THE BALTIMORE CITY
PUBLIC SCHOOL SYSTEM

LOCAL WELLNESS POLICY

In compliance with
Section 204 of Public Law 108-265-
June 30, 2004

Child Nutrition and
WIC Reauthorization Act of 2005

Approved by the
BCPSS Board of School Commissioners
on June 13, 2006
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Preamble

Whereas, children need access to healthful foods and opportunities to be physically active in order to grow, learn, and thrive;

Whereas, good health fosters student attendance and educational achievement;

Whereas, obesity rates have doubled in children and tripled in adolescents over the last two decades, and physical inactivity and excessive calorie intake are the predominant causes of obesity;

Whereas, 37% of BCPSS high school students are either overweight or at risk for being overweight; (Source: Youth Risk Behavior Survey, 2005)

Whereas, heart disease, cancer, stroke, and diabetes are responsible for two-thirds of deaths in the United States, and major risk factors for those diseases, including unhealthy eating habits, physical inactivity, and obesity, are often established in childhood;

Whereas 43.3% of BCPSS high school students do not participate in sufficient vigorous physical activity daily and 71.3% of BCPSS high school students do not attend daily physical education classes; (Source: Youth Risk Behavior Survey, 2005)

Whereas, nationally, the items most commonly sold from school vending machines, school stores, and snack bars include low-nutrition foods and beverages, such as soda, sports drinks, imitation fruit juice, chips, candy, cookies, and snack cakes.

Whereas, school districts around the country are facing significant fiscal and scheduling constraints;

Whereas, community participation is essential to the development and implementation of successful school wellness policies; and

Whereas, healthy students learn better:

Thus, the Baltimore City Public School System is committed to providing school environments that promote and protect children’s health, well-being, and ability to learn by supporting healthy eating and physical activity. Therefore, the Baltimore City Public School System sets forth the following Local Wellness Policy:

• Schools will provide nutrition education in the context of comprehensive school health education to foster lifelong habits of healthy eating and will establish linkages to school meal programs and related community resources.
• Schools will provide structured physical education to foster lifelong habits of physical activity and will establish linkages to health education and school meals programs and related community resources.
• Nutrition and physical education will be delivered by highly qualified teachers.
• All students in grades K-12 will have opportunities, support, and encouragement to be physically active on a regular basis.
• Schools will provide other school-based activities that are designed to promote student and staff wellness.
• Foods and beverages sold or served at school will meet or exceed the nutritional recommendations of the *U. S. Dietary Guidelines for Americans*.

• Qualified child nutrition professionals will provide students with access to a variety of affordable, nutritious, and appealing foods that meet the health and nutrition needs of students; will accommodate the religious, ethnic, and cultural diversity of the student body in meal planning; and will provide a clean, safe, and pleasant setting and adequate time for students to eat.

• To the maximum extent practicable, all schools will participate in available federal school meal programs.

• The BCPSS will engage students, parents, teachers, food service professionals, health professionals, and other interested community members in monitoring and evaluating the implementation of system-wide nutrition standards, nutrition education, and physical education.

• Leadership and coordination for the BCPSS Local Wellness Policy will originate with and be the responsibility of the Departments of Curriculum and Instruction and Food and Nutrition, with advisement from the BCPSS School Health Council.

To implement the **BCPSS Local Wellness Policy**, the following Goals and Action Steps are set forth:

**Component One: Nutrition Education Goals**

I. All BCPSS schools will provide students in Pre-K through grade 12 with behavior-focused nutrition education in the curriculum that is interactive and that teaches skills needed to promote healthy eating habits. This will be accomplished by the following Action Steps:

   a. Schedule comprehensive school health education for a minimum of three 30-minute sessions per week for Pre K-K, three 45-minute sessions per week for grades 1-5 and for a minimum of one full semester in grades 6, 7, and 8 and in high school.

   b. Deliver nutrition concepts and skills to all students in all grades in the context of the BCPSS comprehensive school health education curriculum that is aligned with the *Maryland State Department of Education (MSDE) Voluntary State Curriculum Framework*.

