ACTION GUIDE
FOR SCHOOL NUTRITION AND PHYSICAL ACTIVITY POLICIES

Connecticut State Department of Education
Bureau of Health and Nutrition Services and Child/Family/School Partnerships
## Contents

A Message from Governor M. Jodi Rell........................................................................................................... viii
A Message from Commissioner of Education Betty J. Sternberg................................................................. ix
Connecticut State Board of Education Position Statement on 
Nutrition and Physical Activity in Schools................................................................................................. x
Acknowledgments........................................................................................................................................ xii

### Section 1 – Overview ................................................................................................................................

<table>
<thead>
<tr>
<th>Introduction..................................................................................................................................................</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Background</strong>........................................................................................................................................</td>
<td>2</td>
</tr>
<tr>
<td>▪ Governor’s Directive.................................................................</td>
<td>2</td>
</tr>
<tr>
<td>▪ School Wellness Policy........................................................</td>
<td>3</td>
</tr>
<tr>
<td>▪ Connecticut’s School Nutrition Policies Pilot.....................</td>
<td>3</td>
</tr>
<tr>
<td><strong>Rationale for Policy Development</strong>..........................................</td>
<td>4</td>
</tr>
<tr>
<td>▪ Student Nutrition and Physical Activity Impact Learning..........</td>
<td>4</td>
</tr>
<tr>
<td>▪ Children’s Current Nutrition and Physical Activity Status ....</td>
<td>4</td>
</tr>
<tr>
<td>▪ Schools Make a Difference.......................................................</td>
<td>5</td>
</tr>
<tr>
<td>▪ Importance of Local Policies...................................................</td>
<td>5</td>
</tr>
<tr>
<td><strong>Addressing District Concerns with Policy Development</strong>..........</td>
<td>6</td>
</tr>
<tr>
<td>▪ Responsibility for Student Health...........................................</td>
<td>6</td>
</tr>
<tr>
<td>▪ Financial Implications............................................................</td>
<td>6</td>
</tr>
<tr>
<td>▪ Time Constraints..........................................................................</td>
<td>6</td>
</tr>
<tr>
<td><strong>How to Use this Guide</strong>..........................................................</td>
<td>7</td>
</tr>
<tr>
<td>▪ Policy Requirements and Recommendations...............................</td>
<td>7</td>
</tr>
<tr>
<td>▪ Steps for Policy Development..................................................</td>
<td>7</td>
</tr>
<tr>
<td>▪ Policy Components.......................................................................</td>
<td>8</td>
</tr>
<tr>
<td>▪ Time Frame for Development and Implementation..................</td>
<td>8</td>
</tr>
<tr>
<td>▪ Policy Definitions.........................................................................</td>
<td>9</td>
</tr>
<tr>
<td>▪ Abbreviations and Acronyms...................................................</td>
<td>14</td>
</tr>
<tr>
<td><strong>References</strong>..................................................................................</td>
<td>15</td>
</tr>
<tr>
<td><strong>Resources</strong>..................................................................................</td>
<td>16</td>
</tr>
<tr>
<td>▪ Health and Achievement..........................................................</td>
<td>16</td>
</tr>
<tr>
<td>▪ School Wellness Policy Requirements........................................</td>
<td>16</td>
</tr>
</tbody>
</table>

### Section 2 – Steps for Creating Local Policy .........................................................................................

| **Step 1: Identify Policy Development Team**.................................................................................. | 17 |
| ▪ School Health Team Members.................................................. | 17 |
| ▪ Minimum Core Members for School Health Team.................. | 18 |
| ▪ Recommended Team Members.................................................. | 18 |
| ▪ Team Leader............................................................................... | 19 |
| ▪ Collaboration.............................................................................. | 19 |
| ▪ Responsibilities of School Health Team................................. | 19 |
| **Step 2: Identify Local Policy Development Process**................................................................. | 21 |
| ▪ Federal and State Laws Pertaining to Nutrition and Physical Activity........................................ | 22 |
| | Health Education..................................................................... | 22 |
| | Physical Education................................................................. | 22 |
| | Physical Activity................................................................. | 22 |
| | Foods and Beverages............................................................. | 23 |
| | Lunch Periods........................................................................ | 26 |
| | Food Safety............................................................................ | 26 |
| **Step 3: Conduct Local Assessment Process**................................................................................. | 27 |
| ▪ Nutrition and Physical Activity Practices................................ | 27 |
| ▪ Student Health Data............................................................. | 28 |
| **Step 4: Prioritize Needs and Develop an Action Plan**................................................................. | 30 |
| **Step 5: Draft Policy Language**................................................................................................. | 31 |
| ▪ Tips for Drafting Policy Language........................................... | 32 |
Section 3 – Policy Component: Nutrition Education and Promotion

Goal ................................................................................................................................. 39
Rationale ......................................................................................................................... 39
Policy Recommendations ............................................................................................... 39
- Standards-Based Sequential Nutrition Education ......................................................... 40
- Connecting with Existing Curriculums ........................................................................... 40
- Education Links With School ....................................................................................... 40
- Professional Development for Teachers ........................................................................ 40
- Appropriateness of Nutrition Component of Comprehensive Health Education Curriculum .......................................................... 40
- Educational Reinforcement .......................................................................................... 41
- Nutrition Promotion ...................................................................................................... 41
- Staff Awareness ............................................................................................................. 41
- Staff Members as Role Models ..................................................................................... 41

Implementation Guidance ............................................................................................. 42
- Standards-Based Sequential Nutrition Education ......................................................... 42
  Curriculum Development ............................................................................................... 42
  Health Education Assessment Project (HEAP) .............................................................. 42
  Health Education Curriculum Analysis Tool (HECAT) .................................................. 43
  Content Areas ............................................................................................................... 43
  Nutrition Themes .......................................................................................................... 44
  Nutrition Education Strategies ....................................................................................... 44
  Developmentally Appropriate and Culturally Relevant Activities ................................ 45
- Connecting With Existing Curriculums ........................................................................ 45
  Connecting Nutrition Concepts Across the Curriculum ................................................. 46
- Education Links With School ....................................................................................... 47
  Coordinated School Health ............................................................................................ 47
  Cafeteria-Based Nutrition Education .......................................................................... 47
  After-School Programs .................................................................................................. 48
- Professional Development for Teachers ....................................................................... 48
- Appropriateness of Nutrition Component of Comprehensive Health Education Curriculum .......................................................... 49
- Educational Reinforcement .......................................................................................... 49
- Nutrition Promotion ...................................................................................................... 50
- Staff Awareness ............................................................................................................. 50
- Staff Members as Role Models ..................................................................................... 51

References ...................................................................................................................... 52

Resources ......................................................................................................................... 53
- Connecting with Existing Curriculums ........................................................................... 53
- Coordinated School Health ............................................................................................ 53
- Curriculum Development .............................................................................................. 53
- Dietary Guidelines ......................................................................................................... 53
- Farm to School ............................................................................................................... 53
- Food Safety Education for Children ............................................................................. 53
Section 4 – Policy Component: Physical Education and Physical Activity ........................................55

Goal .................................................................................................................................55

Policy Recommendations ...............................................................................................55
- Standards-Based Sequential Physical Education .............................................................56
- Daily Physical Education Prekindergarten to Grade 12 .....................................................56
- Daily Recess ..................................................................................................................56
- Physical Activity Opportunities Before and After School .............................................56
- Physical Activity and Punishment ................................................................................56
- Safe Routes to School ..................................................................................................57
- Use of School Facilities Outside of School Hours .......................................................57
- Incorporating Physical Activity into the Classroom ......................................................57

Implementation Guidance .............................................................................................58
- Standards-Based Sequential Physical Education .............................................................58
  Curriculum Development ...............................................................................................58
  Differentiating Physical Education and Physical Activity .................................................58
  Physical Activity Recommendations for Children .........................................................59
- Daily Physical Education Prekindergarten to Grade 12 ................................................59
  Quality Physical Education ..........................................................................................59
  Components of a Quality Physical Education Program ...............................................60
  Teacher Qualifications ..................................................................................................60
  Content ..........................................................................................................................62
  Instructional Practices .....................................................................................................62
- Daily Recess ..................................................................................................................63
  Guidelines for Recess .....................................................................................................63
  Recess Before Lunch ......................................................................................................64
- Physical Activity Opportunities Before and After School .............................................64
  Characteristics of Quality Extracurricular Physical Activity Programs ..........................65
- Physical Activity and Punishment ................................................................................67
- Safe Routes to School ..................................................................................................67
- Use of School Facilities Outside of School Hours .......................................................68
- Incorporating Physical Activity into the Classroom ......................................................69
  Physical Activity Breaks ...............................................................................................70

References .......................................................................................................................71

Resources .......................................................................................................................73
- Behavior Management ..................................................................................................73
- Classroom-Based Physical Activity ..............................................................................73
- Data and Trends ..........................................................................................................73
- Evaluating Physical Education .....................................................................................73
- Guidelines and Standards ............................................................................................73
- Physical Activity Before and After School .................................................................73
- Programs to Promote Physical Activity ......................................................................73
- Recess ...........................................................................................................................73
- Safe Routes to School ..................................................................................................73
Section 5 – Policy Component: Nutrition Standards for School Foods and Beverages

Goal .......................................................................................................................................................... 75
Policy Recommendations .................................................................................................................................. 75
Policy Recommendations for School Meals ..................................................................................................... 76
- Nutrition Guidelines ................................................................................................................................. 76
- Menu Planning ........................................................................................................................................ 76
- Breakfast ........................................................................................................................................... 77
- Special Dietary Needs ............................................................................................................................. 77
Policy Recommendations for Other Foods and Beverages ............................................................................. 78
- Food or Beverage Contracts .................................................................................................................. 78
- Cafeteria A la Carte Sales .................................................................................................................... 79
- Vending Machines and School Stores ..................................................................................................... 79
- Events on School Premises .................................................................................................................. 79
- Fundraising ......................................................................................................................................... 79
- Classroom Snacks ............................................................................................................................... 79
- Access to Drinking Water .................................................................................................................. 80
- Food Brought Into School ................................................................................................................ 80
- Celebrations and Meetings ................................................................................................................ 80
Implementation Guidance for School Meals ................................................................................................. 81
- Nutrition Guidelines ................................................................................................................................. 81
  - USDA Requirements .......................................................................................................................... 81
  - Dietary Guidelines ............................................................................................................................. 81
    - Fruits and Vegetables ....................................................................................................................... 81
    - Whole-Grain Foods ........................................................................................................................ 81
    - Low-Fat and Nonfat Dairy .............................................................................................................. 81
    - Nondairy Alternatives .................................................................................................................... 81
  - Sharing Nutrition Information ........................................................................................................... 83
- Menu Planning ....................................................................................................................................... 84
- Breakfast ............................................................................................................................................. 84
- Encouraging Breakfast Consumption .................................................................................................... 84
- School Breakfast Program .................................................................................................................. 85
- Special Dietary Needs .......................................................................................................................... 85
Implementation Guidance for Other Foods and Beverages ............................................................................. 86
- Developing District Nutrition Standards ............................................................................................... 86
- Food or Beverage Contracts ................................................................................................................ 88
  - Beverages ......................................................................................................................................... 88
  - Food .................................................................................................................................................. 88
- Cafeteria A la Carte Sales .................................................................................................................... 90
  - Beverages ......................................................................................................................................... 90
  - Food .................................................................................................................................................. 90
- Vending Machines and School Stores ..................................................................................................... 92
  - Beverages ......................................................................................................................................... 92
  - Food .................................................................................................................................................. 92
- Events on School Premises .................................................................................................................. 94
  - Beverages ......................................................................................................................................... 94
  - Food .................................................................................................................................................. 94
- Fundraising ......................................................................................................................................... 96
  - Beverages ......................................................................................................................................... 96
  - Food .................................................................................................................................................. 96
  - Ideas for Healthy Fundraising Alternatives ....................................................................................... 98
- Classroom Snacks ................................................................................................................................ 99
  - After-School Snack Program ........................................................................................................... 99
- Access to Drinking Water .................................................................................................................. 100
- Food Brought Into School ................................................................................................................ 100
  - Nutrition Guidance ......................................................................................................................... 100
  - Food Safety .................................................................................................................................... 100
Section 6 – Policy Component: Other School-Based Activities to Promote Student Wellness

Goal .................................................................................................................................119
Rationale ..........................................................................................................................119
Policy Recommendations .................................................................................................119
  • Surroundings for Eating ..........................................................................................120
  • Time for and Scheduling of Meals .........................................................................120
  • Free and Reduced-Price Meals .............................................................................120
  • Summer Food Service Program ...........................................................................120
  • Financial Operation of Child Nutrition Programs ..................................................120
  • Qualifications of Food Service Staff Members .....................................................121
  • Training for Food Service Staff Members ..............................................................121
  • Food Safety ...........................................................................................................121
  • Food Rewards and Punishment .............................................................................121
  • Sharing of Foods ....................................................................................................121
  • Staff Wellness ........................................................................................................121
Implementation Guidance .................................................................................................122
  • Surroundings for Eating ........................................................................................122
  • Time for and Scheduling of Meals .........................................................................122
  • Free and Reduced-Price Meals .............................................................................123
Section 7 – Policy Component: Communication and Promotion

Goal ..................................................................................................................................................133

Rationale ........................................................................................................................................133

Policy Recommendations ..............................................................................................................133

- Consistent Health Messages .......................................................................................................134
- Engaging Families .......................................................................................................................134
- Engaging Students ......................................................................................................................134
- Partnering with Community Organizations ..............................................................................135
- Food Marketing in Schools .........................................................................................................135
- Media ..........................................................................................................................................135

Implementation Guidance ............................................................................................................136

- Consistent Health Messages .......................................................................................................136
- Engaging Families .......................................................................................................................137
- Engaging Students ......................................................................................................................138
- Partnering with Community Organizations ..............................................................................139
- Food Marketing in Schools .........................................................................................................141
  Acceptable and Unacceptable Marketing Techniques ...............................................................141
  Promoting School Meals ............................................................................................................141
- Media ..........................................................................................................................................142

References .......................................................................................................................................143

Resources .........................................................................................................................................144

- Engaging Families .......................................................................................................................144
- Engaging Students .......................................................................................................................144
- Partnering with Community Organizations ..............................................................................144
- Marketing and Promotion ............................................................................................................144
- Working with the Media ..............................................................................................................144

Section 8 – Policy Component: Measurement and Evaluation

Goal ..................................................................................................................................................145

Rationale ........................................................................................................................................145

Policy Recommendations ..............................................................................................................145

- Monitoring ...................................................................................................................................146
- Policy Review ...............................................................................................................................146
Section 9 – School Nutrition Policies Pilots

Overview ........................................................................................................................................... 155

- Background .................................................................................................................................. 155
- Goal ............................................................................................................................................. 155
- Application Process ......................................................................................................................... 155
- Pilot Requirements .......................................................................................................................... 156
- Support Training ............................................................................................................................. 157
- Support Resources .......................................................................................................................... 158
- Funding ......................................................................................................................................... 158

Pilot Results ........................................................................................................................................ 159

- Existence of School Health Team .................................................................................................. 159
- School Health Team Membership .................................................................................................. 159
  Table 1. Representation on School Health Teams .......................................................................... 159
- Importance of Member Representation .......................................................................................... 160
  Table 2. Rating of Importance of Member Representation .............................................................. 160
- Policy Adoption ............................................................................................................................... 160
- Time for Team Meetings ................................................................................................................. 161
- Continuation of School Health Team .............................................................................................. 161
- Barriers to Policy Development ..................................................................................................... 161
  Table 3. Perceived Barriers to Policy Development ...................................................................... 161
- Policy Development Resources ...................................................................................................... 162
  Table 4. Usefulness of Policy Development Resources .................................................................. 162
- Policy Promotion Strategies .......................................................................................................... 163
  Table 5. Strategies Used to Promote Policies ................................................................................. 163
- Benefits of Participating in the School Nutrition Policies Pilot ..................................................... 164
- Pilots’ Perceptions of Results .......................................................................................................... 164
  Table 6. School Health Teams’ Perception of Pilot Results ........................................................... 165

Pilot District Profiles .......................................................................................................................... 166

- Farmington Public Schools ............................................................................................................ 167
- Franklin Elementary School ............................................................................................................ 170
- Killingly Public Schools .................................................................................................................. 173
- Milford Public Schools .................................................................................................................... 175
- Norwalk Public Schools .................................................................................................................. 178
- Putnam Public Schools .................................................................................................................... 181
- Regional School District #10 ............................................................................................................ 184
- Ridgefield Public Schools ............................................................................................................... 187
- Salem Public Schools ....................................................................................................................... 190
- Windham Public Schools ................................................................................................................ 194

References ............................................................................................................................................ 152
Resources ............................................................................................................................................ 152
- Evaluation ..................................................................................................................................... 153
- Surveys .......................................................................................................................................... 153
A Message from Governor
M. Jodi Rell

In June 2005, I directed the Commissioner of Education to develop and publish guidelines to assist local school boards of education in adopting school nutrition policies, including:

- Methods for promoting physical exercise both during and after the school day through physical education programs as well as with organized recreation programs;
- Methods of providing healthy meals and food options, including fresh fruit and vegetables, at outlets within a school and which address not just the nutritional value of food sold in vending machines and stores, but also meals such as breakfast and lunch served to children in school cafeterias;
- Processes for augmenting health, science or physical education curricula to highlight to students the need for a healthy lifestyle and the roles that diet and exercise play in a healthy lifestyle;
- Strategies for conducting meetings and forums with parents, teachers, members of the board of education and parent-teacher organizations to identify the support parents need in order to encourage healthy lifestyles in their children;
- Techniques to involve students in the discussion of school nutrition as a component of promoting healthy lifestyles to ensure that school nutrition policies are effective and recognize the realities facing students in the school environment; and
- Research and data, including health trends and nutritional information that local school districts can use and provide to parents to make balanced, rational decisions when implementing comprehensive local school nutrition policies.

In response to my directive, this Action Guide for School Nutrition and Physical Activity Policies has been developed by the Connecticut State Department of Education. It provides comprehensive guidance for school districts on developing and implementing policies that promote healthy eating and physical activity.

It is my hope that local boards of education will use the Action Guide to customize policies that meet the local needs of the children and families they serve. With guidance and support from the Connecticut State Department of Education, and with the involvement of students, parents, school staff members and community partners, local school districts can develop and implement comprehensive school nutrition and physical activity policies that positively impact students’ health and well-being.

M. Jodi Rell
Governor
February 2006
A Message from Commissioner of Education
Betty J. Sternberg

Well-planned and effectively implemented school nutrition and fitness programs have been shown to enhance students’ overall health, behavior and academic achievement in school. By developing and implementing districtwide policies on nutrition and physical activity, schools can create an environment to help reduce barriers to learning.

The Connecticut State Department of Education is pleased to provide districts with a resource to assist in these efforts. The *Action Guide for School Nutrition and Physical Activity Policies* provides comprehensive guidance for school districts on developing and implementing policies to promote healthy eating and physical activity. It was reviewed by an outside committee representing 21 health and education organizations in Connecticut.

The *Action Guide* translates research-based policy development concepts and models into real-life strategies that work at the local level, based on the experience of 10 Connecticut pilot school districts. The *Action Guide* further supports the State Board of Education’s *Position Statement on Nutrition and Physical Activity* (adopted December 7, 2005), which acknowledges that children’s health is essential to their success in school, and emphasizes the Board’s commitment to promoting policies that support a learning environment conducive to healthy lifestyles.

The *Action Guide* will help districts meet recommended state and national guidelines and the U.S. Department of Agriculture School Wellness Policy requirements (Public Law 108-265). The *Action Guide for School Nutrition and Physical Activity Policies* is intended to guide local school districts in establishing and implementing policies and practices that:

- promote students’ improved nutrition and increased physical activity;
- encourage families to support and participate in programs and initiatives that are intended to improve their children’s health; and
- encourage schools to collaborate with community organizations to provide consistent health messages and to support school-based activities that promote healthy eating and physical activity.

I strongly encourage all Connecticut school districts to use the *Action Guide for School Nutrition and Physical Activity Policies* to assist in developing and promoting local school policies and practices that consistently support student health and learning. The Connecticut State Department of Education is committed to providing ongoing professional development and technical assistance opportunities to support districts’ efforts to develop and implement local school nutrition and physical activity policies. I look forward to working together to optimize opportunities for improved student health and achievement in Connecticut.

Dr. Betty J. Sternberg
Commissioner of Education
February 2006
Position Statement on
Nutrition and Physical Activity in Schools

Adopted December 7, 2005

The Connecticut State Board of Education believes that children’s health is essential to their success in school. Research studies over the past decade have consistently concluded that student health status and school achievement are directly connected and, in fact, that student health is one of the most significant influences on learning and achievement. Healthy eating and regular physical activity are essential components of a healthy lifestyle. Well-planned and effectively implemented nutrition and physical activity programs have been shown to enhance students’ overall health, behavior and academic achievement.

The Connecticut State Board of Education is committed to promoting policies that support a learning environment conducive to healthy lifestyles. School districts must engage students, parents, school staff members and community members to develop, implement and monitor policies and practices to promote and support healthy eating and sufficient physical activity.

The Role of Schools
School polices and practices play a significant role in promoting a healthy environment. Schools must create an environment that gives students consistent, accurate health information and ample opportunity to use it. The classroom, cafeteria and school activities should provide clear and consistent messages that explain and reinforce healthy eating and physical activity. Students must be taught skills for making healthy lifestyle choices not only in the school building, but also in their daily activities outside of school. Local school boards must establish and enforce policies and procedures that:

- help schools promote good nutrition and regular physical activity;
- incorporate nutrition and physical activity goals into school improvement plans;
- require schools to allow time in the curriculum for nutrition education, physical education and physical activity, and to incorporate these concepts throughout all subjects;
- seek revenue sources that do not require raising funds by competing with nutritious school meals;
- make decisions regarding the sale and use of foods and beverages at school-sponsored activities (such as fundraisers, parties and sports events) based on healthy eating goals;
- promote positive local media coverage of schools’ efforts to improve the overall health of students and their families; and
- support families’ efforts to provide a healthy diet and daily physical activity for their children by providing education, resources and activities that help with positive role modeling.
The Role of Families

Good nutrition and physical activity practices begin at home. Family involvement is crucial. Families can help children develop healthy habits by providing healthy choices, talking about good nutrition, encouraging an interest in cooking, encouraging safe and positive physical activity, serving as positive role models, and participating in school health and nutrition programs. Schools must provide education and support so that families can:

- understand the importance of preparing nutritious meals and engaging in regular physical activity with their children;
- reinforce messages about the importance of proper nutrition and physical activity, and serve as role models for healthy living;
- advocate for a healthy and active school environment for their children, including providing healthy foods for school events;
- understand the goals of the school curriculum and encourage appropriate nutrition education and physical education; and
- understand the value of and encourage children’s participation in quality school meal programs.

The Role of Students

Students have a responsibility for protecting their own health. Students must take advantage of opportunities to learn about nutrition and physical activity, and apply this knowledge by making healthy choices for themselves. Schools must support students by teaching and providing opportunities for students to:

- set personal goals for healthy eating and physical activity, and make healthy choices;
- actively engage in physical education and enjoy physical activity;
- advocate for nutrition education and physical activity options at school;
- take an active role in advocating for healthy food choices at school, not only in the cafeteria, but in vending machines, school stores and fundraising activities; and
- serve as role models for younger children.

The Role of Communities

Communities play an important role in promoting healthy lifestyles by investing in the health, fitness, safety and well-being of children and their families. Community agencies can collaborate to provide integrated support services that build upon existing community resources and linkages with public schools. Schools must partner with communities to:

- work with families to support strategies that contribute to improved nutrition, increased physical activity and overall healthy lifestyles;
- provide and/or seek funds needed to support the school district’s healthy lifestyles initiatives;
- develop and coordinate networks for communicating information and services that support nutrition and physical activity programs; and
- make facilities and programs available, accessible and affordable for the pursuit of individual as well as group physical activities and sports.

Acknowledgments

This guide was developed through Connecticut’s 2003-2005 Team Nutrition Training Grant, funded by the U.S. Department of Agriculture (USDA), Food and Nutrition Service.

Appreciation is given to the following organizations for allowing the Connecticut State Department of Education to reprint and/or adapt selected material for use in this guide:

- Centers for Disease Control and Prevention
- Idaho Action for Healthy Kids
- National Alliance for Nutrition and Activity
- National Association for Sport and Physical Education
- National Association of State Boards of Education
- Rhode Island Healthy Schools Coalition
- U.S. Department of Agriculture, Food and Nutrition Services
- Wyoming Action for Healthy Kids

Appreciation is given to the following organizations for reviewing this guide:

- Action for Healthy Kids
- American Association of Family and Consumer Sciences, Connecticut Affiliate
- American Cancer Society
- American Diabetes Association
- American Heart Association
- Association of School Nurses of Connecticut
- Connecticut Association of Boards of Education
- Connecticut Association of Health, Physical Education, Recreation and Dance
- Connecticut Association of Schools
- Connecticut Association of Public School Superintendents
- Connecticut Commission on Children
- Connecticut State Board of Education
- Connecticut State Department of Public Health
- Connecticut Association of Directors of Health
- Connecticut Dietetic Association
- End Hunger Connecticut!
- Environment and Human Health, Inc.
- Hezekiah Beardsley Connecticut Chapter of the American Academy of Pediatrics
- Parent Teacher Association of Connecticut
- School Nutrition Association of Connecticut
- State Student Advisory Council on Education
Acknowledgments, Continued

Appreciation is given to the members of the Connecticut pilot districts’ School Health Teams for their hard work and commitment to promote a healthy school environment through the development and implementation of school nutrition and physical activity policies:

- Farmington Public Schools
- Franklin Elementary School
- Killingly Public Schools
- Milford Public Schools
- Norwalk Public Schools
- Putnam Public Schools
- Regional School District #10
- Ridgefield Public Schools
- Salem Public School
- Windham Public Schools

The Action Guide for School Nutrition and Physical Activity Policies was developed through a 2003-2005 Team Nutrition grant from the U.S. Department of Agriculture to the Connecticut State Department of Education. This project has been partially funded with Federal funds from the U.S. Department of Agriculture, Food and Nutrition Service. The content of this publication does not necessarily reflect the views or policies of the Department, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.

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Introduction

The Action Guide for School Nutrition and Physical Activity Policies is intended to help schools encourage healthy lifestyles in students by promoting the development and implementation of comprehensive nutrition and physical activity policies by local boards of education. The goals of these policies are to promote school practices that consistently support student health and learning, and to ensure that:

- the classroom, cafeteria and other school activities provide clear and consistent messages that explain and reinforce healthy eating and physical activity habits;
- students learn to make healthy lifestyle choices not only in the classroom and the cafeteria, but also at class parties, sports events — wherever they are throughout the school day; and
- students have many opportunities to practice healthy habits — they can choose from an array of healthy food options, eat in relaxed and comfortable surroundings and enjoy daily physical activity.

The Action Guide for School Nutrition and Physical Activity Policies includes detailed information on the steps, strategies and resources involved in developing, adopting and implementing school policies to promote healthy eating and physical activity. This document is based on current science, public health research, national guidelines, legislation for the U.S. Department of Agriculture (USDA) School Wellness Policy* (Public Law 108-265) and existing practices from exemplary states and school districts. Following these guidelines will help school districts comply with the USDA School Wellness Policy regulations and meet recommended national and state standards for nutrition and physical activity practices. Specific information on how to use this guide is found on page 7.

* The term “School Wellness Policy” is used by USDA to denote those policies related to nutrition and physical activity that are required by Public Law 108-265 (Child Nutrition and WIC Reauthorization Act of 2004). However, the concept of “wellness” is much broader, and goes beyond nutrition and physical activity to address the physical, mental, social and emotional needs of students. Some aspects of the broader concept of “wellness” are not addressed in the recommended policies contained in this document. These model policies also do not address certain important related areas, such as counseling services for those with eating disorders and policies to reduce weight-related bullying. The Connecticut State Department of Education encourages school districts to establish and maintain coordinated school health initiatives that address all components of school health, including mental health services and school health services, which are not addressed in this document. For additional information, see SDE’s Guidelines for A Coordinated Approach to School Health: Addressing the Physical Social and Emotional Health Needs of the School Community (http://www.sde.ct.gov/sde/cwp/view.asp?a=2678&q=320726#Guidelines).

Note: Throughout this document the words “parent(s)” and “family(ies)” will be used in the broadest sense to mean those adults with primary responsibility for children. The Connecticut State Department of Education (SDE) prefers the use of “family” to “parent” because not all responsible agents are parents, but most are family, either by relationship or function.
Background

The development of the *Action Guide for School Nutrition and Physical Activity Policies* is in response to three initiatives related to the promotion of nutrition and physical activity in schools:

1. the Governor’s June 2005 directive to the Connecticut State Department of Education to develop guidelines to assist local boards of education in adopting school nutrition policies;
2. the USDA June 2004 legislation for School Wellness Policy; and

**Governor’s Directive**

In June 2005, the Governor directed the Connecticut State Department of Education to develop guidelines to promote the development and implementation of comprehensive school nutrition policies by local boards of education. The purpose of these guidelines is to encourage healthy lifestyles in students by addressing:

- Methods for promoting physical exercise both during and after the school day through physical education programs as well as with organized recreation programs;
- Methods of providing healthy meals and food options, including fresh fruit and vegetables, at outlets within a school and which address not just the nutritional value of food sold in vending machines and stores, but also meals such as breakfast and lunch served to children in school cafeterias;
- Processes for augmenting health, science or physical education curricula to highlight to students the need for a healthy lifestyle and the roles that diet and exercise play in a healthy lifestyle;
- Strategies for conducting meetings and forums with parents, teachers, members of the board of education and parent-teacher organizations to identify the support parents need in order to encourage healthy lifestyles in their children;
- Techniques to involve students in the discussion of school nutrition as a component of promoting healthy lifestyles to ensure that school nutrition policies are effective and recognize the realities facing students in the school environment; and
- Research and data, including health trends and nutritional information that local school districts can use and provide to parents to make balanced, rational decisions when implementing comprehensive local school nutrition policies.

*Gov. M. Jodi Rell*

*June 14, 2005*
School Wellness Policy
In June 2004, the Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265) was passed. This federal legislation requires that public and private schools and Residential Child Care Institutions (RCCIs) participating in USDA Child Nutrition Programs (i.e., National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program) must establish a local wellness policy by the first day of the 2006-07 school year. The majority of Connecticut schools are affected by this legislation, because 88 percent participate in USDA Child Nutrition Programs.

At a minimum, the district School Wellness Policy must:

1. include goals for nutrition education, physical activity and other school-based activities designed to promote student wellness in a manner that the local educational agency determines appropriate;
2. include nutrition guidelines for all foods available on the school campus during the school day, with the objectives of promoting student health and reducing childhood obesity;
3. provide an assurance that guidelines for school meals are not less restrictive than those set by the U.S. Department of Agriculture;
4. establish a plan for measuring implementation of the local wellness policy, including the designation of one or more persons within the local education agency or at each school, as appropriate, charged with ensuring that the school meets the local wellness policy; and
5. involve parents, students, representatives of the school food authority, the school board, school administrators, and the public in development of the local wellness policy.

These are the minimum requirements established by the federal legislation. School districts may choose to include additional features or integrate student wellness with other ongoing programs, for example, coordinated school health initiatives and community-based programs.

Connecticut’s School Nutrition Policies Pilot
In September 2003, the Connecticut State Department of Education began a School Nutrition Policies pilot project as part of a USDA Team Nutrition grant. From January 2004 through June 2005, 10 pilot districts worked to develop, adopt and implement school policies to promote healthy eating and physical activity, and foster a healthy school environment. The goal of the project was to develop best practice models to assist school districts in developing local policies and action plans for implementing healthy eating and physical activity practices. Additional information on the pilot program is found in Section 9 – School Nutrition Policies Pilots.
Rationale for Policy Development

Meeting the basic developmental needs of students — ensuring that they are safe, drug-free, healthy and resilient — is vital to improving academic performance. Research studies over the past decade have consistently concluded that student health status and achievement are directly connected. In fact, research shows that the health and well-being of students is one of the most significant influences on learning and academic achievement. Making the Connection: Health and Student Achievement offers a comprehensive list of research-based studies supporting this link. Several studies conclude that students who participate in a comprehensive health education program have significantly higher reading and math scores than those who do not; physically fit children perform better academically; and children who eat well learn better.

Student Nutrition and Physical Activity Impact Learning

Research clearly shows that nutrition and physical activity are directly linked to academic achievement. Children who eat well and are physically active learn better, while poorly nourished and sedentary children tend to have weaker academic performance and score lower on standardized achievement tests. Poor nutrition and hunger interfere with cognitive function and are associated with lower academic achievement in underweight, normal weight and overweight children. Emerging research suggests that lower academic achievement is associated with being overweight. Participation in breakfast programs is associated with increased academic test scores, improved daily attendance, better class participation and reduced tardiness. Numerous studies have found that regular physical activity supports better learning. Student fitness levels have been correlated with academic achievement, including improved math, reading and writing scores. Research also suggests that decreasing physical education may undermine the goal of better performance, while adding time for physical activity may support improved academic performance.

Children’s Current Nutrition and Physical Activity Status

Currently, 16 percent of school-age children and adolescents are overweight — three times the number of overweight children in 1980. Over the last two decades, this number has increased by more than 50 percent and the number of “extremely” overweight children has nearly doubled. Eating habits that contribute to health problems tend to be established early in life, and unhealthy habits tend to be maintained as children age. Between 70 and 80 percent of overweight children and adolescents continue to be overweight or become obese as adults.

Poor eating habits are not limited to children who are overweight. Overall, children’s eating habits are poor. Only 2 percent of school-age children consume the recommended daily number of servings from all five major food groups. Less than 15 percent of schoolchildren eat the recommended servings of fruit, less than 20 percent eat the recommended servings of vegetables, less than 25 percent eat the recommended servings of grains, and only 30 percent consume the recommended milk group servings on any given day.

National guidelines for children’s physical activity include at least 60 minutes of age-appropriate physical activity all or most days of the week. Yet almost half of young people age 12 to 21 and more than a third of high school students do not participate in physical activity on a regular basis. In the 2005-06 school year, 64 percent of Connecticut’s students in Grades 4, 6, 8 and 10 could not pass all four components of a health-related physical fitness assessment. The poorest performances were seen in the mile run, which indicates cardiovascular endurance; only 48 percent of students were able to meet the health standard.
### Schools Make a Difference

While the primary responsibility of schools is to foster academic achievement, schools also have a responsibility to help students learn, establish and maintain lifelong healthy eating and activity patterns. The National Academies’ Institute of Medicine emphasizes that schools, governments, communities, corporations and parents all must bear responsibility for changing social norms to promote healthier lifestyles and decrease our national obesity problem. While schools cannot solve the problem alone, they have many opportunities to significantly impact children’s health and learning for the majority of their day. Well-planned and effectively implemented school nutrition and fitness programs have been shown to enhance students’ overall health, as well as their behavior and academic achievement in school. School policies and practices can play a significant role in promoting an environment that supports healthy student behaviors and encourages learning.

The support of school leaders is critical to successful implementation of a healthy school environment. Their decisions and policies can affect many issues, such as:

- meal schedules;
- dining space and atmosphere;
- foods sold for school fundraisers and in school stores;
- operation of vending machines;
- foods allowed for parties, special events and other social activities;
- financial support of school nutrition programs;
- nutrition education;
- physical education; and
- physical activity programs and opportunities.

The policy development process provides a unique opportunity for school staff members to collaborate within the district and local community to provide a school environment that optimizes student health and school achievement.

### Importance of Local Policies

Without written districtwide policies, decisions regarding nutrition and physical activity practices are left to individuals. The result is nutrition and physical activity practices that are inconsistent from school to school, and even classroom to classroom. Written districtwide policies help to eliminate inappropriate practices by providing clear standards that are implemented consistently throughout the school district. Policies can address practices that are counterproductive to students’ health and ultimately undermine schools’ goal of improving student performance, such as:

- selling low-nutrient, high-calorie foods (e.g., candy, cookies, chips) in vending machines, school stores and fundraisers;
- punishing students by taking away recess;
- reducing time available for physical education and physical activity, e.g., recess;
- providing insufficient nutrition education; and
- rewarding children’s behavior and performance with candy and other low-nutrient foods.

By developing and implementing districtwide policies, schools can help reduce barriers to learning by providing an environment that promotes healthy eating and physical activity for all children.
Overview

Addressing District Concerns with Policy Development

School district concerns with policy development commonly focus on responsibility for student health, financial implications and time constraints.

Responsibility for Student Health

Schools, families and communities all play a vital role in providing opportunities for students to develop healthy eating and physical activity habits. With increased attention focused on improved academic achievement, schools are constantly challenged to meet the needs of the whole child. Research clearly demonstrates that healthy students do better in school. Unhealthy students, regardless of the cause, are less likely to do well academically. As the American Cancer Society points out, “Children who face violence, hunger, substance abuse, unintended pregnancy, and despair cannot possibly focus on academic excellence. There is no curriculum brilliant enough to compensate for a hungry stomach or a distracted mind.” Schools are not only responsible for academic preparation, but also for preparing students for life. This includes teaching students the necessary skills and behaviors for lifelong health. By developing and implementing districtwide policies, schools can help reduce barriers to learning by providing an environment that promotes healthy eating and physical activity for all children.

Financial Implications

Districts are often concerned about the financial impact of policy development and implementation, for example, making healthy changes in foods and beverages at school or devoting additional staff time for programs and activities. Some policy changes can be implemented with existing school staff members and resources, while others may impact schools financially. It is important for districts to evaluate the potential local impact of policy changes and, if necessary, determine alternate methods to maintain revenues. Across the nation, many school districts have been successful in making healthy changes in policies, programs and activities related to nutrition and physical activity. Additional information and examples can be found in Success Stories under Resources in Section 2 – Steps for Creating Local Policy. In Connecticut, the 10 districts participating in the School Nutrition Policies Pilot found that finances were not a significant barrier to the policy development process. For additional information, see Section 9 – School Nutrition Policies Pilots.

Time Constraints

The policy development process can require a significant time commitment. Districts can take advantage of strategies to maximize the effectiveness of the policy development process. Successful strategies employed by the Connecticut School Nutrition Policies Pilot districts included:

- identifying a dedicated team leader who can commit the necessary time to the policy development process;
- ensuring appropriate school district and community representation to enable the local policy development team to make the most effective use of time during policy discussions and decision making; and
- committing upfront to specific meeting dates and setting deadlines for accomplishing specific tasks.

For additional success strategies, see Section 9 – School Nutrition Policies Pilots.
How to Use This Guide

The Action Guide for School Nutrition and Physical Activity Policies was developed in nine sections, including:

- Section 1 – Overview;
- Section 2 – Steps for Creating Local Policy;
- Section 3 – Policy Component: Nutrition Education and Promotion;
- Section 4 – Policy Component: Physical Education and Physical Activity;
- Section 5 – Policy Component: Nutrition Standards for School Foods and Beverages;
- Section 6 – Policy Component: Other School-Based Activities to Promote Student Wellness;
- Section 7 – Policy Component: Communication and Promotion;
- Section 8 – Policy Component: Measurement and Evaluation; and
- Section 9 – School Nutrition Policies Pilots.

Starting with the first two sections — Overview and Steps for Creating Local Policy — will assist districts in understanding the background and rationale for policy development, as well as the steps in the process. The policy component sections (Sections 3 through 8) do not need to be read all at once or in sequential order. After identifying and prioritizing local needs, the policy development team can start with any of the six policy component sections that reflect the district’s priorities. Districts can choose those sections that are most needed, based on local needs and existing policies and practices. Districts can also use the last section — School Nutrition Policies Pilots — to learn about the actual “how-to” of the policy development process, as experienced by each of the 10 pilot districts.

Policy Requirements and Recommendations

Districts participating in USDA Child Nutrition Programs are required to develop a School Wellness Policy that meets the criteria specified under School Wellness Policy (page 3). The Action Guide identifies the policy components that must be addressed in order to meet this requirement. When applicable, USDA School Wellness Policy requirements are indicated throughout the guide. The Action Guide also includes recommended (not required) language for each of the policy components. School districts may choose to use the policy recommendations as written or revise them as needed to meet local needs and reflect community priorities.

Steps for Policy Development

Before policy writing can begin, it is important for school district staff members to have an understanding of the steps involved in the policy development process. These include:

1. Identify Policy Development Team
2. Identify Local Policy Development Process
3. Conduct Local Assessment Process
4. Prioritize Needs and Develop an Action Plan
5. Draft Policy Language
6. Build Awareness and Support
7. Adopt and Implement the Policy
8. Maintain, Measure and Evaluate
1 Overview

Section 2 – Steps for Creating Local Policy provides a step-by-step guide to the policy development process. For each step, key resources are identified to assist schools with planning and implementation.

Policy Components
The nutrition and physical activity policies are organized into six key components, including:

1. Nutrition Education and Promotion;
2. Physical Activity and Physical Education;
3. Nutrition Standards for School Foods and Beverages (School Meals and Other Foods and Beverages);
4. Other School-Based Activities to Promote Student Wellness;
5. Communication and Promotion; and

Each of the six components is individually addressed in Sections 3 to 8 of the Action Guide. Each section includes information and resources to assist with the development and implementation of the policy component, including the goal, rationale, policy language recommendations, implementation guidance and resources.

Each policy component section provides recommendations (not requirements) for policy language. This language represents recommended best practice for developing school nutrition and physical activity policies. School districts may choose to use the policy recommendations as written or revise them as needed to meet local needs and reflect community priorities. When developing nutrition and physical activity policies, districts will need to take into account their unique circumstances, challenges, opportunities and available resources. Policies should meet local needs and be adapted to the health concerns, food preferences and dietary practices of different ethnic groups.

Time Frame for Development and Implementation
Schools participating in USDA Child Nutrition Programs were required by federal law to establish a local School Wellness Policy by the first day of the 2006-07 school year. Districts may find it more practical to phase in the implementation of policies than to implement a comprehensive set of nutrition and physical activity policies all at once. District decision makers need to consider challenges to policy implementation such as limited class time, curriculum requirements and funding and space constraints.

While the School Wellness Policy must be established by the first day of the 2006-07 school year, it is important to note that policies are an ongoing project. They should be continuously implemented, evaluated and updated. For additional information, see Section 8 – Measurement and Evaluation.

Schools not participating in USDA Child Nutrition Programs are strongly encouraged, but not required, to establish and implement nutrition and physical activity policies within a reasonable time.
Policy Definitions

A La Carte Items: Any food or beverage that students purchase in addition to or in place of the USDA reimbursable school breakfast or lunch. A la carte items include foods and beverages sold in vending machines, a la carte lines or kiosks, school stores or snack bars located anywhere on school grounds, including the cafeteria and athletic events.

After-School Snack Program: A program under the National School Lunch Program that offers cash reimbursement to help schools serve snacks to children in afterschool activities aimed at promoting children’s health and well-being. A school must provide children with regularly scheduled activities in an organized, structured and supervised environment and include educational or enrichment activities (e.g., mentoring or tutoring programs).
http://www.fns.usda.gov/cnd/Afterschool/default.htm

Body Mass Index (BMI): A measure of body weight adjusted for height that is used as a tool for indicating weight status in adults over 20 years old. BMI is a general indicator used to identify whether an adult is underweight, normal, overweight or obese.
http://www.cdc.gov/healthyweight/assessing/bmi/index.html

BMI-for-age: A gender- and age-specific BMI measurement to assess underweight, overweight and risk for overweight in children and teens.
http://www.cdc.gov/healthyweight/assessing/bmi/childrens_bmi/about_childrens_bmi.html

Child Nutrition Programs: The U.S. Department of Agriculture’s federally assisted meal programs operating in public and nonprofit private schools and Residential Child Care Institutions (RCCIs), including the National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program.

Competitive Foods: The U.S. Department of Agriculture defines competitive foods as all foods and beverages sold in schools except for meals provided through the National School Lunch Program and School Breakfast Program. They include any foods and beverages sold anywhere on school premises in competition with school meals, such as cafeteria a la carte sales, vending machines, school stores and fundraisers.

Comprehensive School Health Education: Addresses the physical, mental, emotional and social dimensions of health and provides students with the knowledge, skills and motivation they need to enhance their health, prevent disease and reduce health-related risk behaviors.

Connecticut Nutrition Standards: State nutrition standards developed by the Connecticut State Department of Education in response to Section 10-215e of the Connecticut General Statutes. These standards address the nutritional content of all food items sold to students separately from a reimbursable school lunch or breakfast. They focus on limiting fat, saturated fat, trans fat, sodium and added sugars, moderating portion sizes, and promoting increased intake of nutrient-dense foods such as such as whole grains, fruits, vegetables and low-fat/nonfat dairy products lean meats, legumes, nuts and seeds.

