

Mingus Union High School

District No. 4 Local Wellness



MINGUS Union High School District No. 4 Local Wellness Plan

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Mingus Union High School District Mission Statement

Students will be provided the tools necessary to develop the highest possible level of achievement and encouraged to be lifelong learners through:

- Partnership with family and community.
- Highest level of staff training.
- Excellent facilities.
- Embracing cultural diversity.
- Providing a wide range of learning methods and experiences in a safe environment.

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Components of Health School System

Family & Community Involvement, Academic & Counseling & Guidance, Staff & Students, Health Services, Healthy Environment, Nutrition Services, Physical Activity



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The Mingus Union High School District Wellness Handbook has been created to provide holistic wellness operating guidelines based on school district policies. This handbook is also a point of reference for parent groups, partnering groups, and parents in understanding the District's Wellness Program and Guidelines. Buildings within Mingus Union High School District will be responsible for implementing and following the guidelines set before them in this handbook. It is the responsibility of the above mentioned parties to read and understand this handbook.



The District has the right to make additions, discontinue, or modify any guideline addressed in this handbook at any time.

Overview

Local wellness policies are an important tool for parents, local education agencies (LEAs) and school districts in promoting student wellness, preventing and reducing childhood obesity, and providing assurance that school meal nutrition guidelines meet the minimum federal school meal standards. Section 204 of the [Healthy, Hunger-Free Kids Act of 2010](#), Public Law 111-296, expands the scope of wellness policies; brings in additional stakeholders in its development, implementation and review; and requires public updates on the content and implementation of the wellness policies.

As of School Year 2006-2007, all districts were required to establish a local school wellness policy. Mingus Union High School District will review this handbook annually and make adjustments as deemed appropriate based on policy and regulation changes advised by Arizona School Boards Association.

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*HEALTHY FAMILIES
Create Healthy Communities*



Additional Information provided by the USDA - United States Department of Agriculture Food and Nutrition Service

Learn the National Facts

Obesity by the numbers

Over the past three decades, childhood obesity rates in America have tripled, and today, nearly one in three children in America are overweight or obese. The numbers are even higher in African American and Hispanic communities, where nearly 40% of the children are overweight or obese. If we don't solve this problem, one third of all children born in 2000 or later will suffer from diabetes at some point in their lives. Many others will face chronic obesity-related health problems like heart disease, high blood pressure, cancer, and asthma.

How Did We Get Here?

Thirty years ago, most people led lives that kept them at a healthy weight. Kids walked to and from school every day, ran around at recess, participated in gym class, and played for hours after school before dinner. Meals were home-cooked with reasonable portion sizes and there was always a vegetable on the plate. Eating fast food was rare and snacking between meals was an occasional treat.

Today, children experience a very different lifestyle. Walks to and from school have been replaced by car and bus rides. Gym class and after-school sports have been cut; afternoons are now spent with TV, video games, and the internet. Parents are busier than ever and families eat fewer home-cooked meals. Snacking between meals is now commonplace.

Thirty years ago, kids ate just one snack a day, whereas now they are trending toward three snacks, resulting in an additional 200 calories a day. And one in five school-age children has up to six snacks a day. Portion sizes have also exploded- they are now two to five times bigger than they were in years past. Beverage portions have grown as well- in the mid-1970s, the average sugar-sweetened beverage was 13.6 ounces compared to today, and kids think nothing of drinking 20 ounces of sugar-sweetened beverages at a time. In total, we are now eating 31 percent more calories than we were forty years ago—including 56 percent more fats and oils and 14 percent more sugars and sweeteners. The average American now eats fifteen more pounds of sugar a year than in 1970. Eight to 18-year old adolescents spend an average of 7.5 hours a day using entertainment media, including, TV, computers, video games, cell phones and movies, and only one-third of high school students get the recommended levels of physical activity.

Now that's the bad news. The good news is that by making just a few lifestyle changes, we can help our children lead healthier lives—and we already have the tools we need to do it. We just need the will.

In addition: MUHS promotes walking or biking to school to promote physical activity. The District annually reviews safe routes for students who walk or bike to school in connection with Yavapai County Health Department, Cottonwood Police and Fire Departments Safe Routes to School Program.

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www.letsmove.gov



What is MUHS District doing to support student and staff health & wellness?

For Students:

Students are given many opportunities to participate in a variety of activities that promote health and wellness including physical activity, social/emotional growth and stress reduction to include:



For Staff:	Annual health:	Annual District:
Staff receives a monthly wellness bulletin, District's Benefits plan Administrator	Health Screening, Mammograms, Cancer Screening, Bone Density	Biometric Screening

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Influenza Prevention Precautions (December 1st – March 31st)

Annually during flu season which starts December 1st and ends March 31st the following precautions will be used at Mingus Union High School District to prevent further outbreak:

- All students and teachers will wash hands each time entering classrooms.
- All students and teachers will wash hands before eating meals and after using restroom.
- Frequently touched surfaces and items will be frequently cleaned with disinfectant including door handles, drinking fountain handles and tabletops.
- Disinfectant will be available in each classroom for discretionary use by teachers.

