



Office of the State  
Superintendent of Education  
Division of Health and Wellness



# LOCAL WELLNESS POLICY TEMPLATE

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## INTRODUCTION

The Office of the State Superintendent of Education (OSSE) developed this Local Wellness Policy (LWP) template to support local education agencies (LEAs) in developing high-quality LWPs. This template is structured to support LEAs in addressing all necessary LWP elements stipulated in local and federal law. This template also includes additional school health requirements and recommendations that LEAs may choose to incorporate into their policies (see *Local Wellness Policy Guide* for more detail). LEAs may choose to utilize this template when developing an LWP.

### WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD MODEL

This LWP template is intended to offer an outline for an LEA's approach to ensuring environments and opportunities exist for all students to practice healthy eating and physical activity behaviors throughout the school day while minimizing distractions. This LWP template is structured to align with the 10 components of the Whole School, Whole Community, Whole Child (WSCC) model. The WSCC model promotes a holistic approach to school health and integrates health services and programs into the day-to-day school and student life as a tool for improving academic achievement and learning. The WSCC model is the Centers for Disease Control and Prevention's (CDC) 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 (see *Local Wellness Policy Guide* for more detail).

#### The 10 WSCC components are:

1. Health Education
2. Physical Education and Physical Activity
3. Nutrition Environment and Services
4. Physical Environment
5. Social and Emotional Climate
6. Counseling, Psychological & Social Services
7. Health Services
8. Employee Wellness
9. Family Engagement
10. Community Involvement



#### HOW TO USE THIS TEMPLATE

This template is an optional tool to support LEAs in developing a high-quality LWP. LEAs may choose to incorporate some or all components of this template when developing their policy. LEAs must ensure all mandatory local and federal LWP components are included in their final policy (see *Local Wellness Policy Guide* for more detail).

This template is divided into 10 components in alignment with the WSCC model. Each component includes content that is color coded based whether it is a mandatory LWP element that must be implemented **and** included in the document (color: ● **yellow**), a local school health requirement, which must be implemented, that is highly recommended to be included though inclusion is not required (color: ● **green**), or additional recommended content that is not required, but encouraged to be included (color: ● **blue**). All ● **yellow** elements must be included in an LEA's LWP and all ● **green** and ● **blue** elements are recommended for inclusion. All elements, when combined together, support a high-quality, well-rounded LWP aligned to the CDC WSCC model.

In order to meet the mandatory ● **yellow** requirements of an LWP, LEAs should ensure the policy covers the following while completing this template:

- students in the school have access to healthy foods throughout the school day – both through reimbursable school meals and other foods available throughout the school campus/day – in accordance with federal and state nutrition standards;
- students receive quality nutrition education that helps them develop lifelong healthy eating behaviors;
- students have opportunities to be physically active before, during and after school;
- schools engage in nutrition and physical activity promotion and other activities that promote student wellness;
- school staff are encouraged and supported to practice healthy nutrition and physical activity behaviors in and out of school;
- the community is engaged in supporting the work of the LEA in creating continuity between school and other settings for students and staff to practice lifelong healthy habits; and
- the LEA establishes and maintains an infrastructure for management, oversight, implementation, evaluation, and communication about the policy and its established goals and objectives.

This template is intended to offer a WSCC-aligned outline for an LEA's policy that would apply to all its students, staff, and schools. At a minimum, LEAs should identify specific measurable goals and outcomes within each ● **yellow** section of the template. LEAs should include additional language or modify this template, where appropriate, so that it accurately reflects specific needs (e.g., removing references to grades not served by the LEA). LEAs may choose to amend the introductory language to each WSCC component and should enter the LEA's name wherever the text reads [LEA NAME]. For support in completing the template or understanding LWP requirements, please contact OSSE at [OSSE.schoolhealth@dc.gov](mailto:OSSE.schoolhealth@dc.gov).

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## LOCAL WELLNESS POLICY TEMPLATE

\_\_\_\_\_ Local Wellness Policy

This Local Wellness Policy (LWP) outlines \_\_\_\_\_'s approach to ensuring environments and opportunities for all students to practice healthy eating and physical activity behaviors throughout the school day while minimizing commercial distractions. This policy applies to all students, staff and schools in \_\_\_\_\_.