Coordinated School Health: A model from the Centers for Disease Control and Prevention (CDC) in which schools provide a critical facility where many agencies work together to maintain the well-being of young people and promote student achievement. The model includes eight components: (1) comprehensive school health education; (2) physical education; (3) health services; (4) nutrition services; (5) health promotion for staff members; (6) counseling and psychological services; (7) healthy school environment; and (8) parent/community involvement.
http://www.cdc.gov/healthyyouth/CSHP/
1 Overview

**Dietary Guidelines for Americans:** A federal document that provides science-based advice for Americans two years and older to promote health and to reduce risk for chronic diseases through diet and physical activity. The Dietary Guidelines are published jointly every five years by the U.S. Department of Health and Human Services and the U.S. Department of Agriculture, and form the basis of federal food, nutrition education and information programs. [http://www.healthierus.gov/dietaryguidelines/](http://www.healthierus.gov/dietaryguidelines/)

**Dietary Reference Intakes (DRIs):** Reference values that are estimates of nutrient intakes to be used for planning and assessing diets for healthy people. DRIs represent a shift in emphasis from preventing nutrient deficiencies to decreasing the risk of chronic disease (e.g., cardiovascular disease, osteoporosis, certain cancers and other diseases that are diet related). They include four categories: Estimated Average Requirement (EAR), Recommended Dietary Allowance (RDA), Adequate Intake (AI) and Tolerable Upper Intake Level (UL). [http://fnic.nal.usda.gov/nal_display/index.php?info_center=4&tax_level=3&tax_subject=256&topic_id=1342&level3_id=5141](http://fnic.nal.usda.gov/nal_display/index.php?info_center=4&tax_level=3&tax_subject=256&topic_id=1342&level3_id=5141)

**District Reference Group (DRG):** A classification system of the Connecticut State Department of Education in which districts that have public school students with similar socioeconomic status and need are grouped together. DRGs are based on the following seven variables: income, education, occupation, family structure, poverty, home language and district enrollment. Charter schools, Connecticut Technical High Schools and regional educational service centers are not given DRGs. [http://www.csde.state.ct.us/public/cedar/databulletins/db_drg_06_2006.pdf](http://www.csde.state.ct.us/public/cedar/databulletins/db_drg_06_2006.pdf)

**Extracurricular Activities:** School-sponsored voluntary programs that supplement regular education and contribute to the educational objectives of the school.

**Foods and Beverages of Low Nutrient Density:** Those foods and beverages that supply calories from fat and/or sugar but relatively few, if any, vitamins, minerals and other nutrients.

**Foods of Minimal Nutritional Value (FMNV):** For artificially sweetened foods, the USDA defines a food of minimal nutritional value as one that provides less than five percent of the Dietary Reference Intakes (DRIs) for each of eight specified nutrients (protein, vitamin A, vitamin C, niacin, riboflavin, thiamin, calcium and iron) per serving. For all other foods, FMNV are those that provide less than five percent of the DRI for each of the eight nutrients per serving and per 100 calories. USDA regulations define only four specific categories of FMNV, including (1) soda water (all carbonated or aerated beverages); (2) water ices; (3) chewing gum; and (4) certain candies (hard candy, jellies and gums, marshmallow candies, fondant, licorice, spun candy, and candy-coated popcorn). Note: The federal regulations do not restrict the sale of any other low-nutrient foods and beverages, e.g., chips and noncarbonated sweetened drinks. However, these foods and beverages are addressed by state statutes and regulations (see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 − Steps for Creating Local Policy.) [http://www.fns.usda.gov/cnd/menu/fmnv.htm](http://www.fns.usda.gov/cnd/menu/fmnv.htm)

**Healthy Food Certification (HFC):** The process under Section 10-215f of the Connecticut General Statutes requiring that each board of education or governing authority for all public schools participating in the National School Lunch Program must certify annually to the SDE whether they will follow the Connecticut Nutrition Standards for all foods sold to students separately from reimbursable school meals, including, but not limited to, school stores, vending machines, school cafeterias and any fundraising activities on school premises. Districts that opt to implement healthy food certification receive an additional 10 cents per lunch, based on the total number of reimbursable lunches (paid, free and reduced) served in the district in the prior school year. [http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Standards](http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Standards)

**Hazard Analysis Critical Control Points (HACCP):** A preventative food safety program to control food safety hazards during all aspects of food service operations. HACCP reduces the risk of food-borne hazards by focusing on each step of the food preparation process from receiving to service.
**Intramurals:** Physical activity programs that provide opportunities for all students to participate in sport, fitness and recreational activities within their own school.

**MyPyramid:** USDA’s food guidance system to translate the Dietary Guidelines into a healthy eating plan. Focuses on recommendations for daily servings of the food groups, as well as daily physical activity. [http://www.mypyramid.gov/](http://www.mypyramid.gov/)

**National School Lunch Program (NSLP):** USDA’s federally assisted meal program operating in public and nonprofit private schools and residential child care institutions (RCCIs). The NSLP provides nutritionally balanced, low-cost or free lunches to children each school day. [http://www.fns.usda.gov/cnd/lunch/](http://www.fns.usda.gov/cnd/lunch/)

**Nutrient-Dense Foods:** Those foods that provide substantial amounts of naturally occurring vitamins, minerals and other nutrients with relatively few calories. Examples include fruits, vegetables, whole grains, low-fat and nonfat dairy, lean meats, legumes, nuts and seeds.

**Nutrition Standards:** Federal, state or local guidelines for the nutritional content of foods and beverages. Nutrition standards list criteria that determine which foods and beverages can and cannot be offered on school premises.

**Qualified Food Operator (QFO):** A full-time food service employee in a supervisory capacity on site who has demonstrated knowledge in the safe preparation and service of food by passing a test administered by a testing agency approved by the Connecticut State Department of Public Health. [http://www.ct.gov/dph/cwp/view.asp?a=3140&q=387486](http://www.ct.gov/dph/cwp/view.asp?a=3140&q=387486)

**Obesity:** Condition of having a high amount of body fat with ranges of weight that are greater than what is generally considered healthy for a given height and have been shown to increase the likelihood of certain diseases and other health problems. For adults, obesity is defined as a Body Mass Index (BMI) of 30.0 and above. For children, obesity is defined as BMI-for-age equal to or greater than the 95th percentile. [http://www.cdc.gov/nccdphp/dnpa/obesity/defining.htm](http://www.cdc.gov/nccdphp/dnpa/obesity/defining.htm)

**Overweight:** Condition of being too heavy for one’s height. For adults, overweight is defined as a Body Mass Index (BMI) between 25 and 29.9. For children, overweight is defined as BMI-for-age between the 85th percentile and the 94th percentile. Body weight comes from fat, muscle, bone and water. Overweight does not always mean over-fat. [http://www.cdc.gov/nccdphp/dnpa/obesity/defining.htm](http://www.cdc.gov/nccdphp/dnpa/obesity/defining.htm)

**Physical Activity:** Bodily movement of any type, including recreational, fitness and sport activities such as jumping rope, playing soccer and lifting weights, as well as daily activities such as walking to the store, taking the stairs or raking the leaves.

**Physical Education:** The phase of the general education program that contributes to the total growth and development of each child, primarily through movement experiences. Systematic and properly taught physical education includes the major content standards, including movement competence, maintaining physical fitness, learning personal health and wellness skills, applying movement concepts and skill mechanics, developing lifetime activity skills, and demonstrating positive social skills.

**Physical Education Program (PEP):** Funded by the U.S. Department of Education, Carol M. White PEP competitive grants are for local educational agencies and community-based organizations to initiate, expand or improve physical education programs, including after-school programs, in one or more grades (K-12) in order to help students make progress toward meeting state standards for physical education. [http://www.ed.gov/programs/whitephysed/index.html](http://www.ed.gov/programs/whitephysed/index.html)
Overview

Planned, Ongoing and Systematic Program of Instruction: At a minimum, for a program to be planned, it should have written goals and written learning objectives for the grades in which the program is taught. To be ongoing, the learning objectives should evolve from grade level to grade level. For a program to be systematic, it should be implemented equitably across each specific grade or course, e.g., all third grade students should receive instruction in the same agreed-upon learning objectives across each third grade classroom. This does not mean that each third grade teacher must use the same materials or activities.

School Breakfast Program: USDA’s federally assisted breakfast program operating in public and nonprofit private schools and residential child care institutions (RCCIs). The SBP provides nutritionally balanced, low-cost or free breakfasts to children each school day.
http://www.fns.usda.gov/cnd/breakfast/

School Day: The period that begins with the arrival of the first child at school and ends after the last instructional period.

School Health Index (SHI): A self-assessment and planning tool from the Centers for Disease Control and Prevention (CDC) that schools can use to improve their health and safety policies and programs. The SHI is based on CDC’s research-based guidelines for school health programs, which identify the policies and practices most likely to be effective in improving youth health risk behaviors. It is structured around CDC’s eight-component model of coordinated school health.
http://apps.nccd.cdc.gov/shi/

School Health Council (SHC): An advisory group of individuals who represent segments of the community. The group acts collectively to provide advice to the school system on aspects of the school health program. Generally, the members of an SHC are specifically appointed by the school system. Most often, SHCs advise an entire school district, but an SHC may also be useful for an individual school wanting its own advisory council. School districts often use advisory councils to provide advice to them on a variety of topics, such as exceptional children or dropout prevention.

School Health Team: A group of individuals representing the school and community in the development, implementation and evaluation of the school district’s health policies, including nutrition and physical activity policies. Also may be known as the School Health Council or School Health Advisory Council.

School Health Improvement Plan: A tool included in the Centers for Disease Control and Prevention’s School Health Index that assists schools with identifying steps and planning for implementation of recommended actions to improve local school health policies and programs.
http://www.cdc.gov/HealthyYouth/SHI/training/07-Improvement/index.htm

School Improvement Plan (SIP): An action plan required of Title I funded schools not meeting adequate yearly progress (AYP) under the No Child Left Behind Act, which includes annual measurable objectives; specific actions, strategies and interventions to meet each objective; timelines; sources needed; designation of responsibility and evaluation strategies.

School Meals: Meals served under USDA Child Nutrition Programs, including breakfast, lunch and after-school snacks.

School Wellness Policy: Federal requirement (Public Law 108-265) that school districts and institutions participating in USDA Child Nutrition Programs, including public schools, private schools and residential child care institutions, must set goals for nutrition education, physical activity, nutrition standards for school foods and beverages, and other school-based activities designed to promote student wellness.
**Special Milk Program:** The USDA Special Milk Program provides milk to children in schools and child care institutions who do not participate in other USDA meal service programs. The program reimburses schools for the milk they serve. [http://www.fns.usda.gov/cnd/Milk/](http://www.fns.usda.gov/cnd/Milk/)

**Team Nutrition:** A U.S. Department of Agriculture initiative to support Child Nutrition Programs through training and technical assistance for food service, nutrition education for children and their caregivers, and school and community support for healthy eating and physical activity. The goal of Team Nutrition is to improve children’s lifelong eating and physical activity habits through nutrition education based on the principles of the Dietary Guidelines for Americans and MyPyramid, USDA’s food guidance system. [http://www.fns.usda.gov/tn/Default.htm](http://www.fns.usda.gov/tn/Default.htm)

**USDA Nutrient Standards:** The required level of calories and key nutrients (protein, vitamin A, vitamin C, calcium and iron) that school meals must meet, as averaged over a week, for specific age or grade groups of children. USDA nutrient standards are designed to provide adequate calories, nutrients and dietary fiber for a specific age group, and reduce or limit fat, saturated fat and cholesterol. [http://teamnutrition.usda.gov/Resources/menuplanner.html](http://teamnutrition.usda.gov/Resources/menuplanner.html)
## Abbreviations and Acronyms

<table>
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<td>BMI</td>
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<td>Council on Physical Education for Children</td>
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<tr>
<td>DRG</td>
<td>District Reference Group</td>
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<td>DRIs</td>
<td>Dietary Reference Intakes</td>
</tr>
<tr>
<td>FMNV</td>
<td>Foods of Minimal Nutritional Value</td>
</tr>
<tr>
<td>FNS</td>
<td>Food and Nutrition Service (U.S. Department of Agriculture)</td>
</tr>
<tr>
<td>HACCP</td>
<td>Hazard Analysis Critical Control Points</td>
</tr>
<tr>
<td>HEAP</td>
<td>Health Education Assessment Project</td>
</tr>
<tr>
<td>HECAT</td>
<td>Health Education Curriculum Analysis Tool</td>
</tr>
<tr>
<td>HFC</td>
<td>Healthy Food Certification</td>
</tr>
<tr>
<td>IDEA</td>
<td>Individuals with Disabilities Education Act</td>
</tr>
<tr>
<td>IEP</td>
<td>Individualized Education Plan</td>
</tr>
<tr>
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<tr>
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<tr>
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<td>National School Lunch Program</td>
</tr>
<tr>
<td>PEP</td>
<td>Carol M. White Physical Education Program</td>
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<tr>
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<td>Planning and Placement Team</td>
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<td>School Health Index</td>
</tr>
<tr>
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<td>School Improvement Plan</td>
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<td>SMP</td>
<td>Special Milk Program</td>
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<td>Qualified Food Operator</td>
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<td>RCCI</td>
<td>Residential Child Care Institution</td>
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<tr>
<td>USDA</td>
<td>United States Department of Agriculture</td>
</tr>
<tr>
<td>WIC</td>
<td>Supplemental Nutrition Program for Women, Infants and Children</td>
</tr>
</tbody>
</table>
References


3 Association of State and Territorial Health Officials (ASTHO) and the Society of State Directors of Health, Physical Education and Recreation (SSDHPER). Making the Connection: Health and Student Achievement, 2002. [http://www.thesociety.org/]


22 National Association for Sport and Physical Education. (2006). Executive Summary, Shape of the Nation.


Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

Health and Achievement

Click on SDE’s Healthy School Environment Resource List, then click on Health and Achievement to access resources on this topic.

School Wellness Policy Requirements


Local Wellness Policy, U.S. Department of Agriculture: http://teamnutrition.usda.gov/Healthy/wellnesspolicy.html


Additional resources can be found in the SDE’s Healthy School Environment Resource List (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/hse_resource_list.pdf) and Nutrition-Related Resources (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/nutrition_resources.pdf). These lists are updated regularly.
Steps for Creating Local Policy

The process of policy development is just as important as the final product — the policy document. Individuals could work independently to write a policy, but it will be ineffective if it is not supported and implemented districtwide. This requires a team with appropriate representation from the school and community to come to consensus regarding best practices based on local needs. Bringing individuals together to work as a team may present a challenge; however, this process is essential to ensuring the success of policy development and implementation. The end result will be a final policy document that meets local district needs and can be implemented to promote the goal of better health and learning for students.

While the actual policy development process will be different for each school district, following the steps outlined below can help all districts be successful in developing effective nutrition and physical activity policies.

Step 1: Identify Policy Development Team

A districtwide School Health Team (or School Health Council, School Health Advisory Group, etc.) is critical to successful policy development. The team consists of a group of individuals representing the school and community. The School Health Team works to develop, implement, monitor, review and revise school nutrition and physical activity policies. The process may involve the development of a new team or enhancement of an existing School Health Team, such as a school health council or coordinated school health team. The School Health Team serves many purposes, including:

- developing policy language;
- developing guidance to clarify, support and promote policy implementation;
- monitoring policy implementation;
- evaluating the progress of policy implementation;
- serving as a resource to school sites for policy implementation (e.g., providing lists of ideas for healthy incentives, snacks and celebrations, and ideas for classroom physical activity);
- increasing awareness and providing education on health concerns (e.g., students’ nutrition needs); and
- revising policy as necessary.

School Health Team Members

At a minimum, the USDA School Wellness Policy legislation requires that parents, students, school food service, the school board, school administrators and the public, be involved in developing the local wellness policy. The Connecticut State Department of Education has identified additional team members who are critical to the successful development of nutrition and physical activity policies. These include school nurses, physical education coordinator/teachers and health education coordinator/teachers. To optimize success, it is strongly recommended that the team also include other members as appropriate to local needs, as well as those who will be affected by the policy (see School Health Team Members on the next page). Districts should also consider the professional diversity of the team and include ethnic, cultural and demographic representation that mirrors the school community.
It is also important to choose individuals who can champion the team’s efforts. Frequently, members of effective policy teams demonstrate a combination of the following qualities:

- strong interest in improving school nutrition and physical activity in schools;
- effective communication skills and the attitude of team players;
- understanding of the district’s procedural requirements for policy; and
- policy-related experience in the district.

## School Health Team Members

### Minimum Core Members for School Health Team

- Parents*
- Students*
- School Food Service (e.g., district food service director/manager)*
- School Nurse
- Physical Education Coordinator/Teacher
- Health Education Coordinator/Teacher
- School Board*
- School Administrators (e.g., superintendent, assistant superintendent, principal, assistant principal, school business official, curriculum director)*
- The Public*

*Required by the USDA School Wellness Policy legislation

### Recommended Team Members (as appropriate to local needs)

- **Other school staff members**, e.g., school medical advisors, curriculum supervisors, school counselors, family and consumer sciences teachers, school social workers and school business officials
- **Health care providers**, e.g., pediatricians, dietitians, nutrition/health consultants, dentists and representatives of nonprofit health organizations, e.g., American Cancer Society, American Diabetes Association and American Heart Association
- **Community groups**, e.g., YMCA, YWCA, Boy Scouts, Girl Scouts, Boys and Girls Clubs, faith-based groups, school readiness councils and local elected officials
- **Physical activity groups**, e.g., town park and recreation programs, youth sports leagues and commercial fitness centers
- **University departments and other government agencies** involved in nutrition and physical activity, e.g., local cooperative extension service
- **Hospitals and public health representatives**, e.g., local health department/district
Team Leader
A team leader or coordinator should be identified. This person plays a critical leadership role in coordinating the activities of the School Health Team, so it is important to have someone who is qualified, dedicated and can commit the necessary time.

Collaboration
The School Health Team should ensure collaboration with any existing efforts underway in the school or community. The school district may already be working on student wellness issues and have an existing infrastructure, such as a school health council, coordinated school health initiatives, a local Team Nutrition team, or staff members involved in the Carol M. White Physical Education Program (PEP). These teams and team members are well-positioned to assist in the development of the policy. District policies should also be part of the overall school initiatives and connect directly to the strategies in the School Improvement Plan (SIP) to promote student achievement (for those Title I funded schools not making adequate yearly progress under the No Child Left Behind Act).

Responsibilities of School Health Team
Responsibilities of the School Health Team may include, but are not limited to, oversight of the following:

- implementation of district nutrition and physical activity standards;
- integration of nutrition and physical activity in the overall curriculum;
- assurance that staff professional development includes nutrition and physical activity issues;
- assurance that students receive nutrition education and engage in vigorous physical activity;
- pursuit of contracts with outside vendors that encourage healthful eating and reduction of school/district dependence on profits from foods of little nutritional value;
- consistent healthful choices among all school venues that involve the sale of food;
- increasing community awareness of student health needs;
- partnering with local community to support policies and programs;
- gathering data to measure the impact of local policies over time;
- revising policies as necessary to meet changing needs and respond to local evaluation results; and
- preparation of annual reports that include specific information regarding the implementation and evaluation of local policies. This information can include:
  1. monthly district menus and meal counts;
  2. financial data for vending and other food sales;
  3. listing of all a la carte, vending and competitive foods sold by school food service;
  4. listing of all other sales of foods throughout the district, including vending machines, school stores, culinary and special education programs, in-school and in-class fundraisers, etc.;
  5. listing of physical activity programs and opportunities for students throughout the school year;
  6. assessment of student, staff and parent satisfaction and/or support of instituted policies and practices; and
  7. other evaluation data specific to the local district policies.
The following resources provide more detailed information on the structure, function and role of school health teams.


- *Promoting Healthy Youth, Schools and Communities: A Guide to Community-School Health Advisory Councils*, Iowa Department of Public Health, 2000: [http://www.idph.state.ia.us/hpcdp/promoting_healthy_youth.asp](http://www.idph.state.ia.us/hpcdp/promoting_healthy_youth.asp)

For additional resources to assist schools with establishing a new team or building on existing teams and partnerships, see *School Health Teams* under *Resources* at the end of this section.
Step 2: Identify Local Policy Development Process

There are no standard procedures for developing nutrition and physical activity policies. The process will vary from one district to another. Before the School Health Team can start to develop policies, team members must understand their local school district process for policy development and adoption. The team should find out:

- who in the district needs to be involved or kept informed;
- what format should be used for the document;
- who needs to review and approve drafts; and
- the typical timeline for policy review and approval.

If the School Health Team is not familiar with the district’s procedures, the school district superintendent’s office can provide specific information on the process. Understanding these requirements upfront will save time and prevent frustration. The process by which the district’s policy is developed can have a significant impact on the school and community and on the effectiveness of implementation. It is important for the School Health Team to take time and plan carefully.

School Health Team members must also understand what is needed for compliance with all local, state and federal requirements. The team should identify and review existing state laws and policies, other school districts’ policies, and the school district’s own local policies that address wellness topics. Districts may have existing local health policies that can be expanded to include nutrition and/or physical activity.

In many cases, state laws and state or local policies are more stringent than the federal law. At a minimum, the school district’s nutrition and physical activity policies must be in compliance with the federal requirements, plus all relevant state and district requirements. Information on Connecticut’s relevant laws is found in Federal and State Laws Pertaining to Nutrition and Physical Activity on the next page.

Note: When reviewing other districts’ policies and sample policy resources for potential language, it is important to ensure that the language is appropriate for your district and meets all applicable federal and state requirements. For example, districts that participate in healthy food certification (see Section 5 –Nutrition Standards for School Foods and Beverages) should not use policy language from a district that does not participate, as it is unlikely to comply with the statutory requirements for healthy food certification.
Federal and State Laws Pertaining to Nutrition and Physical Activity

Health Education

Connecticut General Statutes Section 10-16b. Prescribed courses of study. (a) In the public schools the program of instruction offered shall include at least the following subject matter, as taught by legally qualified teachers, the arts; career education; consumer education; health and safety, including, but not limited to, human growth and development, nutrition, first aid, disease prevention, community and consumer health, physical, mental and emotional health, including youth suicide prevention, substance abuse prevention, safety, which may include the dangers of gang membership, and accident prevention; language arts, including reading, writing, grammar, speaking and spelling; mathematics; physical education; science; social studies, including, but not limited to, citizenship, economics, geography, government and history; and in addition, on at least the secondary level, one or more foreign languages and vocational education. For purposes of this subsection, language arts may include American sign language or signed English, provided such subject matter is taught by a qualified instructor under the supervision of a teacher who holds a certificate issued by the State Board of Education.

(c) Each local and regional board of education shall on September 1, 1982, and annually thereafter at such time and in such manner as the Commissioner of Education shall request, attest to the State Board of Education that such local or regional board of education offers at least the program of instruction required pursuant to this section, and that such program of instruction is planned, ongoing and systematic.


Physical Education

Connecticut General Statutes Section 10-221a. High school graduation requirements. (b) Commencing with classes graduating in 2004, and for each graduating class thereafter, no local or regional board of education shall permit any student to graduate from high school or grant a diploma to any student who has not satisfactorily completed a minimum of twenty credits, not fewer than four of which shall be in English, not fewer than three in mathematics, not fewer than three in social studies, including at least one-half credit course on civics and American government, not fewer than two in science, not fewer than one in the arts or vocational education and not fewer than one in physical education.


Physical Activity

Connecticut General Statutes Section 10-221o. Lunch Periods and Recess. Each local and regional board of education shall require each school under its jurisdiction to (1) offer all full day students a daily lunch period of not less than twenty minutes, and (2) include in the regular school day for each student enrolled in grades kindergarten to five, inclusive, a period of physical exercise, except that a planning and placement team may develop a different schedule for a child requiring special education and related services in accordance with chapter 164 and the Individuals With Disabilities Education Act, 20 USC 1400 et seq., as amended from time to time. In the event of a conflict with this section and any provision of chapter 164, such other provision of chapter 164 shall be deemed controlling.

http://www.cga.ct.gov/2005/pub/Chap170.htm#Sec10-221o.htm
Foods and Beverages

Connecticut General Statutes Section 10-215. Lunches, breakfasts and other feeding programs for public school children and employees. Any local or regional board of education may establish and operate a school lunch program for public school children, may operate lunch services for its employees, may establish and operate a school breakfast program, as provided under federal laws governing said programs, or may establish and operate such other child feeding programs as it deems necessary. Charges for such lunches, breakfasts or other such feeding may be fixed by such boards and shall not exceed the cost of food, wages and other expenses directly incurred in providing such services. When such services are offered, a board shall provide free lunches, breakfasts or other such feeding to children whose economic needs require such action under the standards promulgated by said federal laws. Such board is authorized to purchase equipment and supplies that are necessary, to employ the necessary personnel, to utilize the services of volunteers and to receive and expend any funds and receive and use any equipment and supplies which may become available to carry out the provisions of this section. Any town board of education may vote to designate any volunteer organization within the town to provide a school lunch program, school breakfast program or other child feeding program in accordance with the provisions of this section.


Connecticut General Statutes Section 10-215a. Nonpublic school and nonprofit agency participation in feeding programs. Nonpublic schools and nonprofit agencies may participate in the school breakfast, lunch and other feeding programs provided in sections 10-215 to 10-215b under such regulations as may be promulgated by the State Board of Education in conformance with said sections and under the federal laws governing said programs, except that such schools, other than the endowed academies approved pursuant to section 10-34, and agencies shall not be eligible for the funding described in subdivision (2) of subsection (a) of section 10-215b.


Connecticut General Statutes Section 10-215b. Duties of State Board of Education re feeding programs. (a) The State Board of Education is authorized to expend in each fiscal year an amount equal to (1) the money required pursuant to the matching requirements of said federal laws and shall disburse the same in accordance with said laws, and (2) ten cents per lunch served in the prior school year in accordance with said laws by any local or regional board of education, the regional vocational-technical school system or governing authority of a state charter school, interdistrict magnet school or endowed academy approved pursuant to section 10-34 that participates in the National School Lunch Program and certifies pursuant to section 10-215f that the nutrition standards established by the Department of Education pursuant to section 10-215e shall be met.
(b) The State Board of Education shall prescribe the manner and time of application by such board of education, the regional vocational-technical school system, such governing authority or controlling authority of the nonpublic schools for such funds, provided such application shall include the certification that any funds received pursuant to subsection (a) of this section shall be used for the program approved. The State Board of Education shall determine the eligibility of the applicant to receive such grants pursuant to regulations provided in subsection (c) of this section and shall certify to the Comptroller the amount of the grant for which the board of education, the regional vocational-technical school system, the governing authority or the controlling authority of a nonpublic school is eligible. Upon receipt of such certification, the Comptroller shall draw an order on the Treasurer in the amount, at the time and to the payee so certified.
(c) The State Board of Education may adopt such regulations as may be necessary in implementing sections 10-215 to 10-215b, inclusive.
(d) The Commissioner of Education shall establish a procedure for monitoring compliance by boards of education, the regional vocational-technical school system, or governing authorities with certifications submitted in accordance with section 10-215f and may adjust grant amounts pursuant to subdivision (2) of subsection (a) of this section based on failure to comply with said certification.

Foods and Beverages, Continued

Connecticut General Statutes Section 10-215e. Nutrition standards for food that is not part of lunch or breakfast program. Not later than August 1, 2006, and January first of each year thereafter, the Department of Education shall publish a set of nutrition standards for food items offered for sale to students at schools. Such standards shall not apply to food sold as part of the National School Lunch Program and School Breakfast Program unless such items are purchased separately from a school lunch or breakfast that is reimbursable under such program. [http://www.cga.ct.gov/2007/pub/Chap169.htm#Sec10-215e.htm]

Connecticut General Statutes Section 10-215f. Certification that food meets nutrition standards. (a) Each local and regional board of education, the regional vocational-technical school system, and the governing authority for each state charter school, interdistrict magnet school and endowed academy approved pursuant to section 10-34 that participates in the National School Lunch Program shall certify in its annual application to the Department of Education for school lunch funding whether, during the school year for which such application is submitted, all food items made available for sale to students in schools under its jurisdiction and not exempted from the nutrition standards published by the Department of Education pursuant to section 10-215e will meet said standards. Except as otherwise provided in subsection (b) of this section, such certification shall include food not exempted from said nutrition standards and offered for sale to students at all times, and from all sources, including, but not limited to, school stores, vending machines, school cafeterias, and any fundraising activities on school premises, whether or not school sponsored.

(b) Each board of education, the regional vocational-technical school system and each governing authority that certifies pursuant to this section compliance with the department's nutrition standards for food may exclude from such certification the sale to students of food items that do not meet such standards, provided (1) such sale is in connection with an event occurring after the end of the regular school day or on the weekend, (2) such sale is at the location of such event, and (3) such food is not sold from a vending machine or school store. [http://www.cga.ct.gov/2007/pub/Chap169.htm#Sec10-215f.htm]

Connecticut General Statutes Section 10-221p. Boards to make available for purchase nutritious and low-fat foods. Each local and regional board of education and governing authority for each state charter school, interdistrict magnet school and endowed academy approved pursuant to section 10-34, shall make available in the schools under its jurisdiction for purchase by students enrolled in such schools nutritious and low-fat foods, which shall include, but shall not be limited to, low-fat dairy products and fresh or dried fruit at all times when food is available for purchase by students in such schools during the regular school day. [http://www.cga.ct.gov/2007/pub/Chap170.htm#Sec10-221p.htm]

Connecticut General Statutes Section 10-221q. Sale of beverages. (a) Except as otherwise provided in subsection (b) of this section, each local and regional board of education and the governing authority for each state charter school, interdistrict magnet school and endowed academy approved pursuant to section 10-34, shall permit at schools under its jurisdiction the sale of only the following beverages to students from any source, including, but not limited to, school stores, vending machines, school cafeterias, and any fund-raising activities on school premises, whether or not school sponsored: (1) Milk that may be flavored but contain no artificial sweeteners and no more than four grams of sugar per ounce, (2) nondairy milks such as soy or rice milk, which may be flavored but contain no artificial sweeteners, no more than four grams of sugar per ounce, no more than thirty-five per cent of calories from fat per portion and no more than ten per cent of calories from saturated fat per portion, (3) one hundred per cent fruit juice, vegetable juice or combination of such juices, containing no added sugars, sweeteners or artificial sweeteners, (4) beverages that contain only water and fruit or vegetable juice and have no added sugars, sweeteners or artificial sweeteners, and (5) water, which may be flavored but contain no added sugars, sweeteners, artificial sweeteners or caffeine. Portion sizes of beverages, other than water as described in subdivision (5) of this subsection, that are offered for sale pursuant to this subsection shall not exceed twelve ounces.
Foods and Beverages, Continued

(b) Each such board of education or governing authority may permit at schools under its jurisdiction, the sale to students of beverages that are not listed in subsection (a) of this section, provided (1) such sale is in connection with an event occurring after the end of the regular school day or on the weekend, (2) such sale is at the location of such event, and (3) such beverages are not sold from a vending machine or school store, http://www.cga.ct.gov/2007/pub/Chap170.htm#Sec10-221q.htm

Note: CGS Sections 10-221p and 10-221q apply to all public schools, regardless of whether they are participating in USDA federally funded Child Nutrition Programs and regardless of whether they are implementing healthy food certification under Section 10-215f. (For more information on healthy food certification see Section 5 – Nutrition Standards for School Foods and Beverages.)


(a) No school food authority shall permit the sale or dispensing to students of extra food items anywhere on the school premises from thirty minutes prior to the start of any state or federally subsidized milk or food service program until thirty minutes after such program.

(b) “Extra food items” means tea, coffee, soft drinks and candy.

(c) “School food authority” means the governing body which has the legal authority to operate one or more school feeding programs and receive state or federal subsidies for the operation of any such program.

(d) The provisions of this section shall not apply to the Department of Corrections.

Note: Section 10-221q of the Connecticut General Statutes (see page 24) completely eliminates the sale of tea, coffee and soft drinks to students in all public schools, so it supersedes the timeframe previously allowed by Section 10-215b-1 of the Regulations of Connecticut State Agencies.

Regulations of Connecticut State Agencies Section 10-215b-23. Income from the sale of food items.

The income from the sale to students of food items, anywhere on the school premises from thirty minutes prior to the start of any state or federally subsidized milk or food service program until thirty minutes after any such program, shall accrue to the school food authority for the benefit of state or federally subsidized milk or food service programs.

Note: Regulations 10-215b-1 and 10-215b-23 only apply to schools participating in the USDA’s National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program.

Connecticut General Statutes Section 10-266w. School breakfast grant program.

(a) For each fiscal year, each local and regional board of education having at least one school building designated as a severe need school, as defined by federal law governing school nutrition programs, in the fiscal year two years prior to the grant year, shall be eligible to receive a grant to assist in providing school breakfasts to all students in each eligible severe need school, provided any local or regional board having at least one school building so designated shall participate in the federal school breakfast program on behalf of all severe need schools in the district with grades eight or under in which at least eighty per cent of the lunches served are served to students who are eligible for free or reduced price lunches pursuant to federal law and regulations.

http://www.cga.ct.gov/2005/pub/Chap172.htm#Sec10-266w.htm

USDA Regulations 7 CFR 220 School Breakfast Program:

Specifies the requirements for the School Breakfast Program, including menu planning requirements and nutrition standards for breakfasts.

http://www.fns.usda.gov/cnd/Governance/regulations.htm

USDA Regulations 7 CFR 210 National School Lunch Program:

Specifies the requirements for the National School Lunch Program, including menu planning requirements and nutrition standards for lunches.

http://www.fns.usda.gov/cnd/Governance/regulations.htm
Foods and Beverages, Continued


**USDA Regulations 210.11 (a) (2) and 220.12 (a) Competitive Food Services**: Federal regulations prohibit the sale of foods of minimal nutritional value (FMNV) in food service areas during mealtimes. Appendix B to Parts 210 and 220 of the federal regulations defines four specific categories of FMNV, including (1) soda water (all carbonated and aerated beverages), (2) water ices (any frozen, sweetened water such as "...sicles" and flavored ice with the exception of products that contain fruit, fruit juice, milk, milk ingredients or egg ingredients other than egg whites), (3) chewing gum and (4) certain candies (hard candy, jellies and gums, marshmallow candies, fondant, licorice, spun candy and candy-coated popcorn). [http://www.fns.usda.gov/cnd/Governance/regulations/7CFR210.pdf](http://www.fns.usda.gov/cnd/Governance/regulations/7CFR210.pdf) and [http://www.fns.usda.gov/cnd/Governance/regulations/7CFR220.pdf](http://www.fns.usda.gov/cnd/Governance/regulations/7CFR220.pdf)

*Note: This regulation only applies to schools participating in the USDA’s National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program. Schools that do not participate in the federally funded Child Nutrition Programs are not subject to any federal nutrition standards. However, all public schools must comply with the requirements for allowable beverages under Section 10-221q of the Connecticut General Statutes, and the state competitive foods regulations (Sections 10-215b-1 and 10-215b-23) which supersede the federal regulation.*

**Lunch Periods**

**USDA Regulations 210.10 (f) (1) Timing of Lunch Periods**: Specifies that schools participating in the NSLP must serve lunches during the timeframe of 10:00 a.m. to 2:00 p.m. The regulation requires that schools must submit a request to the SDE for a waiver if lunches will be served before or after this timeframe. The SDE must evaluate the circumstances of each request to determine whether it meets one of the two USDA criteria for an exemption from the specified timeframe for lunch. [http://www.fns.usda.gov/cnd/governance/regulations/7CFR210.pdf](http://www.fns.usda.gov/cnd/governance/regulations/7CFR210.pdf)

**Connecticut General Statutes Section 10-221o. Lunch Periods and Recess.** Each local and regional board of education shall require each school under its jurisdiction to (1) offer all full day students a daily lunch period of not less than twenty minutes, and (2) include in the regular school day for each student enrolled in grades kindergarten to five, inclusive, a period of physical exercise, except that a planning and placement team may develop a different schedule for a child requiring special education and related services in accordance with chapter 164 and the Individuals With Disabilities Education Act, 20 USC 1400 et seq., as amended from time to time. In the event of a conflict with this section and any provision of chapter 164, such other provision of chapter 164 shall be deemed controlling. [http://www.cga.ct.gov/2005/pub/Chap170.htm#Sec10-221o.htm](http://www.cga.ct.gov/2005/pub/Chap170.htm#Sec10-221o.htm)

**Food Safety**


**Section 111 of Public Law 108-265 School Food Safety Program**: Each school food authority shall implement a school food safety program, in the preparation and service of each meal served to children, that complies with any hazard analysis and critical control point system established by the USDA. All schools participating in the National School Lunch Program and School Breakfast Program must have a minimum of two food safety and sanitation inspections per year. Schools are also required to post their most recent health inspection in a visible public location and provide a copy of the report to any member of the public on request. [http://www.fns.usda.gov/cnd/Governance/Legislation/Historical/PL_108-265.pdf](http://www.fns.usda.gov/cnd/Governance/Legislation/Historical/PL_108-265.pdf)
Step 3: Conduct Local Assessment Process

**Nutrition and Physical Activity Practices**

Before making plans to develop policies, the School Health Team should assess the district’s current nutrition and physical activity programs, policies and student needs, then identify areas that need improvement. It often helps to begin by conducting a baseline assessment of schools’ existing nutrition and physical activity environments. The results of school-by-school assessments can be compiled at the district level to prioritize needs. Some strategies for assessing local needs are listed below.

- Interview nutrition and health professionals to learn more about local eating and physical activity habits and to identify materials and services available for students and school staff members. Schools might interview representatives from: the school food service program; the state Team Nutrition Program; the State Department of Education Child Nutrition Programs; the nutrition unit within the State Department of Health; the district or state school health coordinator; the local WIC program and Cooperative Extension nutrition education program; the state or local chapters of the American Cancer Society, American Diabetes Association, American Dietetic Association and the American Heart Association; nutrition councils or coalitions; university research programs; organizations with special insights into the particular nutrition education needs of cultural and ethnic minorities; and businesses that offer nutrition-related services or food products.

- Interview food service staff members about students’ eating practices in the school cafeteria, e.g., percent participation in school meals, types of a la carte items purchased, plate waste and content of lunches sent from home.

- Observe the school cafeteria, the teachers’ lunchroom and other areas in the school where food is available.

- Review health, nutrition and physical education curriculums used by teachers.

- Review school district policies regarding recess and physical activity.

- Survey teachers to determine how nutrition and physical education are taught, and where they fit into the comprehensive school health curriculum.

- Survey the level of teachers’ interest in nutrition, physical activity or wellness programs for themselves.

- Survey schools regarding current practices on fundraising, celebrations and use of food by school staff members for reward or punishment.

- Survey schools regarding foods and beverages sold in vending machines, school stores and a la carte in the cafeteria.

- Survey students to determine their dietary preferences and the types of healthy changes they want in foods at school.

- Survey parents regarding family nutrition and physical activity practices and issues of concern regarding nutrition and physical activity.

Strategies adapted with permission from *Guidelines for School Health Programs to Promote Lifelong Healthy Eating*. Centers for Disease Control and Prevention, MMWR, June 14, 1996/45(RR-9):1-33. [http://www.cdc.gov/mmwr/preview/mmwrhtml/00042446.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/00042446.htm)
Steps for Creating Local Policy

The Centers for Disease Control and Prevention’s School Health Index (SHI) provides a comprehensive tool for assessing current nutrition and physical activity practices at the local school level.


The SHI enables schools to:

- identify strengths and weaknesses of health and safety policies and programs;
- develop an action plan for improving student health; and
- engage teachers, parents, students, and the community in promoting health-enhancing behaviors and better health.

The items in the SHI are based on CDC’s research-based guidelines for school health programs, which identify the policies and practices most likely to be effective in reducing youth health risk behaviors. The SHI is structured around CDC’s eight-component model of coordinated school health. For more information on coordinated school health, see Coordinated School Health under Resources at the end of this section.

Additional resources to assist schools with the self-assessment and planning process are found in Program Assessment under Resources at the end of this section.

Student Health Data

Identifying data on the education and health status of students in the local district provides a powerful rationale for local-level change and assists in prioritizing areas of work. Districts can review local health data, such as student fitness tests, BMI data and other indicators of student health. Local health departments and community organizations can also provide relevant local data. State agencies (e.g., Departments of Public Health and Education) and organizations (e.g., American Cancer Society, American Heart Association and American Diabetes Association) can also provide community and state data. Some local data sources include:

- Connecticut Department of Public Health’s Annual Registration Reports (Statistics from the Connecticut vital records databases, including analyses of births and deaths): http://www.ct.gov/dph/cwp/view.asp?a=3132&q=394598
- Connecticut School Health Survey (CSHS): http://www.ct.gov/dph/cwp/view.asp?a=3132&q=388104&dphNav_GID=1832&dphPNavCtr=#46988
- Connecticut State Department of Education’s Strategic School Profiles (percent of students passing all four physical fitness tests): http://www.csde.state.ct.us/public/cedar/profiles/index.htm
National data is available from many sources, such as the Centers for Disease Control and Prevention (CDC), the U.S. Department of Agriculture and Action for Healthy Kids. Some of these resources provide state profiles in addition to national summaries. Some sources for national data on the health status of young people are listed below. For additional resources on children’s nutrition and physical activity status, see Data and Trends under Resources at the end of this section.

- School Health Policies and Programs Study – SHPPS (CDC): [http://www.cdc.gov/HealthyYouth/shpps/index.htm](http://www.cdc.gov/HealthyYouth/shpps/index.htm)
- Trend Fact Sheets from YRBSS (CDC): [http://www.cdc.gov/HealthyYouth/yrbs/trends.htm](http://www.cdc.gov/HealthyYouth/yrbs/trends.htm)

When gathering assessment data, it is also important to keep the end in mind. Districts should consider what data will be useful to determine the impact of the local policies and to measure outcomes over time. Baseline data is critical to the evaluation process in determining whether the desired changes have occurred. For additional information on evaluation, see Section 8 – Measurement and Evaluation.
Step 4: Prioritize Needs and Develop an Action Plan

To facilitate policy development, the School Health Team should prioritize the areas for change and address them in order of local importance. After completing a needs assessment (see Step 3 – Conduct Local Assessment Process), the School Health Team can determine the critical areas for change and develop an action plan with recommended strategies to improve performance. The School Health Index (SHI) is useful in this process.


The SHI includes a section on prioritizing areas for improvement, based on importance, cost, time, commitment and feasibility. The results of school-by-school assessments can be compiled at the district level to prioritize needs. This step allows the School Health Team to decide on the key actions that will be implemented first.

The SHI also includes a School Health Improvement Plan that allows the School Health Team to list the steps identified and plan for implementation of recommended actions. Completing the SHI is an important first step toward improving school health promotion policies and practices. Schools can then act to implement the School Health Improvement Plan and develop an ongoing process for monitoring progress and reviewing the recommendations for change.

School and community forums can be used to inform the broader school community of the findings of the assessment, gather additional input and build consensus for recommendations and proposed actions. The Healthy Eating Active Living Resource Toolkit (Connecticut Association of Directors of Health) is a good resource to assist schools with this process. It provides descriptions and examples of a step-by-step process for team building, assessment, development of action plans and evaluation. The kit is available at http://www.cadh.org/CADHResources/HealthyEatingActiveLivingToolkit/tabid/61/Default.aspx.

Additional resources to assist districts with prioritizing local needs and developing an action plan are found in Assessment and Developing and Implementing School Policies under Resources at the end of this section.
Step 5: Draft Policy Language

The School Health Team should use the results of the needs assessment to draft initial policy statements (see Step 3 – Conduct Local Assessment Process and Step 4 – Prioritize Needs and Develop an Action Plan). Policies should address the six policy components:

1. Nutrition Education and Promotion;
2. Physical Activity and Physical Education;
3. Nutrition Standards for School Foods and Beverages (School Meals and Other Foods and Beverages);
4. Other School-Based Activities to Promote Student Wellness;
5. Communication and Promotion; and

Sections 3 through 8 of this guide contain recommended (not required) policy language and additional implementation guidance for each of the six policy components. School districts are encouraged to adapt policy language to meet local needs and reflect community priorities.

*Fit, Healthy and Ready to Learn: A School Health Policy Guide* from the National Association of State Boards of Education ([http://www.nasbe.org/healthyschools/fithealthy.html](http://www.nasbe.org/healthyschools/fithealthy.html)) is a useful tool for developing policy language. This guide provides direction on establishing an overall policy framework for school health programs and specific policies on various topics, including healthy eating and physical activity.

*Fit, Healthy and Ready to Learn* provides an excellent starting place for sample language that the School Health Team may consider adapting to meet the school district’s needs. The following websites also contain a wealth of resources and information on sample policy language:


Many other federal, state and local organizations have developed model language and sample policies. For more information, see *Developing and Implementing School Policies and Sample Policies* under Resources at the end of this section.

**Note:** When reviewing other district policies and sample policy resources for potential language it is important to ensure that the language is appropriate for your district and meets all applicable federal and state requirements.

**USDA School Wellness Policy regulations require that districts address:**
- nutrition education;
- physical activity,
- other school-based activities designed to promote student wellness;
- nutrition guidelines for all foods at school;
- assurance that school meals meet USDA guidelines; and
- a plan for measuring implementation.
Tips for Drafting Policy Language

- **Follow established, science-based health guidelines.** School policies must follow science-based guidelines from credible health organizations and government agencies, such as the U.S. Department of Agriculture, U.S. Department of Health and Human Services, American Academy of Pediatrics, Centers for Disease Control and Prevention and National Association for Sport and Physical Education. Undocumented and overly restrictive dietary approaches to childhood weight control, behavior management or other health issues are not appropriate as school policy.