PEDICULOSIS (LICE) INFESTATION

It is the position of Mingus Union High School District in cooperation with the National Association of School Nurses (NASN) and the Center for Disease Control and Prevention (CDC) that the management of pediculosis (infestation by head lice) should not disrupt the educational process. No disease is associated with head lice, and in-school transmission is considered to be rare. Children with live head lice should remain in class. Classroom-wide or school wide screening is not merited. There are many myths associated with pediculosis in regards to the life cycle of the louse, methods of transmission, treatment options, care of the environment, student's family, school and community at large. Research data does not support immediate exclusion upon the identification of the presence of live lice or nits as an effective means of controlling pediculosis transmission. Once diagnosed with live lice students' parents will be notified and student will be allowed to remain at school for treatment at home after school.

Immunizations



IMMUNIZATIONS OF STAFF

Unless legally exempted, all staff members must show proof of immunity to measles and rubella. The Human Resources department compiles a list with all staff immunization information to be accessed by the District Nurse in the event of an outbreak to determine who could be at risk.

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Measles (Rubella)

Acceptable proof of immunity to measles shall consist of:

- A record of immunization against measles with a live virus vaccine given on or after the first birthday; or
- A statement, signed by a licensed physician or a state or local health officer that affirms serologic evidence of having had measles.
- Anyone born prior to January 1, 1957 shall be considered to be immune to measles. (Rubella)

German measles (Rubella)

Evidence of immunity to rubella shall consist of:

- A record of immunization against rubella given on or after the first birthday; or a statement, signed by a licensed physician or a state or local health officer, that affirms serologic evidence of having had rubella.

General Information

In the event of an outbreak of either Measles or German measles, staff members who are not in compliance shall be put on leave without pay until they are in compliance. **Memory of immunization date is not acceptable; medical documentation of immunity is required.**

In the event of an outbreak of Measles or German measles, non-immune staff members, including those who utilize the exemption, must be excluded from school.

Implementing Policy

The District shall generate a list of all employees to identify those who need proof of immunity to measles. The Superintendent shall distribute information about the District's policy on measles and rubella. The Superintendent shall collect proof of immunity from staff members and compile a list denoting immunity or non-immunity of staff members.

Non Immune staff members shall be referred for vaccine to a physician or the County Health Department. Their records will be updated as they receive vaccine.

Maintaining Policy

Throughout each school year, new staff members shall be required to show proof of immunity before employment. A list of non-immune employees shall be maintained and updated throughout the year and maintained by the Human Resources Department for access by the District Nurse to determine who may be at risk in the event of an outbreak.

IMMUNIZATIONS OF STUDENTS

Subject to the exemptions as provided by law, immunization against diphtheria, tetanus, pertussis, poliomyelitis, rubella (measles), mumps, rubella (German measles), hepatitis B, hemophilic influenza b (Hib), and varicella is required for attendance of a student in District school. A student's immunization record must be submitted prior to attendance, although a student may be **conditionally enrolled** provided

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that necessary immunizations have been initiated and a schedule has been established for completion of the required immunizations. The school administrator shall review the school immunization record at least twice each school year until the pupil receives all of the required immunizations. A student shall not be allowed to attend school without submitting documentary proof of compliance to the school administrator unless the student is exempted from immunization. On enrollment, the school administrator shall forbid student attendance if the administrator does not have documentary proof of compliance and the student is not exempted from immunization. A student who fails to comply with the immunization schedule shall be excluded from school attendance until documentary proof of compliance is provided to the school administrator, except that a homeless student shall not be excluded from attendance until the fifth (5th) calendar day after enrollment.

Any student with serologic confirmation of the presence of specific antibodies against a vaccine-preventable disease shall not be subject to immunization against that disease as a condition for attending school.

The District will cooperate with county and state health departments in programs of immunization. Parents' permission must be secured before a student may participate in such immunization projects.

IMMUNIZATIONS OF STUDENTS

Subject to the exemptions in A.R.S. 15-873, immunization against each of the following diseases is required for attendance of a child in any school:

- Diphtheria;
- Tetanus;
- Hepatitis B;
- Pertussis;
- Poliomyelitis;
- Measles (rubella);
- Mumps;
- Rubella (German measles);
- *Hemophilic influenza* type b (Hib);
- Varicella
- Meningococcal

A child is in compliance with the requirements if the child has met the criteria of the appropriate immunization schedule as recommended by the Department of Health Services or is actively in the process of meeting such criteria as evidenced by having received one (1) dose of each of the required immunizations and has established a schedule for completion of the required immunizations.

A child shall not be allowed to attend school without submitting documentary proof to the school administrator unless the child is exempted from immunization pursuant to section 15-873. Upon enrollment, schools shall forbid attendance for a student not meeting the requirements for immunization or exemption from immunization. Homeless students shall be referred to the liaison for homeless

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students and shall not be required to comply with the immunization requirements until the fifth (5th) calendar day after enrollment.

The admitting official shall deem the student to be in compliance with the requirements of this regulation if:

- The student's immunization record complies with the documentary proof required pursuant to A.A.C. R9- 6-704, and the student has received or is in the process of receiving all required age-specific vaccine doses according to exhibit JLCB-EA; or
- An exemption from immunization is submitted in accordance with the procedures set forth in R9-6-706.

When the student's immunization record is not available at the time of enrollment, the school shall provide the responsible person with the following:

- Notification of the lack of compliance with the immunization requirements;
- A written notice that specifies when the required doses shall be completed, notes the availability of exemptions to immunization, and refers the student to a physician or local health department for review of the student's immunization history and provision of immunizations as needed; and
- Notification that the student is excluded in accordance with 15-872 until an acceptable immunization record that meets the standards of documentary proof is presented to the school.