Specific measurable goals and outcomes are identified within each section below.

### LOCAL WELLNESS POLICY OFFICIAL(S)

\_\_\_\_\_ has identified the following LEA or school official(s) responsible for the implementation and oversight of the LWP to ensure each school's compliance with the policy ([7 CFR 210.31\(c\)\(4\)](#)).

NAME	POSITION TITLE	EMAIL ADDRESS	LWP ROLE

### TRIENNIAL PROGRESS ASSESSMENTS

At least once every three years, \_\_\_\_\_ will conduct a Triennial Progress Assessment and develop a report that reviews each \_\_\_\_\_ schools' compliance with this LWP. This assessment and report will include a full description of the progress made in attaining the goals of \_\_\_\_\_'s LWP.

The positions/persons responsible for managing the triennial assessment and report is \_\_\_\_\_. The above referenced individual(s) will monitor \_\_\_\_\_ schools' compliance with this LWP and develop the triennial progress reports. \_\_\_\_\_ schools will actively notify households/families of the availability of the triennial progress report.

### ESTABLISH A PLAN TO MEASURE THE IMPACT AND IMPLEMENTATION OF THE LOCAL WELLNESS POLICY

**Federal LWP Requirement ([7 CFR 210.31\(c\)\(6\)](#))** Provide a description of the plan for measuring the implementation of the local school wellness policy, and for reporting local school wellness policy content and implementation issues to the public.

\_\_\_\_\_ will evaluate compliance and effectiveness of this LWP using existing data collection tools, such as, but not limited to:



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## HEALTH EDUCATION

Health education is comprised of several aspects of wellbeing, including mental health, physical fitness, sexual health and safety.<sup>1</sup> High-quality health education and promotion of school-based health activities can help improve students' quality of life, increase healthy behaviors, and reduce risky behaviors throughout students' lives.<sup>2</sup> \_\_\_\_\_ recognizes the connection between good health, quality of life, and readiness to learn. \_\_\_\_\_ is committed to providing high-quality health education and promoting health policies and activities that result in students that exhibit healthier behaviors.

**Healthy Schools Act Requirement** ([DC Official Code § 38–821.01\(1F\)](#)); ([DC Official Code § 38–824.02\(b\)](#))

Students in kindergarten through Grade 8 receive health education instruction aligned with [OSSE Health Education Standards](#).

**Healthy Schools Act Requirement** ([DC Official Code § 38–824.02\(b\)\(2\)](#))

Schools serving students in kindergarten through Grade 8 provide an average of 75 minutes of health education per week.

**School Safety Omnibus Amendment Act Requirement** ([DC Official Code § 38–824.02\(b-2\)\(1\)\(A\)](#))

Students in kindergarten through Grade 12 receive age- and developmentally appropriate, evidence-based, and culturally responsive instruction on recognizing and reporting sexual misconduct and child abuse, setting and respecting appropriate personal and body boundaries and privacy rules, communicating with adults about concerns regarding body boundaries or privacy violations, the meaning of consent, developing and maintaining healthy relationships, and other appropriate topics to support healthy development of students.

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1 Centers for Disease Control and Prevention. (2019). Healthy Schools: Components of the Whole School, Whole Community, Whole Child (WCSS). Retrieved from [www.cdc.gov/healthyschools/wscs/components.htm](http://www.cdc.gov/healthyschools/wscs/components.htm)

2 Centers for Disease Control and Prevention. (2021). Healthy Schools: Improving School Health. Retrieved from: [www.cdc.gov/healthyschools/schoolhealth.htm](http://www.cdc.gov/healthyschools/schoolhealth.htm)

**Healthy Schools Act Requirement** ([DC Official Code § 38–824.02\(b-1\)\(1\)](#))

High school health instruction provides cardiopulmonary resuscitation (CPR) instruction in at least one health class necessary for graduation for students in grades 9-12.

**Graduation Requirement** ([5-A DCMR § 2203.3\(b\)](#))

Provide the necessary 1.5 Carnegie units in health/physical education to meet graduation requirement.