- **Be consistent** with existing state and federal requirements and local district policies addressing student health. (See Federal and State Laws Pertaining to Nutrition and Physical Activity on page 22.)

- **Be concise.** Use language that is simple, clear and specific and that avoids jargon.

- **Include the rationale** for the policy (based on national, state and local data) and the benefits of adopting the policy.

- **Be realistic.** The goals you set for nutrition education and physical activity, the nutrition guidelines and other school-based activities must be developed while recognizing both where you would like your school district to be, and where it is now; they should be realistic and attainable.

- **Provide options.** It is often a good idea to propose several policy options from which decision makers can choose.

- **Provide practical guidance** for school staff members regarding implementation.

- **Provide data regarding financial impact.** The local school board or superintendent will probably want to know the financial implications of each policy option, particularly in regard to nutrition guidelines for foods and beverages sold in vending machines or school stores. The Connecticut State Department of Education’s Healthy Snack Pilot provides detailed information on the financial impact of a year-long pilot in five schools, as well as guidance on providing healthy snacks throughout the school environment (see Section 5 – Nutrition Standards for School Foods and Beverages). The USDA and CDC’s joint publication Making It Happen: School Nutrition Success Stories provides examples of success stories in which schools improved the nutritional quality of foods offered and maintained revenue. (For additional information, see Success Stories under Resources at the end of this section.)

- **Plan for evaluation.** The School Health Team will find it helpful to draft a plan for implementing and measuring the new policy while drafting the policy itself. Questions to consider include: What indicators will be used to evaluate the progress of implementation? Who will be responsible for monitoring the implementation of the policy? How often will the implementation be evaluated? Answering these questions while the initial policy is drafted will help the team anticipate challenges and prepare to meet them. (For additional information, see Section 8 – Measurement and Evaluation.)

- **Keep decision makers informed.** Decision makers do not like surprises. The team needs to keep school district decision makers informed about the proposed policy and obtain their support throughout the development process.

Adapted with permission from *Fit, Healthy and Ready to Learn*, National Association of State Boards of Education, 2000.
Step 6: Build Awareness and Support

Educating various audiences — such as administrators, teachers, food service staff members, parents, students and the community — about the district’s policy initiative is critical to success. Healthy nutrition and physical activity practices will need significant support from students, families, school staff members and the community. It is essential to obtain their input during the policy development process in order for the policy to be smoothly adopted and widely implemented. Ideally, all of these groups will be part of the School Health Team and can provide representative input on behalf of their members.

**Tips for Success**

- **Gather input from the school and community.** Input can be gathered informally and formally through a variety of channels such as student advisory councils and surveys; parent meetings and surveys; and community forums and town meetings. (Information on surveys can be found under Resources in Section 8 – Measurement and Evaluation.)

- **Use local media to spread awareness of the district’s needs and proposed policies** (see Working with the Media under Resources in Section 7 – Communication and Promotion). When dealing with the education community, it is helpful to identify the potential benefits the policy can have on student learning and academic achievement. Data and resources are contained in Health and Achievement under Resources at the end of this section.

- **Enlist community leaders to speak out in favor of the proposed solutions.** Community leaders can be powerful champions in building awareness and support for the district’s nutrition and physical activity policies.

- **Be prepared for challenges that may arise.** School and community responses to policy language around nutrition and physical activity practices can be unexpectedly controversial (such as what foods are or are not allowed for school parties or fundraisers). Research the facts and prepare in advance to respond to concerns with specific talking points that reflect scientific data and guidelines for best practice. Be sure that all spokespeople for the policy are providing a consistent message.

- **Learn from others’ successes.** The Connecticut School Nutrition Policies Pilot districts implemented a variety of activities to promote awareness and build local support (see Section 9 – School Nutrition Policies Pilots). The USDA’s Making it Happen! School Nutrition Success Stories documents successes with building local support for school health policy goals ([http://www.fns.usda.gov/tn/Resources/makingithappen.html](http://www.fns.usda.gov/tn/Resources/makingithappen.html)). Additional strategies are found in Success Stories under Resources at the end of this section.
Step 7: Adopt and Implement the Policy

Developing and adopting a sound policy is only the beginning. The adoption of a policy does not automatically mean that it will be implemented. Implementation requires good planning and management skills, the necessary resources, consistent oversight and widespread buy-in by school staff members and the local community. Leadership, commitment, communication and support are key to successful policy implementation.

Implementation can occur all at once or may be phased in over time. The School Health Team is in the best position to determine which approach is likely to be most effective in the district.

The attitude of all school personnel – individuals serving the food, the personnel who stock vending machines, students, coaches, teachers and administrators – can have a significant effect on the response to the policy. A positive attitude toward new foods, new physical activity options or other changes – from everyone in the school community – can make a huge difference.

Communication and promotion can be important tools for policy implementation. A proactive communication plan can help inform, educate and build support for adopting and implementing school nutrition and physical activity policies. For more information, see Section 7 – Communication and Promotion.
Step 8: Maintain, Measure and Evaluate

In order for policies to be successful, school districts must establish a plan for measuring implementation and sustaining local efforts. This includes evaluation, feedback and documentation based on sound evidence.

A sustained effort by each district is necessary to ensure that new policies are faithfully implemented. The School Health Team or other designated staff members must periodically assess how well the policies are being managed and enforced. It may be necessary to reinforce policy goals with school staff members. School Health Teams may also need to update or amend policies based on changes such as new research and trends in community health needs.

Evaluation and feedback are very important in maintaining local nutrition and physical activity policies. Districts need to document any changes that result from the policies, such as:

- financial impact on the school food service program;
- school store or vending machine revenues;
- student health trends;
- time spent on physical activity; and
- nutrition education programs conducted.

It is also important to assess student, parent, teacher, administrator and other school staff member satisfaction with the new policies.

A good evaluation plan does not need to be extensive or formal or put additional, undue burdens on team members or others who are involved in the process. Through the evaluation process, the district will be able to answer some basic questions that are very important to policymakers, students, school staff members, families and the general public.

Keep in mind that the policy process is ongoing – it does not end with the development of the policy document. Policy implementation requires regular evaluation. The results of local evaluation efforts often necessitate policy revisions. For additional resources and more information on the evaluation process, see Section 8 – Measurement and Evaluation.
2 Steps for Creating Local Policy

References


Guidelines for School Health Programs to Promote Lifelong Healthy Eating, Centers for Disease Control and Prevention, MMWR, June 14, 1996/45(RR-9);1-33: http://www.cdc.gov/mmwr/preview/mmwrhtml/00042446.htm


Steps for Creating Local Policy


The Local Process: How to Create and Implement a Local Wellness Policy, U.S. Department of Agriculture, Team Nutrition Website: http://www.fns.usda.gov/tn/Healthy/wellnesspolicy_steps.html


Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

Assessment

Click on the SDE’s Healthy School Environment Resource List, then click on Assessment under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Coordinated School Health

Click on the SDE’s Healthy School Environment Resource List, then click on Coordinated School Health under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Data and Trends

Click on the SDE’s Healthy School Environment Resource List, then click on Data and Trends under School Policies to Promote Healthy Lifestyles to access resources on data and trends for nutrition and health.

Click on the SDE’s Healthy School Environment Resource List, then click on Data and Trends under Physical Activity and Physical Education to access resources on data and trends for physical activity and physical education.

Developing and Implementing School Policies

Click on the SDE’s Healthy School Environment Resource List, then click on Developing and Implementing School Policies under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Health and Achievement

Click on the SDE’s Healthy School Environment Resource List, then click on Health and Achievement to access resources on this topic.

Sample Policies

Click on the SDE’s Healthy School Environment Resource List, then click on Sample Policies under School Policies to Promote Healthy Lifestyles to access resources on this topic.
2 Steps for Creating Local Policy

School Health Teams
Click on the SDE’s Healthy School Environment Resource List, then click on School Health Teams under School Policies to Promote Healthy Lifestyles to access resources on this topic.

School Improvement Plan
Connecticut State Department of Education School Improvement Plan:
http://www.csde.state.ct.us/public/cedar/nclb/sip/resources/sip_guide/templates/sample_school_improvement_template.doc


School Improvement Guide to Comprehensive Accountability for Learning and NCLB Requirements in Connecticut Schools, Connecticut State Department of Education, June 2005:

Success Stories
Click on SDE’s Healthy School Environment Resource List, then click on Success Stories under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Additional resources can be found in the SDE’s Healthy School Environment Resource List (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/hse_resource_list.pdf) and Nutrition-Related Resources (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/nutrition_resources.pdf). These lists are updated regularly.
Policy Component: Nutrition Education and Promotion

Goal

School districts will provide nutrition education experiences that positively influence students’ eating behaviors and help develop lifelong healthy habits. Districts will provide an environment that encourages and supports healthy eating by students.

Rationale

Nutrition education has been shown to improve eating habits and health. Connecting nutrition education to other content areas helps with the mastery of core subject standards. Research shows that behavior change correlates positively with the amount of nutrition instruction received. Linking nutrition education and promotion throughout the school and community reinforces consistent health messages and provides multiple opportunities for students to practice healthy habits.

Policy Recommendations

Policies for Nutrition Education and Promotion will address the following areas:

- Standards-Based, Sequential Nutrition Education
- Connecting with Existing Curriculums
- Education Links with School
- Professional Development for Teachers
- Appropriateness of Nutrition Component of Comprehensive Health Education Curriculum
- Educational Reinforcement
- Nutrition Promotion
- Staff Awareness
- Staff Members as Role Models

Specific guidance regarding the implementation of each policy recommendation for Nutrition Education and Promotion follows under Implementation Guidance, after this section. Resources to assist with the implementation of each policy recommendation are found in Resources at the end of this section.

This section provides recommendations (not requirements) for policy language for Nutrition Education and Promotion. This language represents recommended best practice for developing school nutrition and physical activity policies. School districts may choose to use the policy recommendations as written or revise them as needed to meet local needs and reflect community priorities. When developing nutrition and physical activity policies, districts will need to take into account their unique circumstances, challenges, opportunities and available resources. Policies should meet local needs and be adapted to the health concerns, food preferences and dietary practices of different ethnic groups.
Policy Recommendations

Standards-Based Sequential Nutrition Education
Nutrition education shall be based on current science, research and national guidelines. Nutrition education shall be standards-based, using national or state-developed standards, such as the Connecticut State Department of Education’s *Healthy and Balanced Living Curriculum Framework*. Nutrition education shall be offered as part of a planned, ongoing, systematic, sequential, standards-based, comprehensive school health education program designed to provide students with the knowledge and skills necessary to promote and protect their health. The nutrition education program shall focus on students’ eating behaviors, be based on theories and methods proven effective by published research, and be consistent with the state’s/district’s comprehensive school health education standards/guidelines/curriculum framework. Students shall be able to demonstrate competency through application of knowledge, skill development and practice.

Connecting with Existing Curriculums
Nutrition education shall be a part of comprehensive school health education and shall also be included in other classroom content areas such as math, science, language arts, social sciences, family and consumer sciences and elective subjects. All prekindergarten-12 instructional staff members shall be encouraged to incorporate nutritional themes from the Connecticut State Department of Education’s *Healthy and Balanced Living Curriculum Framework* into daily lessons, when appropriate, to reinforce and support health messages.

Education Links with School
The nutrition education program links with school meal programs, other school foods, and nutrition-related community services that occur outside the classroom or that link classroom nutrition education to the larger school community, such as school gardens, cafeteria-based nutrition education and after-school programs. Nutrition education shall be offered in the school cafeteria and classroom, with coordination between school food service and teachers. The district shall link nutrition education with other coordinated school health initiatives.

Professional Development for Teachers
The school district shall include appropriate training for teachers and other staff members. Staff members responsible for nutrition education shall be adequately prepared and shall regularly participate in professional development activities to effectively deliver the nutrition education program as planned. Preparation and professional development activities shall provide basic knowledge of nutrition, combined with the development of skills and adequate time to practice skills in program-specific activities. Training shall include instructional techniques and strategies designed to promote healthy eating behaviors. Staff members providing nutrition education shall not advocate dieting behaviors or any specific eating regimen to students, other staff members or parents.

Appropriateness of Nutrition Component of Comprehensive Health Education Curriculum
The school district shall assess all nutrition education lessons and materials for accuracy, completeness, balance and consistency with the state’s/district’s educational goals and curriculum standards. Materials developed by food marketing boards or food corporations shall be examined for appropriateness of commercial messages.
Policy Recommendations

Educational Reinforcement
School instructional staff members shall collaborate with agencies and groups conducting nutrition education in the community to send consistent messages to students and their families. Guest speakers and performers invited to address students shall receive appropriate orientation to relevant district policies. School staff members shall be encouraged to coordinate with other agencies and community groups to provide opportunities for student volunteer work related to nutrition, such as assisting with food recovery efforts and preparing nutritious meals for home-bound people. School officials shall disseminate information to parents, students and staff members about community programs that offer nutrition assistance to families.

Nutrition Promotion
The school district shall conduct nutrition education activities and promotions that involve parents, students and the community. The district shall participate in programs that promote and reinforce student health, such as Team Nutrition and the HealthierUS School Challenge. The school team responsible for planning nutrition activities shall ensure interdisciplinary collaboration by including school food service, school nurses, health and physical education teachers, family and consumer sciences teachers, and other appropriate school staff members.

Staff Awareness
The school district shall build awareness among teachers, food service staff, coaches, nurses and other school staff members about the importance of nutrition, physical activity and body-size acceptance to academic success and lifelong wellness.

Staff Members as Role Models
School staff members shall be encouraged to model healthy eating and physical activity behaviors.
Implementation Guidance

Standards-Based Sequential Nutrition Education

Curriculum Development
The Connecticut State Department of Education (SDE) Healthy and Balanced Living Curriculum Framework presents a vision for healthy and balanced living by showing the interrelated concepts and skills in comprehensive school health (including nutrition) and physical education. The purpose of the curriculum framework is to set high-level content standards and performance indicators that guide the development of curriculums that challenge and motivate students and contribute to student learning and achievement. Districts are encouraged to use the Healthy and Balanced Living Curriculum Framework as a best practice document to develop the nutrition education component of their comprehensive health education curriculum.

The SDE Healthy and Balanced Living Curriculum Framework provides guidance for curriculum development in comprehensive school health education and physical education and shows connections between these two content areas. The curriculum framework leads students to make connections and apply the concepts and skills of health and physical education for the purpose of developing and maintaining well-being. The design of the curriculum framework begins to move instruction in this direction.

The Healthy and Balanced Living Curriculum Framework standards provide guidance for teachers on how to teach students to live actively, energetically and fully in a state of well-being and what concepts and skills are necessary to accept responsibility for self and well-being. The comprehensive school health education and physical education standards are based on the National Health Education Standards and Moving into the Future: The National Standards for Physical Education, 2nd edition.

Two recommended resources to help guide curriculum development and instruction are the Health Education Assessment Project (HEAP) and the Health Education Curriculum Analysis Tool (HECAT).

- Health Education Assessment Project (HEAP): HEAP is a national and state initiative focused on increasing the capacity of school districts to deliver a research-based approach to building the health literacy of students by addressing accountability in comprehensive school health education. HEAP aligns curriculum, instruction and assessment to improve student learning through comprehensive school health education instruction using the Connecticut Curriculum Assessment Framework and HEAP student assessment items. HEAP’s objectives are to:
  - provide strategies for scoring student work in order to assess comprehensive school health education curriculums;
  - develop capacity for school communities to provide effective, assessment-based, comprehensive school health education for all students;
  - provide consistency in the application of the state standards in assessment-based, comprehensive school health education;
  - increase connections between comprehensive school health education and other components of Coordinated School Health; and
  - improve coordination of assessment strategies within the school community.
**Health Education Curriculum Analysis Tool (HECAT):** HECAT allows educators to evaluate and select their curriculums based on research that supports positive health behaviors among students by answering the following questions:

- Is the curriculum enhancing students’ health behaviors?
- Are the elements of effective health education practices incorporated?
- How is it aligned with national and state health education standards?
- Are strategies included that assess both concepts and skills?
- Is the content accurate and current?
- Are there opportunities for students to practice essential health skills?
- Does it promote positive health behaviors and norms?
- What and where are the gaps?

HECAT is available at [http://www.cdc.gov/HealthyYouth/HECAT/](http://www.cdc.gov/HealthyYouth/HECAT/). Additional resources to assist with curriculum development are found in Curriculum Development under Resources at the end of this section.

**Content Areas**

Nutrition education shall be designed to help students learn:

- nutritional knowledge, including, but not limited to, the benefits of healthy eating, essential nutrients, nutritional deficiencies, principles of healthy weight management, the use and misuse of dietary supplements, and safe food preparation, handling and storage;
- nutrition-related skills, including, but not limited to, planning a healthy meal, understanding and using food labels, accessing and critically evaluating nutrition information, misinformation and commercial food advertising;
- how to assess and manage one’s personal eating habits, set goals for improvement and achieve those goals; and
- how to communicate, make healthy decisions and advocate for developing lifelong healthy habits.

Nutrition education activities shall:

- be consistent with the Dietary Guidelines for Americans ([http://www.healthierus.gov/dietaryguidelines/](http://www.healthierus.gov/dietaryguidelines/));
- emphasize the appealing aspects of healthy eating;
- include enjoyable, developmentally appropriate, culturally relevant, participatory activities, such as contests, promotions, taste testing, farm visits and school gardens;
- promote fruits, vegetables, whole-grain products, low-fat and fat-free dairy products, healthy food preparation methods and health-enhancing nutrition practices;
- emphasize caloric balance between food intake and energy expenditure (physical activity);
- engage families as partners in their children’s education; and
- teach media literacy with an emphasis on food marketing.
Nutrition Themes
Nutrition themes include, but are not limited to, the following:

- MyPyramid (Healthy Eating Plan)
- Dietary Guidelines for Americans
- Sources of Major Nutrients
- Understanding Calories
- Food Labels
- Identify and Limit Foods of Low Nutrient Density
- Healthy Heart Choices
- Diet and Disease
- Body-Size Acceptance, Healthy Weight and Dangers of Unhealthy Weight-Control Practices
- Healthy Breakfast
- Healthy Snacks
- Multicultural Influences
- Proper Food Safety/Sanitation

Themes should be developmentally and culturally appropriate. The district nutrition policy should reinforce nutrition education to help students practice these themes in a supportive school environment.

Nutrition Education Strategies
Nutrition education strategies are most likely to promote lifelong habits for good health if they help children learn the skills needed for healthy eating behaviors, provide opportunities to practice these behaviors, and make nutrition education relevant and fun. Effective nutrition education programs influence eating behaviors. As indicated in the Centers for Disease Control and Prevention’s (CDC) Guidelines for School Health Programs to Promote Lifelong Healthy Eating, effective nutrition education programs:

- focus on changing specific behaviors rather than on learning general facts about nutrition;
- employ active learning or experiential strategies using developmentally appropriate instructional concepts at each grade level;
- devote adequate time and intensity to focus on behaviors and skill building;
- provide teachers and other staff members with adequate training in nutrition education; and
- link with the school environment by involving the child’s family and providing school meal programs and food-related policies that reinforce classroom nutrition education.

CDC notes, “The context in which students learn about healthy eating behaviors and the feelings students associate with healthy foods are key factors in determining their receptivity to nutrition education. Students are more likely to adopt healthy eating behaviors when:

- they learn about these behaviors through fun, participatory activities rather than through lectures;
- lessons emphasize the positive, appealing aspects of healthy eating patterns rather than the negative consequences of unhealthy eating patterns;
Nutrition Education and Promotion

Implementation Guidance

- the benefits of healthy eating behaviors are presented in the context of what is already important to the students; and
- the students have repeated opportunities to taste foods that are low in fat, sodium and added sugars and high in vitamins, minerals and fiber during their lessons.”

Developmentally Appropriate and Culturally Relevant Activities

CDC’s Guidelines for School Health Programs to Promote Lifelong Healthy Eating describes how the nutrition curriculum should be both developmentally and culturally appropriate. “Different educational strategies should be used for children at different stages of cognitive development. Regardless of the amount and quality of teaching they receive, young elementary students might not fully understand abstract concepts (e.g., the nutrient content of foods or the classification of foods into groups). Nutrition education for young children should focus on concrete experiences (e.g., increasing exposure to many healthy foods and building skills in choosing healthy foods).

“More abstract associations between nutrition and health become appropriate as children approach middle school. By this age, children can understand and act on the connection between eating behaviors and health. Nutrition education for middle and high school students should focus on helping students assess their own eating behaviors and set goals for improving their food selection. Lessons for older children should emphasize personal responsibility, decision-making skills, advocating for healthy behaviors and resisting negative social pressures.

“Nutrition education presents opportunities for students to learn about and experience cultural diversity related to food and eating. Students from different cultural groups have different health concerns, eating patterns, food preferences, and food-related habits and attitudes. These differences need to be considered when developing curricula or discussing food choices. Nutrition education can succeed only when students believe it is relevant to their lives.”

Connecting with Existing Curriculums

Nutrition education should be taught as part of the comprehensive school health education curriculum. When nutrition education is linked with other content areas, children have daily exposure to nutrition concepts and messages. An interdisciplinary approach to nutrition education reinforces what children are learning.

The interdisciplinary approach to nutrition education should complement and not replace sequential nutrition education lessons within a comprehensive school health education curriculum. The exclusive use of an interdisciplinary approach can sacrifice key elements of an effective nutrition education program (e.g., adequate instructional time, focusing on behaviors and skill-building, attention to scope and sequence, and adequate teacher preparation).
Implementation Guidance

Nutrition concepts are easily linked with a variety of content areas, such as math, science, language arts, social sciences, family and consumer sciences and elective subjects. For example:

- using literature with appropriate health themes in language arts;
- calculating nutritional value of foods and analyzing nutrients in math;
- reading food labels and calculating the percent contribution of daily nutrients in math;
- identifying foods’ chemical compounds in science;
- determining chemical changes in recipe ingredients (e.g., formation of gluten in flour) in chemistry;
- researching food customs of other countries in social studies;
- preparing another country’s recipe in world language class; and
- creating a healthy menu based on local food preferences in social studies.

The chart below provides an example of how the nutrition concept “Eat five servings of fruits and vegetables a day for good health” can easily be incorporated into other subject areas at the elementary level.

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Connecting Nutrition Concepts across the Curriculum

**Language Arts** — Read books with fruit and vegetable themes. Describe and discuss the colors, shapes, textures and tastes of the different types of fruits and vegetables featured in these books.

**Social Studies and Geography** — Learn about states and countries where certain fruits and vegetables are grown. Map countries that are major producers of specific fruits and vegetables.

**Mathematics** — Have students track the number of servings of fruits and vegetables they eat for two days by placing stickers on a classroom chart. Count the number of fruits and vegetables and have students determine the following: What fruit is eaten most often? What vegetable is eaten most often?

**Science** — Conduct a Bean Olympics. Plant bean seeds in a shallow pan. Tape a number to a penny and place over each seed. The first bean to sprout and turn over its penny wins.

Resources to help districts connect nutrition themes to other areas of the school curriculum can be found in *Connecting with Existing Curriculums* under Resources at the end of this section.
Education Links with School

Many opportunities to enhance nutrition education exist at school and in the community. Examples include coordinated school health initiatives, cafeteria-based nutrition education, after-school programs, and nutrition promotions, events and initiatives such as school/community health fairs and school gardens. For more information, see Education Links with School and Nutrition Promotion under Resources at the end of this section.

Coordinated School Health: A coordinated school health program empowers students with not only the knowledge, attitudes and skills required to make positive health decisions, but also the environment, motivation, services and support necessary to develop and maintain healthy behaviors. The coordinated school health model includes health education, physical education, health services, nutrition services, health promotion for staff members, counseling and psychological services, healthy school environment, and parent/community involvement. (For more information, see Coordinated School Health under Resources in Section 2 – Steps for Creating Local Policy.) Each component can contribute to interdisciplinary efforts that promote healthy eating and physical activity. CDC’s Guidelines for School Health Programs to Promote Lifelong Healthy Eating provides examples of how classroom nutrition education can be supported and reinforced throughout the school environment:

- Schools provide appealing, low-fat, low-sodium foods in vending machines and at school meetings and events;
- School counselors and nurses provide guidance on health and, if necessary, referrals to appropriate health professionals (e.g., registered dietitian) for nutritional problems;
- Community organizations provide counseling or nutrition education campaigns;
- Physical education teachers help students understand the relationship between nutrition and physical activity;
- School food service personnel serve healthy, well-balanced meals in the cafeteria; and
- School personnel act as role models for healthy eating (see Staff Members as Role Models in this section).

Cafeteria-Based Nutrition Education: The school cafeteria provides an ideal setting for students to practice healthy eating. Coordinating school food service programs with classroom lessons allows students to apply critical thinking skills taught in the classroom. CDC’s Guidelines for School Health Programs to Promote Lifelong Healthy Eating provides suggestions for school food service personnel to connect the cafeteria to the classroom:

- Visit classrooms and explain how the school food service program ensures that meals meet U.S. Department of Agriculture (USDA) nutrient standards and the Dietary Guidelines for Americans.
- Invite classes to visit the cafeteria kitchen and learn how to prepare healthy foods.
- Involve students in planning the school menu and preparing recipes.
- Offer foods that reinforce classroom lessons, e.g., whole-wheat rolls to reinforce a lesson on dietary fiber.
- Display nutrition posters in the cafeteria and distribute nutrition information and materials.
Nutrition Education and Promotion

Implementation Guidance

- Coordinate menus with classroom lessons and school promotions, e.g., featuring foods from other countries for an international day.
- Display nutrition information about available foods and give students opportunities to practice food analysis and selection skills learned in the classroom.

Resources to assist in the implementation of cafeteria-based nutrition education can be found in Nutrition Lessons and Programs, Nutrition Promotions and Handouts for Children, Parents and School Staff Members (see Resources at the end of this section).

After-School Programs: After-school programs provide an ideal setting to provide nutrition and physical activity opportunities. After-school programs extend their responsibilities to families and schools by including supportive learning environments, in addition to providing children with a safe environment, healthy recreation and appropriate social development. After-school programs have three components: academic, enrichment and recreational. Some programs incorporate health and nutrition concepts into the academic and recreational components of the program. For example, in some after-school programs, students learn about math and spatial reasoning by playing basketball. Students also learn about the importance of good nutrition and physical activities associated with developing the ability to learn and play the game. When a student gains competence in sports, music or gardening, the confidence and skills that come from that experience are transferable to academic skills.

Professional Development for Teachers

CDC’s Guidelines for School Health Programs to Promote Lifelong Healthy Eating describes successful professional development for teachers.

“Appropriate training in nutrition and comprehensive school health education affects the quality of instruction and increases the extent to which teachers implement the curriculum. All elementary school teachers as well as secondary school teachers in disciplines such as comprehensive school health education, family and consumer sciences, language arts, physical education and science should receive appropriate nutrition education training.

“Training should address developmentally and culturally appropriate content and teaching strategies. Training should focus on giving teachers the skills they need to provide innovative nutrition education techniques. Training programs are most effective if they:

- are designed to meet the specific needs of the teachers and are based on the teachers’ level of nutrition knowledge and experience with suggested teaching strategies;
- model behavioral change techniques and give teachers practice in using them;
- involve multiple sessions spaced across time so that teachers can try out the newly learned techniques in their classrooms and report on their experiences to the training group; and
- provide post-training sessions so that teachers can share experiences with their peers.

“Teachers should understand the importance of fully implementing the selected curriculum and become familiar with its underlying theory and concepts. Training should also help
teachers assess and improve eating practices and make them aware of the behavioral messages they give as role models.”

In addition to teachers, professional development activities in nutrition should be offered to all appropriate school personnel; for example, mental health providers, school nurses and school food service personnel. Nutrition training can help mental health providers reinforce healthy eating behaviors for students. School nurses should have the opportunity to participate in continuing education activities so they can help educators design, implement and evaluate the nutrition curriculum or the nutrition component of the health education curriculum. Nutrition education can help food service personnel reinforce classroom instruction through the school meal program and help shape the district’s nutrition policy. (For additional information, see Training for Food Service Staff Members in Section 6 – Other School-Based Activities to Promote Student Wellness.)

**Appropriateness of Nutrition Component of Comprehensive Health Education Curriculum**

Districts should ensure that all nutrition education lessons and materials are accurate, complete and balanced and meet state and district standards. HEAP and HECAT can assist districts with the evaluation of comprehensive school health education curriculums, including nutrition education lessons and materials. For more information, see Curriculum Development at the beginning of this section.

**Educational Reinforcement**

By collaborating with other school and community groups working on nutrition education, districts can increase the effectiveness of nutrition interventions by providing consistent and reinforcing health messages. Districts may consider collaborating with nutrition education and physical activity programs conducted by:

- school clubs, organizations and the student council;
- PTA/PTO and other parent volunteers/organizations;
- local health departments;
- nonprofit health organizations, such as the American Heart Association, American Cancer Society and American Diabetes Association;
- hospital community outreach programs;
- town park and recreation departments;
- local health care providers, e.g., pediatricians, dentists, dietitians;
- community groups and programs, e.g., scouts, YMCA/YWCA;
- faith-based groups; and
- town and city health initiatives.

Additional information on collaboration can be found in Partnering with Community Organizations in Section 7 – Communication and Promotion. Resources can be found in Partnering with Community Organizations under Resources at the end of this section.
Nutrition Promotion

Participation in programs that promote and reinforce health emphasizes the school’s commitment to a healthy school nutrition environment. Some programs that challenge schools to standards of excellence include:


- **Team Nutrition (U.S. Department of Agriculture)**: Information on joining as a Team Nutrition school. [http://teamnutrition.usda.gov/team.html](http://teamnutrition.usda.gov/team.html)

Schools can also promote nutrition through a variety of activities, including food demonstrations in school cafeterias, connecting with local farmers’ markets and farm-to-school programs, sampling of popular healthy ethnic foods, and participating in comprehensive marketing campaigns (e.g., promoting nutrition and physical activity messages such as CDC’s *Fruits & Veggies More Matters* campaign and daily physical activity). The USDA Team Nutrition resources can help schools conduct nutrition events such as health and nutrition fairs, theme days and tasting activities ([http://teamnutrition.usda.gov/library.html](http://teamnutrition.usda.gov/library.html)).

Additional resources can be found in *Farm to School, Fruits and Vegetables* and *Nutrition Promotions* under Resources at the end of this section.

Staff Awareness

It is important for all school personnel to be aware of the importance of nutrition and physical activity to student achievement so they can reinforce positive health messages in the school environment. The School Health Team can use appropriate personnel in the school district (including health and physical education teachers, family and consumer sciences teachers, school nurses, school medical advisors and school food service directors) and the community (including registered dietitians and other health professionals) to help promote staff awareness. Appropriate personnel can serve as a resource to teachers for nutrition and nutrition education. They can provide staff members with scientifically accurate and evidence-based health information regarding health benefits and risks of dietary habits, health trends and effective strategies for addressing nutrition issues, and food safety and food-borne illness prevention.
Staff Members as Role Models

Adults can have a significant impact on the development of students’ health behaviors. School staff members can model healthy eating and physical activity behaviors in a variety of ways, including:

- using teaching skills that help students gather information, practice problem solving techniques and use effective communication skills;
- providing healthy snacks in the classroom (see Section 5 – Nutrition Standards for School Foods and Beverages);
- encouraging nonfood fundraisers (see Section 5 – Nutrition Standards for School Foods and Beverages);
- not using food as a reward for behavior or academics (see Section 6 – Other School-Based Activities to Promote Student Wellness);
- participating in the school meal program and making healthy choices;
- using the stairs instead of the elevator when appropriate;
- participating with children in classroom-based physical activity (see Section 4 – Physical Education and Physical Activity);
- leading or participating in school fitness activities such as walking or running clubs, yoga class and weight lifting;
- joining in children’s games on the playground or gymnasium;
- talking about the physical activities they like to do outside of school;
- using physical activity as a reward rather than as a form of punishment (see Section 4 – Physical Education and Physical Activity); and
- using appropriate safety gear, such as helmets, during physical activity.

Staff wellness programs can encourage school personnel to be positive role models for students. Additional information on staff wellness is contained in Section 6 – Other School-Based Activities to Promote Student Wellness.
References

http://www.nasbe.org/healthyschools/fithealthy.html

Guidelines for School Health Programs to Promote Lifelong Healthy Eating, Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, June 14, 1996/45(RR-9):1-33:
http://www.cdc.gov/mmwr/preview/mmwrhtml/00042446.htm

Healthy and Balance Living Curriculum Framework, Connecticut State Department of Education, 2006:

Idaho Implementation Guide for School Wellness Policy, Idaho Action for Healthy Kids, April 2005:

Mississippi Local School Wellness Policy Guide for Development, Mississippi Department of Education, 2005:
http://www.mde.k12.ms.us/HealthySchools/Initiatives.html#Wellness

Model School Wellness Policies, National Alliance for Nutrition and Activity, 2005:
http://www.schoolwellnesspolicies.org/

Rhode Island School District Nutrition & Physical Activity Model Policy Language, Rhode Island Healthy Schools Coalition, June 2006:

School Nutrition Association Local Wellness Policy Recommendations, School Nutrition Association, 2005:
http://www.schoolnutrition.org/Content.aspx?id=8504
Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

**Connecting with Existing Curriculums**
Click on the SDE’s [Healthy School Environment Resource List](#), then click on Connecting with Existing Curriculums under Nutrition Education to access resources on this topic.

**Coordinated School Health**
Click on the SDE’s [Healthy School Environment Resource List](#), then click on Coordinated School Health under School Policies to Promote Healthy Lifestyles to access resources on this topic.

**Curriculum Development**
Click on the SDE’s [Healthy School Environment Resource List](#), then click on Curriculum Development under Nutrition Education to access resources on this topic.

**Dietary Guidelines**
Click on the SDE’s [Nutrition-Related Resources](#), then click on Dietary Guidelines under General Nutrition and Health to access resources on this topic.

**Farm to School**
Click on the SDE’s [Healthy School Environment Resource List](#), then click on Farm to School under Nutrition Education to access resources on this topic.

**Food Safety Education for Children**
Click on the SDE’s [Nutrition-Related Resources](#), then click on Food Safety Education for Children under Food Safety to access resources on this topic.

**Fruits and Vegetables**
Click on the SDE’s [Nutrition-Related Resources](#), then click on Fruits and Vegetables under General Nutrition and Health to access resources on this topic.

**Games and Activities**
Click on the SDE’s [Healthy School Environment Resource List](#), then click on Games and Activities under Nutrition Education to access resources on this topic.

**Handouts for Children, Parents and School Staff Members**
Click on the SDE’s [Healthy School Environment Resource List](#), then click on Handouts for Children, Parents and School Staff Members under Promoting Nutrition and Physical Activity to access resources on this topic.

**Healthy Eating Calculators**
Click on the SDE’s [Healthy School Environment Resource List](#), then click on Healthy Eating Calculators under Nutrition Education to access resources on this topic.
3 Nutrition Education and Promotion

Interactive Websites for Children
Click on the SDE’s Healthy School Environment Resource List, then click on Interactive Websites for Children under Promoting Nutrition and Physical Activity to access resources on this topic.

Nutrition Education
Click on the SDE’s Healthy School Environment Resource List, then click on Nutrition Education to access resources on this topic.

Nutrition Lessons and Programs
Click on the SDE’s Healthy School Environment Resource List, then click on Nutrition Lessons and Programs under Nutrition Education to access resources on this topic.

Nutrition Promotions
Click on SDE’s Healthy School Environment Resource List, then click on Nutrition Promotions and Programs under Nutrition Education to access resources on this topic.

Partnering with Community Organizations
Click on the SDE’s Healthy School Environment Resource List, then click on Partnering with Community Organizations under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Additional resources can be found in the SDE’s Healthy School Environment Resource List (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/hse_resource_list.pdf) and Nutrition-Related Resources (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/nutrition_resources.pdf). These lists are updated regularly.
Policy Component: Physical Education and Physical Activity

Goal
School districts will provide students with a variety of opportunities for daily physical activity and quality physical education. The district’s physical activity component will provide opportunities for every student to develop the knowledge and skills for specific physical activities, and to maintain physical fitness, to regularly participate in physical activity, and to understand the short- and long-term benefits of a physically active and healthy lifestyle.

Rationale
Physical education plays a critical role in helping children learn necessary skills and develop confidence in their physical abilities. Schools can help children and adolescents become more physically active and fit by providing a wide range of accessible, safe and affordable opportunities to be active. Appropriate practices guided by competent, knowledgeable and supportive adults influence the extent to which students choose to engage in activities, enjoy physical activity and develop healthy lifestyles.

Policy Recommendations
Policies for Physical Education and Physical Activity will address the following areas:

- Standards-Based, Sequential Physical Education
- Daily Physical Education Prekindergarten to Grade 12
- Daily Recess
- Physical Activity Opportunities Before and After School
- Physical Activity and Punishment
- Safe Routes to School
- Use of School Facilities Outside of School Hours
- Incorporating Physical Activity into the Classroom

Specific guidance regarding the implementation of each Physical Education and Physical Activity policy recommendation follows under Implementation Guidance, after this section. Resources to assist with implementation of each policy recommendation are found in Resources at the end of this section.

This section provides recommendations (not requirements) for policy language for Physical Education and Physical Activity. This language represents recommended best practice for developing school nutrition and physical activity policies. School districts may choose to use the policy recommendations as written or revise them as needed to meet local needs and reflect community priorities. When developing nutrition and physical activity policies, districts will need to take into account their unique circumstances, challenges, opportunities and available resources. Policies should meet local needs and be adapted to the health concerns, food preferences and dietary practices of different ethnic groups.
Policy Recommendations

Standards-Based, Sequential Physical Education
Physical education shall be standards-based, using national or state-developed standards, such as Connecticut’s Healthy and Balanced Living Curriculum Framework and National Association for Sport and Physical Education (NASPE) guidelines. Physical education classes shall be sequential, building from year to year, and content will include motor skills, concepts and strategies, engagement in physical activity, physical fitness, responsible behavior and benefits of physical activity. Students shall be able to demonstrate competency through application of skills, health wellness literacy, concepts and plans, and advocacy.

Daily Physical Education Prekindergarten to Grade 12
All students in prekindergarten to Grade 12, including students with disabilities and special health-care needs and in alternative educational settings, shall receive daily physical education (150 minutes per week for elementary school students and 225 minutes per week for middle and high school students) for the entire school year. All physical education shall be taught by a certified physical education teacher. Student involvement in other activities involving physical activity (e.g., interscholastic or intramural sports) shall not be substituted for meeting the physical education requirement. Students shall spend at least 50 percent of physical education class time participating in moderate to vigorous physical activity.

Daily Recess
All elementary school students shall have at least 20 minutes a day of supervised recess, preferably outdoors, during which schools should encourage moderate to vigorous physical activity and provide space, equipment and an environment that is conducive to safe and enjoyable activity. Districts shall ensure that students with special physical and cognitive needs have equal physical activity opportunities, with appropriate assistance and services. Districts shall discourage extended periods (i.e., periods of two or more hours) of inactivity. When activities, such as mandatory schoolwide testing, make it necessary for students to remain indoors for long periods of time, schools shall give students periodic breaks during which they are encouraged to get up from their chairs and be moderately active. Districts shall prohibit withholding of recess or the use of exercise as punishment, and shall develop alternative practices for promoting appropriate behavior. Recess shall not be withheld as a consequence of incomplete school assignments.

Physical Activity Opportunities Before and After School
All elementary, middle and high schools shall offer extracurricular physical activity programs, such as physical activity clubs or intramural programs. All high schools, and middle schools as appropriate, shall offer interscholastic sports programs. Districts shall offer a range of activities that meet the needs, interests and abilities of all students, including boys, girls, students with physical and cognitive disabilities, and students with special health care needs. After-school, child care and enrichment programs shall provide and encourage — verbally and through the provision of space, equipment and activities — daily periods of moderate to vigorous physical activity for all participants.

Physical Activity and Punishment
Teachers and other school and community personnel shall not use physical activity or exercise (e.g., running laps and pushups) or withhold opportunities for physical activity (e.g., recess and physical education) as punishment. Recess or other opportunities for physical activity shall not be withheld as a measure to enforce the completion of academic work. Appropriate alternate strategies shall be developed as consequences for negative or undesirable behaviors.
Policy Recommendations

Safe Routes to School
When appropriate, the district shall work together with local public works, public safety and/or police departments to make it safer and easier for students to walk and bike to school.

Use of School Facilities Outside of School Hours
School spaces and facilities shall be available to students, staff members and community members for physical activity before, during and after the school day, on weekends and during school vacations. These spaces and facilities shall also be available to community agencies and organizations offering physical activity and nutrition programs. School policies concerning safety shall apply at all times.

Incorporating Physical Activity into the Classroom
Students in all grades shall be provided with opportunities for physical activity beyond and in addition to physical education. Classroom health education shall complement physical education by reinforcing the knowledge and self-management skills needed to maintain a physically active lifestyle and to reduce time spent on sedentary activities, such as watching television. Opportunities for physical activity shall be incorporated into other subject lessons and can be used as reinforcement, reward and celebration for achievement, positive behavior and completion of assignments. Classroom teachers shall provide short physical activity breaks between lessons or classes, as appropriate.
Implementation Guidance

Standards-Based, Sequential Physical Education

Curriculum Development
The Connecticut State Department of Education (SDE) Physical Education – A Guide to K-12 Program Development (2000) is a comprehensive guide to program development. The SDE Healthy and Balanced Living Curriculum Framework presents a vision for healthy and balanced living by showing the interrelated concepts and skills in comprehensive school health and physical education. The purpose of the curriculum framework is to guide the development of curriculums that challenge and motivate students and contribute to student learning and achievement. Districts are encouraged to use the SDE Healthy and Balanced Living Curriculum Framework as a best practice document to develop their physical education curriculum.

The Healthy and Balanced Living Curriculum Framework provides guidance for curriculum development in comprehensive school health education and physical education and shows connections between these two content areas. The curriculum framework leads students to make connections and apply the concepts and skills of health and physical education for the purpose of developing and maintaining well-being. The design of the curriculum framework begins to move instruction in this direction.

The Healthy and Balanced Living Curriculum Framework standards provide guidance for teachers on how to teach students to live actively, energetically and fully in a state of well-being and what concepts and skills are necessary to accept responsibility for self and well-being. The comprehensive school health education and physical education standards are based on the National Health Education Standards and Moving into the Future: The National Standards for Physical Education, 2nd edition.

Differentiating Physical Education and Physical Activity
While physical education and physical activity are often used interchangeably, they differ in important ways, with both being necessary to contribute to the development of healthy, active children. The National Association for Sport and Physical Education (NASPE) provides the definitions below.

“School physical education, taught through a well-defined curriculum by highly qualified physical education teachers, offers the best opportunity to provide physical activity to all children and to teach them the skills and knowledge needed to establish and sustain an active lifestyle. Physical education teachers assess student knowledge, motor and social skills, and provide instruction in a safe, supportive environment. Based on sequence of learning, physical education should not be compared to or confused with other physical activity experiences such as recess, intramurals, or recreational endeavors. A quality physical education program must provide learning opportunities, appropriate instruction, and meaningful and challenging content for all children. Appropriate instructional practices in physical education recognize children’s development and movement abilities.

Physical activity is bodily movement of any type and may include recreational, fitness and sport activities such as jumping rope, playing soccer, lifting weights, as well as daily activities such as walking to the store, taking the stairs or raking leaves. Similar health benefits to those received during a physical education class are possible during physical activity bouts when the participant is active at an intensity that increases heart rate and produces heavier than normal breathing.”
Physical Activity Recommendations for Children

The Dietary Guidelines for Americans recommend that children and adolescents engage in at least 60 minutes of physical activity on most, preferably all, days of the week. The National Association for Physical Education and Sport has developed specific physical activity recommendations for children.

- Children should accumulate at least 60 minutes, and up to several hours, of age-appropriate physical activity on all, or most days of the week. This daily accumulation should include moderate and vigorous physical activity with the majority of the time being spent in activity that is intermittent in nature.
- Children should participate in several bouts of physical activity lasting 15 minutes or more each day.
- Children should participate each day in a variety of age-appropriate physical activities designed to achieve optimal health, wellness, fitness, and performance benefits.
- Extended periods (periods of two hours or more) of inactivity are discouraged for children, especially during the daytime hours.


Daily Physical Education Prekindergarten to Grade 12

Quality Physical Education

Implementation Guidance

Components of a Quality Physical Education Program
In *What Constitutes a Quality Physical Education Program? NASPE Sets the Standard*, NASPE defines the importance of a quality physical education program.

“NASPE believes that every student from kindergarten through grade 12 should have the opportunity to participate in quality comprehensive physical education. It is the unique role of quality physical education programs to develop the health-related fitness, physical competence, and cognitive understanding about physical activity for all students so that they can adopt healthy and physically active lifestyles. Quality physical education programs are important because they provide learning experiences that meet the developmental needs of youngsters, which help improve a child’s mental alertness, academic performance, readiness to learn and enthusiasm for learning.”