When immunization records are presented that do not comply with the standards for documentary proof, the school shall:

- Notify the responsible person of the lack of compliance with the immunization requirements; and
- Obtain a review and verification of the student's immunization record by or in consultation with a school nurse, a public health nurse, a licensed physician, or an authorized representative of a local health department.

If the admitting official is unable to verify the accuracy of the student's immunization record pursuant to the preceding paragraph, the school shall provide to the responsible person:

- A written referral to a physician or local health department for further review of the student's immunization history and provision of immunizations as needed; and
- Notification that the student is excluded until an immunization record that meets the standards of documentary proof is presented to the school.

Each school shall maintain a current list of students without evidence of immunization or immunity to the diseases listed in R9-6-702, which shall include the names of all students with incomplete immunization histories or exemptions for personal or medical reasons where evidence of immunity has not been provided.

Schools shall forbid attendance by a student lacking proof of immunization or immunity against any of the immunization-preventable diseases as determined by the State Department of Health Services or local health department during periods of outbreaks of the diseases for which immunity is lacking. The announcement of an outbreak of disease and the length of the period of communicability shall be as declared by the state or local health department.

Standards for Documentary Proof

Proof of immunity to the diseases listed in R9-6-702 shall be documented in accordance with R9-6-704.

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Immunization records or statements of immunity shall be signed by a physician or authorized representative of a health agency.

Exemptions to Immunizations

Students who have reached their fifth (5th) birthday shall be exempt from the Hib immunization requirement.

Students who have reached their seventh (7th) birthday shall be exempt from the pertussis immunization requirement.

Any student with laboratory evidence of immunity shall not be subject to immunization against that disease as a condition for attending school, provided that such evidence is submitted to the school.

In accordance with A.R.S. 15-873, documentary proof is not required for a student to be admitted to school if one (1) of the following occurs:

- The parent or guardian of the student submits a signed statement to the school administrator stating that the parent or guardian has received information about immunizations provided by the Department of Health Services, understands the risks and benefits of immunizations and the potential risks of non-immunization, and that, due to personal beliefs, the parent or guardian does not consent to the immunization of the student.
- The school administrator receives written certification, signed by the parent or guardian and by a physician that states that one (1) or more of the required immunizations may be detrimental to the student's health and indicates the specific nature and probable duration of the medical condition or circumstance that precludes immunization.
An exemption pursuant to the preceding subparagraph is valid only during the duration of the circumstance or condition that precludes immunization.

If a medical exemption is granted in accordance with A.R.S. 15-873, it shall be defined by the grantor as either permanent or temporary.

- A permanent medical exemption may be provided for one (1) or more vaccines.
- A temporary medical exemption shall specify the date of its termination. A student with a temporary medical exemption shall be allowed to attend school on the condition that the required immunizations are obtained at the termination of the exemption; the responsible person shall be notified of the date by which the student shall complete all required immunizations.
- Any exemption granted in accordance with A.R.S. 15-873 shall be recorded on the school immunization record in the student's permanent file.

Students who lack documentary proof of immunization shall not attend school during outbreak periods of communicable immunization-preventable diseases as determined by the Department of Health Services or local health department. The Department of Health Services or local health department shall transmit notice of this determination to the school administrator responsible for the exclusion of the students.

Reporting Communicable Diseases

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The administrator of a school shall submit by telephone a report to the local health department any case, suspected case, or outbreak of a communicable disease as follows:

- Within twenty-four (24) hours after detecting a case or suspected case of:
 - Cryptosporidiosis
 - Enter hemorrhagic *Escherichia coli*
 - Hemophilic influenza: invasive disease
 - Hepatitis A
 - Measles
 - Meningococcal invasive disease
 - Mumps
 - Pertussis (whooping cough)
 - Rubella (German measles)
 - Salmonellosis Shigellosis
- Within twenty-four (24) hours after detecting an outbreak of:
 - Conjunctivitis: acute
 - Diarrhea, nausea, or vomiting
 - Scabies
 - Streptococcal Group A infection
- Within five (5) working days after detecting a case or a suspected case of:
 - Campylobacter
 - Varicella (chicken pox)

The report shall include:

- The name and address of the school
- The number of individuals having the disease, infestation, or symptoms
- The date and time the disease or infestation was detected or the symptoms began
- The number of rooms, grades, or classes affected and the name of each
- Information about each affected individual to include
 - Name,
 - Date of birth or age,
 - Residential address and telephone number,
 - Whether the individual is a staff member, student, child in care, or a resident
- The number of individuals attending or residing in the school, and
- The name, address, and telephone number of the person making the report.

Other Required Reports

An immunization record shall be maintained for each student in the school. Each immunization record shall include the following information:

- Name of the student;
- Date of birth;
- The date of the student's admission to the school;
 - The month and year in which each vaccine was received, except for measles, mumps, and rubella, for which the day, month, and year are required.

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- The type of immunizing agents administered to the student;
- The date each dose of immunizing agent is administered to the student; and
 - The established schedule for completion of immunizations if the student is admitted to or allowed to continue to attend a school pursuant to section 15-872, subsection E.
 - By November 15 of each year, each administrator of a public-school-based day care program or preschool shall submit a report to the state or local health department on a form provided by the Department. A school shall transfer an immunization record and signed requests for provision of immunizations, including any revocations thereof, with the mandatory permanent student record and provide at no charge, on request, a copy of the immunization record to the parent or guardian of the pupil.



