

~~Comprehensive School Health System~~

~~The Governing Board and Superintendent or designee shall endeavor to build and promote a comprehensive school health system by their commitment to securing funds and qualified personnel to support and reinforce instruction on healthy behavior and health literacy. A comprehensive school health system consists of:~~

~~1. Safe and Healthy School Environments:~~

- ~~a. Plan and develop schools which students, parents/guardians and staff are free to learn and teach within an environment that is trusting and positive, without the threat of physical or emotional harm.~~
- ~~b. Expectations are clear, rules are consistent and consequences are understood.~~
- ~~c. Positive behaviors and positive environments that enhance health, i.e., stress reduction, should be reinforced.~~
- ~~d. A clean, healthy school environment with proper lighting, ventilation, clean water, proper waste disposal, school safety program, adherence to building codes, sanitary food services, etc., should be provided to all students.~~

~~2. Health Education:~~

- ~~a. Comprehensive and sequential curriculum for students grades K-12, focusing on the whole child, covering emotional, physical, social health, self-esteem and emphasizing long-term health-related behaviors.~~
- ~~b. In-depth training for teachers on the curriculum shall be part of the program.~~
- ~~c. Administration and all staff, including classified, will have general awareness training regarding risk-taking behaviors and health promotion.~~
- ~~d. Programs adequately covering the emotional, physical and social well-being of the students and staff.~~
- ~~e. Programs should include the family and may include significant others in the process of health education when possible.~~
- ~~f. Health promotion programs for all staff to develop positive health attitudes and behaviors for themselves.~~

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~~g. Ongoing quantitative and qualitative evaluations of all programs from students, staff and parents/guardians.~~

~~h. Stress the process of independence for health consumers and how to effectively use the healthcare system.~~

~~3. Physical Education:~~

~~a. Increase emphasis on physical fitness through PE programs that are developmentally appropriate for K-12 grades.~~

~~b. Encourage PE programs for staff and consistent inservice education regarding student curriculum.~~

~~c. Emphasize noncompetitive class programs that develop individual life-long health habits promoting overall health and well-being.~~

~~4. Nutrition Services:~~

~~a. Nutritionally balanced meals in school cafeterias that follow U.S. dietary guidelines and are liked by students and staff.~~

~~b. Nutrition education for parents/guardians and students in regards to making health food choices with appreciation of cultural differences, agri-economic factors and environmental factors.~~

~~5. Health Services:~~

~~a. Health services should be equally provided to every school and to every student in the district.~~

~~b. Increasing the qualified nursing services or a full-time school health nurse on every campus who can make assessments, interpret the health problem to the school staff, work with dropout counselors on case management, do health counseling and referral, work with the various community agencies to assure that the health needs of the student are met and followed up on the communitywide referral systems. The nurse can, therefore, identify student's and family's health care needs and make the appropriate referrals and follow-up.~~

~~c. If the need becomes evident for further health care, after the above has been fulfilled, staff should develop programs that are specifically tailored to individual school needs, but made available to each student in every school in the district, i.e., single mobile clinic teams treating and teaching per cluster, rotating clinics, mental health counselors on campus. Periodically~~

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~~short term clinics on every campus for purposes of immunization, eyescreening hearing tests and prevention of diseases and afflictions related to childhood.~~

~~d. Any necessary services must be provided free to all students in the district, with noneducation funds (not part of the state or federal education budget), with the cooperation of public health community agencies and be accessible to all students. The district shall not be liable for any services performed.~~

~~e. Parent/guardian permission must be received when appropriate, according to law or other provisions, unless a crisis/emergency situation exists. Any health services provided should not duplicate existing services by the same or other health care providers, and should maintain the confidentiality of the student.~~

~~f. The school district needs to develop a model that trains interagency and school personnel in shared language, shared information regarding organizational systems and coordination of services for students and staff. They should not function independent of each other.~~

~~6. Psychological and Counseling Services~~

~~a. Early detection of mental and emotional problems~~

~~b. Emphasize prevention education~~

~~c. Emphasize early intervention~~

~~d. Role model positive behaviors to the students and staff~~

~~e. Address academic achievement issues and other educational and motivational issues in the areas of health~~

~~7. Health Promotion for Staff~~

~~a. Meet the individual needs of diverse school sites and give priority to the most important health needs of the individual school settings~~

~~8. Parent and Community Involvement~~

~~a. Promote understanding and respecting the different ways in which families and cultural and ethnic groups may view health related issues~~

~~b. Promote consistent community wide messages that reduce risk taking behaviors~~

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~~c. Integrate within the school system and within the community to develop partnerships for comprehensive health education programs~~

Policy
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~~SAN JOSE UNIFIED SCHOOL DISTRICT~~
~~San Jose, California~~