According to NASPE guidelines, a high-quality physical education program is developed and led by qualified teachers and includes opportunity to learn, meaningful content and appropriate instruction. The criteria for quality programs include pupil-teacher ratios equivalent to that in the classroom context, as well as adequate equipment to promote maximum practice time. Quality physical education programs follow the national standards for physical education as outlined in:


Additional resources to help districts develop quality physical education programs include NASPE’s *Appropriate Practices and Opportunity to Learn* documents. These resources are found in *Guidelines and Standards* and *Curriculum, Best Practices and Programs* under Resources at the end of this section.

Teacher Qualifications
A high-quality physical education program is taught by trained professionals who:

- meet state and national standards;
- are certified in physical education; and
- serve as positive role models of personal health, fitness, skills and the enjoyment of participating in physical activity. (For additional information on teachers as role models for physical activity, see *Staff Members as Role Models* in Section 3 – *Nutrition Education and Promotion*.)

In Connecticut, certified physical education teachers deliver the majority of instruction in their discipline. Skilled physical educators play an important role in helping students master important subjects, both as providers of instruction and as expert partners with other teachers who incorporate physical education into their teaching. The teaching competencies required for Connecticut physical education teachers can be found in Connecticut’s *Physical Education: A Guide to K-12 Program Development* at [http://www.sde.ct.gov/sde/cwp/view.asp?a=2618&q=320982](http://www.sde.ct.gov/sde/cwp/view.asp?a=2618&q=320982).
Components of a Quality Physical Education Program

Opportunity to Learn

- Instructional periods totaling 150 minutes per week (elementary) and 225 minutes per week (middle and secondary school) during the school day for the entire school year
- Qualified physical education specialist providing a developmentally appropriate program
- Teacher to pupil ratio no greater than 1:25 for optimal instruction
- Adequate and safe equipment and facilities
- A comprehensive curriculum that reflects national/state physical education standards
- Appropriate facilities, equipment and materials.

Meaningful Content

- Instruction in a variety of motor skills that are designed to enhance the physical, mental, and social/emotional development of every child
- Fitness education and assessment (e.g., the Connecticut Physical Fitness Assessment, Second Generation) to help children understand, improve and/or maintain their physical well-being
- Development of cognitive concepts about motor skill and fitness
- Opportunities to improve their emerging social and cooperative skills and gain a multicultural perspective
- Promotion of ongoing, appropriate physical activity throughout life

Appropriate Instruction

- Full inclusion of all students
- Maximum practice opportunities for class activities
- Well-designed lessons that facilitate student learning
- Out-of-school assignments that support learning and practice
- No use of physical activity for punishment
- Regular assessment to monitor and reinforce student learning

Physical Education and Physical Activity

Implementation Guidance

Content
Physical activity is crucial to the development and maintenance of good health. The goal of physical education is to develop physically educated individuals who have the knowledge, skills and confidence to enjoy a lifetime of healthful physical activity. In Moving into the Future: National Physical Education Standards, NASPE defines a physically educated child or adolescent as one who:

- has learned the skills necessary to perform a variety of physical activities;
- knows the implications of and benefits from involvement in physical activities;
- participates regularly in physical activity;
- is physically fit; and
- values physical activity and its contribution to a healthful lifestyle.

NASPE further defines the content standards for quality physical education programs. “Physical education programs should help children and adolescents obtain the knowledge and skills they need to become physically educated. Six national standards and accompanying benchmarks exist for determining whether a child or adolescent has the knowledge and skills needed to be considered physically educated:

1. Demonstrates competency in motor skills and movement patterns needed to perform a variety of physical activities;
2. Demonstrates understanding of movement concepts, principles, strategies, and tactics as they apply to the learning and performance of physical activities;
3. Participates regularly in physical activity;
4. Achieves and maintains a health-enhancing level of physical fitness;
5. Exhibits responsible personal and social behavior that respects self and others in physical activity settings; and
6. Values physical activity for health, enjoyment, challenge, self-expression, and/or social interaction.”

The benchmarks for each of these standards provide goals or targets for assessing the child’s or adolescent’s learning or achievement, designing instructional units and lessons, and selecting learning experiences and movement activities.

Instructional Practices
Physical education teachers should include the following instructional practices in their efforts to help children and adolescents become physically educated:

- plan for and provide instruction that is based on students’ individual needs and interests, and supports a variety of learning styles;
- include exposure to and skill development in a variety of experiences, e.g., games, fitness and sports;
- ensure that a high proportion of instructional time is devoted to learning and practice;
- conduct authentic and meaningful assessment while skills are forming as well as culmination assessments;
- provide a learning environment and an approach to teaching that are inclusive and challenging;
implement concepts and principles in all domains of learning throughout physical education, and advocate for the infusion of concepts throughout all other academic subjects;

- provide regular and systematic feedback that is personal, constructive, and meaningful;

- refrain from using exercise as punishment and avoid withholding instruction and opportunities to learn as a consequence of behavior;

- engage in teaching practices that do not embarrass, discriminate or otherwise dishearten students or single them out for negative treatment;

- give assignments that are appropriate and meaningful to students’ learning, with real-life application of information and skills; and

- maintain an emphasis on the enjoyment, fun and personal satisfaction that comes from competent, confident and joyful movement.

**Daily Recess**

**Guidelines for Recess**

Quality physical education and daily recess are necessary components of the school curriculum that enable students to develop physical competence, health-related fitness, self-responsibility, and enjoyment of physical activity so that they can be physically active for a lifetime. Recess should not replace physical education. Recess is unstructured playtime where children have choices, develop rules for play and release energy and stress. It is an opportunity for children to practice or use skills developed in physical education class. The following guidelines for recess are adapted with permission from NASPE’s *Recess in Elementary Schools* (2001).

- Schools should develop schedules that provide for supervised, daily recess in pre-kindergarten through Grades 5 or 6.

- The use of facilities for recess activities should not interfere with instructional classes (separate locations for each activity).

- If possible, recess should not be scheduled back-to-back with physical education classes.

- Recess should not be viewed as a reward but a necessary educational support component for all children. Students should not be denied recess as a means of punishment or to make up work.

- Periods of moderate physical activity should be encouraged and facilitated, while recognizing that recess should provide opportunities for children to make choices.

- Children should be encouraged to be physically active at recess so that recess provides some of children’s daily recommended activity time.

- Schools should provide the facilities, equipment and supervision necessary to ensure that the recess experience is productive, safe and enjoyable. Developmentally appropriate equipment, as outlined in NASPE’s *Guidelines for Facilities, Equipment and Instructional Materials*, should be made available. Adults should regularly check equipment and facilities for safety.

- Physical education teachers and classroom teachers should teach children positive skills for self-responsibility during recess.
Implementation Guidance

- Adults should direct or intervene when a child’s physical or emotional safety is an issue. Bullying or aggressive behavior must not be allowed, and all safety rules should be enforced.

Recess Before Lunch
Scheduling recess before lunch is an effective strategy to increase meal consumption and promote better behavior. Students who play before they eat have improved behavior on the playground, in the cafeteria and classroom. They waste less food and drink more milk, which leads to increased nutrient intake. The cafeteria atmosphere is improved during mealtime, and children are more settled and ready to learn upon returning to the classroom. Recess Before Lunch: A Guide to Success (Montana Office of Public Instruction, 2003) provides schools with strategies for promoting and implementing recess before lunch (http://www opi.state.mt.us/schoolfood/recessBL.html). Additional resources are found in Recess under Resources at the end of this section.

Physical Activity Opportunities Before and After School
Physical activity in school is important, but opportunities for children and adolescents to participate in regular physical activity (e.g., intramural sports, yoga classes, ski club and hiking club) should extend beyond the school day. These opportunities can assist children and adolescents with meeting daily physical activity recommendations. The following considerations are important when assessing or organizing extracurricular physical activity programs at school or in nonschool settings (adapted with permission from Bright Futures in Practice: Physical Activity, National Center for Education in Maternal and Child Health):

- Children’s and adolescents’ interests are important when planning physical activities.
- Children and adolescents need successful physical activity experiences.
- Children and adolescents need positive feedback that focuses on participation, not outcomes (e.g., a child who actively participates during a soccer game should be complimented, regardless of the game’s outcome).
- Effective physical activity programs focus on enjoyment.
- Children and adolescents need positive role models (e.g., parents and other adults who participate in physical activity themselves and with others).
- Children’s and adolescents’ physical activity interests may differ from those of adults.
- Children and adolescents benefit when they are encouraged to participate in physical activity.
- Physical activity programs should help children and adolescents increase physical competence and self-confidence.
- Physical activity goals should be realistic.

A summary of the characteristics of quality extracurricular physical activity programs for children or adolescents is found on the next two pages.
Characteristics of Quality Extracurricular Physical Activity Programs

Physical education class is not the only opportunity to help students engage in and enjoy physical activity. In order for positive attitudes toward physical activity to be developed for a lifetime, children and adolescents need ample opportunities to develop skills and interests. They also need regular opportunities to use the skills they develop. It is important that children and adolescents have many opportunities for physical movement, engagement in structured and unstructured play, sport and recreational activities.

Schools and communities can provide numerous opportunities, as well as physical facilities, for students to engage in structured and unstructured physical activity. Structured activities may include organized individual and team sports and instructional programs (e.g., youth sports leagues, instruction in dance, gymnastics, swimming, self-defense, and other fitness activities) during after-school programs (e.g., school-based, after-school and child-care programs, Boys’ and Girls’ Clubs, YMCA, YWCA, Jewish Community Centers). Such activities and programs should be staffed by qualified, caring adults who are positive role models and have been trained in best practices in working with, coaching and/or supervising children during physical activity. Unstructured activities can include self- and parent-directed activities such as hiking, bicycling and neighborhood play.

A summary of the characteristics of quality extracurricular physical activity programs for children and adolescents is found on the next page. Guidelines for assessing and organizing school and community programs to promote physical activity for children and adolescents include:

- **Guidelines for School and Community Programs to Promote Lifelong Physical Activity Among Young People**, Centers for Disease Control and Prevention, 1997: [http://www.cdc.gov/HealthyYouth/physicalactivity/guidelines/](http://www.cdc.gov/HealthyYouth/physicalactivity/guidelines/)


These guidelines address policy, environment, physical education, health education, extracurricular activities, parental involvement, personnel training, health services, community programs and program evaluation. Additional resources are included in **Guidelines and Standards** under **Resources** at the end of this section.
Characteristics of Quality Extracurricular Physical Activity Programs for Children or Adolescents

Philosophy
- The program has a written philosophy or mission statement that incorporates skill development, educational focus, fair play and enjoyment.
- Fun is a priority.
- Performance and success are based on age- and developmentally appropriate standards.
- Fair play, teamwork and good sportsmanship are taught and reinforced.

Administration and Organization
- There are published guidelines for child, adolescent, parent, coach and spectator involvement.
- Coaches are carefully selected and trained, undergo a background check, meet certification requirements and are monitored by qualified administrators. Coaches who do not meet certification requirements are provided with additional training or are removed.
- Sufficient and appropriate safety equipment is available for all program participants.
- All aspects of children’s and adolescents’ growth and development (e.g., size, emotional development, skill level) are considered when practice groups or teams are selected.

Safety
- Facilities are clean.
- Equipment and practice and competition areas are safe and in good condition; regular inspections are conducted; and maintenance and replacement policies are enforced.
- Appropriate safety equipment (e.g., mats, helmets and wrist, elbow and knee guards) is provided.
- Coaches and staff members are trained in injury prevention, first aid, cardiopulmonary resuscitation (CPR) and automatic emergency defibrillator (AED) use.
- The ratio of coaches and staff members to children and adolescents is appropriate. The ratio allows for adequate instruction and supervision and ensures safety at all times. (Ratios vary depending on the physical activity and on the age and skill levels of children and adolescents.)

Child’s or Adolescent’s Readiness to Participate
- The group or team's interest level, desire to have fun, skill level and emotional development match those of the child or adolescent.
- The program’s level of intensity and competitiveness matches the child’s or adolescent’s needs.
- All children and adolescents are treated with respect and are given meaningful opportunities to learn skills and participate fully.

Adapted with permission from Bright Futures in Practice: Physical Activity (Tool D: Characteristics of Excellent Physical Activity Programs for Children and Adolescents). National Center for Education in Maternal and Child Health, Georgetown University, 2001. [http://www.brightfutures.org/physicalactivity/tools/d.html](http://www.brightfutures.org/physicalactivity/tools/d.html)
Physical Activity and Punishment
One of the prime goals of physical education programs, exercise and opportunities to engage in physical activity is to provide students with positive experiences that will motivate them to pursue and develop active lifestyles. The practice of using physical activity as punishment develops student attitudes that are contrary to this goal.

Districts should review their policies regarding physical activity and punishment to ensure that exercise is not being used as punishment (e.g., doing push-ups or running laps) and that opportunities for physical activity are not being withheld (e.g., not being permitted to play with the rest of the class, or being kept from recess or physical education class as a consequence for behavior or incomplete assignments). Policies for athletic and intramural programs should also be reviewed.

Districts should develop purposeful, educationally sound strategies that provide teachers, coaches, supervisors and other school personnel with appropriate actions and measures that are consistent with district philosophy to reinforce positive behaviors and messages while discouraging undesirable behaviors. Teachers do not punish children with reading and then expect them to develop a love of reading. Neither should teachers punish with exercise and expect children to develop a love of activity.

Safe Routes to School
When appropriate, school districts can work with community partners to make it safer and easier for students to walk and bike to school. Ideas for safe routes to school include:

- establishing a walking club;
- initiating a community “walking school bus” (http://www.walkingbus.org/); and
- organizing neighborhood watch groups or cooperatives to take turns walking children to the bus stop or to school.

Several websites contain additional ideas, strategies and resources on developing, implementing and promoting safe routes to school. These include:

- Safe Routes to School Programs: Information and resources on programs to improve the health of kids and the community by making walking and bicycling to school safer, easier and more enjoyable. http://www.saferoutesinfo.org/
- International Walk to School Week: Information about a worldwide program to promote physical activity. http://www.walktoschool-usa.org/

Additional resources are found in Safe Routes to School under Resources at the end of this section.
Implementation Guidance

Use of School Facilities Outside of School Hours
Schools that function as centers of their communities must be accessible to the people who benefit from them. Well-planned school facilities can support the teaching and learning process and activities, as well as meet the specific needs of different communities. Model policies for use of schools as centers of community activities can be found in the following resources:


Adequate facilities and equipment are critical to support the success of physical activity programs in school facilities. These programs may be modified and adapted to meet the budget and space available. NASPE’s *Guidelines for After-School Physical Activity and Intramural Sport Programs* (2001) provides basic guidelines for facilities and equipment.

- Facilities should be adequate to meet the needs, interests and number of participants.
- Safety standards must be considered and met for each activity in the program; damaged equipment should be repaired or discarded.
- The amount of equipment depends upon specific programs, but should meet the needs of participants so that programs can serve the maximum number of participants under established safety standards.
- Equipment should be modified according to age, size and/or physical ability of the participants.
- Regular inspections should be implemented to ensure safety in all activities.

Detailed best practice guidelines for the use of facilities and equipment outside of school hours, as well as guidelines for the health and safety of program participants, can be found in NASPE’s *Guidelines for After-School Physical Activity and Intramural Sport Programs*, available at [http://www.aahperd.org/naspe/pdf_files/pos_papers/intramural_guidelines.pdf](http://www.aahperd.org/naspe/pdf_files/pos_papers/intramural_guidelines.pdf).
Incorporating Physical Activity into the Classroom
For students to receive the nationally recommended amount of daily physical activity (at least 60 minutes per day) and to fully embrace regular physical activity as a personal behavior, students need opportunities for physical activity beyond physical education class. Physical activity can easily be incorporated into the classroom, as part of the learning process or as an energizing break (see Physical Activity Breaks on the next page). The resources below provide ideas for physical activity breaks in the classroom setting.

- **Energizers**, East Carolina University: [http://www.ncpe4me.com/energizers.html](http://www.ncpe4me.com/energizers.html)

Schools can also incorporate schoolwide physical exercise in which each classroom participates in exercise as a collaborative activity. This can be accomplished by allocating a set time or by leading classroom exercise announced over the intercom.

For additional ideas on incorporating physical activity in the classroom, see Physical Activity Breaks on the next page and Classroom-Based Physical Activity under Resources at the end of this section.
Implementation Guidance

Physical Activity Breaks

The ideas below indicate how easily physical activity can be incorporated into the classroom. Even 10 minute bouts of physical activity can enhance learning. All of the ideas can be adjusted for developmental appropriateness.

Math
- Have students measure their jumping skills by measuring the distance covered when jumping, leaping and hopping.
- Call out a math problem. If the answer is less than 20, have students give their answer in jumping jacks or other gross motor movements.
- Have students calculate and graph their resting heart rate and elevated heart rate.

Science
- Test the shapes of movement equipment and analyze why they are shaped as such.
- Take nature walks.

Language Arts
- Ask students to record in their journals the amount of time they spend watching television and being physically active, and what activities they enjoyed the most.
- Read health-related books to the students as a reward.

Spelling
- Host a spelling bee with a physical activity theme. Ask students to act out verbs such as skip, hop and jump.
- Have students spell out health-related words using their bodies to form letters.

Geography
- Rhythmic Activity: “Body Mind Map” uses the body as a model of the globe. North Pole: touch head, South Pole: touch toes, Equator: hands around waist, America: Left hand, Europe: nose, etc.
- Have students research and demonstrate what physical activities are done in other countries.

References


Bright Futures in Practice: Physical Activity (Tool D: Characteristics of Excellent Physical Activity Programs for Children and Adolescents), National Center for Education in Maternal and Child Health, Georgetown University, 2001: http://www.brightfutures.org/physicalactivity/tools/d.html


4 Physical Education and Physical Activity


Position Statement on Use of Physical Activity as Punishment, California Association for Health, Physical Education, Recreation and Dance: http://www.nospank.net/exerc2.htm


Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

**Behavior Management**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Behavior Management under Physical Activity and Physical Education to access resources on this topic.

**Classroom-Based Physical Activity**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Classroom-Based Physical Activity under Physical Activity and Physical Education to access resources on this topic.

**Data and Trends**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Data and Trends under Physical Activity and Physical Education to access resources on this topic.

**Evaluating Physical Education**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Evaluating Physical Education under Physical Activity and Physical Education to access resources on this topic.

**Guidelines and Standards**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Guidelines and Standards under Physical Activity and Physical Education to access resources on this topic.

**Physical Activity Before and After School**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Physical Activity Before and After School under Physical Activity and Physical Education to access resources on this topic.

**Programs to Promote Physical Activity**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Programs to Promote Physical Activity under Physical Activity and Physical Education to access resources on this topic.

**Recess**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Recess under Physical Activity and Physical Education to access resources on this topic.

**Safe Routes to School**

Click on the SDE’s [Healthy School Environment Resource List](#), then click on Safe Routes to School under Physical Activity and Physical Education to access resources on this topic.
Additional resources can be found in the SDE’s Healthy School Environment Resource List (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/hse_resource_list.pdf) and Nutrition-Related Resources (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/nutrition_resources.pdf). These lists are updated regularly.
Goal

School districts will provide students with access to a variety of affordable, nutritious and appealing foods that meet students’ health and nutrition needs and accommodate ethnic and cultural food preferences. School meals will include a variety of healthy choices that meet USDA requirements and the Dietary Guidelines for Americans, and are modified, as appropriate, for special dietary needs. Districts will use the Dietary Guidelines and other appropriate nutrition guidelines to establish nutrition standards and provide clear guidance for all foods and beverages available everywhere on school grounds to encourage healthy choices for students.* The standards will focus on increasing nutrient density, decreasing fats, sodium and added sugars, and moderating portion size. Policies will encourage the consumption of nutrient-dense foods (such as fruits, vegetables, whole grains, low-fat or nonfat dairy, lean meats, legumes, nuts and seeds) wherever foods are sold or served at school.

Rationale

Students' lifelong eating habits are greatly influenced by the types of foods and beverages available to them. Numerous studies have shown that students who eat breakfast and lunch at school consume a greater variety of healthy foods and more nutrients. Students consume more vegetables, drink more milk and fewer sweetened beverages, consume more grain mixtures, and eat fewer cookies, cakes and salty snacks than students who make other lunch choices. Over the past few decades, the availability of snack foods and beverages has increased at school, both in the cafeteria and through other school organizations including school stores, vending machines (e.g., soda and other sweetened beverages, snack chips and cookies) and fundraisers (e.g., candy and baked goods). These snacks are often low in nutrient density; they supply calories from added fat and/or sugar but relatively few, if any, vitamins, minerals and other nutrients. When children replace healthy meals with less nutritious snacks, they are often consuming inadequate nutrients and excess calories. When snacks of low nutrient density are consumed in addition to the school meal, children may be consuming too many calories. Nutrition standards help schools provide healthier food and beverage choices throughout the entire school environment.

Policy Recommendations

Policy recommendations for Nutrition Standards include (1) School Meals and (2) Other Foods and Beverages at School.

This section provides recommendations (not requirements) for policy language for Nutrition Standards for School Foods and Beverages. This language represents recommended best practice for developing school nutrition and physical activity policies. School districts may choose to use the policy recommendations as written or revise them as needed to meet local needs and reflect community priorities. When developing nutrition and physical activity policies, districts will need to take into account their unique circumstances, challenges, opportunities and available resources. Policies should meet local needs and be adapted to the health concerns, food preferences and dietary practices of different ethnic groups.

* In Connecticut public schools, all beverages sold to students must meet the requirements of Section 10-221q of the Connecticut General Statutes (CGS). Districts participating in healthy food certification under CGS Section 10-215f must ensure that all food sold to students separately from reimbursable meals meets the Connecticut Nutrition Standards.
Policy Recommendations for School Meals

Policies for school meals will address the following areas:

- Nutrition Guidelines
- Menu Planning
- Breakfast Promotion
- Special Dietary Needs

Specific guidance regarding the implementation of each policy recommendation for Nutrition Standards for School Meals follows under Implementation Guidance for School Meals, after this section. Resources to assist with the implementation of each policy recommendation are found in Resources at the end of this section.

Nutrition Guidelines

School meals shall offer varied and nutritious food choices that are consistent with USDA nutrient standards and the Dietary Guidelines (which focus on increasing fruits, vegetables and whole grains). School meals shall:

- meet, at a minimum, nutrition requirements established by local, state and federal laws and regulations;
- offer a variety of fruits and vegetables, emphasizing fresh and locally grown produce, when available;
- serve only low-fat (1%) and fat-free milk (as recommended by the Dietary Guidelines for Americans) and nutritionally equivalent nondairy alternatives as defined by the USDA, which also comply with the state beverage requirements*;
- ensure that half of the grains served are whole grain, as recommended by the Dietary Guidelines for Americans; and
- share information about the nutritional content of meals with students, families and school staff members.

* All beverages sold to students on school premises, including beverages sold as part of reimbursable school meals and a la carte sales, must also comply with Section 10-221q of the Connecticut General Statutes (see Requirements for Beverages on page 103).

Menu Planning

Menus shall be planned to be appealing and attractive to children. School meals shall be planned to incorporate the basic menu planning principles of balance, variety, contrast, color and eye appeal. Menus shall be planned with input from students, parents and other school personnel and shall take into account students’ cultural norms and preferences. Schools shall engage students and parents, through surveys and taste-tests of new entrees, in selecting foods sold through the school meal programs in order to identify new, healthful and appealing food choices.
Policy Recommendations for School Meals

**Breakfast**
Districts shall help ensure that all children have breakfast, either at home or at school, in order to meet their nutritional needs and enhance their ability to learn. Schools will:

- to the extent possible, operate the School Breakfast Program;
- to the extent possible, arrange bus schedules and use methods to serve school breakfasts that encourage participation, including serving breakfast in the classroom, “grab-and-go” breakfast, or breakfast during morning break or recess;
- notify parents and students of the availability of the School Breakfast Program, if the school serves breakfast to students; and
- encourage parents to provide a healthy breakfast for their children through newsletter articles, take-home materials, or other means.

**Special Dietary Needs**
With appropriate medical documentation, modified meals shall be prepared for students with food allergies or other special dietary needs.
Policy Recommendations for Other Foods and Beverages

Policies for other foods and beverages at school will address the following areas:

- Food or Beverage Contracts
- Cafeteria A La Carte Sales
- Vending Machines and School Stores
- Events on School Premises
- Fundraising
- Classroom Snacks
- Access to Drinking Water
- Food Brought into School
- Celebrations and Meetings

Specific guidance regarding the implementation of each policy recommendation for Nutrition Standards for Other Foods and Beverages follows under Implementation Guidance for Other Foods and Beverages, after this section. Resources to assist with implementation of each policy recommendation are found in Resources at the end of this section.

District policy shall address nutrition standards for all foods and beverages sold or served to students at school, such as cafeteria a la carte sales, vending machines, school stores, concession stands, fundraisers, classroom snacks, after-school programs, events, celebrations and meetings. To support children’s health and school nutrition education efforts, all beverages sold or served at school shall meet the requirements of state statute and all food sold or served at school shall meet the district’s nutrition standards. The district’s nutrition standards shall focus on decreasing fats, sodium and added sugars, moderating portion sizes, and shall encourage the consumption of nutrient-dense foods (such as fruits, vegetables, whole grains, low-fat or nonfat dairy, lean meats, legumes, nuts and seeds) throughout the school environment.

Food or Beverage Contracts

Agreements with food or vending companies to sell foods or beverages in schools shall ensure that contractors will follow the federal regulations for school nutrition programs and all applicable state statutes and regulations. Beverages shall meet the requirements of state statute and food shall meet the district’s nutrition standards.*

* Districts are strongly encouraged to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirement for developing nutrition guidelines for all foods available at school. If the district implements healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. In the language above, substitute “Connecticut Nutrition Standards” for “district’s nutrition standards.”
Policy Recommendations for Other Foods and Beverages

**Cafeteria A La Carte Sales**
Foods and beverages sold a la carte in the cafeteria shall meet the federal regulations for school nutrition programs and all applicable state statutes and regulations. Beverages shall meet the requirements of state statute and food shall meet the district’s nutrition standards.*

**Vending Machines and School Stores**
Foods and beverages sold in vending machines and school stores shall meet the federal regulations for school nutrition programs and all applicable state statutes and regulations. Beverages shall meet the requirements of state statute and food shall meet the district’s nutrition standards.*

**Events on School Premises**
Foods and beverages offered or sold at any events held on school premises, regardless of whether they are sponsored by the school or an outside group, shall meet the federal regulations for school nutrition programs and all applicable state statutes and regulations. Beverages shall meet the requirements of state statute and food shall meet the district’s nutrition standards.*

**Fundraising**
School fundraising activities shall not involve food or beverages or shall only use foods and beverages that meet the requirements of the state beverage statute and the district’s nutrition standards.* Schools shall encourage fundraising activities that promote physical activity. The school district shall make available to students, parents, teachers and school groups a list of ideas for acceptable fundraising activities, such as healthy foods and beverages or alternate nonfood fundraisers.

* Districts are strongly encouraged to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirement for developing nutrition guidelines for all foods available at school. If the district implements healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. In the language above, substitute “Connecticut Nutrition Standards” for “district’s nutrition standards.”
Policy Recommendations for Other Foods and Beverages

Classroom Snacks
Classroom snacks shall feature healthy choices that meet the requirements of the state beverage statute and the district’s nutrition standards.* School personnel shall not withhold student access to snacks as punishment.

Access to Drinking Water
Students and school staff members will have access to free, safe, fresh drinking water throughout the school day.

Food Brought Into School
Districts shall encourage families to pack healthy lunches and snacks and to refrain from including beverages that do not meet the requirements of the state beverage statute or foods that do not meet the district’s nutrition standards.* Districts shall develop procedures to ensure that all food brought from home to be shared with other students is safe.

Celebrations and Meetings
Districts shall limit celebrations and meetings at school that involve food. Foods and beverages served at school celebrations and meetings shall feature healthy choices that meet the requirements of the state beverage statute and the district’s nutrition standards.* Nonfood celebrations shall be promoted. The district shall disseminate a list of ideas to parents and teachers, including healthy food and beverage choices and alternative activities for classroom parties (e.g., increased recess time instead of a class party).

* Districts are strongly encouraged to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirement for developing nutrition guidelines for all foods available at school. If the district implements healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. In the language above, substitute “Connecticut Nutrition Standards” for “district’s nutrition standards.”
Implementation Guidance for School Meals

Nutrition Guidelines

USDA Requirements: Schools must ensure that reimbursable school meals meet the program requirements and nutrient standards specified by the U.S. Department of Agriculture’s (USDA) regulations for school meals (7 CFR Part 210 and Part 220), as well as all state and local requirements. All beverages sold as part of reimbursable school meals must comply with USDA requirements and the state beverage statute (see Requirements for Beverages on page 103). The school nutrition program should ensure that all students have affordable access to the varied and nutritious foods they need to stay healthy and learn well. Schools should strive to increase participation in USDA Child Nutrition Programs (e.g., National School Lunch Program, School Breakfast Program, After-School Snack Program and Summer Food Service Program).

School meals must meet USDA nutrient standards, as specified in the federal regulations. The nutrient standards specify the levels of nutrients that school meals must meet, as averaged over a week. More information on the nutrition requirements for school meals can be found in the resources listed below, and in Menu Planning and Recipes, School Breakfast Program, School Lunch Program and State and Federal Requirements under Resources at the end of this section.


Dietary Guidelines: Menus should support and reinforce the Dietary Guidelines for Americans. The Dietary Guidelines encourage increased consumption of nutrient-dense foods and beverages, such as fruits, vegetables, whole grains and low-fat or nonfat dairy products, while limiting levels of cholesterol, fat, saturated fat, trans fat, sodium and added sugars. Information on the Dietary Guidelines can be found at http://www.healthierus.gov/dietaryguidelines/.

- Fruits and Vegetables: Schools are encouraged to increase the variety of fresh fruits and vegetables available in school meals. To the extent possible, schools should offer at least two different non-fried vegetables and two different fruit options each day and offer five different fruits and five different vegetables over the course of a week. Schools are also encouraged to serve fresh fruits and vegetables from local farmers when possible. Schools are encouraged to make fruits and vegetables readily available and use merchandising techniques to promote consumption. Useful resources to assist with planning, preparing and promoting fruits and vegetables in school meals are listed below. Additional resources are found in Fruits and Vegetables and Farm to School under Resources at the end of this section.
Whole-Grain Foods: The Dietary Guidelines recommend that children consume whole grains often; at least half of the recommended daily servings of grains should be whole grains. A whole-grain food is one labeled as a whole-grain product or with a whole grain as the primary or first ingredient in the product’s ingredient label. Whole grains are those grains or foods that are made with the entire grain seed (kernel), including the endosperm, bran and germ.

Whole-grain products (such as whole-wheat bread and brown rice) provide more vitamins, minerals and fiber than refined enriched products (such as white bread and white rice). Examples of whole-grain products include whole-wheat flour, cracked wheat, brown rice, and oatmeal. Food product labels may also contain the whole-grain health claim: “Diets rich in whole-grain foods and other plant foods and low in total fat, saturated fat, and cholesterol may help reduce the risk of heart disease and certain cancers.” Foods that bear the whole-grain health claim must contain 51 percent or more whole grains by weight, and be low in fat. Information on whole grains can be found in the resources below.

- Whole Grains Council: http://www.wholegrainscouncil.org/

Low-Fat and Nonfat Dairy: Low-fat and nonfat dairy products, including yogurt, milk and cheese, provide a significant amount of calcium and other needed nutrients while helping to lower students’ fat and saturated fat consumption. Whole and 2 percent milk are major sources of saturated fat in children’s diets. School-age children generally do not need the added fat calories from whole or 2 percent milk. Schools are encouraged to help students learn preferences for low-fat and nonfat (skim) milk. The resources below can assist schools with promoting low-fat dairy products.

- 1% or Less School Kit, Center for Science in the Public Interest: http://www.cspinet.org/nutrition/1less.htm
**Nondairy Alternatives:** Nondairy beverages (e.g., soy milk or rice milk) offered as fluid milk substitutes for children with medical or other special dietary needs must be nutritionally equivalent to fluid milk and provide specific levels of calcium, protein, vitamins A and D, magnesium, phosphorus, potassium, riboflavin and vitamin B₁₂. All substitutions of nondairy beverages must follow the requirements for accommodating special dietary needs outlined by the USDA. Additional information on fluid milk substitutions can be found in the following resources:


**Sharing Nutrition Information:** Schools should make information available on the nutritional content of meals and other foods and beverages sold to students, families and school staff members. Nutrition information could be made available on menus, in school newsletters, on a school Web site, at PTA/PTO meetings and parent open houses, and on cafeteria menu boards, placards or other point-of-purchase materials. For additional information on communicating with families, see *Engaging Families in Section 7 – Communication and Promotion.*
Implementation Guidance for School Meals

Menu Planning
Input from the school community, including students, parents and school staff members, is important to the menu planning process. The school community is the customer base of the school food service program, so menus should be planned to reflect local preferences. School meals also provide an opportunity to reflect and celebrate ethnic communities through preparation techniques and use of food products. The USDA’s Food and Nutrition Information Center maintains a list of ethnic and cultural food resources at http://www.nal.usda.gov/fnic/etext/000010.html. These resources can assist school food service programs with planning menus to address the food preferences of the local community.

Surveys can assist the school food service program with identifying customer satisfaction and providing ideas for new menu items. The National Food Service Management Institute has several surveys available at http://www.nfsmi.org/ (click on “Resource Center” and scroll down to “NFSMI Resource Guide”). Additional information on surveys is found under Resources in Section 8 – Measurement and Evaluation.

Students, parents and school staff members can also be involved in taste-testing new food items or recipes. For example, school food service personnel can:

- work with teachers and students in family and consumer sciences classes or culinary arts classes to prepare and taste new recipes;
- provide samples of new food items and recipes on the cafeteria serving lines; and
- provide samples of menu items at parent meetings, orientations and open houses.

Additional resources on menu planning can be found in Menu Planning and Recipes under Resources at the end of this section. Additional information on engaging students in school nutrition programs can be found in Engaging Students in Section 7 – Communication and Promotion. Additional information on engaging parents and families can be found in Engaging Families in Section 7 – Communication and Promotion.

Breakfast
Breakfast consumption is clearly linked to academic achievement. Children who eat breakfast have higher test scores, work faster, make fewer errors and are more creative. They also behave better in school, are less likely to have disciplinary problems, are more cooperative and get along better with classmates. Breakfast eaters are healthier, have improved attendance and are less likely to visit the school nurse. Children who eat breakfast also have higher consumption of needed nutrients than those who don’t.

Encouraging Breakfast Consumption: All students should start the day with a healthy breakfast, whether at home or at school. Districts are encouraged to promote breakfast consumption to students and families. Breakfast: Key to Academic Excellence, a handout that addresses the relationship of breakfast and learning, can help schools with these efforts.

School Breakfast Program: Schools are encouraged to participate in the USDA School Breakfast Program. Information on the requirements for the School Breakfast Program can be obtained at http://www.fns.usda.gov/cnd/Breakfast/Default.htm or by contacting the SDE’s Bureau of Health/Nutrition, Family Services and Adult Education.

Schools should consider methods of nontraditional breakfast service to increase participation, such as breakfast served in the classroom, breakfast bags distributed to students or a breakfast after first period program. The resources listed below can help schools increase breakfast participation through alternate serving methods.


Additional resources to help schools implement a School Breakfast Program and promote student breakfast consumption are found in Breakfast under Resources at the end of this section.

Special Dietary Needs

For schools participating in USDA Child Nutrition Programs, USDA regulations require substitutions or modifications in meals for children who are considered disabled under Section 504 of the Rehabilitation Act of 1973 or the Individuals with Disabilities Education Act (IDEA) and whose disabilities restrict their diet, when the need is certified by a licensed physician. Substitutions are also required when a physician determines that a child’s severe medical condition requires specific dietary modifications, even if the child is not considered disabled under Section 504 or IDEA.

School food service programs may (but are not required to) make food substitutions for children who are not disabled but who are medically certified as having a special medical or dietary need. These substitutions may be made on a case-by-case basis and must be documented by a statement signed by a recognized medical authority, including physicians, physician assistants, doctors of osteopathy and advanced practice registered nurses (APRN). The school nurse and food service personnel should communicate closely to implement meal plans for children with special dietary needs.

Specific procedures for handling meal accommodations for children with food allergies and other special dietary needs can be obtained by contacting the SDE’s Bureau of Health/Nutrition, Family Services and Adult Education. Information regarding USDA requirements can be found in the SDE’s Accommodating Special Dietary Needs: Guidance for School Nutrition Programs (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/AccommodatingSpecialDiets.pdf) and the USDA’s Accommodating Children with Special Dietary Needs in the School Nutrition Programs: Guidance for School Food Service Staff (http://www.fns.usda.gov/cnd/Guidance/special_dietary_needs.pdf). For more information, see Special Diets under Resources at the end of this section.
Implementation Guidance for Other Foods and Beverages

Developing District Nutrition Standards

Federal law for School Wellness Policy (Public Law 108-265) requires that districts must develop nutrition guidelines or standards for all foods available at school during the school day. This includes all venues where food is sold or served to students at school, such as cafeteria a la carte sales, vending machines, school stores, fundraisers, classroom parties, meetings, events and other activities on school premises.

Nutrition standards are guidelines for the nutritional content of foods and beverages. They provide objective criteria to determine which foods and beverages can and cannot be offered on school premises. As part of the School Wellness Policy, districts can use nutrition standards to increase healthy options and limit less healthy choices wherever food is available at school, for example:

- requiring that schools offer fruits and vegetables anytime snacks are available;
- requiring that whenever grain products are served, at least half are whole grain;
- allowing only low-fat or nonfat milk;
- specifying limits for the amount of fats (total, saturated and trans), sodium and added sugars per serving;
- specifying portion size limits;
- prohibiting ingredients with questionable health effects, such as caffeine and high fructose corn syrup; and
- eliminating deep-fried foods.

District-developed nutrition standards should be based on current nutrition science and national health recommendations. Undocumented approaches to nutrition standards are not appropriate as school policy.

The SDE strongly recommends that districts use the Connecticut Nutrition Standards as their nutrition standards. The Connecticut Nutrition Standards are based on current nutrition science and national health recommendations from the Dietary Guidelines for Americans, MyPyramid and national organizations, such as the National Academy of Sciences’ Institute of Medicine, American Cancer Society, American Heart Association, American Dietetic Association and American Academy of Pediatrics. They were developed by a committee of nutrition and health professionals and are supported by 28 health and education organizations in Connecticut (see Connecticut Nutrition Standards on page 105.)

If the district has chosen to implement healthy food certification under Section 10-215f of the Connecticut General Statutes, the Connecticut Nutrition Standards must be the district’s standards. Healthy food certification requires that all public school districts participating in the National School Lunch Program must certify annually to the SDE whether all food items sold to students separately from a reimbursable school breakfast or lunch will or will not comply with the Connecticut Nutrition Standards. (For more information, see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy.)
Implementation Guidance for Other Foods and Beverages

If the district is not implementing healthy food certification, the Connecticut Nutrition Standards are strongly encouraged, but not required. However, the district must still develop local nutrition standards in order to meet the federal School Wellness Policy requirements. These standards must specify the nutrition criteria for determining what food and beverages can be sold and served on school premises.

Regardless of whether the district chooses to use the Connecticut Nutrition Standards or develop its own, public schools must comply with all applicable state statutes and regulations regarding food and beverages. The district’s School Wellness Policy must be in compliance with the following:

- **CGS Section 10-221q** (see page 24) requires that any beverages sold to students in public schools must meet the statutory requirements at all times and from all sources including, but not limited to, cafeterias, vending machines, school stores and any fundraising activities on school premises (see Requirements for Beverages on page 103).

- **CGS Section 10-221p** (see page 24) requires that at all times when food is available for purchase by students during the regular school day, nutritious and low-fat foods must also be available for sale. These foods include, but are not limited to, low-fat dairy products and fresh or dried fruit. Additional guidance on this requirement can be found in the SDE’s Questions and Answers on Connecticut Statutes for School Food and Beverages at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/HF_Q&A.pdf.

- **Section 10-215b-1 of the Regulations of Connecticut State Agencies** (see page 25) prohibits the sale or dispensing of candy to students anywhere on school premises from 30 minutes before the start of any state or federally subsidized meal or milk program (National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program) until 30 minutes after the end of the program. Note: If the district implements healthy food certification, candy cannot be sold to students on school premises at any time, unless the board votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see page 25 and Connecticut Nutrition Standards on page 105).

- **Section 10-215b-23 of the Regulations of Connecticut State Agencies** (see page 25) specifies that the income from any food or beverages sold to students anywhere on school premises from 30 minutes before the start of any state or federally subsidized meal or milk program (National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program) until 30 minutes after the end of the program must accrue to the nonprofit food service account. Any food and beverage sales held anywhere on school premises during this time frame (including beverages that meet the requirements of state statute and food that meets the Connecticut Nutrition Standards) must comply with this regulation.

All food and beverage sales must also comply with the federal competitive food services regulation (see Competitive Foods on page 111). For additional information on the requirements specified above, see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy. Additional resources can be found in Connecticut’s Healthy Food Certification and State and Federal Requirements under Resources at the end of this section.

The appropriateness of policy language for foods and beverages depends on many factors, such as whether the district allows beverage exemptions under CGS Section 10-221q and whether the district implements healthy food certification under CGS Section 10-215f. Due to the complex nature of writing policy language that complies with all federal and state requirements for school food and beverages, districts are encouraged to contact the SDE for specific guidance based on local circumstances.
Food or Beverage Contracts
The school district must evaluate all agreements with food or vending companies to sell foods or beverages in schools for compliance with the federal regulations for school nutrition programs and all applicable state statutes and regulations. Contractors must comply with all federal and state requirements and be subject to district auditing processes. The district maintains the responsibility for administering the contract and for meeting all USDA and state requirements.

Beverages
All contracts for beverages sold at school, including beverages sold as part of reimbursable school meals and a la carte sales, must meet the requirements of CGS Section 10-221q at all times. Beverages that do not meet the requirements of state statute can only be sold to students on school premises if the local board of education votes to allow exemptions for beverage sales that meet the criteria of CGS Section 10-221q (see page 24 and Requirements for Beverages on page 103).

All contracts for school meals must ensure that beverages meet the requirements of state statute and the federal regulations for school meal programs. Milk and 100 percent juice are the only beverages that meet the specific USDA meal pattern requirements (fluid milk component and vegetable/fruit component, respectively) for reimbursable meals. Federal regulations require that:

- Juice must be 100 percent juice and can be fruit juice, vegetable juice or a combination of fruit and/or vegetable juices.
- Schools must offer students fluid milk in a variety of fat contents. Schools may offer flavored or unflavored milk and lactose-free fluid milk. All milk must meet state and local standards and must be pasteurized fluid milk with vitamins A and D at levels specified by the Food and Drug Administration.
- Nondairy beverages (e.g., soy milk or rice milk) offered as fluid milk substitutes for children with medical or other special dietary needs must meet the nutrition requirements defined by the USDA (see Nondairy Alternatives under Implementation Guidance for School Meals on page 83).

A brand-specific list of beverages that meet state and federal requirements is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.

Food
All contracts for food sold to students at school must meet the federal requirements for school nutrition programs (see USDA Requirements on page 81) and the district’s nutrition standards. Districts may choose to develop their own nutrition standards or may follow the state nutrition standards (see Connecticut Nutrition Standards on page 105). To ensure consistency with current nutrition science and national health recommendations, the SDE strongly encourages districts to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirements.

If the district has chosen to implement healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards, and must be followed by all contractors. Food items that do not meet Connecticut Nutrition Standards can only be sold to students on school premises if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see page 24 and Connecticut Nutrition Standards on page 105).
Implementation Guidance for Other Foods and Beverages

Food contracts must also comply with the state and federal competitive foods regulations. In compliance with Section 10-215b-1 of the Regulations of Connecticut State Agencies and the federal competitive food services regulation, candy (including sugarless candy) cannot be sold or dispensed to students anywhere on school premises from 30 minutes before the start of any USDA meal or milk program (National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program) until 30 minutes after the end of the program. To provide consistent health messages for students, the SDE strongly encourages districts to ensure that food contracts prohibit the sale of candy on school premises at all times, or at least during the entire school day. If the district implements healthy food certification, candy can only be sold to students if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see Connecticut Nutrition Standards on page 105).

In compliance with Section 10-215b-23 of the Regulations of Connecticut State Agencies, the income from any food or beverages sold anywhere on school premises from 30 minutes before until 30 minutes after the end of any school nutrition program must accrue to the nonprofit food service account. This applies to all school groups and outside organizations selling food and beverages on school premises during this time frame.

In compliance with CGS Section 10-221p, whenever any foods are sold on school premises, nutritious low-fat foods must also be available for sale at the same time. These foods include, but are not limited to, low-fat dairy products and fresh or dried fruit. For additional guidance on this requirement, see the SDE handout, Questions and Answers on Connecticut Statutes for School Food and Beverages, at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/HF_Q&A.pdf.

Food and beverages sold through contracts must also comply with the federal competitive food services regulation (see Competitive Foods on page 111) and all other applicable state statutes and regulations, including lunch periods and food safety (see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy).