Family and Community Involvement Policy

PARENTAL/INVOLVEMENT

Based on the philosophy of the District, it is the intent of the Governing Board that parental involvement in the District, at both the District and site levels, be defined in the broadest possible terms.

Further, it is the intent of the Board, under such a definition, that the Superintendent will, within the capabilities of the District staff and the financial limitations of the District at both the District and site levels, incorporate, to the maximum extent possible, a variety of activities, strategies, and mechanisms into the District and site structures that provide for the:

- Active involvement of,
- Active support to,
- Effective interaction with, and
- Development of parents as active partners in a student support team effort that will enhance the capacity of all students to reach their optimum potential.

Community Involvement in Education

The Governing Board recognizes that the public has substantial resources of training and experience that could be useful to schools. The strength of the local District is in large measure determined by the manner and degree to which these resources are utilized in an advisory capacity and to the degree that these resources are involved in supporting the improvement of the local educational program.

The advice of the public will be given careful consideration. In the evaluation of such contributions, the first concern will be for the educational program as it affects the students. The final decision may depart from this advice when in the judgment of the staff and the Board such advice is not consistent with goals

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adopted by the Board, consistent with current educational practice, or within the reach of the financial resources available.

Wellness Guidelines

Wellness Guidelines will be implemented at a school level and communicated annually to school staff, parent groups, partnering groups, students, and families.

School Health Advisory Committee (SHAC)

The District will have an active School Health Advisory Committee that meets no less than three times a school year.

- The council is led by the District Nurse.
- The council is assembled with the District Nurse, members from community organizations such as Fit Kids, Yavapai County Health Department, parents, support staff, and the MUHS Nutrition Director.
- The members bring requests, comments, and suggestions to the District Nurse for discussion.
- Review and approve the Health and Wellness Policy annually.

School Grounds

- School grounds and/or buildings are open to students, families, and the community for access to physical activities.
- Groups looking to utilize indoor or outdoor school facilities should contact the Mingus Union District Office at 928-634-7531 to reserve for usage.
- The District has the right to refuse access to facilities.

School Parent Groups/Partnering Groups

All Parent sponsored/Outside Partnering Group activities are encouraged to follow the Mingus Union High School District Wellness Guidelines.

- School parent groups/partnering groups are encouraged to follow the following USDA guidelines when bringing food into the school between the bells.

STUDENT WELLNESS

The School District strives to make a significant contribution to the general well-being, mental and physical capacity, and learning ability of each student while affording them the opportunity to fully participate in the educational process.

The District 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. Healthy eating is demonstrably linked to reduced risk for mortality and development of many chronic diseases as adults. To ensure the health and well-being of all students, the Board shall promote and monitor student wellness in a manner that the Board determines is appropriate in the following areas:

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- **Nutrition Guidelines:** All foods available in each school during the day will have as a primary goal the promotion of student health and the reduction of childhood obesity. All guidelines for reimbursable school meals shall not be less restrictive than regulations and guidance issued by the Secretary of Agriculture, as those regulations and guidance apply to schools.
- **Nutrition Education:** The goal is to influence students' eating behaviors by providing nutrition education that is appropriate for students' ages; reflects students' cultures; is integrated into health education or core curricula; and provides opportunities for students to practice skills and have fun.
- **Physical Activity:** The goals for physical activity are to provide opportunities for every student to develop the knowledge and skills for specific physical activities, to maintain students' physical fitness, to ensure students' regular participation in physical activity, and to teach students the short- and long-term benefits of a physically active and healthful lifestyle. Students will also be given the opportunity for “brain breaks” or brief moments of activity within the classroom to stimulate the physical body.
- **Other School-Based Activities:** The goal is to create a total school environment that is conducive to healthy eating and physical activity.
- **Evaluation:** A primary goal will be to regularly (at least annually) evaluate the effectiveness of this policy in promoting healthy eating and changing the program as appropriate to increase its effectiveness. Fit Kids statistical data will be evaluated annually to determine whether or not obesity rates are declining.
- **Parent, Community and Staff Involvement:** A primary goal will be to engage family members, students, and representatives of the school food authority, the Governing Board, school administrators, and the public in development and regular review of this school policy.

The Superintendent is directed to develop administrative regulations to implement this policy, including such provisions as may be necessary to address all food and beverages sold and/or served to students at school (i.e., competitive foods, snacks and beverages sold from vending machines, school stores, after-school programs, and funding-raising activities and refreshments that are made available at school parties, celebrations and meetings), including provisions for staff development, family and community involvement and program evaluation. Regulations and exhibits created for the purpose of implementing this policy shall be considered, in effect, to be an extension of this policy.

Health Services

STUDENT HEALTH SERVICES AND REQUIREMENTS

The Superintendent shall establish procedures for the student health services program in the District. Such procedures will provide for:

- Administration of patent or proprietary medications (over-the-counter [OTC] medications) in compliance with Arizona Revised Statutes and District policies.

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- Administration of prescription medications in compliance with Arizona Revised Statutes and District policies.
- Oversight of immunizations in conjunction with the County Health Department and in compliance with Arizona Revised Statutes.
- Providing preventive health information.
- The treatment of school-related injuries/illnesses, and recommendation for follow-up care.
- Screening clinics for selected physical impairments.

