce the prevalence of childhood obesity and to empower kids to develop lifelong, healthy habits. The Alliance works with schools, companies, community organizations, healthcare professionals and families to transform the conditions and systems that lead to healthier children.

**Body Mass Index (BMI)**: a formula that assesses weight relative to height. It provides a useful screening tool to indirectly measure the amount of bodyfat.

**Competitive Foods**: Foods and beverages sold or made available to students that compete with the school’s operation of the National School Lunch Program, School Breakfast Program and/or After School Snack Program. This definition includes but is not limited to food and beverages sold or provided in vending machines, in school stores or as part of school fundraisers. School fundraisers include food sold by school administrators or staff (principals, coaches, teachers, etc.), students or student groups, parents or parent groups, or any other person, company or organization.

**Extended School Day**: Time during the before-school and after-school activities that include extended academics, clubs, intramural sports, band and choir practice, drama rehearsals, etc.

**Food Services**: Refers to the school’s operation of the National School Lunch Program, School Breakfast Program and After School Snack Programs and includes all food services operations conducted by the school principally for the benefit of school children, all of the revenue from which is used solely for the operation or improvement of such food services.

**Food Service Area**: Any area on school premises where school food service program meals are served and/or eaten.

**Fruit or Vegetable Juice**: Beverages labeled as containing 100% fruit or vegetable juice.

**Healthy Hunger-Free Kids Act**: Authorizes funding for federal school meal and child nutrition programs and increases access to healthy food for low-income children.

**Healthy School Program**: Healthy Schools Program is an evidence-based initiative under the Alliance for a Healthier Generation that will help create and sustain healthy environments where students can learn better and flourish.

**Lunch Period**: Specific amount of time allocated for each meal (breakfast/lunch) from the time students are served and seated.

**Sale items**: All competitive foods (and/or beverages) items available at schools outside of the school (reimbursable) meals program including vending machines, a la carte lines, school stores, snack and other food carts and fundraisers. Any item that is offered for individual sale (even if the item is part of a school meal) is considered “competitive.” This includes, for example, milk, juice, water and side items.
School Campus: All area of the property under the jurisdiction of the school that is accessible to students during the school day.

School Day: The school day has been defined by the United States Department of Agriculture (USDA) as part of the Smart Snack standards as the period from the midnight before to 30 minutes after the official school day.

School Meals: Meals provided under the National School Lunch Program, School Breakfast Program and After School Snack Program for which schools receive reimbursement in accordance with all applicable federal regulations, policies, instructions and guidelines.

Snacks: Defined as either competitive foods or a la carte (see definitions above), depending on whether or not they are provided by the school food services department.

USDA Smart Snacks: science-based, age-appropriate, calorie and portion-controlled standards covering beverages and snacks offered for sale to students outside of the school (reimbursable) meal program such as products sold in school vending machines, a la carte lines, snack and other food carts, fundraisers and school stores.

- Restricted Foods – Foods and beverages that are restricted from sale to students are classified in the following four categories:
  - Soda Water: Any carbonated beverage except as allowed under the Smart Snack standards. No product shall be excluded from this definition because it contains discrete nutrients added to the food such as vitamins, minerals and protein.
  - Water Ices: Any frozen, sweetened water such as “...sicles” and flavored ice with the exception of products that contain fruit or fruit juice.
  - Chewing Gum: Any flavored products from natural or synthetic gums and other ingredients that form an insoluble mass for chewing.
  - Certain Candies: Any processed foods made predominantly from sweeteners or artificial sweeteners with a variety of minor ingredients that characterize the following types:
    - Hard Candy: A product made predominantly from sugar (sucrose) and corn syrup that may be flavored and colored, and is characterized by a hard, brittle texture. Includes such items as sour balls, lollipops, fruit balls, candy sticks, starlight mints, after-dinner mints, jaw breakers, sugar wafers, rock candy, cinnamon candies, breath mints and cough drops.
    - Jellies and Gums: A mixture of carbohydrates that are combined to form a stable gelatinous system of jellylike character and are generally flavored and colored, and include gum drops, jelly beans jellied and fruit-flavored slices.
    - Marshmallow Candies: An aerated confection composed of sugar, corn syrup, invert sugar, 20 percent water, and gelatin or egg white to which flavors and colors may be added.
    - Fondant: A product consisting of microscopic-sized sugars crystals that are separated by
a thin film of sugar and/or invert sugar in solution such as candy corn or soft mints.

- **Licorice**: A product made predominantly from sugar and corn syrup that is flavored with an extract made from the licorice root.

- **Spun Candy**: A product that is made from sugar that has been boiled at a high temperature and spun at a high speed in a special machine.