For information on the requirements for cafeteria a la carte sales and vending machines, see Cafeteria A La Carte Sales on page 90 and Vending Machines and School Stores on page 92. For information on the requirements for school meals, see Implementation Guidance for School Meals on page 81. Additional information can be found in the following resources:


Additional resources can be found in Connecticut’s Healthy Food Certification and State and Federal Requirements under Resources at the end of this section.
Implementation Guidance for Other Foods and Beverages

Cafeteria A La Carte Sales
Cafeteria a la carte sales are those foods and beverages that are sold separately from reimbursable breakfasts and lunches provided through the USDA school meal programs. Cafeteria a la carte sales must comply with all applicable federal regulations and state statutes and regulations. Districts contracting with a food service management company maintain the responsibility for ensuring that all food and beverage sales meet these requirements (see "Food or Beverage Contracts" on page 88).

Beverages
All beverages sold in the cafeteria must meet both the requirements of CGS 10-221q (see "Requirements for Beverages" on page 103) and the federal regulations for school meal programs (see Beverages under "Food and Beverage Contracts" on page 88). Beverages that do not meet the requirements of state statute can never be sold a la carte in the cafeteria. The state statute allows exemptions only for beverages sold at the location of events that occur after the school day or on the weekend, provided they are not sold from a vending machine or school store. Prohibited beverages include sports drinks, energy drinks, coffee (regular, decaffeinated and iced), tea (regular, herbal and iced), hot chocolate, soda (regular and diet), and any other beverages that do not meet the statutory requirements. A brand-specific list of beverages that meet the requirements of state statute is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.

Food
A la carte foods sold in the cafeteria must meet the district’s nutrition standards. Districts may choose to develop their own nutrition standards or may follow the state nutrition standards (see Connecticut Nutrition Standards on page 105). To ensure consistency with current nutrition science and national health recommendations, the SDE strongly encourages districts to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirements.

If the district has chosen to implement healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. Food not meeting the Connecticut Nutrition Standards can never be sold a la carte in the cafeteria. The state statute allows exemptions only for food sold at the location of events that occur after the school day or on the weekend, provided it is not sold from a vending machine or school store. A brand-specific list of commercially available food items that meet the Connecticut Nutrition Standards is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy. Districts are responsible for determining that any school-made food sold a la carte meets the Connecticut Nutrition Standards (see Determining Compliance of Food Items on page 105).

Regardless of whether the district chooses to implement healthy food certification, candy (including sugarless candy) can never be sold during school nutrition programs in the cafeteria. In compliance with Section 10-215b-1 of the Regulations of Connecticut State Agencies and the federal competitive food services regulation, candy cannot be sold or dispensed to students anywhere on
Implementation Guidance for Other Foods and Beverages

School premises from 30 minutes before the start of any USDA meal or milk program (National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program) until 30 minutes after the end of the program. To provide consistent health messages for students, the SDE strongly encourages districts to prohibit the sale of candy on school premises at all times, or at least during the entire school day. If the district implements healthy food certification, candy can only be sold to students if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see Connecticut Nutrition Standards on page 105).

In compliance with Section 10-215b-23 of the Regulations of Connecticut State Agencies, the income from any food or beverages sold anywhere on school premises from 30 minutes before until 30 minutes after the end of any school nutrition program must accrue to the nonprofit food service account. This applies to all school groups and outside organizations selling food and beverages on school premises during this time frame.

A la carte sales of food and beverages in the cafeteria must also comply with the federal competitive food services regulation (see Competitive Foods on page 111).

In compliance with CGS Section 10-221p, whenever a la carte foods are sold in the cafeteria, nutritious low-fat foods must also be available for sale at the same time. These foods include, but are not limited to, low-fat dairy products and fresh or dried fruit. For additional information on how this statute applies to cafeteria a la carte foods and school meals, see the SDE handout, Questions and Answers on Connecticut Statutes for School Food and Beverages, at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/HF_Q&A.pdf.

Additional information on cafeteria a la carte sales can be found in the following SDE resources:


For a summary of the federal and state requirements regarding food and beverages, see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy. For additional resources, see A La Carte Sales and Vending, Connecticut’s Healthy Food Certification and State and Federal Requirements under Resources at the end of this section.
Implementation Guidance for Other Foods and Beverages

Vending Machines and School Stores
Foods and beverages sold in vending machines and school stores must comply with all federal regulations for school nutrition programs and all applicable state statutes and regulations. Districts contracting with a vending operator maintain the responsibility for ensuring that all food and beverage sales meet these requirements (see Food or Beverage Contracts on page 88).

Beverages
All beverages sold in vending machines and school stores must always meet the requirements of CGS Section 10-221q (see page 24 and Requirements for Beverages on page 103). The state beverage statute specifically prohibits vending machines and school stores from ever selling any beverages that are not included in the five allowable categories. Prohibited beverages include sports drinks, energy drinks, coffee (regular, decaffeinated and iced), tea (regular, herbal and iced), hot chocolate, soda (regular and diet), and any other beverages that do not meet the statutory requirements. A brand-specific list of beverages that meet state requirements is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.

Food
Food sold in vending machines and school stores must meet the district’s nutrition standards. Districts may choose to develop their own nutrition standards or may follow the state nutrition standards (see Connecticut Nutrition Standards on page 105). To ensure consistency with current nutrition science and national health recommendations, the SDE strongly encourages districts to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirements.

If the district has chosen to implement healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. Food not meeting the Connecticut Nutrition Standards can never be sold to students from a vending machine or school store under any circumstances. The provision under CGS Section 10-215f allowing the board of education to vote to allow food exemptions does not apply to food sold in vending machines and school stores.

In compliance with Section 10-215b-1 of the Regulations of Connecticut State Agencies and the federal competitive food services regulation, candy (including sugarless candy) cannot be sold or dispensed to students in vending machines or school stores from 30 minutes before the start of any USDA meal or milk program (National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program) until 30 minutes after the end of the program. To promote consistent health messages for students, the SDE strongly encourages districts to prohibit the sale of candy from vending machines and school stores at all times, or at least during the entire school day. If the district implements healthy food certification, candy can never be sold to students from a vending machine or school store.

In compliance with Section 10-215b-23 of the Regulations of Connecticut State Agencies, the income from any food or beverages sold in vending machines and school stores during the time frame of 30 minutes before until 30 minutes after the school nutrition programs must accrue to the nonprofit food service account. If an entity other than the school food service program operates and receives income from vending machines, the vending machines must be shut off or unavailable to students during this time frame. School stores must also be closed during this time frame, unless they do not sell any food or beverages.
Implementation Guidance for Other Foods and Beverages

Food and beverages sold in vending machines and school stores must also comply with the federal competitive food services regulation (see Competitive Foods on page 111).

In compliance with CGS Section 10-221p, whenever food is sold in vending machines or school stores during the regular school day, nutritious low-fat foods must also be available for sale at the same time, either from the vending machine or school store, or elsewhere in the school. These foods include, but are not limited to, low-fat dairy products and fresh or dried fruit. For additional guidance on this requirement, see the SDE handout, Questions and Answers on Connecticut Statutes for School Food and Beverages, at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/HF_Q&A.pdf.

Additional information on the requirements for vending machines and school stores can be found in the following SDE resources:

- **Allowable Beverages in Connecticut Schools:**
- **Competitive Foods in School Nutrition Programs:**
- **Questions and Answers on Connecticut Statutes for School Food and Beverages:**
- **Requirements for Food and Beverages in School Stores:**
- **Requirements for Food and Beverages in Vending Machines:**
- **List of Acceptable Food and Beverages:**

For a summary of the federal and state requirements regarding food and beverages, see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy. For additional resources, see A La Carte Sales and Vending, Healthy Fundraisers and School Stores, Connecticut’s Healthy Food Certification and State and Federal Requirements under Resources at the end of this section.
Implementation Guidance for Other Foods and Beverages

Events on School Premises

Foods and beverages sold and served at events on school premises must comply with all federal regulations for school nutrition programs and all applicable state statutes and regulations, regardless of whether the event is sponsored by the school or an outside organization. An event is an occurrence that involves more than just a regularly scheduled practice, meeting or extracurricular activity. For example, soccer games, school plays and school debates are events but soccer practices, play rehearsals and debate team meetings are not. (Nutrition standards for meetings and practices are addressed in the policy recommendations for Celebrations and Meetings on page 80.)

Beverages

While federal legislation for School Wellness Policy requires that nutrition guidelines apply during the school day, the state beverage statute supersedes this time frame because it applies at all times. All beverages sold to students at events on school premises must meet the requirements of state statute at all times, unless the local board of education votes to allow exemptions for beverage sales that meet the criteria of CGS Section 10-221q (see page 24 and Requirements for Beverages on page 103). A brand-specific list of beverages that meet state requirements is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.

The state beverage statute applies to the sale of beverages to students, not to beverages that are given at no charge to students at events on school premises.* However, the SDE strongly encourages districts to provide students with consistent health messages by also applying the state beverage requirements to beverages that are given to students at school, and extending the time frame to include events held on school premises after the school day.

Food

The federal law for School Wellness Policy (Public Law 108-265) requires that districts develop nutrition guidelines for all foods available at school during the school day. Therefore, all food sold and served to students at events on school premises during the school day must meet the district’s nutrition standards. The SDE strongly encourages districts to extend this time frame to also include events held on school premises after the school day.

If the district chooses not to apply the district’s nutrition standards to events held after the school day (such as sports competitions, school concerts and dances), organizations should be encouraged to include at least some healthy food and beverage choices in their offerings. It is recommended that groups market these healthy options at a lower profit margin to encourage selection by students.

Districts may choose to develop their own nutrition standards or may follow the state nutrition standards (see Connecticut Nutrition Standards on page 105). To ensure consistency with current nutrition science and national health recommendations, the SDE strongly encourages districts to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirements.

If the district has chosen to implement healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. While federal legislation for School Wellness Policy requires that districts include nutrition guidelines for all foods available during the school day, for districts implementing healthy food certification, the Connecticut Nutrition Standards apply at all times. Therefore, they supersede the time frame specified by the federal School Wellness Policy.

* If a fee is collected to cover the cost of beverages “given” to students at events on school premises, then the beverages are being sold to students and must meet the beverage requirements of state statute. A brand-specific list of beverages that meet the requirements of state statute is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.
Implementation Guidance for Other Foods and Beverages

Policy requirements. Food items that do not meet the Connecticut Nutrition Standards can only be sold to students on school premises if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see Connecticut Nutrition Standards on page 105). If exemptions are not allowed, the district is responsible for evaluating all food (commercial and school-made) that will be sold at events for compliance with the Connecticut Nutrition Standards (see Determining Compliance of Food Items on page 105).

The statutory requirements apply to the sale of food, not to food that is given at no charge to students at events.* However, the SDE strongly encourages districts to provide students with consistent health messages by applying the Connecticut Nutrition Standards to all food that is available to students on school premises.

In compliance with Section 10-215b-1 of state regulations and the federal competitive food services regulation, candy (including sugarless candy) cannot be sold or dispensed to students anywhere on school premises from 30 minutes before the start of any USDA meal or milk program until 30 minutes after the end of the program (see Competitive Foods on page 111). To promote consistent health messages for students, the SDE strongly encourages districts to prohibit the sale and serving of candy at events on school premises at all times, or at least during the entire school day. If the district implements healthy food certification, candy can only be sold to students at events on school premises if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see Connecticut Nutrition Standards on page 105).

In compliance with Section 10-215b-23 of the Regulations of Connecticut State Agencies, the income from any food or beverages sold at events on school premises during the time frame of 30 minutes before until 30 minutes after the school nutrition programs must accrue to the nonprofit food service account.

In compliance with CGS Section 10-221p, whenever food is sold at events held during the regular school day, nutritious low-fat foods must also be available for sale at the same time. These foods include, but are not limited to, low-fat dairy products and fresh or dried fruit. For additional guidance on this requirement, see the SDE handout, Questions and Answers on Connecticut Statutes for School Food and Beverages, at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/HF_Q&A.pdf.

For additional information, see the following SDE resources:


For a summary of the federal and state requirements regarding food and beverages, see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy. For additional resources, see Connecticut’s Healthy Food Certification and State and Federal Requirements under Resources at the end of this section.

* If a fee is collected to cover the cost of food “given” to students at events on school premises, then the food is being sold to students. Therefore, if the district implements healthy food certification, the food must meet the Connecticut Nutrition Standards. A brand-specific list of food items that meet the Connecticut Nutrition Standards is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.
Implementation Guidance for Other Foods and Beverages

**Fundraising**
Food and beverage fundraisers held on school premises must comply with all applicable state statutes and state and federal regulations.

**Beverages**
All beverages sold to students as fundraisers on school premises must meet the requirements of state statute at all times, unless the local board of education votes to allow exemptions for beverage sales that meet the criteria of CGS Section 10-221q (see page 24 and Requirements for Beverages on page 103). The state beverage statute does not apply to fundraisers held off school premises.* A brand-specific list of beverages that meet state requirements is available at [http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy](http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy).

**Food**
The federal law for School Wellness Policy (Public Law 108-265) requires that districts develop nutrition guidelines for all foods available at school during the school day. Therefore, food sold as fundraisers on school premises during the school day must meet the district’s nutrition standards. The SDE strongly encourages districts to extend this time frame to also include fundraisers held on school premises after the school day.

Districts may choose to develop their own nutrition standards or may follow the state nutrition standards (see Connecticut Nutrition Standards on page 105). To ensure consistency with current nutrition science and national health recommendations, the SDE strongly encourages districts to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirements.

If the district has chosen to implement healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. Food fundraisers held on school premises must meet the Connecticut Nutrition Standards and be conducted in compliance with all statutory requirements of healthy food certification. Food items that do not meet the Connecticut Nutrition Standards can only be sold to students as fundraisers on school premises if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see Connecticut Nutrition Standards on page 105). The Connecticut Nutrition Standards do not apply to fundraisers held off school premises.*

Regardless of whether the district implements healthy food certification, all food and beverage fundraisers sold to students on school premises must comply with Section 10-215b-1 of state regulations and the federal competitive food services regulation. Candy (including sugarless candy) cannot be sold or dispensed to students anywhere on school premises from 30 minutes before the start of any USDA meal or milk program (National School Lunch Program, School Breakfast Program, National School Milk Program, and other USDA-sponsored programs) to 30 minutes after the end of the meal or milk program. Candy cannot be sold or dispensed to students in any facility of the school during these times. This includes vending machines.

* The state beverage statute and Connecticut Nutrition Standards do not apply to fundraisers held off school premises. Students can take home fundraising fliers and catalogs and sell beverages or food (such as soda, cakes, pies, candy and cookie dough) to anyone off school premises. However, if the student is involved in delivering money to school for the foods/beverages and picking up the foods/beverages at school, the fundraiser is selling foods/beverages to students on school premises and is not allowed. For the fundraiser to comply with CGS Sections 10-221q and 10-215f, it must be structured so that parents or other adults pick up the foods/beverages instead of students. This must be clearly indicated in the fundraising flier and any written communication regarding the fundraiser.
Implementation Guidance for Other Foods and Beverages

After-School Snack Program and Special Milk Program) until 30 minutes after the end of the program. If the district implements healthy food certification, candy can only be sold to students if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see Connecticut Nutrition Standards on page 105).

To promote consistent health messages for students, the SDE strongly encourages districts to prohibit candy fundraisers on school premises at all times, or at least during the entire school day. If the district implements healthy food certification, candy fundraisers can occur on school premises only if the local board of education votes to allow exemptions for food sales that meet the criteria of CGS Section 10-215f (see Connecticut Nutrition Standards on page 105).

In compliance with Section 10-215b-23 of the Regulations of Connecticut State Agencies, the income from any food or beverage fundraisers sold on school premises from 30 minutes before the start of any USDA meal or milk program (National School Lunch Program, School Breakfast Program, After-School Snack Program and Special Milk Program) until 30 minutes after the end of the program must accrue to the nonprofit food service account. This applies regardless of whether the fundraiser is sponsored by the school or an outside organization.

In compliance with CGS Section 10-221p, whenever food is sold at fundraisers held during the regular school day, nutritious low-fat foods must also be available for sale at the same time. These foods include, but are not limited to, low-fat dairy products and fresh or dried fruit. For additional guidance on this requirement, see the SDE handout, Questions and Answers on Connecticut Statutes for School Food and Beverages, at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/HF_Q&A.pdf.

For additional information on fundraising, see the following SDE resources:

- **Allowable Beverages in Connecticut Schools:**
- **Competitive Foods in School Nutrition Programs:**
- **Fundraising with Food and Beverages:**
- **Healthy Fundraising:**
- **Sample Fundraiser Form:**
- **Questions and Answers on Connecticut Statutes for School Food and Beverages:**

The chart on the next page provides ideas for healthy fundraising activities. The SDE handout, Healthy Fundraising, provides schools with specific ideas on healthy fundraising alternatives ([http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Resources](http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Resources)).

For a summary of the federal and state requirements regarding food and beverages, see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy. For additional resources, see Healthy Fundraisers and School Stores and A La Carte Sales and Vending under Resources at the end of this section.
Implementation Guidance for Other Foods and Beverages

### Ideas for Healthy Fundraising Alternatives

#### Items You Can Sell
- Activity theme bags
- Air fresheners
- Bath accessories
- Balloon bouquets
- Batteries
- Books, calendars
- Brick/stone/tile memorials
- Bumper stickers and decals
- Buttons, pins
- Candles
- Christmas trees
- Coffee cups, mugs
- Cookbooks
- Crafts
- Coupon books
- Customized stickers
- Emergency kits for cars
- First aid kits
- Flowers and bulbs
- Foot warmers
- Football seats
- Garage sale
- Giant coloring books
- Gift baskets
- Gift certificates
- Gift items
- Gift wrap, boxes and bags
- Graduation tickets
- Greeting cards
- Hats
- Holiday ornaments
- Holiday wreaths
- House decorations
- Hugging booth
- Jewelry
- Kissing on the cheek booth
- License plates or holders with school logo
- Lunch box auctions
- Magazine subscriptions
- Megaphones
- Mistletoe
- Monograms

#### Items You Can Sell, Continued
- Music, videos, CDs
- Newspaper space, ads
- Parking spot (preferred location)
- Pet treats/toys/accessories
- Plants
- Pocket calendars
- Pre-paid phone cards
- Raffle donations (nonfood items)
- Raffle extra graduation tickets
- Raffle front row seats at a special school event
- Rent a special parking space
- Scarves
- School art drawings
- School spirit gear
- Scratch-off cards
- Sell/rent wishes
- Souvenir cups
- Spirit/seasonal flags
- Stadium pillows
- Stationery
- Student directories
- Stuffed animals
- Temporary/henna tattoos
- T-shirts, sweatshirts
- Tupperware
- Valentine flowers
- Yearbook covers
- Yearbook graffiti

#### Healthy Foods
- Frozen bananas
- Fruit and nut baskets
- Fruit and yogurt parfaits
- Fruit smoothies
- Lunch box auctions
- Trail mix

#### Sell Custom Merchandise
- Bumper stickers and decals
- Calendars
- Cookbook made by school
- Flying discs with school logo

#### Sell Custom Merchandise, Continued
- Logo air fresheners
- T-shirts/sweatshirts

#### Items Supporting Academics
- Read-A-Thon
- Science Fair
- Spelling Bee

#### Things You Can Do
- Auction (teacher does something for kids)
- Bike-a-thons
- Bowling night/bowl-a-thon
- Car wash (presell tickets as gifts)
- Carnivals (Halloween, Easter)
- Dances (kids, father/daughter, Sadie Hawkins)
- Family/glamour portraits
- Festivals
- Fun runs
- Gift wrapping
- Golf tournament
- Jump-rodpe-a-thon
- Magic show
- Raffle (movie passes, theme bags)
- Raffle (teachers do a silly activity)
- Read-a-thons
- Rent-a-teen helper (rake leaves, water gardens, mow lawns, wash dog)
- Recycling cans/bottles/paper
- Science fairs
- Singing telegrams
- Skate night/skate-a-thon
- Spelling bee
- Talent shows
- Tennis/horseshoe competition
- Treasure hunt/scavenger hunt
- Walk-a-thons
- Workshops/classes

Implementation Guidance for Other Foods and Beverages

Classroom Snacks
Foods available at school during the school day must meet the district’s nutrition standards. If the district implements healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. Foods and beverages that are given (not sold) to students are not required to meet the Connecticut Nutrition Standards and the beverage requirements of state statute. However, the SDE strongly encourages districts to provide students with consistent health messages by applying the same requirements to these foods and beverages.

Snacks served during the school day can make a positive contribution to children’s diets and health if they emphasize nutrient-dense foods, such as fruits, vegetables, whole grains, low-fat or nonfat dairy, lean meats, legumes, nuts and seeds. Schools should assess if and when to offer snacks based on timing of school meals, children’s nutritional needs, children’s ages and other considerations.

Younger children need snacks at times that allow them to come to their regular meals hungry but not starving. Their stomachs are small and their energy needs are high. Generally, most children need to eat within 3 to 4 hours of their last meal. With a long time span between breakfast and lunch (or lunch and the end of the school day), children may not be able to focus on learning without a healthy snack. Children do not have adults’ ability to compensate for hunger. With a significant time span between meals, children can experience hunger symptoms (such as fatigue, irritability, inability to concentrate, weakness and stomach pains) that can interfere with learning.

After-School Snack Program: Eligible schools are encouraged to participate in the After-School Snack Program. Schools that participate in the After-School Snack Program must provide snacks that meet USDA requirements. If the district participates in healthy food certification, these snacks must also meet the Connecticut Nutrition Standards. Information on eligibility and implementation requirements for the After-School Snack Program can be obtained at http://www.fns.usda.gov/cnd/Afterschool/default.htm or by contacting the SDE’s Bureau of Health/Nutrition, Family Services and Adult Education. For additional resources, see After-School Snack Program and A La Carte Sales and Vending under Resources at the end of this section.

Access to Drinking Water
Drinking fountains should be available for students and school staff members to get water at meals and throughout the day. If bottled water is sold, it must meet the beverage requirements of state statute (see page 24 and Requirements for Beverages on page 103).

* If a fee is collected to cover the cost of food and beverages “given” to students at parties and meetings, then the food/beverages are being sold to students. Therefore, beverages must meet the requirements of state statute and, if the district implement healthy food certification, food must meet the Connecticut Nutrition Standards. A brand-specific list of food items that meet the Connecticut Nutrition Standards and beverages that meet the requirements of state statute is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.
Food Brought Into School

Nutrition Guidance: Districts should provide families with information that encourages them to pack healthy lunches and snacks and to refrain from including beverages that do not meet the beverage requirements of state statute (see Requirements for Beverages on page 103) and foods that do not meet the district’s nutrition standards. A brand-specific list of acceptable food and beverages is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.

Food Safety: Districts may want to consider prohibiting the service of foods from home when food will be shared with other students at school celebrations and other functions, and only allowing commercially prepared foods. When parents send in homemade food, it is difficult to ensure that the food is safe from bacterial contamination. To protect food safety, all food to be shared with other students should be commercially prepared, prepackaged, unopened and, when possible, individually wrapped. It is also difficult to ensure that foods sent from home are safe for children with food allergies. Schools can protect food-allergic children by providing nonfood celebrations or, if food is served, obtaining it from a known source such as the school food service program. Resources on food safety are found in Section 6 – Other School-Based Activities to Promote Student Wellness.

Celebrations and Meetings

The federal law for School Wellness Policy (Public Law 108-265) requires that districts develop nutrition guidelines for all foods available at school during the school day. Therefore, the district’s nutrition standards must address food and beverages that are given to students at celebrations, parties, meetings, practices, rehearsals and similar activities held during the school day. The SDE strongly encourages districts to extend this time frame to also include food and beverages available to students at celebrations and meetings held after the school day.

Districts may choose to develop their own nutrition standards or may follow the state nutrition standards (see Connecticut Nutrition Standards on page 105). To ensure consistency with current nutrition science and national health recommendations, the SDE strongly encourages districts to use the Connecticut Nutrition Standards to meet the federal School Wellness Policy requirements.

If the district has chosen to implement healthy food certification under CGS Section 10-215f, the Connecticut Nutrition Standards must be the district’s standards. The statutory requirements apply to the sale of food, not to food that is given at no charge to students at parties, meetings and similar school activities.* However, the SDE strongly encourages districts to provide students with consistent health messages by applying the Connecticut Nutrition Standards to all food that is available to students on school premises.

The state beverage statute (CGS 10-221q) applies to the sale of beverages to students, not to beverages that are given at no charge to students at meetings and other school activities.* However, the SDE strongly encourages districts to provide students with consistent health messages by applying the state beverage requirements to all beverages that are available to students at school.

* If a fee is collected to cover the cost of food and beverages “given” to students at parties and meetings, then the food/beverages are being sold to students. Therefore, beverages must meet the requirements of state statute and, if the district implement healthy food certification, food must meet the Connecticut Nutrition Standards. A brand-specific list of food items that meet the Connecticut Nutrition Standards and beverages that meet the requirements of state statute is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.
Foods and beverages served at school celebrations and parties must meet the district's nutrition standards. Districts may consider determining an appropriate frequency for celebrations that involve food, e.g., limiting celebrations to no more than one party per class per month so that all birthdays are celebrated on one day each month instead of having multiple celebrations every week.

Providing healthy classroom celebrations demonstrates a school commitment to promoting healthy behaviors. It supports the classroom lessons students are learning about health, instead of contradicting them, and gives students an opportunity to practice healthy behaviors. Schools can help promote a positive learning environment by providing healthy celebrations that shift the focus from the food to the child. When food is served, make it count with healthy choices. Teachers and parents can even incorporate a fun nutrition lesson by involving children in the planning and preparation of healthy snacks.

Ideas for Party Activities

- Plan special party games and activities. Ask parents to provide game supplies, pencils, erasers, stickers and other small school supplies instead of food.
- Create a healthy party idea book. Ask school staff members and parents to send in healthy recipes and ideas for activities, games and crafts. Compile these ideas into a book that staff members and parents can use.
- Plan a special craft that children can create. Ask parents to provide craft supplies instead of food.
- Give children extra recess time instead of a class party. For birthdays, let the birthday child choose and lead an active game for everyone.
- Instead of food, ask parents to purchase a book for the classroom or school library in the birthday child’s name. Read it to the class or invite the child’s parents to come in and read it to the class.
- Instead of a party, organize a special community service project, e.g., invite senior citizens in for lunch, make “curechiefs” for chemotherapy patients and blankets for rescue dogs. Involve parents in planning the project and providing needed materials.
- Create a “Celebrate Me” book. Have classmates write stories or poems and draw pictures to describe what is special about the birthday child.
- Provide special time with the principal or another adult, such as taking a walk around the school at recess.
- Create a special birthday package. The birthday child wears a sash and crown, sits in a special chair and visits the principal’s office for a special birthday surprise (pencil, sticker, birthday card, etc.).
- The birthday child is the teacher’s assistant for the day, and gets to do special tasks like make deliveries to the office, lead the line, start an activity and choose a game or story.
5 Nutrition Standards for School Foods and Beverages

Implementation Guidance for Other Foods and Beverages

Ideas for Healthy Foods*

*Note: Foods served at school celebrations and meetings must meet the district’s nutrition standards. Check for food allergies before serving any foods or beverages.

- Low-fat or nonfat plain or flavored milk, 100 percent juice, water, flavored/sparkling water (without added sugars, sweeteners, artificial sweeteners or caffeine), sparkling punch (seltzer and 100 percent fruit juice).
- Fruit smoothies (blend fruits such as berries, bananas and pineapple).
- Fresh fruit assortment, fruit and cheese kabobs, fruit salad, fruit with low-fat whipped topping.
- Dried fruit without added sugar (raisins, apricots, plums), 100 percent fruit snacks.
- Vegetable trays with low-fat or nonfat dip.
- Celery and carrots with peanut butter and raisins.
- Whole-grain crackers with cheese cubes, string cheese or hummus.
- Waffles or pancakes topped with fruit.
- Pretzels, low-fat popcorn, rice cakes, bread sticks.
- Graham crackers, animal crackers.
- Angel food cake, plain or topped with fruit.
- Bagel slices with peanut butter or jam, whole-wheat English muffin, hot pretzels.
- Fruit or grain muffin (low-fat).
- Pizza with low-fat toppings (vegetables, lean ham, Canadian bacon), pizza dippers with marinara sauce.
- Ham, cheese or turkey sandwiches or wraps (with low-fat, low-sugar, low-sodium condiments).
- Low-fat pudding, low-fat yogurt, squeezable yogurt, yogurt smoothies, yogurt parfaits or banana splits (yogurt and fruit topped with cereal, granola or crushed graham crackers).
- Quesadillas or bean burrito with salsa.
- Low-fat breakfast or granola bars (without artificial sweeteners or sugar alcohols).
- Low-fat, low-sodium tortilla chips with salsa or bean dip.
- Trail/cereal mix (whole-grain, low-sugar cereals mixed with dried fruit, pretzels, etc.).
- Nuts and seeds without added fats or sugars.

The Connecticut State Department of Education’s handout, Healthy Celebrations, provides schools with specific ideas for activities and healthy foods at school celebrations (http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Resources). For additional resources, see Celebrations under Resources at the end of this section.

* If beverages are sold to students, they must meet the requirements of state statute and the federal and state competitive foods regulations (see Competitive Foods on page 111). If the district implements healthy food certification and food is sold to students, it must meet the Connecticut Nutrition Standards. Product compliance with the Connecticut Nutrition Standards and state beverage statute varies depending on the brand and type of item. For allowable commercial items, check the SDE’s List of Acceptable Food and Beverages at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy. For school-made items, see Guidance on Evaluating School Recipes for Compliance with the Connecticut Nutrition Standards at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/6EvaluatingRecipes.pdf. For additional information, see Evaluating Food Items for Compliance with Connecticut Nutrition Standards under Resources at the end of this section.
Requirements for Beverages

The requirements for allowable beverages in Connecticut schools are defined by state statute and are separate from the Connecticut Nutrition Standards, which address food. All public schools must comply with the state beverage statute, regardless of whether the district implements healthy food certification under CGS Section 10-215f.

Section 10-221q of the Connecticut General Statutes (http://www.cga.ct.gov/2007/pub/Chap170.htm#Sec10-221q.htm) allows only five categories of beverages to be sold to students in public schools at all times and from all sources including, but not limited to, the cafeteria (a la carte sales and reimbursable school meals), vending machines, school stores and fundraisers:

1. **Milk (flavored or plain)** with no more than 4 grams of sugar per ounce and no artificial sweeteners.

2. **Nondairy milks such as soy or rice milk**, which may be flavored but contain no artificial sweeteners, no more than 4 grams of sugar per ounce, no more than 35 percent of calories from fat per portion and no more than 10 percent of calories from saturated fat per portion.

3. **100 percent fruit juice, vegetable juice or combination of such juices**, containing no added sugars, sweeteners or artificial sweeteners.

4. **Beverages that contain only water and fruit or vegetable juice** and have no added sugars, sweeteners or artificial sweeteners (see Requirements for Beverages Containing Water and Juice at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/Water_Juice_Beverages.pdf).

5. **Water**, which may be flavored but contains no added sugars, sweeteners, artificial sweeteners or caffeine.

Portion sizes of beverages are limited to no more than 12 fluid ounces with the exception of water.

Beverages that do not meet the statutory requirements specified above can only be sold to students at school if the board of education or school governing authority votes to permit them and the following three conditions are met:

1. The sale is in connection with an event occurring after the end of the regular school day or on the weekend.

2. The sale is at the location of the event.

3. The beverages are not sold from a vending machine or school store.

The regular school day is the period that begins with the arrival of the first child at school and ends after the last instructional period. An event is an occurrence that involves more than just a regularly scheduled practice, meeting or extracurricular activity. For example, soccer games, school plays and school debates are events but soccer practices, play rehearsals and debate team meetings are not.
Implementation Guidance for Other Foods and Beverages

The district must determine whether beverages meet the requirements of state statute before they are sold to students. A list of allowable beverages is contained in the SDE’s List of Acceptable Food and Beverage at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy.

Districts can ensure compliance with the requirements of the state beverage statute by verifying that beverages are on the SDE’s list. If a beverage is not listed, districts should submit the product information (nutrition facts label, list of ingredients, package size and product code) to the SDE for review. (See the SDE handout, Submitting Food and Beverage Products for Approval, at (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/SubmittingProducts.pdf).

The following SDE resources contain additional information on allowable beverages:


For a summary of the federal and state requirements regarding food and beverages, see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy. For additional resources, see Connecticut’s Healthy Food Certification and State and Federal Requirements under Resources at the end of this section.
Connecticut Nutrition Standards
The Connecticut Nutrition Standards address all food items sold to students separately from a reimbursable school breakfast or lunch in the USDA School Breakfast Program and National School Lunch Program. They focus on limiting fat, saturated fat, trans fat, added sugars and sodium, moderating portion sizes, and promoting increased intake of nutrient-dense foods, such as fruits, vegetables, whole grains, low-fat or nonfat dairy, lean meats, legumes, nuts and seeds.

The Connecticut Nutrition Standards apply to food sold at all times and from all sources including, but not limited to, school stores, vending machines, a la carte sales in school cafeterias, concession stands and any fundraising activities on school premises, regardless of whether they are sponsored by the school or an outside group. Districts are also encouraged to use the Connecticut Nutrition Standards for food given to students at school, such as classroom parties, meetings and other school activities.


Foods that do not meet the Connecticut Nutrition Standards can only be sold to students at school if the board of education or school governing authority votes to permit them and the following three conditions are met:

1. The sale is in connection with an event occurring after the end of the regular school day or on the weekend.
2. The sale is at the location of the event.
3. The food items are not sold from a vending machine or school store.

The regular school day is the period that begins with the arrival of the first child at school and ends after the last instructional period. An event is an occurrence that involves more than just a regularly scheduled practice, meeting or extracurricular activity. For example, soccer games, school plays and school debates are events but soccer practices, play rehearsals and debate team meetings are not. The exemption for food items that do not meet the Connecticut Nutrition Standards is included as part of the district’s annual Healthy Food Certification Statement.

Determining Compliance of Food Items
The district must determine whether purchased and school-made food items meet the Connecticut Nutrition Standards before they are sold to students.

Implementation Guidance for Other Foods and Beverages

Districts can ensure compliance with the requirements of healthy food certification by verifying that food items are listed on the SDE’s List of Approved Foods and Beverages. If an item is not listed, districts should submit the product information (nutrition facts label, list of ingredients, package size and product code) to the SDE for review. (See the SDE handout, Submitting Food and Beverage Products for Approval, at (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/SubmittingProducts.pdf). For additional information on evaluating commercial products, see Evaluating Foods and Beverages under Connecticut’s Healthy Food Certification in Resources at the end of this section.

School-Made Items: Before any recipes are used to make food that is sold a la carte to students, the district must determine whether the recipes meet the Connecticut Nutrition Standards. School-made food items include food that is sold to students separately from reimbursable meals, and 1) is prepared from scratch using a recipe (e.g., entrees, soup, baked goods, cooked grains, vegetables); or 2) requires some additional processing after purchasing ingredients (e.g., popping popcorn kernels with oil, making cookies from a mix, assembling a sandwich). This includes a la carte food made by the cafeteria, culinary arts classes, family and consumer sciences classes and any other school or outside groups selling food to students on school premises.

The district is responsible for conducting a nutrient analysis to ensure that recipes comply with each nutrition standard for the appropriate food category of the Connecticut Nutrition Standards. Additional information on evaluating recipes for school-made food is contained in the following SDE handouts:


For additional information regarding the Connecticut Nutrition Standards and healthy food certification, see Connecticut’s Healthy Food Certification under Resources at the end of this section. All resources are available on the SDE Web site (Nutrition Education page) at [http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Standards](http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Standards).
Summary of Connecticut Nutrition Standards

The Connecticut Nutrition Standards address all food items sold to students separately from a reimbursable school breakfast or lunch. They focus on limiting fat, saturated fat, trans fat, added sugars and sodium, moderating portion sizes, and promoting increased intake of nutrient-dense foods, such as fruits, vegetables and whole grains. The SDE encourages all schools to use these standards to determine what food items are available at school, including a la carte sales in the cafeteria, vending machines, school stores, fundraisers, classroom parties and other school events. Note: Districts that choose to participate in healthy food certification under Section 10-215f of the Connecticut General Statutes must follow the Connecticut Nutrition Standards for all food items sold to students separately from reimbursable school meals at all times and from all sources.

The Connecticut Nutrition Standards group food items into the following five categories: 1) Entree Items; 2) Cooked Grains; 3) Soup; 4) Fruits and Vegetables; and 5) Snacks and Desserts.

Entree Items

The Connecticut Nutrition Standards differentiate between 1) entree items that are planned as part of a reimbursable meal and are also sold a la carte; and 2) entree items that are only sold a la carte. If an entree item that is planned and served as part of a reimbursable school meal for the day is also sold a la carte, it must be the same portion size but does not need to meet any additional nutrition standards. If an entree item is only sold a la carte (i.e., not part of a reimbursable meal) it must meet the following standards:

- **Fat:** No more than 18 grams per entree. No chemically altered fat substitutes.
- **Saturated Fats:** No more than 5 grams per entree.
- **Trans Fats:** Zero trans fats (<0.5 gram).¹
- **Added Sugars:** No more than 15 grams per entree. No artificial sweeteners or sugar alcohols.
- **Sodium:** No more than 500 milligrams per entree.
- **Caffeine:** No caffeine, with the exception of trace amounts of naturally occurring caffeine-related substances.
- **Fiber:** Increase choices of entrees with whole grains and foods containing fiber.
- **Condiments:** Limit use and provide low-fat, low-sugar and low-sodium varieties.²
- **Portion Size:** No larger than the serving size that would normally be planned and served as part of the reimbursable meal for the appropriate age/grade group under the U.S. Department of Agriculture (USDA) meal pattern.

¹ Trans fats include naturally occurring and artificial sources. Most trans fats (80 percent) come from processed foods and oils. Food labeling regulations allow food labels to state “0 grams” trans fats if a serving contains less than 0.5 gram. To avoid artificial trans fats, read ingredients and select products without hydrogenated oils or shortening.

² Any condiments packaged with a food (e.g., bagel with cream cheese, carrots with dip), must be included when determining whether the food meets the Connecticut Nutrition Standards.

* This provision applies only to entree items that are planned and sold as part of a reimbursable meal and are also sold a la carte the same day. It does not apply to any other meal items such as breads, fruits, vegetables and soups. All other food items that are part of a reimbursable meal and are also sold separately from the meal must meet the Connecticut Nutrition Standards for the specific food category. For example, french fries that are part of a reimbursable meal can only be sold a la carte if they meet the nutrition standards for the Fruits and Vegetables category. Muffins that are part of a reimbursable meal can only be sold a la carte if they meet the nutrition standards for the Snacks and Desserts category.
Summary of Connecticut Nutrition Standards, Continued

**Cooked Grains**
- **Fat:** No more than 7 grams per serving. No chemically altered fat substitutes.
- **Saturated Fats:** No more than 2 grams per serving.
- **Trans Fats:** Zero trans fats (<0.5 gram).\(^1\)
- **Added Sugars:** No more than 15 grams per serving. No artificial sweeteners or sugar alcohols.
- **Sodium:** No more than 500 milligrams per serving.
- **Caffeine:** No caffeine, with the exception of trace amounts of naturally occurring caffeine-related substances.
- **Fiber:** Increase choices of whole grains and naturally occurring grains (those with minimal/trace amounts of added fats and no added sugars).
- **Condiments:** Limit use and provide low-fat, low-sugar and low-sodium varieties.\(^2\)
- **Portion Size:** No larger than the serving size that would normally be planned and served as part of the reimbursable meal for the appropriate age/grade group under the USDA meal pattern.

**Soups**
- **Fat:** No more than 7 grams per serving. No chemically altered fat substitutes.
- **Saturated Fats:** No more than 2 grams per serving.
- **Trans Fats:** Zero trans fats (<0.5 gram).\(^1\)
- **Added Sugars:** No more than 15 grams per serving. No artificial sweeteners or sugar alcohols.
- **Sodium:** No more than 1,000 milligrams per serving.
- **Caffeine:** No caffeine, with the exception of trace amounts of naturally occurring caffeine-related substances.
- **Fiber:** Increase choices of soup containing vegetables, legumes and whole grains.
- **Condiments:** Limit use and provide low-fat, low-sugar and low-sodium varieties.\(^2\)
- **Portion Size:** No more than 1 cup

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\(^1\) Trans fats include naturally occurring and artificial sources. Most trans fats (80 percent) come from processed foods and oils. Food labeling regulations allow food labels to state “0 grams” trans fats if a serving contains less than 0.5 gram. To avoid artificial trans fats, read ingredients and select products without hydrogenated oils or shortening.

\(^2\) Any condiments packaged with a food (e.g., bagel with cream cheese, carrots with dip), must be included when determining whether the food meets the Connecticut Nutrition Standards.
Summary of Connecticut Nutrition Standards, Continued

**Fruits and Vegetables**
This category addresses fresh, frozen, canned and dried fruits and vegetables. Note: *Fruit Roll-Ups or fruit snacks that are not 100 percent fruit do not meet the nutrition standards for the Fruits and Vegetables category.*

- Make **quality fruits and vegetables** available at any place snack items are sold. For example, dried fruit in vending machines; fresh fruit and vegetables, such as pineapple slices, melon cubes or baby carrots in a la carte lines and school stores. (“Quality” means fruits and vegetables prepared and packaged without added fats, sugars or sodium.)
- **Fat:** No more than 35 percent of total calories and 7 grams per serving. No chemically altered fat substitutes.
- **Saturated Fats:** No more than 10 percent of total calories and 2 grams per serving.
- **Trans Fats:** Zero trans fats (<0.5 gram).\(^1\)
- **Added Sugars:** No more than 35 percent by weight and 15 grams per serving. No artificial sweeteners or sugar alcohols.
- **Sodium:** No more than 500 milligrams per serving.
- **Caffeine:** No caffeine, with the exception of trace amounts of naturally occurring caffeine-related substances.
- **Condiments:** Limit use and provide low-fat, low-sugar and low-sodium varieties.\(^2\)
- **Portion Sizes:** \(\frac{1}{2}\) cup *minimum* for quality fruits and vegetables; \(\frac{1}{2}\) cup *maximum* for vegetables or fruits with added fats; and 1.5 ounces *maximum* for dried fruit.

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\(^1\) Trans fats include naturally occurring and artificial sources. Most trans fats (80 percent) come from processed foods and oils. Food labeling regulations allow food labels to state “0 grams” trans fats if a serving contains less than 0.5 gram. To avoid artificial trans fats, read ingredients and select products without hydrogenated oils or shortening.

\(^2\) Any condiments packaged with a food (e.g., bagel with cream cheese, carrots with dip), must be included when determining whether the food meets the Connecticut Nutrition Standards.
5 Nutrition Standards for School Foods and Beverages

Implementation Guidance for Other Foods and Beverages

Summary of Connecticut Nutrition Standards, Continued

Snacks and Desserts
This category addresses all snack and dessert items, such as chips, crackers, popcorn, cereal, trail mix, nuts, seeds, peanut butter and other nut butters, jerky, cookies, animal/ Graham crackers, cereal bars, granola bars, bakery items (e.g., pastries, toaster pastries, muffins, soft pretzels, rolls), frozen desserts, ice cream, cheese, yogurt, pudding and smoothies (made with low-fat yogurt or other low-fat dairy alternatives and/or fruit/ juice).

- **Fat:** No more than 35 percent of total calories and 7 grams per package (with the exception of naturally occurring fats in nuts, seeds, peanut and other nut butters and cheeses). No chemically altered fat substitutes.
- **Saturated Fats:** No more than 10 percent of total calories and 2 grams per package.
- **Trans Fats:** Zero trans fats (<0.5 gram).¹
- **Added Sugars:** No more than 35 percent by weight and 15 grams per package. The standard excludes naturally occurring sugars in fruits, vegetables and dairy products. For smoothies (made with low-fat yogurt or other low-fat dairy alternatives and/or fruit/ juice), yogurt and pudding, no more than 5 grams total sugars (added and naturally occurring) per ounce. No artificial sweeteners or sugar alcohols.
- **Sodium:** No more than 500 milligrams per package.
- **Caffeine:** No caffeine, with the exception of trace amounts of naturally occurring caffeine-related substances.
- **Whole-Grain Foods:** Encourage the availability of whole grains and foods containing fiber. Provide choices of whole grains and naturally occurring grains (those with minimal/trace amounts of added fats and no added sugars). Limit grain-based snacks made from enriched flour.
- **Condiments:** Limit use and provide low-fat, low-sugar and low-sodium varieties.²
- **Portion Sizes:** If products meet the preceding standards for Snacks and Desserts, they may be served in a package that does not exceed the serving size limits specified below.

| Baked chips, popcorn, rice cakes, puffed snacks | 1.25 oz. |
| Crackers, hard pretzels, pita chips, snack mix | 1.75 oz. |
| Peanut butter-filled crackers and cheese-filled crackers | 1.5 oz. |
| Trail mix, nuts, seeds, soy nuts | 1.75 oz. |
| Jerky | 1.25 oz. |
| Cereals | 2 oz. |
| Cookies, animal crackers, graham crackers, cereal bars, granola bars | 2 oz. |
| Bakery items, e.g., pastries, toaster pastries, muffins, bagels, waffles, pancakes, French toast, soft pretzels, rolls | 3 oz. |
| Frozen desserts e.g., ice cream (including novelties), frozen yogurt, Italian ice, sorbets, juice/fruit bars, frozen fruit-based desserts | 4 fl. oz. (½ cup) |
| Pudding, parfaits and cottage cheese | 4 fl. oz. (½ cup) |
| Yogurt and cultured soy | 8 oz. |
| Smoothies (made with low-fat yogurt or other low-fat dairy alternatives and/or fruit/ juice) | 10 fl. oz. |
| Cheese (low-fat recommended) | 2 oz. |
| Nut butters, e.g., peanut butter, almond butter, soy butter | 4 Tbsp. |

¹ Trans fats include naturally occurring and artificial sources. Most trans fats (80 percent) come from processed foods and oils. Food labeling regulations allow food labels to state “0 grams” trans fats if a serving contains less than 0.5 gram. To avoid artificial trans fats, read ingredients and select products without hydrogenated oils or shortening.