   c. Present the integrated nutrition concepts and hands-on skills in other areas of the BCPSS curriculum such as physical education, visual arts, music, mathematics, science, language arts, reading, and social studies.

   d. With technical assistance provided by the BCPSS Department of Curriculum and Instruction and the Department of Food and Nutrition, utilize a team approach for nutrition education that includes teachers, foodservice staff, guest speakers, field trips, and community partners.

   e. Utilize the cafeteria as a “learning lab” for school staff and students to apply decision making skills using the nutrition education provided in the classroom.

   f. Provide “point of decision” posters and serving line tents with nutrition education in the school cafeteria and other places where food may be consumed using materials provided by the BCPSS Department of Curriculum and Instruction and the Department of Food and Nutrition.

   g. Connect nutrition education in the context of a comprehensive health education program with the MSDE requirement for *Student Service Learning* activities in the school, home, and community. A listing of approved Student Service Learning sites is available through the Department of Curriculum and Instruction.
II. All BCPSS schools will have highly qualified teachers who are adequately prepared and who participate in regular professional development activities to effectively deliver nutrition education in the context of comprehensive school health education. This will be accomplished by the following Action Steps:
   a. Provide professional development opportunities for teachers delivering nutrition education in the context of comprehensive school health education that includes accurate and current nutrition information that combines skills practice in program-specific activities and instructional strategies designed to promote healthy eating habits. System-wide nutrition education professional development opportunities will be provided by the Office of Curriculum and Instruction.
   b. Provide locally funded health education curriculum specialists to coordinate compliance with the Code of Maryland for health education (13A.04.18.01.01 Requirements for Comprehensive Health Education Instructional Programs for Grades K-12) and the Local Wellness Policy.

III. All BCPSS schools will provide nutrition education professional development opportunities for all staff, students, and parents. This will be accomplished by the following Action Steps:
   a. Select a member or members of the School Improvement Team to serve as the Local Wellness Policy Contact(s) and who will plan, implement, and evaluate nutrition activities for staff, students, and parents.
   b. Provide opportunities for whole school professional development for nutrition education on one or more scheduled professional days each school year.
   c. Develop strategies for school faculty and staff to consistently model healthy eating habits that follow the Dietary Guidelines for Americans, before, throughout, and after the school day during school sanctioned activities. Technical assistance for this Action Step will be provided by the BCPSS Department of Curriculum and Instruction and the Department of Food and Nutrition.

IV. All BCPSS schools will promote the development of partnerships with local, state, national, and private organizations for the support of balanced, skills-based nutrition education taught in the context of a comprehensive school health education program. This will be accomplished by the following Action Steps:
   a. Select a Local Wellness Policy Contact(s) by September 30 of each school year beginning September 2006, who is/are or will be a member(s) of the School Improvement Team.
   b. Assess and evaluate the status of current partnerships to support nutrition education. The Departments of Curriculum and Instruction and Food and Nutrition will provide technical assistance for new partnership development.
   c. Provide a nutrition education resource center to share with families and the community to positively impact healthy foods choices. Materials for this resource center will be provided by the BCPSS Department of Curriculum and Instruction and the Department of Food and Nutrition.
   d. Provide current and useable information to families via the school homepage or other method such as adding nutrition information to an existing newsletter or developing a monthly nutrition bulletin that encourages parents/guardians to teach their children about healthy habits, to provide nutritious meals for their families, and, on a regular basis, eat meals with their families. This information will be provided by the BCPSS Department of Curriculum and Instruction and the Department of Food and Nutrition.

V: All BCPSS schools will designate one or more staff member(s) as appropriate, who will, with centralized technical assistance, provide leadership in the school wellness efforts and monitor the annual school-based implementation of the Local Wellness Policy for adherence, improvement, and reporting purposes. This will be accomplished by the following Action Steps:
a. Assure that the selected staff member(s) has/have opportunities to attend workshops presented by the Department of Curriculum and Instruction and the Department of Food and Nutrition that will provide guidance on the monitoring and reporting process.
b. Assist with and support the implementation of the Local Wellness Policy reporting process as part of the School Improvement Plan.