RELATIONS WITH EDUCATION

RESEARCH AGENCIES

The Superintendent is authorized to cooperate with colleges, universities, and other recognized research agencies in promoting potentially useful research. Because of the requirements in the Protection of Pupil Rights Amendment (20 U.S.C. 1232h) it may be necessary to limit the number and establish guidelines for the approval of studies. Decisions in connection with research involving students, teachers, or other employees will be influenced by the following factors:

- The objectives of the research should be clearly stated and the design should produce valid and reliable results that will then be made available to the District.
- The research should be expected to contribute to the improvement of education or the general welfare of students.
- Data derived from school records, interviews, surveys or questionnaires that have potential for invasion of the privacy of students or their families must have advance written authorization of parents or guardians even though the collecting and reporting of data are to be conducted under conditions of anonymity.
- Research proposals should be of sufficient scope and depth to justify the time and effort.
- In general, instructional activities will not be interrupted unless there is a clear significance for the educational program of the schools.
- Projects involving student researchers must have prior written approval by a faculty member of the institution in which the student is enrolled. This faculty member must have direct responsibility related to the student's research.

The following activities require direct annual notification to parents at the beginning of the school year of the specific or approximate dates when scheduled, if scheduled in accordance with the Protection of Pupil Rights Amendment:

- Activities involving the collection, disclosure, or use of personal information collected from students for the purpose of marketing or for selling that information (or otherwise providing that information to others for that purpose).
- The administration of any survey containing one or more items described below.
- Political affiliations or beliefs of the student or the student's parent.
- Mental or psychological problems of the student or the student's family.

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- Sex behavior or attitudes.
- Illegal, antisocial, self-incriminating, or demeaning behavior.
- Critical appraisals of other individuals with whom respondents have close family relationships.
- Legally recognized privileged or analogous relationships, such as those of lawyers, physicians, and ministers.
- Religious practices, affiliations, or beliefs of the student or the student's parent.
- Income (other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program).
- Any nonemergency, invasive physical examination or screening that is:
 - Required as a condition of attendance;
 - Administered by the school and scheduled by the school in advance; and not necessary to protect the immediate health and safety of the student, or of other students.

TEACHING ABOUT DRUGS, ALCOHOL, AND TOBACCO

The instructional program may include content on drugs, alcohol, and tobacco for the purpose of developing students' ability to make intelligent choices based on facts, and to develop courage to stand by their own convictions. Further, instruction on the nature and harmful effects of alcohol, tobacco, narcotic drugs, marijuana, and other dangerous drugs on the human system and instruction on the nonuse and prevention of use and abuse of alcohol, tobacco, narcotic drugs, marijuana, and other dangerous drugs may be included in the courses of study, with emphasis on grades four (4) through eight (8). Instruction on the nature and harmful effects of alcohol, tobacco, narcotic drugs, marijuana, and other dangerous drugs on a human fetus may be included in the courses of study in grades six (6) through eight (8). The instruction may be integrated into existing health, science, citizenship, and similar studies and shall meet the criteria for chemical abuse prevention education programs. The program should also emphasize the therapeutic benefit derived from the use of drugs prescribed by a health professional. The program will conform to all applicable Arizona Revised Statutes and Arizona Administrative Codes.

Objectives of the substance abuse program:

- To create an awareness of the total drug problem: prevention; education; treatment; rehabilitation; and law enforcement on the local, state, national, and international levels.
- To inform the students of the effect on the body of narcotics, sedatives, hallucinogens, and stimulants through the appropriate classes.
- To relate the use of drugs and alcohol to physical, mental, social, and emotional consequences.
- To encourage the individual to adopt an appropriate attitude toward pain, stress, and discomfort.
- To understand the need for seeking professional advice in dealing with problems related to physical and mental health.
- To understand the personal, social, and economic problems caused by the misuse of drugs and alcohol.

FAMILY LIFE EDUCATION

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Instruction in Sex Education *Grades 9 - 12*

Elective Lessons

The District may provide a specific *elective lesson* (parent permission required) or lessons concerning sex education as a supplement to the health course of study.

- Such supplement may be taken by the student only upon the written request of the student's parent or guardian.
- Alternative elective lessons from the state-adopted optional subjects shall be provided for students who do not enroll in elective sex education.
-

Governing Board Approval

- All elective sex education lessons to be offered must have prior approval from the Governing Board.

Format of Instruction:

- Lessons shall be taught to boys and girls separately.
- Lessons shall be ungraded and shall require no homework; any evaluation administered for the purpose of self-analysis shall not be retained or recorded by the school or the teacher in any form.
- Lessons shall not include tests, psychological inventories, surveys, or examinations containing any questions about personal beliefs or practices in sex, family life, morality, values, or religion on the part of students or their parents.
- Lessons for grades seven (7) and eight (8) shall include instruction on the laws relating to sexual conduct with a minor.

REGULATION

Instruction on Acquired Immune Deficiency Syndrome and Human Immunodeficiency Virus

The District will develop its own course of study for each grade. At a minimum, instruction shall:

- Be appropriate to the grade level in which it is offered.
- Be medically accurate.
- Promote abstinence.
- Discourage drug abuse.
- Dispel myths regarding transmission of the human immunodeficiency virus.
- The District may request that the Department of Health Services, in conjunction with the Department of Education, review instruction materials to determine their medical accuracy.