² Any condiments packaged with a food (e.g., bagel with cream cheese, carrots with dip), must be included when determining whether the food meets the Connecticut Nutrition Standards.
Competitive Foods

The U.S. Department of Agriculture defines competitive foods as all foods and beverages sold in schools except for meals provided through the National School Lunch Program and School Breakfast Program. They include any foods and beverages sold anywhere on school premises in competition with school meals, such as cafeteria a la carte sales, vending machines, school stores and fundraisers. In compliance with federal School Wellness Policy requirements, the district’s nutrition standards must address the requirements for all competitive foods.

Federal regulations do not address nutrition standards for competitive foods, with the exception of a small group defined as foods of minimal nutritional value (FMNV). The federal competitive food services regulation for the National School Lunch Program (7 CFR Part 210.11) and School Breakfast Program (7 CFR Part 220.12) specifies that FMNV can only be sold outside of the meal service periods. Under the federal regulation, the FMNV definition is limited to the following four specific categories of foods and beverages: 1) soda water (any carbonated or aerated beverages); 2) water ices (any frozen, sweetened water such as “...icles” and flavored ice with the exception of products that contain fruit, fruit juice, milk, milk ingredients or egg ingredients other than egg whites); 3) chewing gum; and 4) certain candies (hard candy, jellies and gums, marshmallow candies, fondant, such as candy corn and soft mints, licorice, spun candy and candy coated popcorn).

The federal definition of FMNV does not include any other competitive foods or beverages of low nutrient density (e.g., cake, cookies, chips, chocolate and sweetened beverages) other than the four categories listed above. However, state statutes and regulations supersede the federal regulation by extending the time frame and imposing additional restrictions regarding food and beverage sales to students in schools. To be allowed for sale in Connecticut schools, any FMNV must:

1) Be exempted by the USDA from the categories of FMNV as defined by the federal competitive food services regulation for child nutrition programs.*

2) Meet the state requirements for the appropriate beverage category, as specified by CGS Section 10-221q (see page 103).

3) Meet the district’s nutrition standards or, if the district participates in healthy food certification, the Connecticut Nutrition Standards (see page 105).

4) Be sold in compliance with Section 10-215b-1 of the state competitive foods regulation, which prohibits candy sales anywhere on school premises during the period of 30 minutes before until 30 minutes after the end of any school nutrition program (see page 25). Note: Section 10-215b-1 also prohibits coffee, tea and soft drinks, but CGS Section 10-221q eliminates the sale of these beverages at all times, so it supersedes the time frame previously allowed by Section 10-215b-1.

5) Be sold in compliance with Section 10-215b-23 of the state competitive foods regulation, which specifies that the income from any food or beverages sold to students anywhere on school premises from 30 minutes before until 30 minutes after the end of any school nutrition program must accrue to the nonprofit food service account (see page 25).

* Foods and beverages that the USDA has exempted are listed on Exemptions Under the U.S. Department of Agriculture’s Competitive Foods Regulation for School Nutrition Programs at http://www.sde.ct.gov/sde/LIB/sde/pdf/deps/nutrition/nslp/ExemptionsList.pdf. However, many USDA-exempted products are prohibited by the state beverage statute, Connecticut Nutrition Standards and state competitive foods regulation. Most of the USDA-exempted beverages do not meet the state statutory requirements. None of the USDA-exempted foods meet the Connecticut Nutrition Standards.
Implementation Guidance for Other Foods and Beverages

Beverages Defined as FMNV
The federal regulations define one beverage category of FMNV (soda waters). Under federal regulations, all carbonated and aerated beverages are “soda waters” and are prohibited for sale during the meal service periods unless the USDA has exempted them from the federal FMNV category. However, Connecticut’s beverage statute supersedes the federal regulation by imposing stricter requirements on what and when beverages can be sold to students. Most of the USDA-exempted beverages cannot be sold in Connecticut schools because they do not meet the beverage requirements of state statute (see the USDA list of exemptions at http://www.sde.ct.gov/sde/LIB/sde/pdf/deps/nutrition/nslp/ExemptionsList.pdf).

If carbonated or aerated beverages (waters, juices or water and juice beverages) meet the state requirements for the appropriate beverage category but the USDA has not exempted them from the federal FMNV category of “soda waters,” they can only be sold to students outside of the meal service periods. For example, some seltzers and sparkling waters meet the state statutory requirements for “water,” but the USDA has not exempted them from the federal “soda waters” category. Therefore, the federal regulation prohibits their sale to students during the meal service periods, even though they meet the state requirements.

Schools must be careful to verify that any carbonated or aerated beverages sold to students meet both state and federal requirements. Only three categories meet both state and federal requirements and are therefore permitted for sale to students in public schools.

1. **Carbonated or aerated waters** (may be plain or flavored but contain no added sugars, sweeteners, artificial sweeteners or caffeine), provided they are *only sold outside the meal service periods*. Carbonated waters containing no added sugars, sweeteners, artificial sweeteners or caffeine are allowed by state statute but are still defined as FMNV under federal regulations, which prohibit their sale during the meal service periods.*

2. **Carbonated or aerated 100 percent juices** (100 percent fruit juice, vegetable juice or combination of such juices, containing no added sugars, sweeteners or artificial sweeteners) in portion sizes not exceeding 12 fluid ounces, provided they meet the requirements of CGS Section 10-221q and the USDA has exempted them from the “soda water” category of FMNV as defined by federal regulations. These beverages may be sold at any time.*

3. **Carbonated or aerated water and juice beverages** (containing only water and fruit or vegetable juice with no added sugars, sweeteners or artificial sweeteners) in portion sizes not exceeding 12 fluid ounces, provided they meet the requirements of CGS Section 10-221q (see Requirements for Beverages Containing Water and Juice at http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/Water_Juice_Beverages.pdf), and the USDA has exempted them from the “soda water” category of FMNV as defined by federal regulations. These beverages may be sold at any time.*

Beverages that meet these requirements are listed on the SDE’s List of Acceptable Food and Beverages at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Healthy. No other carbonated or aerated beverages can be sold to students on school premises at any time, unless the board of education votes to allow their sale at events meeting the three exemption conditions specified under CGS 10-221q (see page 24 and Requirements for Beverages on page 103).

* In compliance with Section 10-215b-23 of state regulations, if these beverages are sold anywhere on school premises during the time frame from 30 minutes before until 30 minutes after any USDA school nutrition program, the income must accrue to the nonprofit food service account.
Food Defined as FMNV

The federal regulations define three food categories of FMNV (water ices, chewing gum and certain candies) that are restricted for sale during the USDA meal periods. However, Sections 10-215b-1 and 10-215b-23 of the Regulations of Connecticut State Agencies supersede the federal requirements by mandating additional requirements for these foods.

While the federal FMNV definition only includes certain candy, the state regulation addresses all candy. Section 10-215b-1 of state regulations supersedes the time frame of the federal competitive food services regulation by prohibiting schools from selling or dispensing candy (including sugarless candy) to students anywhere on school premises from 30 minutes before the start of any USDA meal or milk program (National School Lunch Program, School Breakfast Program, After-School Snack Program, Special Milk Program) until 30 minutes after the end of the program. In districts not implementing healthy food certification under CGS Section 10-215f, candy could be sold outside this time frame.*

The federal competitive food services regulation allows water ices and gum to be sold to students outside the meal periods. However, Section 10-215b-23 of state regulations specifies that the income from any food sold anywhere on school premises during 30 minutes before until 30 minutes after the end of any school nutrition program must accrue to the nonprofit food service account. In districts not implementing healthy food certification, water ices and gum could be sold outside this time frame.* However, in districts implementing healthy food certification, these foods do not meet the Connecticut Nutrition Standards. They cannot be sold to students on school premises unless the board of education votes to allow exemptions for food sales that meet the criteria specified by CGS Section 10-215f (see Connecticut Nutrition Standards on page 105).

The following resources contain additional information on competitive foods.


* The SDE strongly encourages districts to promote consistent health messages to students by prohibiting the sale and serving of candy, gum and water ices on school premises at all times, or at least during the entire school day.
References


Dispensing Junk: How School Vending Undermines Efforts to Feed Children Well, Center for Science in the Public Interest, May 2005: http://cspinet.org/dispensing_junk.pdf


School Breakfast Programs: Energizing the Classroom, Minnesota Department of Children, Families and Learning, March 1998: http://cfl.state.mn.us/energize.pdf


Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

A La Carte Sales and Vending

Click on the SDE’s Healthy School Environment Resource List, then click on A La Carte Sales and Vending under Food at School to access resources on this topic.

After-School Snack Program

Click on the SDE’s Nutrition-Related Resources, then click on After-School Snack Program under Resources for Child Nutrition Programs to access resources on this topic.

Celebrations

Click on the SDE’s Healthy School Environment Resource List, then click on Celebrations under Food at School to access resources on this topic.

Connecticut’s Healthy Food Certification

Connecticut Nutrition Standards


Allowable Food and Beverages


Implementation Guidance


5 **Nutrition Standards for School Foods and Beverages**


**Evaluating Foods and Beverages**


**Dietary Guidelines**

Click on the SDE's [Nutrition-Related Resources](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/GuidanceHealthySnacks.pdf), then click on Dietary Guidelines under General Nutrition and Health to access resources on this topic.
Nutrition Standards for School Foods and Beverages

Farm to School
Click on the SDE’s Healthy School Environment Resource List, then click on Farm to School under Nutrition Education to access resources on this topic.

Food Safety
Click on the SDE’s Nutrition-Related Resources, then click on Food Safety to access resources on this topic.

Fruits and Vegetables
Click on the SDE’s Nutrition-Related Resources, then click on Fruits and Vegetables under General Nutrition and Health to access resources on this topic.

Healthy Fundraisers and School Stores
Click on the SDE’s Healthy School Environment Resource List, then click on Healthy Fundraisers and School Stores under Food at School to access resources on this topic.

Menu Planning and Recipes
Click on the SDE’s Nutrition-Related Resources, then click on Menu Planning and Recipes under Menus, Recipes and Nutrient Information to access resources on this topic.

Nutrition Standards
Click on the SDE’s Healthy School Environment Resource List, then click on Nutrition Standards under Food at School to access resources on this topic.

School Breakfast Program
Click on the SDE’s Nutrition-Related Resources, then click on School Breakfast Program under Resources for Child Nutrition Programs to access resources on this topic.

School Lunch Program
Click on the SDE’s Nutrition-Related Resources, then click on School Lunch Program under Resources for Child Nutrition Programs to access resources on this topic.

Special Diets
Click on the SDE’s Nutrition-Related Resources, then click on Special Diets to access resources on this topic.

State and Federal Requirements


5 Nutrition Standards for School Foods and Beverages

Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265):

Competitive Foods in School Nutrition Programs, Connecticut State Department of Education, 2008:

Connecticut General Statutes on School Food and Beverages, Connecticut State Department of Education:

Exemptions Under the U.S. Department of Agriculture’s Competitive Foods Regulation for School Nutrition Programs, Connecticut State Department of Education:


Fluid Milk Substitutions in the School Nutrition Programs, U.S. Department of Agriculture, 2008:

Final Rule on Fluid Milk Substitutions, Operational Memorandum 03-09, Connecticut State Department of Education, November 14, 2008:

Foods of Minimal Nutritional Value (Appendix B of 7 CFR Part 210 National School Lunch Program Regulations), U.S. Department of Agriculture:

Overview of Requirements for School Food and Beverages, Connecticut State Department of Education, 2006 (Revised 2008):


Requirements for Beverages Containing Water and Juice, Connecticut State Department of Education, 2008:

Requirements for Beverages in Connecticut Public Schools (PowerPoint Presentation), Connecticut State Department of Education, 2008:
http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/Beverages.pdf or
http://www.sde.ct.gov/sde/lib/sde/PowerPointPresentations/DEPS/Understanding_HFC.ppt

State Department of Education Child Nutrition Programs:
http://www.state.ct.us/sde/deps/nutrition/index.htm

USDA Food and Nutrition Service: http://www.fns.usda.gov/fns/default.htm

USDA Regulations for School Meals: http://www.fns.usda.gov/cnd/Governance/regulations.htm

Summer Food Service Program

Click on the SDE’s Nutrition-Related Resources, then click on Summer Food Service Program under Resources for Child Nutrition Programs to access resources on this topic.

Additional resources can be found in the SDE’s Healthy School Environment Resource List (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/hse_resource_list.pdf) and Nutrition-Related Resources (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/nutrition_resources.pdf). These lists are updated regularly.
Goal

School cafeteria environments will support healthy eating habits by providing clean, safe and pleasant settings with adequate time for students to eat. School meal procedures will encourage participation by all students. Food service staff members will have the knowledge and skills to provide cost-effective quality meals served safely. Districts will encourage school staff members to be role models for healthy eating and physical activity behaviors through the provision of staff wellness activities. School staff members will not use food to reward or punish students.

Rationale

Students eat more healthful food safely in a supervised, pleasant environment that provides enough time to eat and socialize. Students’ meal participation is increased when schools use appropriate school meal procedures. Appropriate training is needed for school food service staff members to prepare healthy, safe and cost-effective meals. School staff wellness programs encourage adults to be enthusiastic and healthy role models for students. Using food as reward or punishment is an inappropriate practice that negatively impacts the development of healthy eating behaviors.

Policy Recommendations

Policies for Other School-Based Activities to Promote Student Wellness will address the following areas:

- Surroundings for Eating
- Time for and Scheduling of Meals
- Free and Reduced-Price Meals
- Summer Food Service Program
- Financial Operation of Child Nutrition Programs
- Qualifications of Food Service Staff Members
- Training for Food Service Staff Members
- Food Safety
- Food Rewards and Punishment
- Sharing of Foods
- Staff Wellness
Policy Recommendations

Specific guidance regarding the implementation of each policy recommendation for Other School-Based Activities to Promote Student Wellness follows under Implementation Guidance, after this section. Resources to assist with the implementation of each policy recommendation are found in Resources at the end of this section.

This section provides recommendations (not requirements) for policy language for Other School-Based Activities. This language represents recommended best practice for developing school nutrition and physical activity policies. School districts may choose to use the policy recommendations as written or revise them as needed to meet local needs and reflect community priorities. When developing nutrition and physical activity policies, districts will need to take into account their unique circumstances, challenges, opportunities and available resources. Policies should meet local needs and be adapted to the health concerns, food preferences and dietary practices of different ethnic groups.

Surroundings for Eating
School meals shall be served in clean and pleasant settings. A cafeteria environment that provides students with a relaxed, enjoyable climate shall be developed. The cafeteria environment is a place where students have adequate space to eat, clean and pleasant surroundings, adequate time to eat meals, and convenient access to hand washing or hand sanitizing facilities before meals.

Time for and Scheduling of Meals
Schools shall provide appropriate meal times with adequate time allotted for students to eat (at least 10 minutes for breakfast and 20 minutes for lunch after sitting down to eat). All schools must offer all full day students a daily lunch period of at least 20 minutes between 10 a.m. and 2 p.m.

Free and Reduced-Price Meals
Schools shall prevent the overt identification of students who are eligible for free and reduced-price school meals and shall make every effort to eliminate any social stigma attached to students who are eligible for free and reduced-price school meals.

Summer Food Service Program
Schools in which more than 50 percent of students are eligible for free or reduced-price school meals shall sponsor the Summer Food Service Program for at least six weeks between the last day of the academic school year and the first day of the following school year, and preferably throughout the entire summer vacation.

Financial Operation of Child Nutrition Programs
The school food service program shall aim to be financially self-supporting. However, the program is an essential educational support activity. Budget neutrality or profit generation shall not take precedence over the nutritional needs of the students. If additional funds are needed, they shall not be from the sale of foods that have little nutritional value and/or compete nutritionally with program meals.
**Policy Recommendations**

**Qualifications of Food Service Staff Members**
Qualified nutrition professionals shall administer the school meal programs. As part of the school district’s responsibility to operate a food service program, continuing professional development shall be provided for all nutrition professionals in schools. Staff development programs shall include appropriate certification and/or training programs for school food service directors, managers and cafeteria workers, according to their levels of responsibility.

**Training for Food Service Staff Members**
All food service personnel shall have adequate preservice training in food service operations and regularly participate in professional development activities that address requirements for Child Nutrition Programs, menu planning and preparation, food safety, strategies for promoting healthy eating behaviors and other appropriate topics.

**Food Safety**
All foods made available at school shall comply with state and local food safety and sanitation regulations. Hazard Analysis and Critical Control Points (HACCP) plans and guidelines shall be implemented in school meal programs to prevent food-borne illness in schools.

**Food Rewards and Punishment**
Schools shall not use foods or beverages as rewards for academic performance or good behavior, unless this practice is allowed by a student’s individualized education plan (IEP). Schools shall not withhold food or beverages (including food served through school meals) as a punishment. Alternative rewards shall be developed and promoted.

**Sharing of Foods**
Schools shall discourage students from sharing their foods or beverages with one another during meal or snack times, given concerns with allergies and other restrictions on some children’s diets.

**Staff Wellness**
The district highly values the health and well-being of every staff member and shall plan and implement activities and policies that support personal efforts by staff members to maintain a healthy lifestyle and that encourage staff members to serve as role models.
Implementation Guidance

Surroundings for Eating
The physical cafeteria environment greatly impacts the atmosphere in which children eat. School practices should focus on making the dining experience more enjoyable for students. A pleasant eating environment includes the characteristics summarized below.

- The cafeteria has sufficient serving areas so that students don’t have to spend too much time waiting in line.
- Dining areas are attractive and have sufficient space for seating; tables and chairs are the right size for the students.
- Schools encourage socializing among students, and between students and adults.
- Adults properly supervise school dining rooms and serve as role models to students.
- Creative, innovative methods are used to keep noise levels appropriate — no “eat in silence,” no whistles, no buzzing traffic lights.
- Facility design (including the size and location of the dining/kitchen area, lighting, building materials, windows, open space, adequate food-service equipment for food preparation and service, and food and staff safety), is given priority in renovations or new construction.
- Hand-washing equipment and supplies are in a convenient place so that students can wash their hands before eating, or students have access to hand sanitizing supplies before they eat meals or snacks.
- Drinking fountains are available for students to get water at meals and throughout the day.

Changing the Scene (http://www.fns.usda.gov/tn/healthy/changing.html) contains resources to help schools promote a pleasant eating environment. Additional resources can be found under Resources at the end of this section.

Time for and Scheduling of Meals
Meal periods should be scheduled at appropriate times. Schools should not schedule tutoring, pep rallies, club and organization meetings or other activities during meal times. Meal periods should be long enough for students to eat and socialize.

- Meals shall be scheduled at appropriate times, as near the middle of the day as possible, e.g., lunch shall be scheduled between 11 a.m. and 1 p.m. The U.S. Department of Agriculture’s (USDA) regulations specify that lunches cannot be served before 10 a.m. or after 2 p.m. unless an exemption is requested from the State Department of Education. (Code of Federal Regulations for the National School Lunch Program, Part 210.10(f)(1), http://www.fns.usda.gov/cnd/governance/regulations/7CFR210.pdf).
- Scheduled meal times shall provide students with at least 10 minutes to eat after sitting down for breakfast and 20 minutes to eat after sitting down for lunch. This time does not include the time needed to walk to the cafeteria from the classroom, select and pay for the meal, sit down at a table and walk back to the classroom after the meal. Note: Section 10-221o of the Connecticut General Statutes requires that all full day students are offered “a daily lunch period of not less than 20 minutes” (see Federal and State Laws Pertaining to Nutrition and Physical Activity in Section 2 – Steps for Creating Local Policy).
Activities such as tutoring, clubs or organizational meetings or activities shall not be scheduled during meal times unless students may eat during such activities.

For elementary grades, recess should be scheduled before lunch. Additional information on implementing recess before lunch is found in Section 4 – Physical Education and Physical Activity.

Schools should take reasonable steps to accommodate the tooth-brushing regimens of students with special oral health needs (e.g., orthodontia or high tooth decay risk).

A summary of the state and federal requirements for lunch periods is found in SDE Circular Letter C-9, Federal and State Requirements for Provision and Timeframe of Daily Lunch Period for Students, at http://www.sde.ct.gov/sde/lib/sde/pdf/circ/circ07-08/C9.pdf. Additional resources can be found in Meal Schedules under Resources at the end of this section.

**Free and Reduced-Price Meals**
USDA regulations prohibit schools from making others in the cafeteria aware of the eligibility status of children for free, reduced-price or paid meals. Schools must prevent the overt identification of students who are eligible for free and reduced-price school meals. Strategies to help schools prevent identification of income-eligible students include:

- using electronic identification and payment systems;
- providing meals at no charge to all children, regardless of income;
- promoting the availability of school meals to all students; and
- using nontraditional methods for serving school meals, such as “grab-and-go” or classroom breakfast.

For additional information and resources on the requirements for free and reduced-price meals, contact Child Nutrition Programs in the Connecticut State Department of Education’s Bureau of Health/Nutrition, Family Services and Adult Education.

**Summer Food Service Program**
A child’s need for nutrients does not end when school does. Schools are encouraged to offer meals during breaks in the school calendar and to coordinate with other agencies and community groups to operate, or assist with operating, a summer food service program for children and adolescents who are eligible for federal program support. Information on participation in the Summer Food Service Program can be obtained by contacting Child Nutrition Programs in SDE’s Bureau of Health/Nutrition, Family Services and Adult Education. Additional resources are found in Summer Food Service Program under Resources at the end of this section.
Implementation Guidance

Financial Operation of Child Nutrition Programs
The school food service program should be administered using sound financial and accounting practices. The National Food Service Management Institute’s Financial Management Information System (http://www.nfsmi.org/documentLibraryFiles/PDF/20080225031916.pdf) is a tool to assist school food service directors with operational decision making and improving program quality and efficiency. It assists with interpreting the financial outcomes of decision making and with deciding whether the school food service program’s financial health has changed from previous accounting periods.

The food service program should aim to be self-supporting; however, financial decisions should not compromise high quality standards for food and customer acceptance. Financial decisions should be based on students’ nutrition needs, not on profits. Additional resources can be found in Financial Management under Resources at the end of this section.

Qualifications of Food Service Staff Members
There are no state requirements for qualifications of school food service staff members. Qualification requirements are determined locally by each school district. The Connecticut State Department of Education encourages districts to model qualifications for food service staff members on the recommendations from the National Food Service Management Institute and the School Nutrition Association.

The National Food Service Management Institute has several resources that address competencies and skills for school food service professionals (see Qualifications of Food Service Staff Members under Resources at the end of this section). The School Nutrition Association (SNA) maintains several certification and professional development programs for school food service professionals, as indicated below.

- **Certification:** Standards for academic education, specialized training and work experience as conditions of being awarded certification, and standards for continuing education as a condition of maintaining certification. http://www.schoolnutrition.org/Content.aspx?id=126

- **Credentialing Program:** Standards for academic and specialized training, knowledge and skills, as evidenced by passing a national credentialing exam. http://www.schoolnutrition.org/Content.aspx?id=132

- **Professional Development:** Programs developed to meet specific training needs for SNA members and to support the SNA certification and credentialing programs. http://www.schoolnutrition.org/Content.aspx?id=10748
Training for Food Service Staff Members
Training and professional development opportunities should assist school food service staff members with meeting USDA requirements, planning and preparing safe and healthy meals, promoting healthy eating behaviors and other issues appropriate to a healthy school nutrition environment. In Connecticut, several organizations and agencies provide training opportunities for school food service personnel, including workshops, courses, conferences and food shows.

- School Nutrition Association of Connecticut:
  http://www.snact.org/
- Connecticut State Department of Education
  Bureau of Health/Nutrition, Family Services and Adult Education
  25 Industrial Park Road, Middletown, CT 06457
  Phone: 860-807-2051
- New England Dairy and Food Council
  1034 Commonwealth Avenue, Boston, MA 02215
  Phone: 617-734-6750
  http://www.newenglanddairycouncil.org/

The Connecticut State Department of Education maintains a nutrition resource library containing hundreds of materials on nutrition and food service management which districts can use to assist in planning and implementing training programs. Resources include a wide variety of educational materials, such as nutrition curriculums for all grade levels, videos, books, audiovisuals, puppets and games. The Nutrition Resource Catalog is available at http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320670#Catalog.

At the national level, many resources are available for training school food service staff members.

- USDA’s Team Nutrition provides food service and nutrition education resources at http://nfsmi-web01.nfsmi.olemiss.edu/ResourceOverview.aspx?ID=209.
- The Food and Nutrition Information Center of the National Agricultural Library provides a comprehensive list of resources at http://www.nal.usda.gov/fnic/, as well as a list of food service education opportunities at http://www.nal.usda.gov/fnic/etext/000030.html.

Additional training resources are found in Training for Food Service Staff Members under Resources at the end of this section.
Food Safety

Connecticut Food Safety Requirements: Serving safe food is a critical responsibility for school food service personnel and a key aspect of a healthy school environment. All school food service operations must comply with the requirements of the State of Connecticut Public Health Code 19-13-B42 Sanitation of Places Dispensing Foods or Beverages. This includes compliance with the Connecticut Qualified Food Operator (QFO) legislation. Additional information on Connecticut’s food safety regulations can be found at the websites listed below, and in Food Safety under Resources at the end of this section.


Federal HACCP Requirement: Section 111 of the Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265) requires that all schools participating in Child Nutrition Programs implement a school food safety program, in the preparation and service of each meal served to children, that complies with any hazard analysis and critical control point system established by USDA. Hazard Analysis Critical Control Points (HACCP) is a preventative food safety program to control food safety hazards during all aspects of food service operations. It reduces the risk of food-borne hazards by focusing on each step of the food preparation process from receiving to service. When properly implemented, HACCP-based food safety programs will help ensure the safety of school meals served to children.

Federal Food Safety Inspections Requirement: Section 111 of the Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265) requires that all schools participating in the National School Lunch Program and School Breakfast Program must have a minimum of two food safety and sanitation inspections per year. Schools are also required to post their most recent health inspection in a visible public location and provide a copy of the report to any member of the public on request. For additional information, see SDE Operational Memorandum 14-07, Food Safety Inspection, March 12, 2007, at [http://www.sde.ct.gov/sde/LIB/sde/pdf/DEPS/Nutrition/OPmemos/07/OM_14_07.pdf](http://www.sde.ct.gov/sde/LIB/sde/pdf/DEPS/Nutrition/OPmemos/07/OM_14_07.pdf).
**Sharing of Foods**

District policies should discourage students from sharing foods and beverages to prevent potential problems for children with food allergies or other dietary restrictions. Additional guidance on providing a safe school environment for children with food allergies can be found in the SDE’s *Guidelines for Managing Life-Threatening Food Allergies in Connecticut Schools*, available at [http://www.sde.ct.gov/sde/lib/sde/PDF/deps/student/health/Food_Allergies.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/deps/student/health/Food_Allergies.pdf). Resources on special diets can be found in Section 5 – *Nutrition Standards for School Foods and Beverages*.

**Food Rewards and Punishment**

**Food as a Reward**: Adults often use food rewards because they are an easy, inexpensive and powerful tool to bring about immediate short-term behavior change. Yet, using food as a reward has many negative consequences that go far beyond the short-term benefits of good classroom behavior or performance. Rewarding students with unhealthy foods:

- undermines schools’ efforts to teach students about good nutrition by modeling unhealthy behavior and contradicting the nutrition principles taught in the classroom;
- interferes with children learning to eat in response to hunger and satiety cues (this teaches children to eat when they are not hungry as a reward to themselves, and may contribute to the development of disordered eating);
- increases preference for unhealthy foods (research shows that food preferences for both sweet and nonsweet food increase significantly when foods are presented as rewards); and
- encourages overconsumption of unhealthy foods (foods that supply calories from fat and sugar, but few nutrients).

**Alternatives to Food as a Reward**: The chart on the next page provides specific ideas on alternatives to using food as a reward. For additional resources, see the SDE handout, *Alternatives to Food as Reward* ([http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Resources](http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#Resources)), and *Alternatives to Food as a Reward* under Resources at the end of this section.

**Food as Punishment**: Schools participating in the USDA school meal programs (e.g., National School Lunch Program, School Breakfast Program and After-School Snack Program) are prohibited from restricting student access to school meals for any reason, including as a punishment for student behavior. Other inappropriate practices using food as punishment include:

- denying students access to cafeteria snack or a la carte lines;
- denying students access to certain types of foods; and
- preventing children from eating classroom snacks (when snacks are normally allowed) as a consequence of individual or class behavior.

District policies should prohibit school staff members from withholding access to meals and snacks as punishment, both in the classroom and cafeteria. Restricting access to meals, snacks or other foods and beverages is an inappropriate form of punishment. District policies should encourage the development of alternative practices for promoting appropriate behavior. For additional information, see *Behavior Management* under Resources in Section 4 – *Physical Education and Physical Activity*. 
### Implementation Guidance

#### Ideas for Alternatives to Using Food as a Reward

<table>
<thead>
<tr>
<th>Elementary Students</th>
<th>Middle School</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Make deliveries to office</td>
<td>- Sit with friends</td>
</tr>
<tr>
<td>- Teach class</td>
<td>- Listen to music while working at desk</td>
</tr>
<tr>
<td>- Sit by friends</td>
<td>- Five-minute chat break at end of class</td>
</tr>
<tr>
<td>- Eat lunch with teacher or principal</td>
<td>- Reduced homework or “no homework” pass</td>
</tr>
<tr>
<td>- Eat lunch outdoors with the class</td>
<td>- Extra credit</td>
</tr>
<tr>
<td>- Have lunch or breakfast in the classroom</td>
<td>- Fun video</td>
</tr>
<tr>
<td>- Private lunch in classroom with a friend</td>
<td>- Fun brainteaser activities</td>
</tr>
<tr>
<td>- Be a helper in another classroom</td>
<td>- Computer time</td>
</tr>
<tr>
<td>- Play a favorite game or do puzzles</td>
<td>- Assemblies</td>
</tr>
<tr>
<td>- Stickers, pencils, bookmarks</td>
<td>- Field trips</td>
</tr>
<tr>
<td>- Certificates</td>
<td>- Eat lunch outside or have class outside</td>
</tr>
<tr>
<td>- Fun video</td>
<td></td>
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<tr>
<td>- Extra recess</td>
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<tr>
<td>- Walk with the principal or teacher</td>
<td></td>
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<tr>
<td>- Fun physical activity break</td>
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<tr>
<td>- School supplies</td>
<td></td>
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<tr>
<td>- Trip to treasure box filled with nonfood items (stickers, temporary tattoos,</td>
<td></td>
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<tr>
<td>pencils, erasers, bookmarks)</td>
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<tr>
<td>- Dance to favorite music in the classroom</td>
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<tr>
<td>- Paperback book</td>
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<tr>
<td>- Show-and-tell</td>
<td></td>
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<tr>
<td>- Bank system – Earn play money for privileges</td>
<td></td>
</tr>
<tr>
<td>- Teacher or volunteer reads special book to class</td>
<td></td>
</tr>
<tr>
<td>- Teacher performs special skill (singing, cartwheel, guitar playing, etc.)</td>
<td></td>
</tr>
<tr>
<td>- Read outdoors or enjoy class outdoors</td>
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<tr>
<td>- Have extra art time</td>
<td></td>
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<tr>
<td>- Have “free choice” time at end of the day or end of class period</td>
<td></td>
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<tr>
<td>- Listen with headset to a book on audiotape</td>
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<tr>
<td>- Items that can only be used on special occasions (special art supplies, computer</td>
<td></td>
</tr>
<tr>
<td>games, toys)</td>
<td></td>
</tr>
</tbody>
</table>

**Staff Wellness**

Health promotion services for all school staff members can positively affect their eating and physical activity behaviors and their effectiveness in teaching and modeling healthy behaviors. Districts should encourage all school staff members to improve their own personal health and wellness in order to improve staff morale, create positive role modeling, build the commitment of the staff to promote the health of students, and build the commitment of the staff to help improve the school nutrition and physical activity environment.

Staff wellness is not institutionalized in many school settings. School-site health promotion programs for staff members impact not only the health of the school faculty and staff, but can also have effects on students, their families and community members. Examples of health promotion programs for school staff members include:

- health screenings
- physical activity and fitness programs
- nutrition education
- weight management
- smoking cessation
- influenza vaccinations
- stress management

Once wellness and health promotion programs are available, districts should encourage staff members to participate in these programs. Examples of promotion ideas include:

- introducing wellness programs to new staff members at orientation sessions;
- presenting information at regular staff meetings;
- including flyers and brochures with paychecks;
- putting information into newsletter articles, brochures and e-mail messages; and
- offering health insurance discounts for participants.

The *School Health Index* ([https://apps.nccd.cdc.gov/shi/Default.aspx](https://apps.nccd.cdc.gov/shi/Default.aspx)) provides an assessment tool to help districts evaluate existing staff wellness practices and procedures. Districts may wish to consider incorporating staff wellness programs as part of the School Health Team’s responsibility.

Additional resources on staff wellness are found in *Staff Wellness* under *Resources* at the end of this section.
Other School-Based Activities to Promote Student Wellness

References

Alternatives to Using Food as a Reward, Michigan State University Extension, 2003:
www.msue.msu.edu/fnh/tn/foodrewards.pdf

Changing the Scene: Improving the School Nutrition Environment, U.S. Department of Agriculture, 2000:

Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265):

Federal and State Requirements for Provision and Timeframe of Daily Lunch Period for Students, Connecticut State Department of Education, Circular Letter C-9, November 13, 2007:

Health, Mental Health and Safety Guidelines for Schools (Section 8-03: Provision of Wellness Programs for Staff): http://www.nationalguidelines.org/guideline.cfm?guideNum=8-03

Non-Food Ways to Raise Funds and Reward a Job Well Done, Texas Department of Agriculture, 2004:
http://www.squaremeals.org/vgn/tda/files/2348/13149_Non%20Food%20Ways%20to%20Reward.pdf


School Nutrition Association Local Wellness Policy Recommendations, School Nutrition Association, 2005:

The Child Nutrition and WIC Reauthorization Act of 2004, Public Law 108-265, Section 204:

USDA Regulations for the National School Lunch Program, 7 CFR 210:
http://www.fns.usda.gov/cnd/Governance/Regulations.htm
Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

Alternatives to Food as a Reward
Click on the SDE’s Healthy School Environment Resource List, then click on Alternatives to Food as Reward under Food at School to access resources on this topic.

Financial Management
Click on the SDE’s Nutrition-Related Resources, then click on Financial Management under Resources for Child Nutrition Programs to access resources on this topic.

Food Safety
Click on the SDE’s Nutrition-Related Resources, then click on Food Safety to access resources on this topic.

Meal Schedules
Click on the SDE’s Healthy School Environment Resource List, then click on Meal Schedules under Food at School to access resources on this topic.

Qualifications of Food Service Staff Members
Click on the SDE’s Nutrition-Related Resources, then click on Qualifications of Food Service Staff under Resources for Child Nutrition Programs to access resources on this topic.

Staff Wellness
Click on the SDE’s Healthy School Environment Resource List, then click on Staff Wellness under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Summer Food Service Program
Click on SDE’s Nutrition-Related Resources, then click on Summer Food Service Program under Resources for Child Nutrition Programs to access resources on this topic.

Training for Food Service Staff Members
Click on the SDE’s Nutrition-Related Resources, then click on Training for Food Service Staff under Resources for Child Nutrition Programs to access resources on this topic.
Policy Component: Communication and Promotion

Goal
School districts will promote clear and consistent messages that explain and reinforce healthy eating and physical activity habits. Districts will engage students, families, the community and the media in promoting a healthy school environment.

Rationale
The promotion of consistent messages in the school environment reinforces the district’s commitment to students’ health. Marketing materials in the cafeteria and classrooms should support the concepts and practices in the district’s nutrition and physical activity policies. Marketing targeted to children through multiple media channels contributes to their choices about foods, beverages and physically active pursuits. Families have a significant influence on students’ eating and physical activity habits. Partnering with the local community increases schools’ effectiveness in providing consistent health messages.

Policy Recommendations
Policies for Communication and Promotion will address the following areas:

- Consistent Health Messages
- Engaging Families
- Engaging Students
- Partnering with Community Organizations
- Food Marketing in Schools
- Media

Specific guidance regarding the implementation of each policy recommendation for Marketing and Promotion follows under Implementation Guidance, after this section. Resources to assist with the implementation of each policy recommendation are found in Resources at the end of this section.
Policy Recommendations

Consistent Health Messages
Students shall receive positive, motivating messages, both verbal and nonverbal, about healthy eating and physical activity throughout the school environment. All school personnel shall help reinforce these positive messages. Foods and beverages sold or served at school shall not contradict healthy eating messages. The school district shall not use practices that contradict messages to promote and enjoy physical activity; for example, withholding recess or using physical activity as punishment (e.g., running laps, doing pushups).

Engaging Families
The school district shall encourage family involvement to support and promote healthy eating and physical activity habits. The district shall support families’ efforts to provide a healthy diet and daily physical activity for their children through effective two-way communication strategies that allow sharing of information from school to home and from home to school. The district shall offer nutrition education for parents which can include providing healthy eating seminars, sending home nutrition information, postings on district website, providing nutrient analyses of school menus in language families can understand and any other appropriate methods for reaching families. The district shall provide families with a list of foods that meet the district’s nutrition standards and ideas for healthy celebrations, rewards and fundraising activities. The district shall provide opportunities for families to share their healthy food practices with others in the school community. The district shall provide information about physical education and other school-based physical activity opportunities before, during and after the school day, and shall support families’ efforts to provide their children with opportunities to be physically active outside of school. Such supports shall include sharing information about physical activity and physical education through a website, newsletter or other take-home materials, special events or physical education homework.

Note: Throughout this document the words “parent(s)” and “family(ies)” will be used in the broadest sense to mean those adults with primary responsibility for children. SDE prefers the use of “family” to “parent” because not all responsible agents are parents, but most are family, either by relationship or function.

Engaging Students
Schools shall consider student needs in planning for a healthy school environment. Students shall be asked for input and feedback through the use of student surveys and other means, and attention shall be given to their comments. Key health messages shall be promoted by coordinating classroom and cafeteria, and through planned promotions such as health fairs, nutrition initiatives, programs and contests.
**Policy Recommendations**

**Partnering with Community Organizations**
Schools shall partner with community organizations (e.g., local businesses, faith-based organizations, libraries, local health departments, local colleges and their students, and local health care providers) to provide consistent health messages and support school-based activities that promote healthy eating and physical activity.

**Food Marketing in Schools**
School-based marketing shall be consistent with nutrition education and health promotion. Thus, schools shall limit food and beverage marketing to the promotion of foods and beverages that meet the U.S. Department of Agriculture (USDA) nutrient standards for meals, the beverage requirements of state statute and the district’s nutrition standards.* Schools shall promote healthy food choices and shall not allow advertising that promotes less nutritious food and beverage choices. The promotion of healthy foods, including fruits, vegetables, whole grains and low-fat dairy products, shall be encouraged.

**Media**
Schools shall work with a variety of media, such as local newspapers, radio and television stations, to spread the word to the community about healthy eating and physical activity behaviors, and a healthy school environment.

* In Connecticut public schools, all beverages sold to students must meet the requirements of Section 10-221q of the Connecticut General Statutes (CGS). Districts participating in healthy food certification under CGS Section 10-215f must ensure that all food sold to students separately from reimbursable meals meets the Connecticut Nutrition Standards.
Implementation Guidance

Consistent Health Messages
Making healthy food choices and physical activity available for students is critical to providing a healthy school environment. It is also important to actively promote healthy eating and physical activity to students, families, school staff members and the community. Positive health messages can be promoted through a variety of activities, including:

- featuring regular messages about healthy eating, nutrition education and physical activity in school media (e.g., newsletters, announcements, bulletin board, communications folders and school menus);
- working with school and student organizations (e.g., student council, PTA/PTO and other parent volunteers/organizations) to develop promotional materials that include consistent nutrition and physical activity messages;
- conducting special nutrition and physical activity promotions and events that involve the entire school community, including classroom and cafeteria;
- providing nutrition and physical activity information and resources at registration, PTA/PTO meetings, open houses, health fairs and teacher in-service training;
- providing signage or labeling for healthy food and beverage options in the cafeteria and throughout the school (e.g., vending machines and school stores), via school menus, menu boards, tent cards, posters and other promotional signage;
- providing signage to encourage drinking water;
- providing materials in school and community venues (e.g., websites, offices of local health providers, School-Based Health Centers and after-school programs) that promote healthy eating and physical activity; and
- sending healthy lunch box ideas on a regular basis to families through communications folders.

Foods and beverages sold at school should not contradict nutrition messages in the classroom and school environment. All beverages sold to students must comply with the requirements of state statute. School foods must meet the nutrition standards developed by the district.* The Connecticut Nutrition Standards and the beverage requirements of state statute apply only to foods and beverages that are sold to students. However, to promote consistent health messages to students, the SDE also encourages districts to use the Connecticut Nutrition Standards and state beverage statute as guidelines for foods and beverages that are given to students. Information on nutrition standards for foods and beverages is contained in Section 5 – Nutrition Standards (see Requirements for Beverages and Requirements for Food).

Note: Schools should provide bilingual signage and materials as appropriate to the local community. Messages should be culturally relevant and reflect the importance of good nutrition and healthy eating and physical activity habits.

* Districts that participate in healthy food certification under Section 10-215f of the Connecticut General Statutes must follow the Connecticut Nutrition Standards for all food sold to students separately from reimbursable school meals (see Connecticut Nutrition Standards in Section 5 – Nutrition Standards).
Engaging Families
Families have a significant influence on helping children to develop healthy eating and physical activity habits. They can also be effective allies in promoting support for the district’s nutrition and physical activity policies and programs. It is important for districts to communicate with families in ways that respect families’ cultural backgrounds and promote their participation in health-related activities at school and home. Districts also need to provide information that encourages families to teach their children about health and nutrition, to provide nutritious meals and to participate in regular physical activity.

Parents need to understand — and help communicate to other parents — the nutrition and physical activity issues that impact their children’s health. Parents also need to ensure that healthy meals are served at home and brought to school, and they need to encourage their children to engage in healthy eating and regular physical activity.

Schools can encourage two-way communication by using effective strategies that allow sharing of information from school to home and home to school to better incorporate parents’ perspectives in school-developed programs and materials. Strategies for schools to encourage communication, family involvement and support include:

- recruiting parents to serve on the district’s School Health Team;
- working with PTA/PTO members and other parent volunteers/organizations to encourage parent involvement in nutrition and physical activity efforts at school;
- encouraging parents to plan, promote and conduct nutrition education activities and events in collaboration with school staff members;
- soliciting parent input prior to developing nutrition and physical activity programs and materials;
- providing information to families on nutrition and physical activity issues, e.g., newsletters, fact sheets, health fairs and workshops (see Handouts for Children, Parents and School Staff Members in Section 3 – Nutrition Education and Promotion);
- sending cafeteria menus and nutrition information home with students;
- providing a tear-off form at the bottom of newsletters, handouts and other informational materials that parents can use to respond with questions or concerns about specific issues;
- using local media (e.g., television, radio and newspapers) to provide information and resources on nutrition and physical activity issues, such as district policies, local health issues, programs and activities;
- including home activities on nutrition in student assignments, e.g., interviewing family members about personal food habits, recording food intake, looking at food labels, reading nutrition-related articles or newsletters, creating a healthy snack or meal, and talking about media’s effect on food choices;
- including home activities on physical activity in student assignments, e.g., maintaining physical activity logs, planning games for a family picnic and helping with chores at home;
- providing ideas for healthy alternatives to fundraising, celebrations and food as a reward (see Section 5 – Nutrition Standards for School Foods and Beverages);
Implementation Guidance

- encouraging parents to send healthy snacks and meals to school and refrain from sending or bringing in foods and beverages that do not meet the state beverage statute or the district’s nutrition standards;
- inviting parents and family members to eat with their children in the cafeteria;
- requesting parents’ input on nutrition and physical activity issues through surveys, forums, focus groups, school committees, school organizations and other means;
- inviting families to attend exhibitions of student nutrition projects or health fairs;
- involving families in school garden projects;
- offering nutrition education activities at family nights and other school events;
- providing opportunities to share culturally diverse eating practices and traditions;
- providing nutrition workshops;
- providing opportunities for physical activity that involve the whole family, e.g., family sports night, dances, games that involve physical activity, walk-a-thons; and
- promoting opportunities for physical activity at school and in the community.

