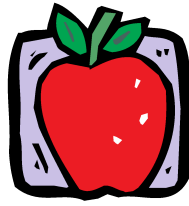


# WELLNESS POLICY



## PHYSICAL ACTIVITY PLAN

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**All students will participate in moderate to vigorous physical activity each day**, as follows:

1. **Each student will engage in** at least 15 minutes of planned **moderate to vigorous physical activity each day**. With input from the staff, the principal (or principal designee) will work out how this will be implemented. The arrangements must fit within the limits of our building and staffing and be compatible with our school improvement plan.
2. Each student will participate in physical education on average once a week.
3. Each student will have at least 15 minutes a day of supervised recess. Weather permitting, recess will occur outdoors as often as possible, and teachers will encourage the students verbally to engage in moderate-to-vigorous physical activity. The school will provide space and equipment to make that activity possible and appealing to students.
4. In keeping with brain-based research, teachers will make all reasonable efforts to avoid periods of more than 30 minutes when students are physically inactive. When possible, physical activity will be integrated into learning activities. When that is not possible, students will be given periodic breaks during which they are encouraged to stand and move in some form.
5. Appropriate accommodations will be made for students with special needs, as required by law and sound professional judgment.

## HEALTHY CHOICE PLAN

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We will **encourage healthy choices among students using the following methods**:

1. Implementing the nutritional standards required by federal and state laws and regulations that apply to our food program and to other food and beverages available during the school day.
2. Implementing a curriculum that addresses the standards for health education, physical education, and consumerism.

## MENTAL HEALTH PLAN

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We will **participate in mental health supports for students using the following methods**:

1. Implementing the CASEL Mental Health standards through our Leader In Me work.
2. Implementing a mental health tier system to support students who may need mental health services through counseling and/or PBIS referrals.
3. Providing awareness and community support as needed to students and families within our school community. .

## **ASSESSMENT TOOL**

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We will **assess students' level of physical activity and physical fitness at least once a year** using the following procedures:

1. The principal (or designee), with collaboration from teachers and parents with wellness expertise, will select an assessment tool. Once the council has adopted a tool, it will remain in use unless the principal (or designee) recommends a change.
2. The principal (or designee) will develop a schedule for completing the assessment during the last month of school.
3. The principal will report the results of the wellness assessment data to the council annually.
4. The council in coordination with the physical education teacher will discuss the results of the report and decide if appropriate wellness goals are included in the school improvement plan or if they need to be added or revised.

## **POLICY IMPLEMENTATION**

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The provisions of this policy will be implemented to comply with provisions required by federal law, state law, and local board policy. If any specific requirement above does not fit with those rules, the principal will notify the council so that the policy can be amended to fit.

The principal may be asked to share the data collected according to this policy with the district office and/or the Kentucky Department of Education.

## **POLICY/PROGRAM EVALUATION**

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A Coordinated School Health Committee [*or insert SBDM standing committee name*] will collect and analyze data to be used as a support and resource for collaboration and integration of practical living instruction throughout the school environment.

The council will evaluate the effectiveness of this policy based on the feedback from Coordinated School Health committee and through our annual school improvement planning process.

Date Adopted: 2/7/2022

Date(s) Reviewed or Revised: 10/3/22