The District may request that the Department of Education provide the following assistance:

- A suggested course of study.
- Teacher training.
- A list of available films and other teaching aids.

At the request of a parent, a student shall be excused from the instruction on acquired immune deficiency syndrome and the human immunodeficiency virus. The District shall notify all parents of their ability to withdraw their children from the instruction.

Nutrition Services

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FOOD SERVICES

The District food service program shall strive to provide well-balanced meals that are nourishing, available at moderate prices, and served in pleasant surroundings.

The Board shall establish prices to be paid by students for school meals and the price charged to adults who purchase meals.

The Superintendent shall develop procedures to implement this policy and shall formulate a plan to provide free or reduced price meals for all eligible students.

PRICING, POSTING AND EXPENSES

The school meal program must be nonprofit. Pricing for student meals shall be established considering market share, creation and loss of revenue and shall be reviewed and adjusted periodically as necessary. The District in compliance with Section 205 of the Healthy, Hunger-Free Kids Act of 2010, shall provide the same level of support for lunches served to students who are not eligible for free or reduced price lunches as they are for lunches served to students eligible for free lunches. Revenue generation should not take precedence over the nutritional needs of students. Prices for adult meals and catering shall be reviewed periodically and shall reflect direct cost of operations. Revenues received are to be used only for the operation or improvement of the program.

Schools shall ensure that:

- The sale price of any food items sold including a reimbursable meal shall be posted in the dining area.
- Each person who eats a school meal must pay the regular price for the meal with two (2) exceptions:
 - Students who have an approved free or reduced-price income application on file for the current school year.
 - Food service employees who are paid from school lunch funds.

FREE AND REDUCED - PRICE FOOD SERVICES

Upon Board approval, the District shall enter into an agreement with the Arizona Department of Education to participate in the National School Lunch Program and School Breakfast Program and to receive commodities donated by the United States Department of Agriculture.

The Superintendent shall develop procedures with respect to determining eligibility of children for free and reduced price meals which follow federal regulations and state guidelines.

District and school administrators will work together to provide a safe, accessible and compliant food service program and shall observe the following directives in operating the food services programs.

MEALS IN SCHOOLS

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TRAINING

The school meal program director/supervisor will develop ongoing in-service and staff Development training opportunities for staff in the area of food safety, nutrition, and customer service.

ELIGIBILITY

Principals will ensure that families are aware of need-based programs for free or reduced price meals and encourage eligible families to apply. The confidentiality of students and families applying for or receiving free or reduced priced meals shall be maintained.

DINING ENVIRONMENT

Principals shall ensure that students and staff have adequate space to eat meals in pleasant surroundings and shall have adequate time to eat, relax, and socialize. Safe drinking water and convenient access to facilities for hand washing and oral hygiene shall be available.

DENIAL OF MEALS AS DISCIPLINARY ACTION

School personnel shall not withhold food from students as punishment. Disciplinary action, which indirectly results in the loss of meals, is allowable (such as suspension from school). Any student attending school, who is not allowed to eat in the cafeteria for disciplinary reasons, shall have a reimbursable meal made available to them.

FEEDING SENIOR CITIZENS

The District may enter into an agreement to provide meals for persons sixty (60) years of age or older and their spouses, or any group of such persons.

STUDENT, PARENT, TEACHER AND COMMUNITY INVOLVEMENT

The District shall promote activities to involve student and parents in the food/nutrition program. Activities may include menu-planning, enhancement of the eating environment, program promotion and related student-community support activities. Schools are encouraged to use the school meal program to teach students about good nutrition practices. School faculties and the general community should be involved in activities to improve the overall acceptability of the food service program. Each school should welcome and encourage parents to eat with students.

RECORDKEEPING

The District must keep complete and accurate records of the school meal program to serve as a basis for claims for reimbursement and for audit and review purposes. All records and tickets must be kept in accordance with the National School Lunch Program and School Breakfast Program State Guidance Manual.

SAFETY INSPECTIONS

The District is required to obtain a minimum of two (2) food safety inspections each school year.

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OTHER FOOD SALES

Food sales by student or adult entities or organizations shall be permitted provided these sales ensure optimum student participation in the school meals program and are in compliance with state and federal regulations.

When meals or snacks are offered to students in organized after-school education or enrichment programs, they should be provided by the food services program.

Healthy Environments

It is the policy of the School District to take reasonable and lawful measures to protect students and staff members from the transmission of communicable diseases. The Superintendent is authorized to adopt such procedures as are necessary to implement this policy in a manner consistent with state and federal laws.

Exclusion from School

A staff member who has a communicable disease shall be excluded from school only if the staff member presents a direct threat to the health or safety of others in the school workplace. The outbreak control measures and other directives of the Department of Health Services (DHS) and local health agencies shall be acted upon as the best medical knowledge and judgments with regard to the exclusion of a staff member who has a communicable disease that is addressed by DHS regulations. The communicable diseases specifically addressed by DHS regulations are listed at A.A.C. R9-6-203 *et seq.*

A staff member who has a chronic communicable disease, such as tuberculosis or HIV/AIDS, shall not be excluded unless a significant risk is presented, to the health and safety of others, which cannot be eliminated by reasonable accommodation. The Superintendent shall consult with legal counsel and health professionals, as necessary, to ensure that exclusion of a staff member with a chronic communicable disease will not violate the staff member's rights under the Americans with Disabilities Act or Section 504 of the Rehabilitation Act.