Engaging Students

Students can be a powerful force for creating change in the school community. Students can serve on the local School Health Team and be actively involved in the local policy development process. *Playing the Policy Game* (California Project Lean, 2003) is one resource to help districts involve students in developing nutrition and physical activity policies in the school and community. ([http://www.californiaprojectlean.org/](http://www.californiaprojectlean.org/)).

Schools may also want to consider encouraging the development of a Student Wellness Council, which brings students together to learn about and promote nutrition, physical activity and wellness. A Student Wellness Council also serves as a link between students, school nutrition personnel, administrators and the community.

In addition to inviting students to serve on the local School Health Team or Student Wellness Council, schools can encourage student involvement by empowering students to act on various nutrition and physical activity initiatives. Sample activities might include:
- conducting meetings to discuss nutrition and physical activity topics;
- conducting nutrition, health and wellness fairs;
- coordinating classroom and cafeteria education efforts;
- coordinating nutrition and/or physical activity contests;
- decorating the cafeteria and other areas of the school, e.g., nutrition and physical activity posters and displays;
- educating the school community about nutrition and physical activity, e.g., bulletin boards, newsletters, fact sheets, websites, assemblies and school events;
- providing input to school food service personnel on menu development;
- taste testing new food products;
**Implementation Guidance**

- conducting student nutrition and fitness surveys;
- developing school wellness programs;
- researching a nutrition or physical activity topic for a report to the School Health Team, an article for the school newspaper or a feature story for school-operated television;
- planning and promoting food drives;
- planning and promoting healthy school fundraisers;
- participating in physical activity events to raise money for charity, e.g., walk-a-thons, bike-a-thons, jump roping and basketball tournaments;
- educating other students about timely nutrition and physical activity issues; and
- conducting peer-to-peer programs and peer mentoring programs.

**Partnering with Community Organizations**

Partnering with community organizations allows districts to more effectively promote consistent health messages. Many organizations are willing to work with local school districts to support and promote nutrition and physical activity initiatives. Examples of potential partners include:

- nonprofit health organizations, e.g., American Cancer Society, American Heart Association and American Diabetes Association;
- Cooperative Extension, Expanded Food and Nutrition Education Program (EFNEP);
- YMCA/YWCA;
- Boy Scouts and Girl Scouts;
- Boys and Girls Clubs, 4-H clubs;
- local civic organizations, e.g., Kiwanis, Lions or Rotary Club;
- faith-based groups;
- School Readiness Councils;
- local elected officials;
- law enforcement officials;
- armed services;
- town park and recreation programs;
- youth sports leagues;
- libraries;
- local hospitals, clinics and medical associations;
- local medical professionals;
- local health organizations and coalitions;
- local businesses;
Implementation Guidance

- commercial fitness centers;
- physical fitness programs for children with disabilities, e.g., Unified Sports and Special Olympics;
- local universities/colleges and their students; and
- local health departments/districts.

Schools can partner with community organizations to provide a variety of activities related to nutrition, physical activity and student wellness. Some ideas include:

- conducting meetings to discuss nutrition and physical activity topics;
- participating in community-based nutrition education campaigns (such as 5 A Day) sponsored by public health agencies or organizations;
- participating in educational physical activity fundraisers, e.g., the American Heart Association’s Jump Rope for Heart and Hoops for Heart (http://www.americanheart.org), and the American Diabetes Association’s School Walk for Diabetes (http://schoolwalk.diabetes.org);
- working with local community leaders to provide Kids Walk-to-School Program (http://www.cdc.gov/nccdphp/dnpa/kidswalk/index.htm);
- working with community organizations and businesses to provide time and space for physical activities;
- working with nonprofit health organizations to promote consistent media messages at school and in the community;
- recruiting local organizations and businesses to participate in school health and fitness fairs;
- cosponsoring nutrition and physical activity events in local schools, e.g., Project ACES – All Children Exercise Simultaneously (http://www.lensaunders.com/aces/aces.html);
- obtaining local funding, services and other resources for local nutrition and physical activity programs and activities;
- working with local hospitals to provide wellness programs for students, families and school staff members;
- inviting local university/college students to conduct nutrition and physical activity initiatives;
- conducting outreach on nutrition and physical activity through Family Resource Centers and School-Based Health Centers;
- volunteering with Unified Sports (a division of Special Olympics) to help with local community events for children with cognitive and physical impairments (http://www.casciacc.org/ciacindex.shtml); and
- promoting a “loaned executive” program between the school system and local hospitals, organizations and businesses in order to provide additional professional services to schools, e.g., a local hospital donating the time of a registered dietitian to work with the district on policy development policy.

Resources to assist with community-based initiatives are found in Partnering with Community Organizations under Resources at the end of this section.
Food Marketing in Schools
Many marketing techniques target the promotion of foods of low-nutrient density, i.e., foods that are high in calories from fat and/or added sugars but contain relatively few, if any, vitamins and minerals. In order to promote healthy food choices, schools should not allow advertising that promotes less nutritious food and beverage choices. Acceptable and unacceptable marketing techniques are summarized in the chart below.

Acceptable and Unacceptable Marketing Techniques

Acceptable Marketing Activities (promote healthful behaviors)
- Vending machine covers promoting water
- Pricing structures that promote healthy options in a la carte lines or vending machines
- Sales of fruit or other healthy foods for fundraisers
- Coupons for discount gym memberships
- Healthy eating messages provided in a variety of venues, e.g., posters, school newsletter, menu backs, school-operated television, intercom announcements, etc.

Not Acceptable (promote foods and beverages of low-nutrient density)
- Logos and brand names of foods and beverages of low-nutrient density on or in vending machines, books or curriculums, textbook covers, school supplies, scoreboards, school structures and sports equipment
- Educational incentive programs that provide food as a reward
- Programs that provide schools with supplies when families buy foods and beverages of low-nutrient density
- In-school television, e.g., Channel One
- Free samples or coupons for foods and beverages of low-nutrient density
- Fundraising activities using foods and beverages of low-nutrient density


Promoting School Meals
When marketing is used in schools, it should promote good nutrition, healthy foods and physical activity. School food service programs can use marketing to promote healthy school meals and food choices. Meals can be marketed in the classroom and related to the curriculum. They can also be marketed in the cafeteria using signage, food samples, giveaways and other promotional events such as theme days. Schools can also involve families through menus, take-home newsletters, invitations to family meals at school and presentations at parent organizations.

Promotions can be powerful marketing tools that have a direct, meaningful impact on customers and their purchasing decisions. As customers of the school food service program, students, faculty and
Implementation Guidance

staff members have choices to make in deciding what to purchase and what not to purchase. Effective nutrition promotions can encourage choices of healthy foods and beverages. Promotions can be used to:

- show customers that the school food service department cares about them and places a high priority on health and nutrition;
- get customers excited or interested in the programs so that they keep participating;
- highlight specific services or products;
- introduce new items on a continual basis, such as highlighting a new recipe on the menu or featuring a new item each month;
- introduce or reinforce an identity or a marketing theme, such as National School Lunch Week or School Breakfast Week;
- celebrate a nutrition and health awareness event, such as National Nutrition Month and National Diabetes Month (see http://healthfinder.gov/nho/default.aspx for a list of national health observances);
- establish a distinctive image or “brand” for the school food service department; and
- reinforce the school food service department’s role in the total school environment by collaborating on special school activities and events.

Promotions are designed to cause action. Ultimately, a promotion is designed to change some attitude or belief and/or cause customers to buy something. For instance, a promotion may be designed to convince students that the fruits and vegetables on the school salad bar taste good or that they want to eat breakfast at school. National School Lunch Week and School Breakfast Week, for example, are designed around annual themes to promote the value of school meals to the entire school community. A promotion may strive to influence students to buy the reimbursable meal in general or to try a new product in particular.

For additional information, see Marketing under Resources at the end of this section and Nutrition Promotion in Section 3 – Nutrition Education and Promotion.

Media

The media can expand the reach of school district efforts, reinforce messages throughout the community, and increase public support for a healthy school nutrition environment. Some strategies for using the media include:

- announcing school menus daily on local radio and television programs, and having them printed in the local newspaper;
- writing an opinion piece on school nutrition and physical activity issues for the local paper;
- inviting local media to attend nutrition and physical activity events at your school;
- inviting a local radio station to broadcast from the school; and
- appearing on local television and radio talk shows to discuss local nutrition and physical activity issues, program and activities.

USDA’s Changing the Scene (http://www.fns.usda.gov/tn/healthy/changing.html) contains tips and resources to help schools work with the media. Additional resources are found in Working with the Media under Resources at the end of this section.
References


Guidelines for School Health Programs to Promote Lifelong Healthy Eating, Centers for Disease Control and Prevention, MMWR, June 14, 1996/45(RR-9);1-33: http://www.cdc.gov/mmwr/preview/mmwrhtml/00042446.htm


7 Communication and Promotion

Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

Engaging Families

Click on the SDE’s Healthy School Environment Resource List, then click on Engaging Families under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Engaging Students

Click on the SDE’s Healthy School Environment Resource List, then click on Engaging Students under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Partnering with Community Organizations

Click on the SDE’s Healthy School Environment Resource List, then click on Partnering with Community Organizations under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Marketing and Promotion

Click on the SDE’s Healthy School Environment Resource List, then click on Marketing and Promotion under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Working with the Media

Click on the SDE’s Healthy School Environment Resource List, then click on Working with the Media under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Additional resources can be found in the SDE’s Healthy School Environment Resource List (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/hse_resource_list.pdf) and Nutrition-Related Resources (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/nutrition_resources.pdf). These lists are updated regularly.
Policy Component: Measurement and Evaluation

Goal
School districts will develop a plan for measuring implementation of the local district nutrition and physical activity policies, including designation of one or more persons with operational responsibility for ensuring that schools are addressing the policy.

Rationale
In order for policies to be successful, school districts must establish a plan for measuring implementation and sustaining local efforts, including evaluation, feedback and documentation based on sound evidence.

Policy Recommendations
Policies for Measurement and Evaluation will address the following areas:
- Monitoring
- Policy Review

Specific guidance regarding the implementation of each policy recommendation for Measurement and Evaluation follows under Implementation Guidance, after this section. Resources to assist with the implementation of each policy recommendation are found in Resources at the end of this section.

This section provides recommendations (not requirements) for policy language for Measurement and Evaluation. This language represents recommended best practice for developing school nutrition and physical activity policies. School districts may choose to use the policy recommendations as written or revise them as needed to meet local needs and reflect community priorities. When developing nutrition and physical activity policies, districts will need to take into account their unique circumstances, challenges, opportunities and available resources. Policies should meet local needs and be adapted to the health concerns, food preferences and dietary practices of different ethnic groups.
Policy Recommendations

**Monitoring**
The superintendent or designee shall ensure compliance with established districtwide nutrition and physical activity policies. In each school, the principal or designee shall ensure compliance with those policies in his or her school and shall report on the school’s compliance to the school district superintendent or designee. School food service staff members, at the school or district level, shall ensure compliance with nutrition policies within school food service areas and shall report on this matter to the superintendent (or if done at the school level, to the school principal).

**Policy Review**
Districts shall identify a strategy and schedule to help review policy compliance, assess progress and determine areas in need of improvement. As part of that process, the school district shall review nutrition and physical activity policies; new research and evidence on health trends and effective programs; provision of an environment that supports healthy eating and physical activity; and nutrition and physical education policies and program elements. The district and individual schools within the district shall, as necessary, revise the nutrition and physical activity policies and develop work plans to facilitate their implementation.
Implementation Guidance

Monitoring and Policy Review
Evaluation is critically important to education decision makers in a number of ways. It helps them to:
- develop well-designed policies and programs;
- ensure accountability to funding agencies;
- weigh and compare various solutions to identified problems;
- determine whether to support or oppose particular programs or policies;
- justify decisions to the general public, the legislature and the news media;
- build consensus among people with different political views; and
- make incremental improvements in policies and programs on a continuous basis.

A good evaluation plan does not need to be intimidating, extensive and resource intensive or put undue burdens on school district staff members. Its critical function is to answer some basic questions that are very important to policymakers, school administrators, families and the general public, including:

- What changes in nutrition education, physical activity, the nutritional quality of foods available to students, and other aspects covered by the policy occurred in each school as a result of the district policy? For example:
  - Did the number of students participating in nutrition education change?
  - Did the students have a different number of minutes of physical activity?
  - Did any schools change available food options?
  - Did participation in the School Breakfast Program or National School Lunch Program change?

- Did the policy and implementation address the issues identified in the needs assessment? For example:
  - Is it making a difference? If so, how?
  - What’s working?
  - What’s not working?

- How can the impact of the policy be increased to enhance its effect on student health and academic learning?

The types of evaluation methods used will be locally determined by school districts based on the components of their local nutrition and physical activity policies. Evaluation can include descriptions of any relevant changes in nutrition and physical activity in the district using a variety of methods, such as student, staff and parent surveys and collection of quantitative data regarding school nutrition and physical activity programs and practices. Policy evaluation can include assessment of the level of satisfaction with policy implementation, qualitative and quantitative analysis of any...
changes produced, and assessment of the consequences and impact. Information on the specific evaluation strategies used by Connecticut’s 10 pilot districts is found in Section 9 – School Nutrition Policies Pilots.

Several types of evaluation are relevant to school nutrition and physical activity, including process evaluation and outcome-based evaluation.

- **Process evaluation** assesses whether a program was implemented and operated as intended. It also addresses the questions of “why” and “why not.” Process evaluation indicators include contrasting actual and planned performance. Student and family satisfaction surveys are examples of process evaluation. School districts can use process evaluation to identify whether their nutrition and physical activity policies are being implemented as planned.

- **Outcome-based evaluation** assesses the results or impact of a program on the participants, e.g., students’ health status, absenteeism and dropout rates. Outcome evaluations depend on the stage of development of the program, and can be short-term, intermediate and long-term. Outcome evaluations represent a change that occurs as a result of the program and may include changes in the following outcomes:
  - knowledge
  - attitudes and beliefs
  - behavior
  - skills
  - risk or protective behaviors
  - life condition
  - environment (including public and private policies, formal and informal enforcement of regulations, and influence of social norms and other societal forces)

Outcome-based evaluation is a systematic way to determine if a project has achieved its goals. This approach helps organizations establish clear program benefits (outcomes), identify ways to measure the program benefits (indicators), and clarify the intended beneficiaries of the program.

**Indicators**
Evaluation requires the gathering of evidence or indicators. Indicators are specific, observable and measurable characteristics or conditions that indicate that a specific change has taken place. Indicators can be developed for activities (process indicators) and/or for outcomes (outcome indicators). Districts should choose indicators that relate to the local policy statements. Some examples of indicators are found in the chart on the next page.

School districts are encouraged to use outcome-based evaluation procedures to justify changes based on documented outcomes. Outcome-based evaluation helps school district staff members be better positioned to request and receive funding because the benefits and impact of the program can be described in very specific terms by identifying what the program will do for participants. It also helps school district staff members better communicate the benefits they intend to deliver to program participants.

However, districts should be aware that changes in outcome-based indicators take time; it can be many years before improvement occurs. It is important to note that the absence of change in outcome-based indicators does not necessarily indicate that a program or policy is unsuccessful.
Evaluation Indicators

**Process Evaluation**
- Number of students reached/impacted
- Number of teachers and other school staff members reached/impacted
- Economic status and racial/ethnic background of students reached/impacted
- Quality of services
- Cost of implementation
- Revenues generated from healthy foods sold at school
- Changes in health and physical education curriculums
- Changes in amount of time spent on physical education and recess
- Changes in before- and after-school physical activity opportunities
- Staffing for services or programs
- Meal participation rates for school breakfast and lunch
- Number/percent of foods that meet nutrition standards
- Number of people reached through education efforts
- Number of activities/meetings/events
- Number of classes/training sessions/workshops conducted

**Outcome-Based Evaluation**
- Student fitness tests (e.g., percent of students passing all four Connecticut Physical Fitness Assessments, percent of students passing the national Physical Best Challenge)
- Student Body Mass Index (BMI)
- Changes in student food choices (e.g., increased consumption of fruits and vegetables)
- Children’s nutrition status (e.g., prevalence of health conditions such as obesity, tooth decay, iron-deficiency anemia, diabetes)


**Evaluation Partnerships**
Districts may consider partnering with local hospitals, universities, health departments and other institutions for help with the evaluation process. Evaluations with outside providers must be conducted in a way that is in compliance with state and federal confidentiality laws, such as the Family Education Rights and Privacy Act (FERPA) and other state statutes.
Revising School Wellness Policy Language

The policy process is ongoing – it does not end with the development of the policy document. It is important for districts to regularly review policy compliance, assess progress and determine areas in need of improvement. The results of these local evaluation efforts will often necessitate review and revision of existing policy language.

A policy that met the district’s needs several years ago may no longer be relevant today. Policy revisions may be necessary to respond to:

- new research and evidence on health trends and effective programs;
- new national and state standards and guidelines regarding nutrition and physical activity;
- new local data regarding student health and achievement issues;
- new state and federal initiatives and legislation;
- local evaluation data regarding the effectiveness of policy implementation;
- changing district priorities; and
- other local, state and federal issues.

Districts may also want to use the results of policy content evaluation tools, such as the SDE School Wellness Policy Report, to assist in identifying those policy areas in need of improvement. (For additional information, see School Wellness Policy Report on the next page.)

Policy revisions will follow a similar process as outlined in Section 2 – Steps for Creating Local Policy. The School Health Team will need to make recommendations for revised policy language based on the issues noted above and local needs assessment data. The review process provides a good opportunity to revisit the School Health Index, prioritize district needs and develop an action plan (see Step 4: Prioritize Needs and Develop an Action Plan on page 30). Keep in mind the importance of communicating potential policy changes to the school community, including the rationale for any changes and a plan for implementation and evaluation of the revised policy.

School Wellness Policy Report

During the 2007-08 school year, the Connecticut State Department of Education conducted a review of district school wellness policies using a school wellness policy assessment tool developed in partnership with the Rudd Center for Food Policy and Obesity at Yale University. Based on this review, each district received a School Wellness Policy Report, which includes three components:

1. School Wellness Policy Report – an overall summary of the district’s scores, state averages and District Reference Group (DRG)* averages for seven school wellness policy categories: Nutrition Education; School Meals; Other School Food and Beverages; Physical Education; Physical Activity; Communication and Promotion; and Evaluation.*

Note: These categories correspond to the six policy categories in the Action Guide. Scores for the category of Nutrition Standards for School Foods and Beverages were
Implementation Guidance

- divided into two groups: 1) school meals; and 2) other foods and beverages.

2. **School Wellness Policy Rating Sheet** – the actual district coding for the 96 policy items that determine the scores for each of the seven policy categories.

3. **School Wellness Policy Report Comments Section** (if applicable) – a review of the district’s policy language for consistency with all applicable federal and state requirements, including suggestions for revising noncompliant language.

The district scores contained in the **School Wellness Policy Report** address the comprehensiveness and strength of each policy area. The **comprehensiveness** score refers to the proportion of items within each policy area that are simply mentioned by the district’s school wellness policy. The **strength** score refers to the proportion of items within each policy area that are addressed with specific and directive language. Weak statements are hard to enforce because they are vague and/or only recommended. They often use words such as may, can, could, should, might, encourage, suggest, urge, some, partial, make an effort and try. Strong statements include a concept followed by specific plans or strategies for implementation and wording that indicates action is required, such as shall, will, must, have to, insist, require, all, total, comply and enforce.

Information on the scoring methodology is provided in the **Coding Tool for Connecticut School Wellness Policies**, available at [http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/SWP/SW_CodingTool.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/SWP/SW_CodingTool.pdf). District scores are based on the **actual content** of the school wellness policy that each district submitted to the SDE, including regulations, action plans and any other policy documents. The report does not address implementation of the district’s school wellness policy. Evaluation of policy implementation should be done locally by the school district, as defined by the evaluation component of the district’s school wellness policy.

The SDE encourages districts to use the **School Wellness Policy Report** to help continue the work of the local school wellness team in implementing, promoting and evaluating the local school wellness policy. Districts can also use the **School Wellness Policy Rating Sheet and Coding Tool for Connecticut School Wellness Policies** to conduct a self-evaluation of any revised policies. All documents are available online at [http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#SW](http://www.sde.ct.gov/sde/cwp/view.asp?a=2626&q=320754#SW).

* District Reference Group (DRG) is a classification system in which districts that have public school students with similar socioeconomic status and need are grouped together. DRGs are based on the following seven variables: income, education, occupation, family structure, poverty, home language and district enrollment. Charter schools, Connecticut Technical High Schools, and regional educational service centers are not given DRGs. [http://www.csde.state.ct.us/public/cedar/databulletins/db_drg_06_2006.pdf](http://www.csde.state.ct.us/public/cedar/databulletins/db_drg_06_2006.pdf).
References

Child Nutrition and WIC Reauthorization Act of 2004 (Public Law 108-265):

http://www.nasbe.org/healthyschools/fithealthy.html


The Local Process: How to Create and Implement a Local Wellness Policy, U.S. Department of Agriculture, Team Nutrition Website:
http://www.fns.usda.gov/tn/Healthy/wellnesspolicy_steps.html
Resources

Resources are listed by main category. Many resources contain information on multiple content areas. For additional resources, consult each policy component section of the Action Guide.

Evaluation

Click on the SDE's Healthy School Environment Resource List, then click on Evaluation under School Policies to Promote Healthy Lifestyles to access resources on this topic.

Surveys


Additional resources can be found in the SDE’s Healthy School Environment Resource List (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/hse_resource_list.pdf) and Nutrition-Related Resources (http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/nutrition_resources.pdf). These lists are updated regularly.
Overview of Connecticut’s School Nutrition Policies Pilot

Background
The School Nutrition Policies Pilot was funded through a 2003-05 Team Nutrition grant from the U.S. Department of Agriculture (USDA) to the Connecticut State Department of Education (SDE). It was one of four activities intended to positively impact children’s healthy eating and physical activity habits through a statewide healthy school environment initiative. The initiative focused on:

- building statewide awareness of and support for a healthy school environment;
- promoting obesity prevention strategies for schools;
- motivating and empowering school leaders to take action; and
- providing the training, resources and assistance needed for successful implementation in local school districts.

From January 2004 through June 2005, 10 school districts participated in the Connecticut Team Nutrition School Nutrition Policies Pilot. The pilots worked to develop, adopt and implement school nutrition and physical activity policies. The districts included:

- Farmington Public Schools
- Franklin Elementary School
- Killingly Public Schools
- Milford Public Schools
- Norwalk Public Schools
- Putnam Public Schools
- Regional School District 10
- Ridgefield Public Schools
- Salem Public School
- Windham Public Schools

Goal
The goal of the pilot was to develop best practice models to help districts develop local policies and action plans for implementing healthy eating and physical activity practices in schools.

Application Process
The School Nutrition Policies Pilot application packet was mailed to school districts in October 2003 with an application deadline of December 1, 2003. The 10 pilot districts were selected from 27 applications based on a variety of criteria, including statement of need; expected benefits; potential impact; goals and objectives; evidence of partnerships and collaboration; evidence of administrative support; understanding of project scope; commitment of resources; composition of proposed School Health Team; and district size and geographical location.
School Nutrition Policies Pilots

OVERVIEW

Pilot Requirements
The pilot districts were required to meet the criteria indicated below.

1. Enroll participating schools as USDA Team Nutrition Schools (http://teamnutrition.usda.gov/team.html).

2. Develop a School Health Team using the CDC Coordinated School Health model, focusing on the nutrition and physical education components. Teams included at a minimum:
   - school or district administrator (e.g., superintendent, principal or school board member);
   - health education coordinator or teacher (e.g., health, family and consumer sciences);
   - physical education coordinator or teacher;
   - food service director;
   - school nurse or nurse supervisor; and
   - Parent Teacher Association (PTA) or Parent Teacher Organization (PTO) parent representative.

   School Health Teams were also encouraged to include other members appropriate to local needs, such as curriculum supervisors, school counselors, other school staff members, students, nutrition/health consultants and community members.

3. Develop an action plan to provide and support a healthy school environment, through implementation of nutrition and physical activity policies that address:
   - a commitment to nutrition and physical activity;
   - quality school meals;
   - other healthy food options (e.g., vending, fundraising, classroom parties);
   - pleasant eating experiences (e.g., clean, safe and pleasant cafeteria, time to eat);
   - nutrition education; and
   - physical education.

   The action plan identified 1) the specific actions needed to meet each district objective; 2) the materials, resources and personnel needed for implementing each action; 3) timelines for achieving each action; and 4) how pilots would document each action was achieved. Each pilot submitted a draft of its action plan to SDE within the first six months of the project (by June 2004).

4. Promote Team Nutrition’s four key messages and behavior outcomes for children:
   - eat a variety of foods;
   - eat more fruits, vegetables and grains;
   - eat lower-fat foods more often; and
   - be physically active.

OVERVIEW

6. Complete a pre- and post-assessment survey. All team members completed a survey to evaluate the school nutrition environment in their district, both before and after the pilot project.

7. Complete a School Health Team final evaluation survey regarding the policy development process to summarize all activities that took place and provide an overview of how the process worked in the district.

Support Training
School Health Teams attended the State Department of Education’s two-day summit, *Making the Connection: Healthy Kids Learn Better* (March 2004), which focused on strategies to promote student achievement by improving the school environment and policies related to healthy eating and physical activity. Nationally renowned speakers addressed a variety of topics, including the relationship between health and academic success, the CDC Coordinated School Health approach, student health and education reform, the role of student health in No Child Left Behind, action steps for success, and models that work.

Four quarterly support workshops were also provided during the project to assist the School Health Teams with the policy development process. The workshops focused on a variety of topics to provide resources and support for team members during the policy development process. Each workshop was four hours in length, with the exception of the first workshop, which was a day-long session.

- **Tools for Schools: Let’s Get Practical** (April 2004): Oriented teams to the use of resources to help districts implement policies and practices for a healthy school nutrition environment, including the School Health Index, Changing the Scene, and Fit, Healthy and Ready to Learn.
- **Building School Partnerships for Academic Success** (September 2004): Overview of how districts can implement the Coordinated School Health model for better student health and learning.
- **Sharing Strategies for Success** (December 2004): Sharing and group discussion regarding each district’s progress with the School Nutrition Policies pilot, including challenges, successes and strategies for districtwide adoption, support and promotion of local policies.
- **Putting the Pieces Together** (May 2005): Sharing and group discussion on completion of the policy development process, and next steps and resources for moving forward with policy implementation.
Support Resources
School Health Teams received materials and other resources to support policy development and implementation. The pilots were provided with several key resources to assist with the policy development process.


- **Promoting Healthy Youth, Schools and Communities: A Guide to Community-School Health Advisory Councils.** Iowa Department of Public Health, 2000. [http://www.idph.state.ia.us/hpcdp/promoting_healthy_youth.asp](http://www.idph.state.ia.us/hpcdp/promoting_healthy_youth.asp)


- **Healthy School Environment Handout Series: Healthy Fundraising, Healthy Celebrations, Alternatives to Food as Reward.** Connecticut State Department of Education. [http://www.state.ct.us/sde/deps/Student/NutritionEd/index.htm](http://www.state.ct.us/sde/deps/Student/NutritionEd/index.htm)


- **List of Nutrition-Related Websites.** Connecticut State Department of Education. [http://www.state.ct.us/sde/deps/Student/NutritionEd/index.htm](http://www.state.ct.us/sde/deps/Student/NutritionEd/index.htm)

An e-mail distribution group provided another support resource for the School Health Teams. All team members received regular e-mails with updates on resources, programs and other information related to nutrition, physical activity, policy development and student achievement.

**Funding**
Each district received a stipend of $3,500 for the 18-month pilot. These funds primarily covered substitute pay and travel for members of the School Health Team to attend trainings and meetings, both within the district and at the state level. Districts could also spend the funds on appropriate resources and copying, distribution and promotion of policy materials.
OVERVIEW

Pilot Results

Existence of School Health Team
The majority of the pilot districts (80 percent) did not have a School Health Team in place prior to the pilot project. Of the two districts that did have a School Health Team in place, neither addressed physical activity issues and only one addressed nutrition issues.

School Health Team Membership
The School Health Teams ranged in size from 6 to 11 members. Table 1 summarizes the percentages of the 10 teams with representation from each member group.

### Table 1. Representation on School Health Teams

<table>
<thead>
<tr>
<th>Team Member</th>
<th>Percent of Teams with Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Educator</td>
<td>90%</td>
</tr>
<tr>
<td>Physical Education Teacher</td>
<td>90%</td>
</tr>
<tr>
<td>School Nurse</td>
<td>90%</td>
</tr>
<tr>
<td>School Food Service</td>
<td>90%</td>
</tr>
<tr>
<td>Parent Representative</td>
<td>90%</td>
</tr>
<tr>
<td>School Principal or Assistant Principal</td>
<td>70%</td>
</tr>
<tr>
<td>Health and Physical Education Coordinator</td>
<td>40%</td>
</tr>
<tr>
<td>Family and Consumer Sciences Teacher</td>
<td>40%</td>
</tr>
<tr>
<td>School Board Member</td>
<td>40%</td>
</tr>
<tr>
<td>Community Group Representative*</td>
<td>40%</td>
</tr>
<tr>
<td>Dietitian</td>
<td>30%</td>
</tr>
<tr>
<td>Social Worker</td>
<td>10%</td>
</tr>
<tr>
<td>School Superintendent</td>
<td>10%</td>
</tr>
<tr>
<td>Curriculum Director</td>
<td>10%</td>
</tr>
<tr>
<td>Other Teacher (math)</td>
<td>10%</td>
</tr>
<tr>
<td>Other Teacher (special education)</td>
<td>10%</td>
</tr>
<tr>
<td>Local Health Department Representative</td>
<td>10%</td>
</tr>
<tr>
<td>Chef</td>
<td>10%</td>
</tr>
<tr>
<td>Family Resource Center Staff</td>
<td>10%</td>
</tr>
<tr>
<td>School-Based Health Center Staff</td>
<td>10%</td>
</tr>
</tbody>
</table>

* Included representatives from the American Cancer Society, local health department and local hospitals
Importance of Member Representation
Each of the School Health Teams rated team member categories in terms of how critical it was to the policy development process to have representation from each group. Each member category was rated on a scale of “Not Critical” (0) to “Extremely Critical” (3). The top rated team members (indicated by a rating of 2.0 or higher) included school food service, parent representative, health educator, physical education teacher, school nurse and school principal or assistant principal. The results are summarized in Table 2.

Table 2. Rating of Importance of Member Representation

<table>
<thead>
<tr>
<th>Team Member</th>
<th>Average Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Food Service</td>
<td>2.7</td>
</tr>
<tr>
<td>Parent Representative</td>
<td>2.5</td>
</tr>
<tr>
<td>Health Educator</td>
<td>2.4</td>
</tr>
<tr>
<td>Physical Education Teacher</td>
<td>2.3</td>
</tr>
<tr>
<td>School Nurse</td>
<td>2.3</td>
</tr>
<tr>
<td>School Principal or Assistant Principal</td>
<td>2.3</td>
</tr>
<tr>
<td>Health and Physical Education Coordinator</td>
<td>1.9</td>
</tr>
<tr>
<td>Family and Consumer Sciences Teacher</td>
<td>1.7</td>
</tr>
<tr>
<td>Dietitian</td>
<td>1.6</td>
</tr>
<tr>
<td>School Board Member</td>
<td>1.5</td>
</tr>
<tr>
<td>Community Group Representative</td>
<td>1.2</td>
</tr>
<tr>
<td>Local Health Department Representative</td>
<td>1.2</td>
</tr>
<tr>
<td>School Superintendent</td>
<td>0.9</td>
</tr>
<tr>
<td>Curriculum Director</td>
<td>0.9</td>
</tr>
<tr>
<td>Other Members (included PTO representative, Family Resource Center staff, students and School Store Advisor)</td>
<td>0.7</td>
</tr>
<tr>
<td>Social Worker</td>
<td>0.5</td>
</tr>
<tr>
<td>Guidance Counselor</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Policy Adoption
Three of the pilot districts had their policies adopted by their boards of education by completion of the pilot project in September 2005. Of the seven districts that did not adopt the policies during the pilot time frame, six completed the process in the 2005-06 school year. One district’s policy was approved by the superintendent in December 2005 and five districts brought the policies to their boards for adoption during the 2005-06 school year. At the completion of the pilot project, one district was still working on the policy development process.
Time for Team Meetings
During the pilot time frame, the majority of School Health Teams met from 8 to 12 times with most meetings lasting 1 to 2 hours. Some districts also used longer sessions on professional development days for the School Health Team to complete a large portion of their work. Some teams developed small subcommittees to work on draft policy language outside of the scheduled team meeting time.

Continuation of School Health Team
Nine of the districts (90 percent) indicated that they would continue their School Health Team after completion of the pilot project. Plans for future tasks included policy promotion and implementation; staff training; planning events and activities for school and community; and expanding the team to include additional members and address new issues.

Barriers to Policy Development
Each School Health Team was asked to rate perceived barriers to the policy development process, on a scale of “never a barrier” (0) to “always a barrier” (2). The pilots indicated that the greatest barrier to policy development was irregular meeting attendance by team members, followed by finding time to hold team meetings. Insufficient administrative support, lack of “buy-in” or support from school staff members, and turnover of team members were not frequently encountered barriers. The pilot districts did not consider insufficient funding and insufficient training to be barriers to the policy development process. Some of the districts indicated other barriers, including:

- administration not making top-down recommendations;
- team members having their own agendas;
- lack of a physical education administrator;
- inflexibility of the food service department in making changes; and
- lack of health/nutrition curriculum information.

The results are summarized in Table 3.

<table>
<thead>
<tr>
<th>Barrier</th>
<th>Scale: Never (0), Sometimes (1), Always (2)</th>
<th>Average Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irregular meeting attendance by School Health Team members</td>
<td>1.2</td>
<td></td>
</tr>
<tr>
<td>Finding time to hold School Health Team meetings</td>
<td>0.9</td>
<td></td>
</tr>
<tr>
<td>Insufficient administrative support for the policy development process</td>
<td>0.7</td>
<td></td>
</tr>
<tr>
<td>Lack of “buy-in” or support from school staff members</td>
<td>0.6</td>
<td></td>
</tr>
<tr>
<td>Turnover of School Health Team members</td>
<td>0.5</td>
<td></td>
</tr>
<tr>
<td>Insufficient funding for the policy development process</td>
<td>0.3</td>
<td></td>
</tr>
<tr>
<td>Insufficient training on policy development</td>
<td>0.3</td>
<td></td>
</tr>
<tr>
<td>Insufficient materials and resources on policy development</td>
<td>0.0</td>
<td></td>
</tr>
</tbody>
</table>
Policy Development Resources

Each School Health Team was asked to rate the resources used in terms of their value to the policy development process (see Table 4 below). The School Health Index was rated as the most valuable resource, with 70 percent of the pilots rating it as “extremely valuable.” Other policy development resources rated as valuable (2.0 or higher) included resources at workshops, technical assistance provided by SDE, support workshops, e-mail information, Fit, Healthy and Ready to Learn and the SDE healthy school nutrition environment handout series.

Table 4. Usefulness of Policy Development Resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Average Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Health Index (Centers for Disease Control and Prevention)</td>
<td>2.5</td>
</tr>
<tr>
<td>Resources provided at SDE’s workshops</td>
<td>2.4</td>
</tr>
<tr>
<td>Technical assistance provided by SDE (e.g., phone support, additional materials, etc.)</td>
<td>2.4</td>
</tr>
<tr>
<td>SDE’s support workshops (Tools for Schools: Let’s Get Practical, Building School Partnerships for Academic Success, Sharing Strategies for Success, and Putting the Pieces Together)</td>
<td>2.4</td>
</tr>
<tr>
<td>Resources provided via e-mail distribution group</td>
<td>2.3</td>
</tr>
<tr>
<td>Fit, Healthy and Ready to Learn (National Association of State Boards of Education)</td>
<td>2.1</td>
</tr>
<tr>
<td>Alternatives to Food as Reward Handout (Connecticut State Department of Education)</td>
<td>2.2</td>
</tr>
<tr>
<td>Healthy Fundraising Handout (Connecticut State Department of Education)</td>
<td>2.2</td>
</tr>
<tr>
<td>Step-By-Step Guide to Coordinated School Health (ETR Associates)</td>
<td>1.7</td>
</tr>
<tr>
<td>Promoting Healthy Youth, Schools and Communities: A Guide to Community-School Health Advisory Councils (ACS and Iowa Department of Public Health)</td>
<td>1.3</td>
</tr>
<tr>
<td>Changing the Scene (U.S. Department of Agriculture)</td>
<td>1.1</td>
</tr>
</tbody>
</table>
Policy Promotion Strategies
The School Health Teams used a variety of strategies to promote their policies to students, families, school staff members and the community (see Table 5). All of the pilots held meetings for parents and provided a newsletter to update parents on activities related to the policy development process. Most districts (90 percent) held meetings with school staff members. The majority also used the media, parent mailings, school newsletter, school district website and e-mails to school staff members. Sixty percent held meetings with community groups, and 50 percent included information in staff and parent handbooks.

Table 5. Strategies Used to Promote Policies

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Percent of Pilots</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meetings with parents</td>
<td>100%</td>
</tr>
<tr>
<td>Newsletter for parents</td>
<td>100%</td>
</tr>
<tr>
<td>Meetings with school staff members</td>
<td>90%</td>
</tr>
<tr>
<td>Meetings with board of education</td>
<td>80%</td>
</tr>
<tr>
<td>Media (newspapers, television, radio)</td>
<td>80%</td>
</tr>
<tr>
<td>Mailings to parents</td>
<td>80%</td>
</tr>
<tr>
<td>Newsletter for school staff members</td>
<td>80%</td>
</tr>
<tr>
<td>School district website</td>
<td>70%</td>
</tr>
<tr>
<td>E-mails to school staff members</td>
<td>70%</td>
</tr>
<tr>
<td>Meetings with community groups</td>
<td>60%</td>
</tr>
<tr>
<td>Staff handbook</td>
<td>50%</td>
</tr>
<tr>
<td>Parent handbook</td>
<td>50%</td>
</tr>
<tr>
<td>Other (Staff informational packet on student nutrition and physical activity)</td>
<td>10%</td>
</tr>
</tbody>
</table>
Benefits of Participating in the School Nutrition Policies Pilot

All of the pilots indicated that the following were benefits of participating in the policy development process:

- improved communication among different school staff disciplines;
- improved understanding regarding the challenges of different school disciplines, e.g., teaching, food service and nursing;
- formation of a School Health Team;
- improved coordination of school health activities;
- improved administrative support;
- increased awareness among school staff members regarding the importance of nutrition and physical activity;
- increased awareness among parents regarding the importance of nutrition and physical activity;
- improved school practices regarding nutrition and physical activity; and
- increased access to resources on nutrition, physical activity and health/achievement.

Eighty percent of the pilots also indicated that increased awareness among students regarding the importance of nutrition and physical activity was a benefit. Two districts indicated other benefits, including:

- seeing the changes and thought process involved in improving the school environment; and
- dramatic overall improvement in districtwide awareness, with plans for formation of a health team in all schools throughout the district.

Pilots’ Perceptions of Results

The School Health Teams were asked to rate several statements regarding the pilot project on a scale of “strongly disagree” (1) to “strongly agree” (4). Table 6 ranks these statements by overall average rating. The teams rated the SDE technical assistance and the e-mail group as highly valuable to the policy development process. The majority of the pilots either “strongly agreed” (50 percent) or “agreed” (40 percent) that the district benefited from the pilot. Thirty percent of the districts “strongly agreed” and 60 percent “agreed” that they accomplished the pilot objectives. As indicated by a rating of 3.0 or higher, the pilots also agreed that:

- our administration provided the needed support to accomplish our goals;
- we have a more coordinated approach to promoting student health; and
- collaboration between different school groups (e.g., teachers, food service, nurse, administrators, etc.) is enhanced.

The pilots’ ratings indicated that they felt it would have been more difficult to complete the project without the stipend or the support workshops.
## Table 6. School Health Teams’ Perception of Pilot Results

<table>
<thead>
<tr>
<th>Statement</th>
<th>Average Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>The technical assistance provided by the State Department of Education...</td>
<td>3.4</td>
</tr>
<tr>
<td>The School Nutrition Policies e-mail group provided valuable information...</td>
<td>3.4</td>
</tr>
<tr>
<td>The pilot project has benefited our school district.</td>
<td>3.3</td>
</tr>
<tr>
<td>Our School Health Team accomplished the pilot project objectives.</td>
<td>3.2</td>
</tr>
<tr>
<td>Our administration provided the needed support to accomplish our goals.</td>
<td>3.1</td>
</tr>
<tr>
<td>We have a more coordinated approach to promoting student health.</td>
<td>3.0</td>
</tr>
<tr>
<td>Collaboration between different school groups (e.g., teachers, food serv...</td>
<td>3.0</td>
</tr>
<tr>
<td>Our accomplishments will be sustainable after completion of the pilot pro...</td>
<td>2.9</td>
</tr>
<tr>
<td>Without the pilot project, it would have been difficult for us to develop...</td>
<td>2.9</td>
</tr>
<tr>
<td>School staff members provided the needed support to accomplish our goals.</td>
<td>2.7</td>
</tr>
<tr>
<td>We would have been able to accomplish the same results if we were not part...</td>
<td>2.2</td>
</tr>
<tr>
<td>We could have completed the project without the stipend.</td>
<td>1.8</td>
</tr>
<tr>
<td>We could have completed the project without the support workshops.</td>
<td>1.8</td>
</tr>
</tbody>
</table>
Pilot District Profiles

This section contains an individual district profile for each of the 10 School Nutrition Policies pilot districts. These profiles provide information on the actual “how-to” of the policy development process, as experienced by each of the pilot districts. Each profile includes:

- contact Information;
- district information (number of schools, enrollment and District Reference Group*)
- composition of the local School Health Team;
- steps and strategies used;
- activities conducted;
- challenges encountered;
- successes achieved;
- critical resources;
- successful team characteristics;
- evaluation methods; and
- recommendations for success.

Each of the districts took an individualized approach to the policy development process. Some districts were not able to present the policies for board of education adoption during the pilot time frame. At the conclusion of the pilot project, some policies were still in draft form, pending approval during the 2005-06 school year.

Note: The February 2006 publication of the Action Guide for School Nutrition and Physical Activity Policies included the original School Wellness Policy developed by each pilot district. These policies are not included in the April 2009 revision because they varied greatly in the comprehensiveness and strength of the areas addressed and did not contain all of the “model” language suggested in this guide. Additionally, state laws passed since the original development of the Action Guide have rendered some of the pilots' original policy language obsolete.

* District Reference Group (DRG) is a classification system in which districts that have public school students with similar socioeconomic status and need are grouped together. DRGs are based on the following seven variables: income, education, occupation, family structure, poverty, home language and district enrollment. Charter schools, Connecticut Technical High Schools and regional educational service centers are not given DRGs. For additional information, see http://www.csde.state.ct.us/public/cedar/databulletins/db_drg_06_2006.pdf.
School District Profile

<table>
<thead>
<tr>
<th>School District:</th>
<th>Farmington Public Schools</th>
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<tr>
<td>Grades:</td>
<td>K-12</td>
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<tr>
<td>Enrollment:</td>
<td>4,400</td>
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<tr>
<td>District Reference Group (DRG):</td>
<td>B</td>
</tr>
<tr>
<td>Number of Schools:</td>
<td>7</td>
</tr>
<tr>
<td>Team Leader:</td>
<td>Ed Manfredi, K-12 Health and Physical Education Department Chair</td>
</tr>
<tr>
<td>Address:</td>
<td>Farmington High School 10 Monteith Drive Farmington, CT 06032</td>
</tr>
</tbody>
</table>

School Health Team in Place before Pilot Project: No

School Health Team Members:
School principal, school nurse, school food service director, parent representative, health and physical education coordinator, health educator, physical education teacher, family and consumer sciences teacher and dietitian

Other People Who Should Have Been Included on the School Health Team:
Elementary classroom teachers and school social worker

Policy Adoption:
The final policy draft will be reviewed for board adoption during the 2005-06 school year.

Number of Times School Health Team Met: 8
Length of Each Meeting: 1.5 hours

Continuation of School Health Team after Pilot Completion:
The School Health Team will broaden its focus to include policy implementation as well as promotion and communication throughout the school district. The team will also move beyond nutrition and physical activity to other issues that affect student health and achievement.

Process for Identifying and Prioritizing Program Improvement Needs:
We used the School Health Index to get an initial sense of where we stood and to create the context for our discussions. We then used team member input and information gathering to prioritize our actions for policy development.

Steps Used for Policy Development and Adoption:
1. Developed the School Health Team.
2. Used the School Health Index (SHI) to identify areas of focus.
3. Expanded the team to include additional members for more representative input.
4. Reviewed the results of the SHI modules with the expanded team and brainstormed strategies.
5. Appointed a small subcommittee to draft initial policy statements using model language from existing resources (e.g., Fit, Healthy and Ready to Learn and Rhode Island’s School District Nutrition & Physical Activity Model Policy Language).
6. Shared initial draft with team and made changes based on group feedback.
7. Brought draft policy to administration for review.
8. Planned for policy adoption during the 2005-06 school year.
Challenges to the Policy Development Process:
- Time to meet as a group.
- Getting representation on the School Health Team from all the key people in the district.