- **Candy-Coated Popcorn**: Popcorn that is coated with a mixture made predominantly from sugar and corn syrup.
FACTS
Joint Use Agreements
Sharing School Recreational Facilities with the Community

OVERVIEW
The U.S. is in the grips of a full-blown obesity epidemic. The prevalence of those who are obese has risen to 34%. In 2009, adult obesity rates rose in 28 states, and in more than two thirds of states, obesity rates exceed 25 percent of all adults. In light of these dire statistics, it is critical to find ways to increase physical activity opportunities in the places where people live, work, learn and play. However, nearly 50 percent of U.S. adults and 65 percent of adolescents do not currently get the recommended amount of physical activity each day.

Land use and facility planning by local governments and school districts have become separated in many communities and this lack of coordination has contributed to larger, more distant schools that have less connection with the people they serve. School facilities, especially those that are centered in the community, can be an excellent resource for recreation and exercise where there is limited availability or private options are too expensive. The most innovative districts are maximizing joint use of school facilities to address the educational and health needs of students and the community’s need for recreational activity spaces.

JOINT USE AGREEMENTS
Schools can offer a variety of safe, clean facilities, including running tracks, pools, gymnasiums, fitness rooms, and playgrounds. Unfortunately, districts often close their property to the public after school hours due to concerns around liability, security, maintenance, and other costs. The reality is that if school districts maintain their property, carry insurance, require community groups to have insurance and enter into formal joint use agreements, they can minimize their liability risks. Public Health Law and Policy has created an excellent toolkit that provides model agreements, case studies, funding options, and other information for implementing joint use agreements. (Available online at: http://www.phlplnet.org/healthy-planning/products/joint_use_toolkit). Joint use agreements allow school districts, local governments, and community-based organizations to overcome common district concerns and share costs and responsibilities of opening school property to the public after school hours.

THE HEALTH BENEFITS
In order for adults and children to get the exercise they need to be healthy, they need places to be active. Research has shown that people who have parks or recreational facilities nearby exercise 38 percent more than those who do not have easy access. Unfortunately, lower-income communities, especially in predominantly Latino or African-American neighborhoods often have fewer resources to support active lifestyles and places to play and exercise.

SOME SUCCESS STORIES
Schools can create access by opening existing facilities during non-school hours, integrating the opportunity for community use when planning new
FACT SHEET: Joint Use Agreements

construction projects, or building collaborative relationships and entering into reciprocal agreements with local governments or community organizations.

- The San Francisco Unified School District and the City and County of San Francisco have an agreement that allows the city to unlock the outdoor playground areas for open, unsupervised use during non-school hours. The city assumes the liability and responsibility for injury, vandalism and/or littering during these recreation times.10

- The Oakland Unified School District, the City of Oakland, and the Unity Council partnered to build a community-based school that offered after-school sports programming for the district’s students and families where opportunities had not previously existed. They built state-of-the-art field spaces and the after-school programs are now full with a wait list. The district has reported improved academic performance, reduced vandalism, and better student behavior.11

- Florida has taken steps to help local governments and school districts coordinate around school facility and community planning. A state law requires local governments and school districts to share more information, establish an inter-local planning agreement, have a school official on the local planning board, and hold periodic joint meetings of elected boards.4

Funding for joint use projects or agreements may come from a variety of sources including developer impact fees, 21st Century Community Learning Center grants, special bond funds, local general obligation bonds, joint use partner funds, private foundation grants, business sponsorships, and utilization fees.5

THE AHA ADVOCATES

- Modify existing resources/and toolkits to apply more generally to states across the country and disseminate these resources to communities to educate and inform about the importance of developing and maintaining joint use agreements through existing state and federal funding programs or information dissemination.

- Integrate joint use agreements into the existing federal and state programs, such as the Land and Water Conservation Fund.

- Incorporate joint use agreements into statewide recreation plans (SCORPs).

- Have state and federal governments require communities applying for public funding or grants to implement joint use agreements.

- Pass state legislation that encourages, supports, or authorizes school districts to enter into agreements supporting joint use of facilities and protects schools from liability when they enter these agreements with third parties.

- Integrate joint use agreements into school construction projects and encourage districts to reconsider traditional school architecture to make facilities more inviting to the community. Since the voter population with school-aged children is often declining in many areas of the country, it may be easier to garner support for school construction projects if the new facilities are shared with the community.

References:


Promoting a Healthy School Environment
HEALTHY FUNDRAISING

Candy, baked goods, soda and other foods with little nutritional value are commonly used for fundraising at school. Schools may make easy money selling these foods, but students pay the price. An environment that constantly provides children with sweets promotes unhealthy habits that can have lifelong impact.

As we face a national epidemic of overweight children, many schools are turning to healthy fundraising alternatives.