**PHYSICAL EDUCATION AND PHYSICAL ACTIVITY**

School-based physical education and physical activity programs offer the best opportunity for students to learn the key skills and gain knowledge needed to establish and sustain a healthy and active lifestyle.<sup>3</sup> High-quality physical education improves a student’s readiness to learn by contributing to motor skill development, boosting self-esteem, reducing stress and anxiety, and improving breathing and blood circulation which result in better concentration, improved behavior, and stronger academic success.<sup>4</sup>

\_\_\_\_\_ ] recognizes the connection between a physically active life and a child’s positive physical, mental, and emotional development. \_\_\_\_\_ understands the importance of engaging its students in opportunities and activities that are empowering, regardless of ability, developmental status, or culture. \_\_\_\_\_ is committed to providing students with high-quality instruction to reinforce physically active behavior during school and throughout life.

**Federal and Local LWP Requirement** ([7 CFR 210.31\(c\)\(1\)](#)); ([DC Official Code § 38–826.01\(b\)\(C\)](#))

LEAs must identify specific goals for increasing physical activity and other school-based activities that promote student wellness through physical activity. In developing these goals, LEAs must review and consider evidence-based strategies and techniques.



3 Shape America. (2019). Is it Physical Education or Physical Activity? Understanding the Difference. Retrieved from [www.shapeamerica.org/publications/resources/teachingtools/qualitype/pa\\_vs\\_pe.aspx](http://www.shapeamerica.org/publications/resources/teachingtools/qualitype/pa_vs_pe.aspx)  
4 US Department of Health and Human Services. *Physical Activity Guidelines for Americans*, 2<sup>nd</sup> edition. Washington, DC: US Department of Health and Human Services; 2018. Retrieved from [health.gov/sites/default/files/2019-09/Physical\\_Activity\\_Guidelines\\_2nd\\_edition.pdf](http://health.gov/sites/default/files/2019-09/Physical_Activity_Guidelines_2nd_edition.pdf)

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**Healthy Schools Act Requirement** ([DC Official Code § 38–821.01\(6C\)](#); ([DC Official Code § 38–824.02\(a\)](#))

Students in kindergarten through Grade 8 receive physical education instruction aligned with [OSSE Physical Education Standards](#).

**Healthy Schools Act Requirement** ([DC Official Code § 38–824.02\(a\)\(1\)\(A\)](#)); ([DC Official Code § 38–824.02\(a\)\(2\)\(A\)](#))

Schools serving students in kindergarten through Grade 5 shall set a goal to provide an average of 150 minutes of physical education per week, and at least one recess of at least 20 minutes per day. If a school serving students in kindergarten through Grade 5 provides less than an average of 90 minutes of physical education per week, it shall submit an action plan to OSSE detailing efforts it will take to increase physical education before beginning the next school year.

**Healthy Schools Act Requirement** ([DC Official Code § 38–824.02\(a\)\(1\)\(A\)](#)); ([DC Official Code § 38–824.02\(a\)\(2\)\(A\)](#))

Schools serving students in grades 6-8 shall set a goal to provide an average of 225 minutes of physical education per week, and at least one recess of at least 20 minutes per day. If a school serving students in grades 6-8 provides less than an average of 135 minutes of physical education per week, it shall submit an action plan to OSSE detailing efforts it will take to increase physical education before beginning the next school year.

**Healthy Schools Act Requirement** ([DC Official Code § 38–821.01\(6C\)](#))

At least 50 percent of physical education instruction time is devoted to moderate-to-vigorous physical activity.



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**Healthy Schools Act Requirement** ([DC Official Code § 38-824.03\(a\)](#))

Provide suitably adapted physical education or supplementary aids for any other student with special needs that preclude the student from participating in regular physical education instruction.

**Healthy Schools Act Requirement** ([DC Official Code § 38-824.03\(b\)](#))

Prohibit requiring or withholding physical activity as a means to punish students, provided that students who are not wearing appropriate athletic clothing may be prohibited from participating in physical activity until properly dressed.

**Healthy Schools Act Requirement** ([DC Official Code § 38-824.02\(a-1\)\(1\)](#))

Provide students in grades pre-K 3 and pre-K 4 with an average of 60 minutes of daily physical activity, including two 20-minute outdoor recess periods each day weather and space permitting.