The school nurse or other person designated by the Superintendent must reassess a staff member who is excluded from school because of a communicable disease before the staff member returns to work. The District may require a physician's written medical release as a condition for the staff member's return to work.

Reporting and Notification

The District shall report by telephone to its local health agency each diagnosed and suspected case of a communicable disease as set out in regulation JLCB-R.

If an outbreak of a communicable disease occurs in a school setting, the Superintendent or the school nurse shall promptly inform staff members who are known to have special vulnerability to infection. The District does not assume any duty to notify an employee of health risks caused by the presence of a communicable disease in the school setting unless the at-risk employee has notified the District of the conditions when notification is needed.

Confidentiality

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The District shall make reasonable efforts to maintain the confidentiality of staff members' medical conditions. All medical information relating to employees is confidential. The identity of a staff member who has a communicable disease and/or the nature of the communicable disease may be disclosed only to:

- Staff members who must have such information to carry out their duties under this policy; or
- Staff members or students (or their parents/guardians) who must have such information to protect themselves from direct threat to their health or safety.

Inquiries or concerns by staff members or others regarding communicable diseases or a staff member who is known or believed to have a communicable disease shall be directed to the Superintendent or the District Nurse.

Universal Precautions

The District shall follow the "Universal Precautions Standard" set forth in the attached Exhibit GBGCB-E to protect employees who are at risk of being exposed to blood and body fluids in the course of their work.

Food Service Workers

The District shall follow the guidance of the U.S. Department of Health and Human Services concerning infectious and communicable diseases transmitted through the handling of food, and special precautions required for food services workers.

HIV/AIDS

Current medical information indicates that HIV can be transmitted by sexual intercourse with an infected partner, by injection of infected blood products, and by transmission from an infected mother to her child *in utero* or during the birth process. None of the identified cases of HIV infection in the United States are known to have been transmitted in a school setting or through any other casual person-to-person contact. There is no evidence that HIV is spread by sneezing, coughing, shaking hands, hugging, or sharing toilets, food, water, or utensils. According to best medical knowledge and judgments, the use of the "universal precautions" and other procedures that implement this policy are sufficient to protect staff members and students from transmission of HIV at school.

ENVIRONMENTAL SAFETY and WELLNESS



Responsibilities of the maintenance supervisor:

- Maintain an overall safety program in maintenance and operation of buildings and grounds.
- Provide specialized assistance as requested by school principal.
- Coordinate with the District Indoor Air Quality Coordinator who will:
 - Monitor indoor air quality.
 - Document District responses to the biennial information on improving and maintaining the indoor air quality (IAQ) in school buildings, which is required by A.R.S. 15-2002 (A)(14) to be distributed to school districts by the School Facilities Board.

Responsibilities of the school principals:

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- Schedule regular inspections.
- Posts required state and federal safety regulations and maintain appropriate safety records.
- Arrange for the correction of defects reported to them by employees in the building by requesting assistance from the maintenance department.
- Cooperate in the correction of defects reported by the maintenance department or other school administrators.
- Implement procedures to monitor and maintain safe indoor air quality.

Responsibilities of the transportation supervisor:

- Maintain standards for certification of school bus drivers.
- Maintain standards for periodic inspection and maintenance of school buses.
- Maintain standards for school bus operation and idling procedures for gasoline, diesel, and alternative fuel engines which minimize air pollution by buses.

Responsibilities of other employees:

- Report promptly to the principal of the school or immediate supervisor any events or situations which may cause increased air pollution within the school or on the campus and any defects in buildings, grounds, or equipment that might prove injurious to the safety, health, or comfort of students, employees, or other persons.
- Take reasonable precaution for the safe use of buildings, grounds, and equipment by students.

Responsibilities of students:

- Avoid the following behaviors:
 - Setting off a false fire alarm.
 - Misusing the fire alarm system, fire extinguishers, or other fire protection and safety equipment.
 - Setting a fire in the building or on the school grounds.
 - Taking any action or creating any situation which either directly or indirectly affects indoor air quality in an adverse manner.
 - Report promptly to the principal of the school or other appropriate school employee any defects in buildings, grounds, indoor air quality, or equipment that might prove injurious to the safety, health, or comfort of employees, students, or other persons.

Responsibilities of other individuals utilizing school buildings:

- Refrain from abusing safety equipment, such as fire extinguishers, alarm systems, et cetera.
- Report promptly to the Superintendent or another school employee any defects in buildings, grounds, indoor air quality, or equipment that might prove injurious to the safety, health, or comfort of students, employees, or other persons.

Physical Activity

The primary goal for the District's physical activity component is to provide opportunities for every student to develop the knowledge and skills for specific physical activities, maintain physical fitness, regularly participate in physical activity, and understand the short- and long-term benefits of a physically active and healthy lifestyle.

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A comprehensive physical activity program encompasses a variety of opportunities for students to be physically active, including physical education, recess, walk-to-school programs, after-school physical activity programs, health education that includes physical activity as a main component, and physical activity breaks within regular classrooms.

Physical activity (time, frequency, and/or intensity): Schools will ensure that students are moderately to vigorously active at least fifty percent (50%) of the time while participating in physical education classes.

Physical activity outside of physical education: Schools may offer after-school intramural programs and/or physical activity clubs that meet the needs and interests of all students, including those who are not athletically involved or those with special health care needs.