Component Two: Physical Education Goals

I. All BCPSS schools will comply with Code of Maryland (COMAR) regulations as described in 13A.04.13.01 Requirements for Physical Education Instructional Programs for Grades K-12. This will be accomplished by the following Action Steps:
   a. Increase and/or maintain centralized support of the COMAR by implementing required policies and procedures as dictated by COMAR certification procedures.
   b. Hire an additional curriculum specialist to implement and monitor Local Wellness Policy physical education goals.

II. Highly qualified teachers will provide physical education instruction in all BCPSS schools. This will be accomplished by the following Action Steps:
   a. Provide all physical education instructors with current training in first aid and cardio-pulmonary resuscitation. High school physical education instructors will have current Red Cross Life Guard Water Safety Instructor certification. All required trainings will be fiscally supported by BCPSS.
   b. Provide all teachers delivering physical education with professional development opportunities that includes recent teaching trends and best practices in physical education and dance. This will be provided by the Office of Curriculum and Instruction.

III. All schools will have physical education curriculum aligned to the Maryland State Department of Education Voluntary State Curriculum Framework (MSDE-VSC). This will be accomplished by the following Action Steps:
   a. Continue to update BCPSS curriculum to align with the MSDE-VSC. This will be accomplished by the Office of Curriculum and Instruction.
   b. Provide professional development on a regular basis to deliver BCPSS physical education curriculum that includes strategies, technology updates, and best practices for implementation. This will be provided by the Office of Curriculum and Instruction.

IV. Every student in BCPSS will have the opportunity to participate in a comprehensive physical education program. This will be accomplished by the following Action Steps:
   a. Incorporate fitness content into physical education class to help students develop the knowledge, skills, motivation, and behaviors that will promote and reinforce a lifetime commitment to wellness through a physically active and healthy lifestyle. This will be provided by the Office of Curriculum and Instruction.
   b. Align all fitness activities with the MSDE-VSC. This will be accomplished by the Office of Curriculum and Instruction.

V. The BCPSS physical education program will meet the needs of the diverse learners through modifications to curriculum according to Individual Educational Plans. This will be accomplished by the following Action Steps:
a. Consider gender, cultural differences, physical and mental abilities of all students when planning physical activity choices.
b. Provide professional development for physical education instructors will include best practices for curricular modification. This will be provided by the Office of Curriculum and Instruction.

VI. All BCPSS physical education equipment and facilities will be safe, clean, and accessible for all students. This will be accomplished by the following Action Step:
   a. All equipment and facilities will be inspected, updated, and repaired on an on-going basis. This will be accomplished by the site based physical educator, the Department of Curriculum and Instruction, and the Baltimore City Health Department.

Component Three: Other School-Based Wellness Activities

I. All BCPSS schools will create an environment that provides consistent wellness messages and is conducive to healthy eating during other school-based activities. This will be accomplished by the following Action Steps:
   a. As part of on-going after-school programs, provide activities that promote the American Dietary Guidelines such as a Culinary Arts Club, a Garden Club, or Healthy Kids Club, whose membership includes school staff, students, parents, family members, and community partners.
   b. Plan and implement parent nutrition workshops to encourage healthy food shopping and planning of family meals. Technical assistance will be provided by the Departments of Curriculum and Instruction and Food and Nutrition.
   c. Establish regular opportunities for staff, students, and families to participate in wellness activities such as aerobics and/or yoga classes, nutritious pot luck lunchtime, and healthy eating tips in a faculty newsletter.
   d. Assure that all summer programs include nutrition education consistent with the Local Wellness Policy.
   e. Plan physical activity events for students not participating in competitive sports.
   f. Access community partners to provide co-curricular and extra-curricular activities such as approved field trips and approved classroom presentations.
   g. Establish and maintain a school garden, where possible, as a comprehensive, cross-curricular teaching tool for faculty, staff and students.