**Healthy Schools Act Requirement** ([DC Official Code § 38-824.01\(a-c\)](#))

It shall be the goal to engage students in physical activity for at least 60 minutes each day. Schools shall promote this goal. Schools shall seek to maximize physical activity by means including: extending the school day, encouraging students to walk or bike to school; promoting active recess; supporting athletic programs; integrating movement into classroom instruction and classroom instruction breaks; entering into shared-use agreements with organizations that provide physical activity programming for children outside of the normal day; and using physical activity as a reward for student achievement and good behavior.

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## NUTRITION ENVIRONMENT AND SERVICES

Offering nutrition education and serving healthy school meals help mitigate childhood obesity, model healthy habits, and promote life-long healthy eating patterns and food selection. \_\_\_\_\_ recognizes that serving healthy meals to students through the [National School Lunch Program](#), [School Breakfast Program](#), [After School Snack Program](#), [Fresh Fruit and Vegetable Program](#), [Special Milk Program](#), [The Child and Adult Care Food Program](#), [Summer Food Service Program](#), and other supplemental nutrition programs contribute to the improved nutritional diet and health of students, reduces hunger among students, and improves students' readiness to learn.

### NUTRITION PROMOTION AND EDUCATION

\_\_\_\_\_ is committed to promoting positive nutrition behaviors and habits. Posters promoting [healthy portions](#), age appropriate [nutrition information](#) for healthier living, and food service menus will be posted in public areas throughout our school(s).v

#### **Federal LWP Requirement (7 CFR 210.31(c))**

LEAs must identify specific goals for nutrition promotion and education and other school-based activities that promote student wellness through nutrition. In developing these goals, LEAs must review and consider evidence-based strategies and techniques.



#### **Healthy Schools Act Requirement (DC Official Code § 38-822.05(b)(1))**

Distribute the menu for each breakfast and lunch served, nutritional content of each menu item, ingredients of each menu item, and the location where fruits and vegetables served in schools are grown and processed. Make information available on school website, in school's office, and to parents and legal guardians upon request.

#### **Healthy Schools Act Requirement (DC Official Code § 38-822.01(a)(1)(B)(i-ii))**

Make a vegetarian food option available as a daily option for the main course for breakfast and lunch at all grade levels. Vegetarian food options shall be rotated to avoid repetition.

**Healthy Schools Act Requirement** ([DC Official Code § 38-822.01\(a\)\(1\)\(B\)\(iii\)](#))

Vegetarian food options shall be clearly labeled or identified.

**Healthy Schools Act Requirement** ([DC Official Code § 38-822.03\(b\)\(3\)](#))

Solicit input from students, faculty, and parents, through taste tests, comment boxes, surveys, a student nutrition advisory council, or other means, regarding nutritious meals that appeal to students.

**Federal Requirement** ([7 CFR 210.10\(a\)\(2\)](#))

Hang *Offer vs. Serve* posters as a guide for students choosing a reimbursable meal.<sup>5</sup>

FOODS AND BEVERAGES MARKETED TO STUDENTS

All food and beverage products marketed on school grounds must, at a minimum, meet the USDA's school meal nutrition and [Smart Snacks](#) standards. Product marketing refers to any written, oral posted graphics intended to promote the sale of a food or beverage product.

\_\_\_\_\_ is committed to marketing food and beverages in nutrition-promoting ways including ensuring that filtered water is available for student and staff consumption throughout the day and that water is marketed in health promoting ways that do not detract from milk promotion. This commitment will be demonstrated by taking the specific actions outlined below.

**Federal and Local LWP Requirement** ([\(7 CFR 210.31\(c\)\(3\)\(iii\)\)](#); [\(DC Official Code § 38-822.06\(f\)\(2\)\)](#))

Establish policies for food and beverage marketing that allow marketing and advertising of only those foods and beverages that meet or exceed the federal nutritional and Healthy Schools Act standards.



<sup>5</sup> See Offer Versus Serve Posters for Lunch at [www.fns.usda.gov/tn/offer-versus-serve-national-school-lunch-program-posters](http://www.fns.usda.gov/tn/offer-versus-serve-national-school-lunch-program-posters)



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FOODS AND BEVERAGES PROVIDED TO STUDENTS

**Federal LWP Requirement** ([7 CFR 210.31\(c\)\(2\)](#))

Establish standards for all foods and beverages provided, but not sold, to students during the school day (e.g., in classroom parties, classroom snacks brought by parents, or other foods given as incentives).