Successes with the Policy Development Process:
- Increased awareness of nutrition and physical activity issues and possible alternatives to past practices.
- Increased communication and coordination among school staff members from different disciplines, which provides a foundation to continue our efforts.
- Increased coordination of district efforts around student health and learning.

Critical Resources Needed to Ensure Success with Policy Development:
- Getting the right people involved in the School Health Team.
- Materials to guide the work and time, e.g., policy development resources and model language.
- Administrative support.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Keep a solid focus on your priorities.
- Work hard to get everyone you want to the table.
- Use time wisely by keeping meeting agendas focused and on track.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Developed a high school parent newsletter that focuses the School Health Team’s work and provides resources and information to support parents.
- Developed a staff wellness project based on a 10,000 steps program. Participants were given a pedometer and invited to take part in our “Walk Across America” program.
- Developed a nutrition PowerPoint presentation for PTO meetings.
- Supported a Grade 7 World of Wellness Day and a high school program for Stress Free Connecticut Academic Performance Test (CAPT).
- Developed and implemented numerous curriculum revisions and program offerings within the context of wellness and school health. For example, health and physical education are combined into a full-year wellness course in Grades 9 and 10, with a focus on health literacy and physical activity promotion. For Grades 11 and 12, we have created semester-long electives (e.g., Personal Wellness, Social Dance and Strength and Conditioning) to better meet students’ needs for increased autonomy and choice. We have also revised and enhanced the health program at the middle school with an introduction to the concepts of wellness.

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- Parent newsletter.
- Information on the back of the school menu.
- Meetings with the board, the District Leadership Council and school staff members to provide implementation strategies and alternatives to previous practices.
- Distribution of a staff packet with essential information on policy implementation strategies and resources, e.g., alternatives to food as a reward, importance of recess, and physical activity guidelines.
- Districtwide “kickoff” event for families when policies are adopted, followed by support events at each local school.
Strategies for District Implementation of the Policies:
- The School Health Team will work with local school leadership through the District Leadership Council.

Methods for Evaluating Success of District Implementation of the Policies:
- Evaluation measures for physical activity will include parent surveys on students’ physical activity and collecting pre- and post-assessment data on student recess logs (e.g., how much time is spent being active versus inactive time due to lack of play, make-up work, disciplinary action and instrumentals).
- Additional evaluation measures for nutrition and other policy areas will be determined after the policy has been adopted by the board of education.

Recommendations for Success with the Policy Development Process:
- Ensure that the School Health Team has good representation and includes all of the right people.
- Enlist the help of those individuals who can champion your efforts at the local school level.
- Communicate regularly with all schools regarding policy issues, e.g., problems, practices and solutions.
- Focus on policy implementation (e.g., developing resources and strategies for school-level implementation), not just the development of the policy document.
School Nutrition Policies Pilots

FRANKLIN ELEMENTARY SCHOOL

School District Profile

<table>
<thead>
<tr>
<th>School District:</th>
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<th>Enrollment: 236</th>
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</thead>
<tbody>
<tr>
<td>Number of Schools:</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Team Leader:</td>
<td>Jenny Spellman</td>
<td>Phone: 860-642-7063</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td>School Nurse</td>
<td>E-mail: <a href="mailto:jspellman@franklin.k12.ct.us">jspellman@franklin.k12.ct.us</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Franklin Elementary School</td>
<td>Website: Unavailable</td>
<td></td>
</tr>
<tr>
<td></td>
<td>206 Pond Road</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Franklin, CT 06254</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

School Health Team in Place before Pilot Project: No

School Health Team Members:
School board member, school principal, school nurse, school food service, parent representative and health and physical education coordinator

Other People Who Should Have Been Included on the School Health Team:
Parent Teacher Organization

Policy Adoption:
The nutrition and health policy was adopted in December 2004 but has since been revised and will be presented again for adoption in January 2006. The physical activity policy is also scheduled for consideration in January 2006.

Number of Times School Health Team Met: 10
Length of Each Meeting: ½ to 3 hours

Continuation of School Health Team after Pilot Completion:
Future plans for the School Health Team include 1) exercise room and equipment; 2) endorse policies already in effect; 3) continue to review policies (School Wellness Policy, incorporate student component); 4) review guidelines for nutrition/physical education curriculum; 5) implement School Policy Handbook; and 6) continue to collaborate with PTO and community.

Process for Identifying and Prioritizing Program Improvement Needs:
The School Health Index modules were used to identify needs. The School Health Team prioritized needs based on resources and feasibility.

Steps Used for Policy Development and Adoption:
1. Identified needs.
2. Reviewed old and current policies.
3. Obtained sample policies from Connecticut Association of Boards of Education (CABE).
4. Team chose most applicable policies and added new information.
5. Presented draft policies to board of education.
6. Board of education approved policies.
School Nutrition Policies Pilots

FRANKLIN ELEMENTARY SCHOOL

Challenges to the Policy Development Process:
- Implementing healthier cafeteria choices without negatively affecting the food service budget.

Successes with the Policy Development Process:
- The policy development process ran smoothly due in large part to dedicated team members.
- We felt a great sense of accomplishment in meeting all deadlines and completing and adopting our policies. It was satisfying to see the team progress toward our goals.
- We feel our greatest success is increased awareness of the need for policy development (and the changes that are associated with it) within our school and community.

Critical Resources Needed to Ensure Success with Policy Development:
- Critical resources include helpful materials (e.g., School Heath Index; Fit, Healthy and Ready to Learn; SDE’s Healthy Fundrasing and Alternatives to Food as Reward handouts; and CABE sample policies), dedicated team members, and support of the staff and administration.
- We felt that parent/guardian contribution and support is one of the most critical resources because they will be enforcing the healthy lifestyle ideas taught in school. We find that parents continue to pack “junk food” and soda in students’ lunches.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Members who are dedicated to the initiative.
- Members who work well together.
- Representation from a variety of specialties.
- Regularly scheduled meetings.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Policies for healthy eating (including fundraising policy) and physical activity approved by board of education.
- School Wellness Policy is almost complete — we need to add student component.
- Conducted Food Play assembly in June 2005 for students, staff and parents (www.foodplay.com/).
- Informational brochures on healthy eating and physical activity on display in school.
- School Health Team attended workshops throughout the pilot project.
- Healthy Fundrasing and Alternatives to Food as Reward handouts provided to staff members and community.
- Health Education Assessment Project (HEAP) training conducted for staff in August 2005.
- Developed School Health Policy handout to educate school staff members.
- Planned and promoted fitness room for the 2005-06 school year.
- Promoting recess before lunch and working on implementation in the 2005-06 school year.

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- We have been promoting awareness through the school newsletter, information in teachers’ mailboxes, bulletin boards, pamphlets, staff health handbook, Food Play assembly and school newspaper.
- We plan to continue these communication strategies, as well as involve students and parents in questionnaires regarding lunch menu choices.
- We are also planning an in-service day for all staff members in 2005-06.
School Nutrition Policies Pilots

FRANKLIN ELEMENTARY SCHOOL

Strategies for District Implementation of the Policies:
- Staff members will be informed as policies are adopted.
- A staff handbook of health and nutrition policies will be available for staff review and sign-off.

Methods for Evaluating Success of District Implementation of the Policies:
- Assess whether lunches brought from home are healthier.
- Assess participation in School Lunch Program.
- Follow up with teachers on success with alternatives to food as a reward and healthy alternatives for fundraisers.
- Review questionnaire that will be sent home to students and parents.

Recommendations for Success with the Policy Development Process:
- Plan consistent meeting schedules (regular meetings).
- Stick to goals and time frames for meeting them.
- Promote communication between team members, school staff members and the community.
- Ensure that team members are committed to the team’s purpose and goals.
- Have a parent on the team to spread the word to other parents.
- Involve a board member or any person who is knowledgeable about policy development.
School District Profile

School District: Killingly Public Schools
Grades: K-12
Enrollment: 3,556

Number of Schools: 5

District Reference Group (DRG): G

Team Leader: Sandra Maynard
Nurse Supervisor

Address: Killingly Central School
60 Soap Street
Dayville, CT 06241

Phone: 860-779-6755
E-mail: smaynard@killinglyschools.org
Website: http://www.killingly.k12.ct.us

School Health Team in Place before Pilot Project: No

School Health Team Members:
School principal, school nurse, social worker, health and physical education coordinator, health educator, physical education teacher and math teacher

Other People Who Should Have Been Included on the School Health Team
Food service director

Policy Adoption:
We were unable to complete the policy development process during the pilot time frame. The policy will be brought to the board once all assessment surveys are completed and policy language is finalized.

Number of Times School Health Team Met: 10
Length of Each Meeting: 1½ hours

Continuation of School Health Team After Pilot Completion:
The School Health Team will continue to work on policy development as time allows to complete the process.

Process for Identifying and Prioritizing Program Improvement Needs:
We used the School Health Index (SHI) to identify areas of strengths and weaknesses.

Steps Used for Policy Development and Adoption:
1. Using the eight SHI module questionnaires, we identified the areas that were rated “2” (partially in place).
2. Each area was reviewed to see why it was rated “2” and what was missing that kept it from being a “3” (fully in place).
3. Once all “2” areas were examined, the committee requested staff feedback on how to implement the missing parts of the components.
4. The committee developed questionnaires for parents, staff members and students. Data from the questionnaires will be used to identify the district deficits in physical activity and nutrition.
Challenges to the Policy Development Process:
- Ongoing problems with regular meeting attendance by team members.
- Lack of interest and participation from some team members who were critical to the policy development process.
- Other priorities for administrative attention and support due to new building project and accreditation issues.

Successes with the Policy Development Process:
- We formed a School Health Team for the first time in our town.
- We evaluated our schools through the School Health Index.

Critical Resources Needed to Ensure Success with Policy Development:
- Time to conduct surveys, collect and analyze data, and conduct staff meetings to develop and finalize policy language.
- If team needs to be reimbursed for meeting times outside of school hours, money is needed.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- A full working committee representing the entire school community.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Compiled assessment surveys for students, parents and school staff members.
- Instituted Project ACES – All Children Exercise Simultaneously (http://www.projectaces.com/).
- Participated in Connecticut at PLAY! Promoting Lifestyle Activity for Youth.
- Encouraged heightened awareness of health, nutrition and physical activity through a variety of programs, including running clubs at school, a morning exercise program, healthy snack alternatives, a hand-washing program, and a grant that supported an after-school program.

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- We will continue to involve staff members, students and parents, and communicate with the board of education.

Strategies for District Implementation of the Policies:
- Implementation strategies will be determined upon completion of the policies.

Methods for Evaluating Success of District Implementation of the Policies:
- We plan to integrate our teacher and student surveys with our technology department. Student surveys will eventually be part of a lesson in the computer labs that will allow for greater use and tabulation of data.
- Specific evaluation measures and processes will be identified when the policies are completed.

Recommendations for Success with the Policy Development Process:
- Enlist cooperation and support from administrators to ensure that there is sufficient staff time to complete the work.
- Go slowly.
School District Profile

<table>
<thead>
<tr>
<th>School District:</th>
<th>Milford Public Schools</th>
<th>Grades:</th>
<th>K-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Schools:</td>
<td>14</td>
<td>Enrollment:</td>
<td>7,616</td>
</tr>
<tr>
<td>Team Leader:</td>
<td>Eileen Faustich</td>
<td>Phone:</td>
<td>(203) 783-3490</td>
</tr>
<tr>
<td>Address:</td>
<td>Food Service Director</td>
<td>E-mail:</td>
<td><a href="mailto:efaustich@milforded.org">efaustich@milforded.org</a></td>
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<td><a href="http://www.milforded.org">http://www.milforded.org</a></td>
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<td>Milford Public Schools</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>70 West River Street</td>
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</tr>
<tr>
<td></td>
<td>Milford, CT 06460</td>
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</tr>
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</table>

School Health Team in Place before Pilot Project: No

School Health Team Members:
School principal, school food service, school nurse, parent representative, health educator, physical education teacher and local health department representative

Other People Who Should Have Been Included on the School Health Team:
We would expand the group to include school-based staff members.

Policy Adoption:
The policy was approved by the superintendent on December 16, 2005.

Number of Times School Health Team Met: 8
Length of Each Meeting: 1.5 hours

Continuation of School Health Team after Pilot Completion:
The School Health Team will continue. Future plans include working on a three-year action plan for continued policy implementation and evaluation.

Process for Identifying and Prioritizing Program Improvement Needs:
We used the School Health Index (Centers for Disease Control and Prevention).

Steps Used for Policy Development and Adoption:
1. Completed the School Health Index.
2. Prioritized the areas of improvement through group discussion.
3. Reviewed sample policies for language consideration, e.g., Fit, Healthy and Ready to Learn and Rhode Island’s School District Nutrition & Physical Activity Model Policy Language.
4. Developed an action plan for policy development.
5. Wrote the draft policy. Each team member took his or her area of expertise and drafted language, and we involved school administration for guidance as needed.
6. Discussed and revised draft policy language during several team meetings.
7. Submitted final draft to superintendent for review and approval.
8. Continue to meet as a committee to promote school-based and district policies.
School Nutrition Policies Pilots

MILFORD PUBLIC SCHOOLS

Challenges to the Policy Development Process:
- Scheduling meetings was challenging, but we agreed on a common meeting date (once per month) so it became a routine monthly meeting.

Successes with the Policy Development Process:
- Collaboration between different school departments, such as teachers, food service and nurse. Getting the School Health Team together was the best part of the pilot. It was beneficial to have everyone on the same team.
- Provided the momentum for school staff members to coordinate with each other on additional activities within the school district.
- Provided good public relations and communication within the school community regarding nutrition and physical activity programs.

Critical Resources Needed to Ensure Success with Policy Development:
- Time was the most critical issue. We found that money was not as much of an issue as time.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Get everyone’s input.
- Prioritize your actions and just get started. The process is as important as the final draft.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Breakfast implemented in half the Milford schools.
- Conducted health fair for students.
- Provided nutrition information to parents at orientation.
- Developed parent brochure to promote the policies.
- Pedometer program for elementary grade levels.
- Pedometer program for staff wellness at West Shore Middle School.

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- We will promote the policies in numerous publications throughout the school district, including district and school newsletter, a separate policy brochure, PTA meetings, board meetings and community forums.

Strategies for District Implementation of the Policies:
- The policies will be implemented by making a standing health and wellness committee. We have general board approval, but the superintendent is charged with carrying out the specifics.
- Our committee will make recommendations each year to implement and develop continued efforts to move toward a healthier community.

Methods for Evaluating Success of District Implementation of the Policies:
- The policies were approved by the superintendent in December 2005. We were waiting for final approval before determining the specific evaluation methods for policy implementation.
- We are thinking about requiring an annual report from the schools to show the number of activities and procedures implemented to track their progress.
Recommendations for Success with the Policy Development Process:

- Make the commitment to the process.
- Involve the central office and school staff.
- Assign a specific “to do” list for each meeting to keep the agenda on track and make productive use of time.
- Gain administrative support. Enlist a few key leaders and make it simple.
School District Profile

<table>
<thead>
<tr>
<th>School District:</th>
<th>Norwalk Public Schools</th>
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<tbody>
<tr>
<td>Number of Schools:</td>
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<tr>
<td>Team Leader:</td>
<td>Leah H. Turner, RN, MSN Coordinator of School Health Services, Central Office Norwalk Public Schools 125 East Avenue Norwalk, CT 06852</td>
</tr>
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<td>Grades:</td>
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<td>H</td>
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<tr>
<td>Phone:</td>
<td>(203) 854-4128</td>
</tr>
<tr>
<td>E-mail:</td>
<td><a href="mailto:leaht@norwalkpublicschools.net">leaht@norwalkpublicschools.net</a></td>
</tr>
<tr>
<td>Website:</td>
<td><a href="http://www.norwalkpublicschools.net">http://www.norwalkpublicschools.net</a></td>
</tr>
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</table>

School Health Team in Place before Pilot Project: No

School Health Team Members: School board member, school nurse, school food service, parent representative, health educator, physical education teacher, local health department representative and chef

Other People Who Should Have Been Included on the School Health Team:
Administrator in charge of physical education and health curriculums and elementary school principal

Policy Adoption:
The policies were adopted by the board of education on May 3, 2005.

Number of Times School Health Team Met: 9 Length of Each Meeting: 1¼-1½ hours

Continuation of School Health Team after Pilot Completion:
The superintendent has not requested that the School Health Team continue.

Process for Identifying and Prioritizing Program Improvement Needs:
1. The committee used the School Health Index in the six pilot schools to identify the needs of the district. We also conducted a vending machine survey to gather baseline data on the number of machines and the types of foods that were currently offered.
2. The committee went through the publication Fit, Healthy and Ready to Learn. We specifically used the Physical Activity and Healthy Eating chapters page-by-page.
3. We discussed the applicability to our district and used it as a template.
4. We were practical, focusing on items that didn’t increase costs; for example, recess before lunch, integrating health and nutrition into the current curriculum and preserving current levels of physical education.
Steps Used for Policy Development and Adoption:
1. The committee developed draft policies.
2. The draft policies were presented to the Policy Committee of the board of education. The team leader (TL) and the school health coordinator (SHC) clarified specific clauses and answered questions.
3. The TL and/or SHC met with high school, middle school and elementary school principals and the superintendent to gain their support.
4. The TL and SHC went before the board of education twice. The first time the final draft was on the agenda for report and discussion. The second time (a month later) the policies were voted on and adopted.

Challenges to the Policy Development Process:
- Gaining global awareness of district staff members who needed to be asked for input to draft successful policies.
- Learning the timing of the board of education’s work schedule.
- Identifying resistance among key players and learning how to change challenges into opportunities.
- Lack of a professional nutrition resource person within the district.

Successes with the Policy Development Process:
- Adoption of proposed policies by the board of education.
- Enrolling nine schools as Team Nutrition Schools (http://teamnutrition.usda.gov/team.html).
- Receiving valuable input from committee members and becoming a working committee.
- Establishing new relationships between school health and the board of education and the PTO Council.

Critical Resources Needed to Ensure Success with Policy Development:
- Team members committed to the project.
- A district that supports the necessity for change.
- Funding for travel, resources and staff time.
- PowerPoint presentations with current student health and achievement statistics as tools for educating parents and administrators.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Committee members who are interested in changing policy.
- Members who are committed, passionate and willing to work toward a common goal.
- Having a consistent time and place to meet.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Conducted a districtwide Body Mass Index (BMI) study of kindergarten and sixth-grade students to ascertain obesity levels.
- Obtained pedometer grant to buy 150 pedometers for students.
- Increased PTO involvement, including presentations to PTO Council, distribution of handouts on fundraising and healthy celebrations, and showing excerpts of “SuperSize Me” film.
- Interviewed by news media and publicized the policies in local newspapers.
9 School Nutrition Policies Pilots

NORWALK PUBLIC SCHOOLS

- Presented healthy eating information to English as a second language (ESL) parents.
- Presented at statewide forum on obesity.
- Attended Health Education Assessment Program (HEAP) training.
- Presented policy development process and results in a poster presentation at the National Association of School Nurses annual conference in Washington, D.C. (June 2005). Received poster presentation award for the category of “Policy Change.”

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- Meetings with school staff members, board of education and parents.
- Mailings and newsletters for parents.
- Staff e-mails and newsletter.
- School district Web site.
- Newspaper articles to promote awareness to the community.
- Topic-related posters purchased and distributed to all schools in the district.

Strategies for District Implementation of the Policies:
- The new policies are included in the school district Policies and Procedures Manual and implemented by administrators.
- Distributed booklet Promoting Healthy Eating & Physical Activity to school administration, PTO Council, school nurses and central office administration.

Methods for Evaluating Success of District Implementation of the Policies:
- A majority of elementary schools have successfully implemented recess before lunch.
- The contents of vending machines have only nutritious choices.
- A majority of schools have established school-based committees to set nutritional standards for school-sponsored events.
- Curriculum supervisors state that nutrition, health and physical education revisions have been completed.
- The PTOs or principals state that their schools have adopted healthy celebrations, healthy fundraising and/or healthy rewards practices.
- Food is offered as a reward less often.
- Physical activity is not used as a punishment.

Recommendations for Success with the Policy Development Process:
- Find people you can work with.
- Set realistic goals.
- Gain an understanding of the local process for policy development.
- Foster a supportive environment at the board level and at the school level.
School District Profile

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<tr>
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<td>Team Leader:</td>
<td>Margo Marvin, Superintendent</td>
<td>District Reference Group (DRG):</td>
<td>G</td>
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<tr>
<td>Address:</td>
<td>Putnam Public Schools, 126 Church Street, Putnam, CT 06260</td>
<td>Phone:</td>
<td>860-963-6900</td>
</tr>
<tr>
<td></td>
<td></td>
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<td><a href="mailto:marvinm@putnam.k12.ct.us">marvinm@putnam.k12.ct.us</a></td>
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<td><a href="http://www.putnam.k12.ct.us">http://www.putnam.k12.ct.us</a></td>
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School Health Team in Place before Pilot Project: Yes

School Health Team Members:
Superintendent, school board member, school principal, school nurse, school food service, parent representative, physical education teacher, family and consumer sciences teacher, special education teacher, community group representative and Family Resource Center staff

Other People Who Should Have Been Included on the School Health Team:
High school student council representative, after-school and summer program representative and health teacher

Policy Adoption:
The draft policy is currently being revised and will be presented to the board for adoption during the 2005-06 school year.

Number of Times School Health Team Met: 12
Length of Each Meeting: 1 hour

Continuation of School Health Team after Pilot Completion:
The School Health Team will continue to meet monthly to finalize the policy and plan additional implementation activities.

Process for Identifying and Prioritizing Program Improvement Needs:
We used the School Health Index.

Steps Used for Policy Development and Adoption:
1. Identified areas for improvement using the School Health Index.
2. Reviewed sample policy language using existing resources.
3. Drafted policy language.
4. Reviewed and revised draft policy language with committee input.
5. Submitted draft policy to superintendent and district administrative team for review and input.
6. Revised draft based on input from superintendent and administrative team.
7. Provided revised draft to board attorney for review.
8. Submitted draft policy to board policy subcommittee. The policy subcommittee will review the revised policy during the 2005-06 school year, and submit to board for approval.
Challenges to the Policy Development Process:
- Irregular attendance at School Health Team meetings.
- Involving all appropriate staff members in the policy development process.

Successes with the Policy Development Process:
- Changes in cafeteria menu.
- Conducted Putnam Family Resource Center activities centered around 5 A Day.
- Changes in Family Resource Center parent education curriculum to include primary prevention through nutrition and physical exercise.
- Increased awareness among staff members regarding the importance of nutrition and physical activity.
- Added Health and Safety Goal to Putnam’s Strategic Plan.

Critical Resources Needed to Ensure Success with Policy Development:
- Input from Connecticut Association of Boards of Education (CABE) and board counsel.
- Support of administration.
- Staff cooperation.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Education of committee members regarding policy issues, student health needs and current problems, solutions and resources.
- Committee members with enthusiasm, commitment and broad representation.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Conducted Family Fun Day with nutrition/activity theme.
- Conducted taste testing of new and healthy foods in the cafeteria.
- Provided open house reception with new menu samples and healthy snack handouts.
- Worked on revising physical education curriculum and health curriculum.
- Conducted Putnam Kids Get Healthy Day.
- Formed a partnership with United Natural Foods Inc. and school food service for healthier food options.
- Presented plan to PTO and the school staff.

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- Communication to staff members, students, parents and board of education via e-mail, Web site and local radio station.

Strategies for District Implementation of the Policies:
- Implementation has already begun for many of the policy components. After the board has adopted the policies, the district will continue to communicate with school staff members regarding specific implementation strategies and resources.

Methods for Evaluating Success of District Implementation of the Policies:
- Specific evaluation methods will be determined when the policies have been adopted by the board of education.
Recommendations for Success with the Policy Development Process:

- Keep goals simple and attainable.
- Solicit support of administrators.
- Involve someone with policy development experience early in the process.
- Start with those things that can change without much approval or disruption; for example, menu changes that include fresh fruit, dark greens, whole grains and low-fat milk.
- Educate staff members and parents, expand awareness and provide for ongoing evaluation.
- Celebrate each success and communicate successes to the school community.
School District Profile

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<tr>
<td>Team Leader:</td>
<td>Phyllis Jones, K-12 Health and Physical Education Coordinator</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td>Lewis Mills High School 26 Lyon Road Burlington, CT 06013</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Phone:</td>
<td>860-673-0423</td>
<td>E-mail:</td>
<td><a href="mailto:jonesp@region10ct.org">jonesp@region10ct.org</a></td>
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<tr>
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<td>District Reference Group (DRG):</td>
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School Health Team in Place before Pilot Project:
Yes, but the team did not address nutrition or physical activity issues.

School Health Team Members:
Curriculum director, school nurse, school food service, parent representative, health and physical education coordinator, health teacher, physical education teacher and representative from the American Cancer Society

Other People Who Should Have Been Included on the School Health Team:
We could have included someone from the guidance, social work, school psychologist area. We have asked an elementary school psychologist to join our School Health Team.

Policy Adoption:
The polices were adopted by the board of education on March 14, 2005.

Number of Times School Health Team Met: 8
Length of Each Meeting: 30-45 minutes

Continuation of School Health Team after Pilot Completion:
The School Health Team will meet two or three times per year to strategize methods of promoting the new policy.

Process for Identifying and Prioritizing Program Improvement Needs:
We looked at the state guidelines, upcoming state policy changes, the Connecticut frameworks in health and physical education, and the School Health Index.

Steps Used for Policy Development and Adoption:
1. Existing model drafts were used to write a draft policy. We used a draft that was provided at one of our policy workshops, along with another policy for its language. NASPE’s Appropriate Practices in Physical Education, Connecticut state standards in health and physical education, and the School Health Index were also used as references.
2. The draft policy was distributed to the team. We spent two meetings revising the draft policy.
3. The revised draft policy was submitted to the superintendent.
4. The superintendent distributed it to school principals and school district attorneys for review and editing.
5. The revised policy was brought to the board of education for approval.
Challenges to the Policy Development Process:
- We had few challenges due to the commitment by the board of education and the school staff.
- Our next challenge will be educating staff members and parents about healthy choices for snacks and celebrations.

Successes with the Policy Development Process:
- We held our meetings at 6:45 am. Because of the early hour, our meetings were very organized and focused. We had an agenda distributed beforehand and a specific amount of time allotted for our meetings, due to teaching responsibilities. This kept us focused and on-task, making our meetings productive.
- We started our policy development work with an existing policy and then made revisions. Revisions at each stage were made and distributed before each meeting to allow participants to read and make suggestions before the next meeting.
- We increased our district’s awareness of school lunch and its importance. Our lunch program is now offering a wider selection of healthy food choices.

Critical Resources Needed to Ensure Success with Policy Development:
- Administrative support – without it, the process can’t work.
- A strong commitment from the team. Our team’s cooperation and input was fantastic.
- Money is also a factor because healthy food costs more.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Keep the size of the team workable, e.g., eight to 10 members. We thought our team of eight members was a good size.
- Make sure the team is committed to a wellness philosphy and providing a healthier lifestyle for students.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Promotional activities are ongoing, and we plan on continued work using our district goal.
- We have scheduled monthly informational e-mails to our faculty and parents containing a brief introduction with one or two attachments. The attachments include the Healthy Celebrations and Alternatives to Food as Rewards handouts along with other informational notices. Our plan is to keep the information short, focused and ongoing throughout the year.

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- Meetings at district in-service days.
- Article for the district’s newsletter that contains the same information and attachment notice that is going out monthly by e-mail. A hard copy is sent in each building or district’s newsletter.
- Monthly e-mails with informational attachments to keep faculty and parents focused on the new policy.

Strategies for District Implementation of the Policies:
- We conduct promotional activities with the School Health Team serving as consultants for each building. Each month, the School Health Team member e-mails two implementation strategies to school staff members. These strategies are from the State Department of Education handouts Alternatives to Food as Reward, Healthy Celebrations and Healthy Fundraising.
- Information was provided to parents through a parent newsletter.
- Policy implementation is discussed and promoted along with the other district goals.
9 School Nutrition Policies Pilots

REGIONAL SCHOOL DISTRICT 10

Methods for Evaluating Success of District Implementation of the Policies:
- Staff and school feedback.
- Student work.
- Teacher observations.
- School lunch assessments.

Recommendations for Success with the Policy Development Process:
- Make sure you have administrative support and involvement.
- Start with a model draft policy and work from that.
- Keep your school health team to eight to 10 members.
- Plan each meeting with an agenda, distribute it and stick to it.
School District Profile

<table>
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<th>Ridgefield Public Schools</th>
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<td>Number of Schools:</td>
<td>9</td>
<td>District Reference Group (DRG): A</td>
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<tr>
<td>Team Leader:</td>
<td>Barbara Lohse</td>
<td>Phone: (203) 438-3744</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td>Health Educator</td>
<td>E-mail: <a href="mailto:blohse@ridgefield.org">blohse@ridgefield.org</a></td>
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<tr>
<td></td>
<td>East Ridge Middle School</td>
<td>Website: <a href="http://www.ridgefieldpublicschools.org">http://www.ridgefieldpublicschools.org</a></td>
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<td>Ridgefield, CT 06877</td>
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School Health Team in Place before Pilot Project: No

School Health Team Members:
School principal, school food service, parent representative, health educator, physical education teacher and family and consumer sciences teacher

Other People Who Should Have Been Included on the School Health Team: None

Policy Adoption:
The policies are still being revised and will be brought to board of education by June 2006.

Number of Times School Health Team Met: 10  Length of Each Meeting: 1 hour

Continuation of School Health Team after Pilot Completion:
The School Health Team will include new members and will work on completion of the School Wellness Policy.

Process for Identifying and Prioritizing Program Improvement Needs:
Areas for improvement were identified based on the School Health Team’s knowledge of current school programs and practices. Our areas of focus included cafeteria food selections and incorporating nutrition into the curriculum.

Steps Used for Policy Development and Adoption:
1. Evaluated current inequities and district needs related to nutrition and physical activity, and determined key areas for improvement.
2. Used existing resources to draft policy language, including Fit, Healthy and Ready to Learn (NASBE), School District Nutrition & Physical Activity Model Policy Language (Rhode Island) and sample policies from other school districts.
3. Provided draft policy language to administration. Revisions were suggested and School Health Team was requested to focus on developing policy language for two key areas, educator/curriculum and cafeteria.
4. Developed two policy subcommittees (curriculum and cafeteria) that will continue to work on policy language for review in January 2006.
5. Will provide policy draft to school district attorney for review in February 2006.
6. Draft back to committees in March 2006 for final revisions.
School Nutrition Policies Pilots

REGIONAL SCHOOL DISTRICT 10

Challenges to the Policy Development Process:
- Complete district support would better promote our efforts and help gain more momentum for school-level support of policies, particularly in the areas of classroom parties, socials and PTA fundraisers.
- We could not incorporate our health goals (wellness, nutrition and physical activity) with our academic school goals.

Successes with the Policy Development Process:
- Curriculum writing to include nutrition in Grades 6-8.
- Curriculum writing in physical education that incorporates best practice standards.
- Better communication about our plans and goals to school and community.
- We worked hard to keep the school-to-home link well connected because this is vital to our success.

Critical Resources Needed to Ensure Success with Policy Development:
- Staff.
- Time to meet and get the work done.
- Funding, if implementation of a policy will cost money.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Be proactive and not reactive.
- Be persistent and committed.
- Get to the parent population – they are your best advocates.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- Held two presentations for faculty and students by Dr. David Katz, Yale University.
- Held meetings and presentations for parents.
- Created new nutrition curriculum.
- Formed a permanent school health committee.
- Conducted Staff Wellness Day, followed up with continuos programs for staff members.
- Appearance on local television show to promote health, nutrition and physical activities.
- Received good publicity in local newspaper (four times during the 2004-05 school year) and in the Danbury News Times about what we are doing in our schools to promote health, wellness and physical activity.
- Conducted nutritious food sampling for students using outside vendors during National Nutrition Month (March 2005).

Strategies for Promoting Adoption and Districtwide Support of the Policies:
- PTA newsletter.
- Local television show, Ridgefield: Now We're Talking.
- Parent forums on nutrition and physical activity.
- Presentations at PTA meetings to promote Team Nutrition and how parents can help build a healthier school community.
Strategies for District Implementation of the Policies:

- Many of our implementation strategies will be determined once the policy has been adopted. Our vision is that it will start in the cafeteria by offering healthier choices for our students and removing those products that are less healthy. Then we would like to see a change in the way classroom parties and socials provide snacks, because unhealthy foods and beverages are prevalent.
- We plan to focus on the connection between nutrition and academic performance because our district’s goals are tied to academic performance. Providing concrete evidence that supports a link between academic performance and nutrition will be a priority.
- We will also be working on getting the support of parents and administration because their support is a key factor in policy implementation.

Methods for Evaluating Success of District Implementation of the Policies:

- Each school will be forming a Wellness Committee, and each school will design and implement programs based on the district policies.
- Each school will conduct a self-evaluation. They will monitor practices and programs and survey staff members, students and parents to see if their expectations were met.

Recommendations for Success with the Policy Development Process:

- Include administration and parents on the School Health Team. They are critical to making the process work effectively.
- Provide continued communication between home and school to share information and give updates on the team’s progress.
- Work closely with the food service director when determining policies that relate to the school food service program and what foods and beverages should be served in the cafeteria.
School Nutrition Policies Pilots

SALEM SCHOOL

School District Profile

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<tr>
<td>Team Leader:</td>
<td>Barbara Bashelor, Health and Physical Education Teacher</td>
</tr>
<tr>
<td>Address:</td>
<td>Salem School School 200 Hartford Road Salem, CT 06420</td>
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<tr>
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<tr>
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<td><a href="mailto:bbashelor@salem.cen.ct.gov">bbashelor@salem.cen.ct.gov</a></td>
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<td>Website:</td>
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School Health Team in Place before Pilot Project: No

School Health Team Members:
School principal, school nurse, school food service, parent representative, health educator and physical education teacher

Other People Who Should Have Been Included on the School Health Team:
School board member (policy committee) and elementary classroom teacher

Policy Adoption:
The policies will be piloted in rough draft form during the first half of the 2005-06 school year. They will then be critiqued by members of the newly formed Salem School Health Council and offered to the board of education for review and adoption as part of the Salem School Wellness Policy.

Number of Times School Health Team Met: 23
Length of Each Meeting: 1 hour

Continuation of School Health Team after Pilot Completion:
Future plans include a team expansion that will encompass all eight components of the Coordinated School Health Model and satisfy the membership requirements necessary for the development of the 2006 USDA School Wellness Policy.

Process for Identifying and Prioritizing Program Improvement Needs:
We identified our areas of need by completing the CDC School Health Index as a team. We then used the sample policies from Fit, Healthy and Ready to Learn (NASBE) to prioritize those needs. As a group, we also spent many hours brainstorming ideas regarding current nutrition and physical activity practices at our school and how we could make a difference.
Steps Used for Policy Development and Adoption:
1. Identified Salem School’s greatest areas of need by completing the CDC School Health Index.
2. Developed a rough draft using the sample policies addressing nutrition and physical activity in Fit, Healthy and Ready to Learn (NASBE).
3. Presented our timeline and plans to the board to raise awareness (November 2004). The presentation included PowerPoint, open discussion and a handout on the timeline for policy development at Salem School.
4. Presented the policy development information at a meeting of the Parent Teacher Organization (PTO) to raise awareness and ask for support (January 2005).
5. Presented overview and objectives to the middle school and elementary school staffs (January 2005). At both PTO and faculty meetings we used the Penn State and Pennsylvania Department of Education video Preventing Childhood Overweight and Obesity: Parents Can Make a Difference, which addresses community and school involvement in improving student wellness (http://nutrition.hhdev.psu.edu/projectpa/html/parentManual/2006/index.html).
6. Team leader presented the superintendent with a rough draft of the policy (April 2005). The team leader met with the superintendent two weeks later to discuss and critique the rough draft.
7. Distributed the policy rough draft to the faculty before the May 2005 faculty meeting and asked for suggestions. The draft was then discussed at the faculty meeting one week later. It was decided that the policy would be piloted in the first half of the 2005-06 school year.
8. Presented at the May 2005 PTO meeting to ask for its support when planning next year’s fundraisers by using healthy alternatives for school fundraising.

Challenges to the Policy Development Process:
- Initially we were unclear about the development of policy and about the difference between school policy and board policy. We continued to ask questions at the pilot support workshops and our understanding increased.
- We found the start date of the pilot difficult with summer arriving shortly after we had just begun the task.
- An administrator’s input is critical when developing policy. The administrator’s schedule should be a priority when planning regular meeting dates and times.

Successes with the Policy Development Process:
- Development of a School Health Team.
- Development of a draft policy.
- Dedicated and supportive team and team leader.
- Increased awareness level at Salem School and in the community about the importance of student wellness.
- Increase in the amount of middle school physical education.
- Increase in health education to include fifth-grade taught by a specialist.
- Positive feedback and support from Salem School superintendent.
**School Nutrition Policies Pilots**

**SALEM SCHOOL**

**Critical Resources Needed to Ensure Success with Policy Development:**
In priority order: 1) time; 2) staff commitment; 3) policy development resources and materials; and 4) funding.

**Characteristics Important to an Effective, Productive and Successful School Health Team:**
- Committed and focused members
- Clear agendas for each meeting
- Setting goals, objectives and a timeline
- Convenient meeting times

**Activities Conducted as a Result of Work on the School Nutrition Policies Project:**
- Held Open House. Invited nutritionist to speak with parents and invited food services to promote healthy lunch choices. Also included a representative from the Salem Recreation Committee to promote activity in the community.
- Presentation to board to raise awareness about student wellness and the development of the policy.
- Two presentations to PTO to 1) increase awareness and discuss our policy objectives and 2) ask for support for healthy fundraising in the 2005-06 school year.
- Two meetings with Salem School faculty to 1) increase awareness and discuss our policy/grant objectives and 2) review and discuss draft policy.
- Faculty member offered to teach cardio-kickboxing to staff members to increase employee wellness.
- Made healthy changes in the cafeteria a la carte offerings to include nutritionally dense snack choices and reduced-fat items.
- Introduced more whole-grain bread in sandwich selections.
- Added nutrition tips to monthly menus.
- Increased middle school physical education time in the 2005-06 school schedule.
- Increased health education to include fifth-grade health taught by a specialist in the 2005-06 school schedule.
- Purchased 25 pedometers for staff use.
- Staff members designed indoor walking routes with mileage for winter walking/jogging.
- Offered yoga classes after school to staff members.
- Made scheduling changes in 2005-06 to allow for a full 30-minute lunch period for students in Grades 1-5.
- Made scheduling changes in 2005-06 to include a 20-minute recess before lunch in Grades 2-5.
- Principal and health teacher met with classroom parents (fall 2005) requesting support and offering ideas for healthy alternatives to classroom celebrations.

**Strategies for Promoting Adoption and Districtwide Support of the Policies:**
Met with faculty and parents at two different faculty and PTO meetings during the 2005 school year. The draft policy will be piloted in the fall of 2005 and then be offered to the board in January with the intent that it is used to develop an overall student wellness policy.
Strategies for District Implementation of the Policies:
The policies will be piloted in fall 2005 and then offered for board approval in winter 2006. Implementation strategies will be developed based on our final School Wellness Policy.

Methods for Evaluating Success of District Implementation of the Policies:
- Survey teachers concerning the changes in classroom party menus and celebration alternatives.
- Survey teachers concerning the change in recess as punishment.
- Survey teachers and lunch aides concerning the success of recess before lunch.
- Survey the parent community about the changes made in school concerning wellness.

Recommendations for Success with the Policy Development Process:
- Find a committed team and team leader.
- Involve your food service organization.
- Meet with the board policy committee in your town to increase awareness about the creation of policy at the local level.
- Review existing resources on policy development.
- Use the CDC School Health Index to prioritize school needs.
- Get the word out to faculty and parents. Be visible at monthly meetings and discuss your ideas with people in the school community.
- Contact appropriate state staff members as needed for assistance with questions and concerns.
School Nutrition Policies Pilots

WINDHAM PUBLIC SCHOOLS

School District Profile

<table>
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<tr>
<th>School District:</th>
<th>Windham Public Schools</th>
<th>Grades: PK-12</th>
<th>Enrollment: 3,633</th>
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<tbody>
<tr>
<td>Number of Schools:</td>
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<tr>
<td>Team Leader:</td>
<td>Shawn Grunwald</td>
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<td>School-Based Health</td>
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<tr>
<td></td>
<td>Center Coordinator</td>
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<tr>
<td>Address:</td>
<td>Windham High/Middle</td>
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<td></td>
<td>School 355 High Street</td>
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<td></td>
<td>Willimantic, CT 06226</td>
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</table>

School Health Team in Place before Pilot Project: No

School Health Team Members:
School board member, school nurse, school food service, parent representative, health educator, physical education teacher, family and consumer sciences teacher, community group representative, dietitian and school-based health center staff

Other People Who Should Have Been Included on the School Health Team:
Superintendent and school store adviser

Policy Adopted by Board of Education: The policy concepts were approved by the board of education in June 2005. Policy adoption will take place in the 2005-06 school year, after the board completes a review of all district policies.

Number of Times School Health Team Met: 8  
Length of Each Meeting: ¾-3 hours

Continuation of School Health Team after Pilot Completion:
The School Health Team will continue as part of an overall school health advisory committee that is much broader in scope but will have a set agenda item dedicated to school nutrition and physical activity.

Process for Identifying and Prioritizing Program Improvement Needs:
We based program improvement needs on the results of the School Health Index, coupled with discussion with the various administrators and board of education members to determine how realistic it would be to actually change.
Steps Used for Policy Development and Adoption:
1. Conducted School Health Index.
2. Surveyed parents, students, principals and cafeteria managers.
3. Presented results to districtwide PTO and superintendent.
4. Assigned one person (team leader) to write draft policies. Shared draft policies with team, superintendent and assistant superintendent. Solicited and incorporated feedback.
5. Draft policies presented at Student Services Committee of board of education, which approved content.
6. Policies given to Policies Subcommittee for format change (administrator in charge approved content).
7. Format modified but no content changes made. Policies were sent to full board of education for adoption. Board approved policy concepts in June 2005.
8. Policy adoption will take place in the 2005-06 school year, after the board completes a review of all district policies.

Challenges to the Policy Development Process:
The biggest challenge was moving forward from the information-gathering stage to the actual policy writing stage. This was solved by assigning one person to write the policy draft and the group trusting that person to complete the task. Checks and balances were built in by allowing each team member to review and comment on the initial draft, and then review the final draft.

Successes with the Policy Development Process:
The biggest success was gathering different people from different schools and disciplines to work together on the tasks. We were also successful in connecting with the districtwide PTO to work together on student health and achievement goals.

Critical Resources Needed to Ensure Success with Policy Development:
Allocated staff time that is funded through this grant so staff members are not “donating” time to this project when they are already overcommitted on other things.

Characteristics Important to an Effective, Productive and Successful School Health Team:
- Build in social time so members can get to know one another (if they don’t already) and build some camaraderie.
- Schedule sufficient time for meetings.
- Have a clear leader who is empowered and willing to set the agenda and do some extra work.

Activities Conducted as a Result of Work on the School Nutrition Policies Project:
- One of the team members developed a staff wellness program that included a walking program, BMI and weight monitoring, blood pressure checks and incentives for participation.
- Worked with a class adviser on piloting a healthy fundraiser. The fundraiser was successful and will be incorporated as a yearly event.
- Started a parent resource library via the districtwide PTO and a resource library for staff members via the Curriculum Office with materials procured through this project.
- The board of education is exploring incorporating Connecticut-grown foods into the cafeteria.
- The board of education is looking at scheduling recess before lunch in at least one of the elementary schools (K-4).
School Nutrition Policies Pilots

WINDHAM PUBLIC SCHOOLS

Strategies for Promoting Adoption and Districtwide Support of the Policies:
Throughout the whole process, the team leader sent out periodic informational memos to each building representative, principals, superintendent, assistant superintendents and department heads to keep them informed of the process, and to allow them to keep staff members updated and informed. Parents were informed through the districtwide PTO and PTO newsletters. Students will be informed in the same manner as every other board policy, through student handbooks.

Strategies for District Implementation of the Policies:
The relevant parts of the policies will be part of the school staff handbook and student handbook. One of the high school classes has made a commitment to doing at least one healthy fundraiser (citrus fruits). Information was distributed at a districtwide PTO meeting for inclusion in PTO newsletters.

Methods for Evaluating Success of District Implementation of the Policies:
We will monitor a variety of areas, such as the number of fundraisers done next year involving either nonfood items or healthy food choices; whether Connecticut-grown foods are instituted in the school lunch program; and whether at least one school has recess before lunch. The policies recommend but do not mandate these things so if they are done implementation will be considered successful.

Recommendations for Success with the Policy Development Process:
- Be realistic about what you hope to accomplish in a certain time frame and with local funding constraints. It is better to take on a small amount, be successful and build on your success to move on the next step than to set a large goal and not reach it.
- Choose your team members carefully. It is critical for success that team members are willing to work hard to get the job done.
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