Benefits of Healthy Fundraising

Healthy Kids Learn Better: Research clearly demonstrates that good nutrition is linked to better behavior and academic performance. To provide the best possible learning environment for children, schools must also provide an environment that supports healthy behaviors.

Provides Consistent Messages: Fundraising with healthy foods and non-food items demonstrates a school commitment to promoting healthy behaviors. It supports the classroom lessons students are learning about health, instead of contradicting them.

Promotes a Healthy School Environment: Students need to receive consistent, reliable health information and ample opportunity to use it. Finding healthy alternatives to fund-raising is an important part of providing a healthy school environment.

Consequences of Unhealthy Fundraising

Compromises Classroom Learning: Selling unhealthy food items contradicts nutrition messages taught in the classroom. Schools are designed to teach and model appropriate skills and behaviors. Nutrition principles taught in the classroom are meaningless if they are contradicted by other activities that promote unhealthy choices, like selling candy and other sweets. It’s like saying, “You need to eat healthy foods to feel and do your best, but it is more important for us to make money than for you to be healthy and do well.” Classroom learning about nutrition remains strictly theoretical if the school environment regularly promotes unhealthy behaviors.

Promotes the Wrong Message: Selling unhealthy foods provides a message that schools care more about making money than student health. We would never think of raising money with anything else that increases student health risks, but food fundraisers are often overlooked. As schools promote healthy lifestyle choices to reduce student health risks and improve learning, school fundraisers must be included.

Contributes to Poor Health: Foods commonly used as fundraisers (like chocolate, candy, soda and baked goods) provide unneeded calories and displace healthier food choices. Skyrocketing obesity rates among children are resulting in serious health consequences, such as increased incidence of type 2 diabetes and high blood pressure.

Almost 20 percent of children are overweight, a threefold increase from the 1970’s. Poor eating habits and a sedentary lifestyle are just behind smoking as the leading cause of deaths per year in the United States, and the number of deaths related to poor diet and physical inactivity is increasing.
## WHAT SCHOOLS CAN DO

### Ideas for Healthy Fundraising Alternatives

Schools can help promote a healthy learning environment by using fundraising alternatives to food:

<table>
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<tr>
<th>HEALTHY FOODS</th>
<th>ITEMS SUPPORTING ACADEMICS</th>
<th>SELL CUSTOM MERCHANDISE</th>
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</thead>
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<td>❖ Fruit and nut baskets</td>
<td>❖ Read-A-Thon</td>
<td>❖ Bumper stickers/decals</td>
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<td>❖ Fruit and yogurt parfaits</td>
<td>❖ Science Fair</td>
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<td>❖ Fruit smoothies</td>
<td>❖ Spelling Bee</td>
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<td>❖ Lunch box auctions</td>
<td>❖ Student Art Show</td>
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<tr>
<td>❖ Frozen bananas</td>
<td>❖ Walk-a-thon</td>
<td>❖ T-shirts</td>
</tr>
<tr>
<td>❖ Trail mix</td>
<td>❖ Temporary/henna tattoos</td>
<td>❖ Sweatshirts</td>
</tr>
</tbody>
</table>

## THINGS YOU CAN DO

❖ Auction donated items
❖ Bike-a-thons
❖ Bowling night/bowl-a-thon
❖ Car wash
   (pre-sell tickets as gifts)
❖ Carnivals (Halloween, Easter)
❖ Dances (kids, father/daughter)
❖ Family/glamour portraits
❖ Festivals
❖ Fun runs
❖ Gift wrapping
❖ Golf tournament
❖ Jump Rope a-thons
❖ Magic show
❖ Recycling cans/bottles/paper
❖ Rent a special parking space
❖ Singing telegrams
❖ Skate night/skate-a-thon
❖ Talent shows
❖ Tennis/horseshoe competition
❖ Treasure hunt/scavenger hunt
❖ Workshops/classes