**Federal and Local LWP Requirement** ([DC Official Code § 38-822.03\(c\)](#); ([7 CFR 210.18\(h\)\(2\)\(v\)](#))

Make cold, filtered water available free to students, through water fountains or other means, when meals are served to students.

FOODS AND BEVERAGES SOLD TO STUDENTS

**Federal LWP Requirement** ([7 CFR 210.31\(c\)\(3\)\(i-ii\)](#))

Establish standards and nutrition 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 standards and the Smart Snack in School nutrition standards.

**Healthy Schools Act Requirement** ([DC Official Code § 38-822.06\(e\)](#))

Schools shall prohibit all third-parties, other than school-related organizations and school meal service providers, from selling food or beverages of any type to students on school property from 90 minutes before the school day begins to 90 minutes after the school day ends.

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## SCHOOL MEALS

\_\_\_\_\_ is committed to serving healthy meals through the National School Lunch Program, School Breakfast Program and other supplemental programs to children, with plenty of fruits, vegetables, whole grains, lean protein and fat-free or low-fat dairy, that are moderate in sodium, low in saturated fat, have zero grams of trans-fat per serving (nutrition label or manufacturer's specification), and to meet the local and federal nutrition requirements and the needs of school children within their calorie requirements.

**Local LWP Requirement** ([DC Official Code § 38-826-01\(b\)\(2\)\(B\)](#))

Establish plans for increasing the use of locally grown, locally processed, and unprocessed foods from growers engaged in sustainable agriculture practices.



**Healthy Schools Act Requirement** ([DC Official Code § 38-823.01](#))

Track procurement using the [Locally Grown Food Item Tracking Log](#).<sup>6</sup>

**Healthy Schools Act Requirement** ([DC Official Code § 38-822.02\(a\)](#))

Serve school meals that meet or exceed the federal nutritional and HSA standards.

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<sup>6</sup> Office of the State Superintendent of Education. (2019). Locally Grown and Unprocessed Food Item Tracking Log. Retrieved from <https://osse.dc.gov/publication/locally-grown-and-unprocessed-food-item-tracking-log>

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## PHYSICAL ENVIRONMENT

According to the CDC, physical environment is defined as the school building and its contents, the land on which the building is located, and the area surrounding it.<sup>7</sup> The physical learning environment has a great impact on student learning and promotes and improves learning by ensuring the health and safety of students and staff. \_\_\_\_\_  
\_ recognizes the connection between physical environment and student outcomes and believes safe, positive, respectful learning environments will result in more engaged students. Additionally, \_\_\_\_\_ understands that environmental sustainability means meeting present needs without compromising the ability of future generations to meet their own needs.<sup>8</sup>  
\_\_\_\_\_ is committed to implementing and maintaining standards to ensure a healthy school physical environment and creating environmental sustainability practices for staff and students and recognizes its importance for both today and for years to come.

### Local LWP Requirement (DC Official Code § 38–826.01(b)(2)(A))

Establish goals for improving the environmental sustainability of schools.



### Local LWP Requirement (DC Official Code § 38–826.01(b)(2)(D))

Establish goals for developing and implementing an Environmental Literacy Program.



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7 Centers for Disease Control and Prevention. (2019). Components of the Whole school, Whole Community, Whole Child (WSCC): Physical Environment. Retrieved from <https://osse.dc.gov/node/1113332> [www.cdc.gov/healthyschools/wscs/components.htm](http://www.cdc.gov/healthyschools/wscs/components.htm)

8 Office of the State Superintendent of Education. (2019). 2017 DC Environmental Literacy Plan. Retrieved from [osse.dc.gov/sites/default/files/dc/sites/osse/page\\_content/attachments/2017%20Environmental%20Literacy%20Plan.pdf](https://osse.dc.gov/sites/default/files/dc/sites/osse/page_content/attachments/2017%20Environmental%20Literacy%20Plan.pdf)



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## SOCIAL AND EMOTIONAL CLIMATE

According to the CDC, social and emotional climate refers to aspects of students' educational experience that influence their social and emotional development.<sup>9</sup> The quality and character of school life is often referred to as school climate.<sup>10</sup> The school's climate and students' social and emotional needs play major roles in the development of students.<sup>11</sup> \_\_\_\_\_

\_\_\_\_\_ recognizes the connection between students' social and emotional needs and their ability to learn and perform both within and outside of the classroom setting. \_\_\_\_\_ understands that a positive school climate is one in which the quality and character of school life is formed through: a student-centered environment rooted in community values and input, systems of culture, gender, and LGBTQ responsive engagement, and proactive safety measures that prioritize the health and wellness of all members of the school community, including staff and families.