II. Implementation of other wellness activities at the school site will be monitored by school site staff for the purposes of evaluation and reporting. This will be accomplished by the following Action Step:
   a. Wellness activities planned and implemented in adherence to this component will be included in the duties of the selected school site staff member who is monitoring the implementation of the nutrition and physical education activities as described in Component One and Component Two.

Component Four: Nutrition Standards
(This component was approved January 10, 2006 by the Board of School Commissioners)

I. School meals will meet or exceed USDA nutrition standards by:
   a. Providing whole grain products, low and fat-free milk, and fresh fruits and vegetables:
   b. Minimizing trans and saturated fats, sodium, and sugar; and
   c. Using current nutrition research to improve school foods and meal standards.
II. All foods sold in all schools meet or exceed the nutrition standards approved by the Maryland State Board of Education. These standards apply to ALL snack/ala carte foods sold in cafeteria, vending machines, school stores, and concession stands during the school day.
   In brief, those standards:
   a. Limit portion sizes to single servings
   b. Limit to specific amounts the fat and sugar content of those foods.
   c. Prohibit the sale of foods of minimal nutrition value (including soda) until the end of the school day.

III. All efforts will be made to maximize meal participation by:
   a. Placing priority on school meals over sales of ala carte and snack foods.
   b. Prohibiting the sale of competitive foods until the end of the last lunch period.
   c. Preparing and presenting healthy foods in ways that will encourage their consumption.
   d. Establishing multiple processes to facilitate immediate, continuous, and specific feedback on school meal preparation, quality, variety, or service.
   e. Working with a standing parent nutrition committee, consisting of members of the Parent Community Advisory Board (PCAB), Special Education Citizens Advisory Committee (SECAC), the Parent Teacher Association (PTA), and other interested persons.

IV. Foods prepared by culinary arts students and sold to other students during the school day may occur to the extent necessary for students to learn preparation techniques for varied foods and to recover food costs. The nutrition standards in Object II should apply to the extent possible and be consistent with the particular food items.

V. Schools will encourage fundraisers that do not negatively impact health, such as the sale of nutritious food items and items other than food. It is recognized that the selling of candy and other foods high in fat or sugar during the school day is detrimental to student health and behavior.

VI. Foods offered during the school day as part of parties/celebrations or as rewards should reinforce healthy eating by taking the consideration that foods high in fat and sugar should be eaten in small portions and in moderation.

VII. Marketing techniques and approaches will be adopted to promote healthy school meals; to expose students to a variety of foods, tastes and diverse cuisines; to connect nutrition education in the classroom and healthy eating in the cafeteria; and to encourage nutritional well-being by the entire school community.

VIII. The Director of Food and Nutrition will report to the Board of School Commissioners by June of each year on:
   a. Steps taken and planned to improve the nutrition, quality, variety, and acceptance of school meals and other foods available in schools.
   b. Evaluations received from the School Improvement Teams and school community regarding adherence to the Local Wellness Policy Nutrition Standards and their recommendations for further improvement.
   c. Annual Climate Survey satisfaction measure of the implementation of the Local Wellness Policy Nutrition Standards.
Component Five: Local Wellness Policy Coordination and Evaluation

I. The Departments of Curriculum and Instruction and Food and Nutrition will provide leadership and coordination for the BCPSS Local Wellness Policy.

II. The BCPSS School Health Council (established in 2003) will serve in an advisory capacity to develop, implement, monitor, review and, as necessary, revise school nutrition standards, nutrition education goals, and physical education goals. The School Health Council members come from the school system, health department, and community-at-large and represent the following eight school health program components:

a. Physical Education
b. Health Education
c. School Nutrition
d. School Health Services
e. Psychological and Counseling Services
f. School Environment
g. Parent and Community Involvement
h. Employee Wellness

III. The BCPSS Health Education Advisory Board will make recommendations concerning nutrition education programs. This Board, established in 1985, consists of parents, school administration, community health partners, clergy, law enforcement, judiciary, MSDE, teachers, and students.

IV. The Director of Food and Nutrition and the Director of Curriculum and Instruction will report on Local Wellness Policy compliance, progress, and areas for improvement by June of each year.