## ITEMS YOU CAN SELL

❖ Activity theme bags
❖ Air fresheners
❖ Bath accessories
❖ Balloon bouquets
❖ Batteries
❖ Books, calendars
❖ Brick/stone/tile memorials
❖ Bumper stickers & decals
❖ Buttons, pins
❖ Candles
❖ Christmas trees
❖ Coffee cups, mugs
❖ Cookbooks
❖ Crafts
❖ Coupon Books
❖ Customized stickers
❖ First aid kits
❖ Emergency kits for cars
❖ Flowers and bulbs
❖ Foot warmers
❖ Football seats
❖ Garage sale
❖ Giant coloring books
❖ Gift baskets
❖ Gift certificates
❖ Gift items
❖ Gift wrap, boxes and bags
❖ Graduation tickets
❖ Greeting cards
❖ Hats
❖ Holiday ornaments
❖ Holiday wreaths
❖ House decorations
❖ Jewelry
❖ License plates or holders w/ school logo
❖ Lunch box auctions
❖ Magazine subscriptions
❖ Megaphones
❖ Mistletoe
❖ Monograms
❖ Music, videos, CDs
❖ Newspaper space, ads
❖ Parking spot (preferred location)
❖ Pet treats/toys/accessories
❖ Plants
❖ Pocket calendars
❖ Pre-paid phone cards
❖ Scarves
❖ School art drawings
❖ School frisbees
❖ School spirit gear
❖ Souvenir cups
❖ Spirit/seasonal flags
❖ Stadium pillows
❖ Stationery
❖ Student directories
❖ Stuffed animals
❖ Temporary/henna tattoos
❖ T-shirts, sweatshirts
❖ Valentine flowers
❖ Yearbook covers
❖ Yearbook graffiti

❖ Survey student ideas
Promoting a Healthy School Environment

ALTERNATIVES TO FOOD AS REWARD

Food is commonly used to reward students for good behavior and academic performance. It’s an easy, inexpensive and powerful tool to bring about immediate short-term behavior change. Yet, using food as reward has many negative consequences that go far beyond the short-term benefits of good behavior or performance.

Research clearly demonstrates that healthy kids learn better. To provide the best possible learning environment for children, schools must provide an environment that supports healthy behaviors. Students need to receive consistent, reliable health information and ample opportunity to use it. Finding alternatives to food rewards is an important part of providing a healthy school environment.

CONSEQUENCES OF USING FOOD AS REWARD

“Rewarding children with unhealthy foods in school undermines our efforts to teach them about good nutrition. It’s like teaching children a lesson on the importance of not smoking, and then handing out ashtrays and lighters to the kids who did the best job listening.”

Marlene Schwartz, PhD, Co-Director, Rudd Center for Food Policy and Obesity, Yale University

Compromises Classroom Learning:
Schools are institutions designed to teach and model appropriate behaviors and skills to children. Nutrition principles taught in the classroom are meaningless if they are contradicted by rewarding children with candy and other sweets. It’s like saying, “You need to eat healthy foods to feel and do your best, but when you behave or perform your best, you will be rewarded with unhealthy food.” Classroom learning about nutrition will remain strictly theoretical if schools regularly model unhealthy behaviors.

Contributes to Poor Health:
Foods commonly used as rewards (like candy and cookies) can contribute to health problems for children, e.g., obesity, diabetes, hypertension and cavities. Food rewards provide unneeded calories and displace healthier food choices.

Encourages over consumption of Unhealthy Foods:
Foods used as rewards are typically “empty calorie” foods - high in fat, sugar and salt with little nutritional value. Decreasing the availability of empty calorie foods is one strategy schools can use to address the current childhood obesity epidemic.

Contributes to Poor Eating Habits:
Rewarding with food can interfere with children learning to eat in response to hunger and satiety cues. This teaches kids to eat when they are not hungry as a reward to themselves, and may contribute to the development of disordered eating.

Increases Preference for Sweets:
Food preferences for both sweet and non-sweet food increase significantly when foods are presented as rewards. This can teach children to prefer unhealthy foods.

About 20 percent of children are overweight. Over the past three decades, the childhood obesity rate has more than doubled for preschool children aged 2-5 years and adolescents aged 12-19 years, and it has more than tripled for children aged 6-11 years.
WHAT SCHOOLS CAN DO
Ideas for Alternatives to Using Food as a Reward

Schools can help promote a healthy learning environment by using nonfood rewards. The ideas below are just a beginning and can be modified for different ages. Be creative, and don’t forget the simple motivation of recognizing students for good work or behavior.

Elementary School Students
- Make deliveries to office
- Teach class
- Sit by friends
- Eat lunch with teacher or principal
- Eat lunch outdoors with the class
- Have lunch or breakfast in the classroom
- Private lunch in classroom with a friend
- Be a helper in another classroom
- Play a favorite game or do puzzles
- Stickers, pencils, bookmarks
- Certificates
- Fun video
- Extra recess
- Walk with the principal or teacher
- Fun physical activity break
- School supplies

Middle School Students
- Sit with friends
- Listen to music while working at desk
- Five-minute chat break at end of class
- Reduced homework or “no homework” pass
- Extra credit
- Fun video
- Fun brainteaser activities
- Computer time
- Assemblies
- Field trips
- Eat lunch outside or have class outside

High School Students
- Extra credit or bonus points
- Fun video
- Reduced homework
- Late homework pass
- Donated coupons to video stores, music stores or movies
- Drawings for donated prizes among students who meet certain grade standards