\_\_\_\_\_ is committed to developing socially and emotionally healthy students by creating and maintaining a school climate that results in a safe, engaging, healthy, challenging, and supportive learning environment.

\_\_\_\_\_ understands the design, education and implementation of social and emotional learning priorities is essential to demonstrating this commitment.

### Healthy Schools Act Requirement ([DC Official Code § 38-826.06](#))

Schools covered by the Youth Risk Behavior Surveillance System (YRBSS), serving grades 6-12, shall participate in the biennial DC data collection.

### Recommendation

Survey students to measure broad perceptions of student access to quality mental health supports.<sup>12</sup>

### Recommendation

Provide a designated physical safe space for LGBTQ students.<sup>13</sup>

9 Centers for Disease Control and Prevention. (2019). Components of the Whole school, Whole Community, Whole Child (WSCC): Social and Emotional Climate. Retrieved from <https://www.cdc.gov/healthyschools/wsc/components.htm>

10 National School Climate Center. (2012). The School Climate Improvement Process: Essential Elements(No:4). Retrieved from <https://files.eric.ed.gov/fulltext/ED573705.pdf>

11 Durlak, JA., Wiessberg, RP. (2011). Promoting Social and Emotional Development is an Essential Part of Students' Development. *Human Development*. (54)1-3. Retrieved from [www.researchgate.net/profile/Roger\\_Weissberg/publication/239784381\\_Promoting\\_Social\\_and\\_Emotional\\_Development\\_Is\\_an\\_Essential\\_Part\\_of\\_Students%27\\_Education/links/57f97a1d08ae91deaa616b5a/Promoting-Social-and-Emotional-Development-Is-an-Essential-Part-of-Students-Education.pdf](http://www.researchgate.net/profile/Roger_Weissberg/publication/239784381_Promoting_Social_and_Emotional_Development_Is_an_Essential_Part_of_Students%27_Education/links/57f97a1d08ae91deaa616b5a/Promoting-Social-and-Emotional-Development-Is-an-Essential-Part-of-Students-Education.pdf)

12 Refer to Appendix A in OSSE's Local Wellness Policy Guide for related supports and resources.

13 This recommendation is intended to serve as a complement to work done by the bullying prevention task force ([DC Code § 2-1535.02](#)), with the specific goal of reducing suicidal ideation and suicide rates in LGBTQ students.

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## COUNSELING, PSYCHOLOGICAL, AND SOCIAL SERVICES

The DC school behavioral health model is a coordinated system designed to promote positive school culture, mental wellness and access to high-quality services for children, youth, and their families.<sup>14</sup> \_\_\_\_\_ recognizes the connection between reducing barriers to access and helping students and schools thrive through integrating school- and community-based providers and services using a school-wide, multi-tiered system of supports (MTSS).<sup>15</sup>

\_\_\_\_\_ understands that partnerships with licensed school behavioral health professionals with education and training in social work, professional counseling, or school, clinical, or counseling psychology, whether employed by \_\_\_\_\_ or by a community-based organization that partners with the LEA, both collaborate with teachers, administrators, parents, and community-based organizations to provide a coordinated system of support that addresses prevention, intervention, and direct service needs of the school.

\_\_\_\_\_ is committed to supporting students and families through the provision of Counseling, Psychological and Social Services to ensure a well-rounded environment of comprehensive health and safety are made available for all within the school environment.

### **Youth Suicide Prevention and School Climate Survey Amendment Act (DC Official Code § 7-1131.17(a)-(b)(1))**

Ensure principals and teachers are trained to identify, approach, and refer students in psychological distress through requiring the completion of the Department of Behavioral Health’s online training once every two years.

### **School Safety Omnibus Amendment Act (DC Official Code § 38-952.02(b)(1))**

Ensure school staff are trained at the time of hiring and at minimum every two years thereafter on identifying, responding to, and reporting student-on-student acts of sexual harassment, sexual assault, or dating violence, including any mandatory reporting requirements under District or federal law.