Physical activity: Grades 9-12 shall have physical education classes daily, which activities shall not be withheld for disciplinary purposes. (Regulation JL-RB)

Interscholastic Sports

The purpose of interscholastic athletics is both educational and recreational. The school sports program should encourage participation by as many students as possible and should always be conducted with the best interests of the participants as the first consideration.

District participation in interscholastic athletics shall be subject to approval by the Board. This shall include approval of membership in any leagues, associations, or conferences, and of any new agreements with other schools for a series of games or events.

The following rules shall be observed for participation by individual students:

- For each type of sport in which the student engages, the parents or guardian must give written consent.
- The student must be determined by a physician to be physically fit for the sport.

The Superintendent shall set up other rules for participation, such as those governing academic standing, in accordance with policies of the District and pertinent regulations and recommendations of the state interscholastic athletic association.

Health and Safety of Participants

The health and safety of participants in interscholastic athletic activities must receive careful consideration.

The Board shall develop, in consultation with the Arizona Interscholastic Association (AIA) guidelines, information and forms to inform and educate coaches, pupils and parents of the dangers of concussions and head injuries and the risks of continued participation in athletic activity after a concussion.

Before a student participates in an athletic activity, the student, the student's parents, and the coaches shall participate in a District program to educate program participants of the danger of concussions, head injuries, and the risk of continued participation in athletic activity after a concussion. Students and parents

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shall sign the AIA form (Exhibit JJIB-E) at least once each school year stating awareness of the nature and risk of concussion. The District shall retain documentation of the participation of all affected coaching staff members in the program. For the purpose of this policy, athletic activity does not include:

- Dance,
- Rhythmic gymnastics,
- Competition or exhibitions of academic skills or knowledge or other similar forms of physical noncontact activities,
- Civic activities or academic activities, whether engaged in for the purpose of competition or recreation.

A student who is suspected of sustaining a concussion in a practice session, a game, or other interscholastic athletic activity shall be immediately removed from the athletic event. A coach from the student's team or an official or licensed health care provider may remove a student from play. A team parent may also remove his or her own child from play. A student may return to play on the same day if a health care provider rules out a suspected concussion at the time the student is removed from play. On a subsequent day, the student may return to play if the student has been evaluated by and receives written clearance to resume participation in athletic activity from a health care provider who has been trained in the evaluation and management of concussions and head injuries as prescribed by A.R.S. 15-341.

A group or organization that uses property or facilities owned or operated by the District for athletic activities shall comply with the policies of the Board related to concussions and head injury. This requirement does not apply to teams based in another state participating in athletic events in Arizona.

A District employee, team coach, official, team volunteer or a parent or guardian of a team member is not subject to civil liability for any act, omission or policy undertaken in good faith to comply with the requirements of this policy or for decisions made or actions taken by a healthcare provider. Further, the District and its employees and volunteers are not subject to civil liability for any other people or organization's failure or alleged failure to comply with the requirements of this policy.

Participants must be provided access to water at all times during practice sessions, games, or other interscholastic athletic activities.

The Superintendent shall require that regulations for health and safety of participants in interscholastic athletics be developed, implemented, and enforced. Such regulations may, at the discretion of the Superintendent, be incorporated into this policy as an administrative regulation.

Academic Counseling and Social Services

Educational Guidance and Academic Counseling

The focus of the academic counseling and educational guidance programs in the District is on the academic developmental needs of students.

Personnel involved in academic counseling will demonstrate respect for the dignity and worth of each individual, and encourage each student to develop individual responsibility and decision-making skills. Personnel involved in counseling coordinate the school guidance program and involve all staff

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members in designing and implementing plans to meet three (3) major goals: of self and confidence in their own abilities in order to enhance their career options and development.

- *Educational development.* Students may participate in planning their education.
- *Personal/social development.* Students will develop appropriate behaviors for a variety of social settings. Students will develop awareness
- *Career development.* Students will develop career options consistent with their interests, abilities, and values.

School Counselors and Psychologists

- Psychological services, including testing, are available to students through the public schools. Initial referrals for psychological evaluations may come from certificated staff members or parents, or from the student.
- Prior written or oral consent of a parent or the legal guardian of a minor child must be obtained in the manner and as required by A.R.S. 36-2272 to procure, solicit to perform, arrange for the performance of or perform mental health screening in a nonclinical setting or mental health treatment on a minor. Eligible student (age eighteen [18] years and beyond) authorization must be obtained prior to the referral or performance of a mental health screening or mental health treatment as described above, except as otherwise provided by law or a court order. These restrictions do not apply when an emergency exists that requires a person to perform mental health screening or provide mental health treatment to prevent serious injury to or save the life of a minor child.
- A school psychologist shall administer preliminary tests to determine the need for psychological evaluations.
- Referrals to outside agencies shall be made only with parental or eligible student authorization, except as otherwise provided by law or a court order.

Social Services

The District also works closely with the following community referral agencies and will refer families for assistance when deemed appropriate [through the District's Homeless Liaison Coordinator](#):

- Catholic Social Services
- House of Ruth Pregnancy Center
- Arizona Department of Economic Security
 - Food Stamps
 - AHCCCS
 - Child and Family Services
- Old Town Mission
- Yavapai County Health Department
- Verde Valley Medical Center
- Spectrum Health Care
- Verde Valley Sanctuary
- Local Food Banks