### **School Safety Omnibus Amendment Act (DC Official Code § 38-951.02(c)(1-2))**

Ensure school staff are trained at the time of hiring and at minimum every two years thereafter on recognizing and reporting sexual misconduct, student sexual abuse, and child abuse and training on an annual basis for parents regarding sexual misconduct and student sexual abuse.

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14 Deputy Mayor of Health and Human Services. (2019). School Mental Health Program and School Health Services Program. Retrieved from [dmhhs.dc.gov/publication/school-mental-health-program-and-school-health-services-program](https://dmhhs.dc.gov/publication/school-mental-health-program-and-school-health-services-program)

15 Multi-tier System and Supports Integrated Services Framework for Student Wellness. (2015). CSHA Conference. Retrieved from [www.schoolhealthcenters.org/wp-content/uploads/2015/05/Building-Framework-MH-Supports-Presentation.pdf](https://www.schoolhealthcenters.org/wp-content/uploads/2015/05/Building-Framework-MH-Supports-Presentation.pdf)

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**Recommendation**

Identify specific goals for any school-based activities that promote student wellness through counseling, psychological and social services.

**Recommendation**

Provide a designated space for the delivery of behavioral and mental health services.

**Recommendation**

Establish a policy and procedures for suicide prevention and intervention, including a defined school crisis team and safe space for behavioral and mental health service delivery.<sup>16</sup>

**Recommendation:**

Encourage and support behavioral health staff to participate in the School Behavioral Health Community of Practice and to engage in ongoing support and learning with peers.

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<sup>16</sup> This acknowledgement coincides with a requirement mentioned in the Social and Emotional Climate section of this template.



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## HEALTH SERVICES

Health services provide preventive and actual care for a host of medical conditions and concerns within the scope of practice of school nurses, nurse practitioners, dentists, health educators, physicians, physician assistants, and allied health personnel.<sup>17</sup> These services include but are not limited to first aid, cardiopulmonary resuscitation (CPR) and automatic external defibrillator (AED) use, anaphylaxis treatment and management, and planning and management of chronic diseases such as asthma and diabetes. These services ideally combine school and community resources to meet the needs of the students, staff and community through proper care coordination.

\_\_\_\_\_ recognizes the connection between coordinated care models and improved student outcomes. \_\_\_\_\_ understands that registered nurses, doctors, physician assistants, allied health professionals and other qualified personnel may be among those contributing to the coordinated care students receive. \_\_\_\_\_ is committed to coordinated preventive and actual care service models that meet the needs of the students, staff and school community. \_\_\_\_\_ has established the following goals for implementing the Health Services component to demonstrate this commitment.

### **Student Health Care Act Requirement** ([DC Official Code § 38-602\(a\)-\(b\)](#))

Collect annual Universal Health Certificates and Oral Health Assessments from each student.

### **Access to Emergency Epinephrine in Schools Amendment Act** ([DC Official Code § 38-651.04a\(b\)\(3\)](#)); ([DC Official Code § 38-651.04a \(c\)\(2\)\(B\)](#))

Schools shall stock and maintain two undesignated epinephrine auto-injector twin-packs in a secure but easily accessible location and ensure at least two OSSE-certified staff members are trained annually and present during all hours of the school day.

### **Immunization of School Students Act** ([DC Official Code § 38-501](#)); ([DCMR § 5-E5300](#))

Ensure all schools implement the [Immunization Attendance Policy](#) and verify student compliance with District immunization requirements for enrollment and attendance.

### **Recommendation**

Provide a designated space that is recognized as the health or nurse's suite.

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<sup>17</sup> Centers for Disease Control and Prevention. (2021). Components of the Whole School, Whole Community, Whole Child (WSCC): Health Services. Retrieved from [www.cdc.gov/healthyschools/wscs/components.htm](http://www.cdc.gov/healthyschools/wscs/components.htm)

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**Recommendation**

Ensure qualified staff, inclusive of a Registered Nurse, provide care and management of health services rendered for the school environment.

**Recommendation**

Share, and make publicly available, nurse hours and availability, emergency care protocol, and undesignated epinephrine use plans.

**Recommendation**

Establish care coordination plans to increase access and referrals to primary care services and improve school-physician links following incidents.

**Recommendation**

Develop and implement a school preparedness system for medication storage and administration, tracking staff certifications, and students with chronic health conditions who lack clearly identifiable action plans.

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## EMPLOYEE WELLNESS

Employee health has a direct impact on how school staff perform in their roles in the school community. Employee wellness efforts at schools have the potential to increase feelings of work satisfaction and productivity, as well as lower rates of absenteeism and medical costs related to staff stress.<sup>18</sup> \_\_\_\_\_

recognizes the connection between healthy school employees and improved job performance and satisfaction.

\_\_\_\_\_ understands that while there is no legislative requirement for employee wellness, implementing policies that promote employee wellness and improve job satisfaction may have a positive impact on student development. While there are no Employee Wellness LWP requirements, \_\_\_\_\_ establishes the following employee wellness goals:

### **Federal LWP Requirement (7 CFR 210.31(c)(5))**

Describe the manner in which representatives of the LEA, teachers of physical education, school health professionals, the school board (if applicable), and school administrators are provided the opportunity to participate in the development, implementation, and periodic review and update of the Local Wellness Policy.



### **Recommendation**

Address and improve educator wellness through initiatives, for example offering yoga classes, immunizations, screenings and wellness campaigns, and mindfulness trainings.

### **Recommendation**

Provide professional development trainings to address and improve staff development and preparedness, for example by facilitating implicit bias training and assessments, and cross-cultural communication training.

### **Recommendation**

Take action to address and improve staff mental health, for example by informing and actively promoting Employee Assistance Programs and other community behavioral health resources available to staff throughout the school year.

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<sup>18</sup> Centers for Disease Control and Prevention. (2016). Preventing Chronic Disease. Absenteeism and Employer Costs Associated with Chronic Diseases and Health Risk Factors in the US Workforce. Retrieved from [www.cdc.gov/pcd/issues/2016/15\\_0503.htm](http://www.cdc.gov/pcd/issues/2016/15_0503.htm)

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## FAMILY ENGAGEMENT

Engaging family members in school programs and services is a priority that may have a lasting impact on students as they grow. \_\_\_\_\_ understands that welcoming participation from families when developing and implementing LWP goals supports the creation of an effective, comprehensive and robust local wellness policy that will meet the needs of the school community and the students it serves. By allowing families to participate in the development, implementation and evaluation of this wellness policy, \_\_\_\_\_ acknowledges the connection between family involvement, in connection with teachers, and other school staff, and ensuring students receive a well-rounded, comprehensive education that can serve them within and outside of the classroom setting. \_\_\_\_\_ is committed to engaging family members in our LWP development, wellness committee participation, policy implementation and other health and wellness requirements and initiatives.

### **Federal LWP Requirement (7 CFR 210.31(c)(5))**

Describe the manner in which parents and legal guardians are provided the opportunity to participate in the development, implementation, and periodic review and update of the Local Wellness Policy.



### **Recommendation**

Educate families on behaviors for contagious disease prevention and response and include guidelines for when to keep sick children at home and when they can return to school.

### **Recommendation**

Have communication protocols in place to notify families of positive contagious disease cases that protect the privacy of affected individuals and their families consistent with DC Health guidelines.

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**Recommendation**

Inform parents of all hygiene and cleaning practices introduced, including reinforcing proper hand hygiene, mask wearing, and other health practices while students are at home.

**COMMUNITY INVOLVEMENT**

Engaging community stakeholders in the LWP process may provide strong support for the school community both during operating hours and when the school itself is closed. Advisory neighborhood commission members, local business owners, area law enforcement and public works professionals are just a few community stakeholders that may provide valuable support and insight to creating the safe, healthy learning environment our students need to thrive in an academic setting. \_\_\_\_\_ recognizes and values the role the community plays in the safe and healthy development of our students. \_\_\_\_\_ is committed to accepting and implementing feedback and support from the community and works to engage members of the community-at-large in our students' development.

**Federal LWP Requirement ([7 CFR 210.31\(c\)\(5\)](#))**

Describe the manner in which community members are provided the opportunity to participate in the development, implementation, and periodic review and update of the Local Wellness Policy.









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