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The district ensures, through well-aligned district programming and community partnerships, students' physiological needs are met.

PRACTICE 2

INDICATOR A: Food and Nutrition

PREPARATION

GETTING AWARE	The district food service department reviews most recent guidelines and recommendations for nutritional support. The district reviews supply offerings to identify providers and available food supplies that most align to nutritional guidance.
GETTING READY	The district reviews information and research on exemplary food service programs that are able to offer fresh, healthy foods. The district organizes pilots to attempt to operationalize healthier food programs. The district reviews how these programs are connected to health and nutrition education within the curriculum.

PROGRESS INDICATORS

GETTING STARTED	The district provides basic nutritional support to students in accordance with USDA guidelines.
GETTING BETTER	The district provides enhanced nutritional opportunities for students, and offers a selection of appropriate nutritional options for students. Districts limit or eliminate non-nutritional food choices within their food offerings (including snack and vending machines).
KEEP IMPROVING	The district provides comprehensive nutritional programs for a range of dietary needs or plans for students. Non-nutritional options are limited or eliminated. Fresh foods are utilized, and programs are reviewed by a nutritionist or similar expert. Instruction around nutrition is coordinated between teachers and the food program, and is communicated to families and community.

RESEARCH REFERENCES FOR THIS INDICATOR:

Busch, V., Loyen, A., Lodder, M., Schrijvers, A. J., van Yperen, T. A., & de Leeuw, J. R. (2014). The effects of adolescent health-related behavior on academic performance: A systematic review of the longitudinal evidence. *Review of Educational Research*, *84*(2), 245-274.

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Rani, M. A., Shriraam, V., Zachariah, R., Harries, A. D., Satyanarayana, S., Tetali, S., ... & Sathiyasekaran, B. W. C. (2013). Does a nutrition education programme change the knowledge and practice of healthy diets among high school adolescents in Chennai, India?. *Health Education Journal*, *72*(6), 733-741.

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INDICATOR B: Physical and Health Education

PREPARATION

GETTING AWARE	The district reviews exemplary programs that integrate physical health into the broader curriculum. The district engages in a review and inventory of existing physical education and health content throughout the K-12 education sequence. The district may wish to use student health surveys (such as MiPHY) to gather student data on health risk behaviors, and physical activity levels to improve prevention and health promoting programs.
GETTING READY	The district uses information from an inventory to engage in a mapping of instruction and student activities with content standards for health and physical education. The district engages in needs assessment around health and physical education using student and family survey data. The district uses such information to develop a plan for integrating content into the broader curriculum.

PROGRESS INDICATORS

GETTING STARTED	The district provides required health, physical education, and similar programming through identified courses or instructional practice.
GETTING BETTER	The district provides comprehensive health and physical education into essential learnings for all students and grade levels. Instruction in these areas includes guidance and support for student practices, rather than approaching content information alone.
KEEP IMPROVING	The district integrates health and physical education into core requirements for students, and provide integrated instruction and flexible learning options to meet the individual needs of learners. Instruction includes personal guidance and plans for individual student practices. Students are able to develop and implement plans for healthful practices and physical well-being within their learning.

RESEARCH REFERENCES FOR THIS INDICATOR:

Busch V, Loyen A, Lodder M, Schrjvers, A. J., van Yperen, T.A., & de Leeuw, J.R. (2014). The effects of adolescent health-related behavior on academic performance: A systematic review of the longitudinal evidence. *Review of Educational Research, 84(2),* 245-274.

Centers for Disease Control. (2020). *CDC healthy schools: Strategies for using the WSCC framework*.

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Kann, L., McManus, T., Harris, W. A., Shanklin, S. L., Flint, K. H., Queen, B., ... & Ethier, K. A. (2018). Youth risk behavior surveillance–United States, 2017. *MMWR Surveillance Summaries*, *67*(8), 1.

Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003). What works in prevention: Principles of effective prevention programs. *American psychologist*, *58*(6-7), 449.

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INDICATOR C: Athletic and Extra-curricular Programming

PREPARATION		
GETTING AWARE	The district conducts an inventory of school-based and community-based athletic offerings within their locale. The district identifies possible gaps in opportunities, especially for those offered directly by the district, which could be offered through district decisions or partnerships with community groups and organizations.
GETTING READY	The district develops a plan for maintaining and extending athletic offerings through the PK-12 experience, using existing information, needs assessment, and community input. The district seeks out information on exemplary programs from other locales to determine possible offerings.

PROGRESS INDICATORS		
GETTING STARTED	The district engages in athletic training through extra curricular programs and/or sports.
GETTING BETTER	The district provides opportunities for all students to participate in athletic training, and seeks out community partners to provide support to students in non-traditional sports or programs so all students have learning opportunities in district programs.
KEEP IMPROVING	The district ensures access and provides opportunities for all students to participate in athletic training in areas of interest to learners, including sports. The district establishes community partnerships to provide offerings to all students, and establishes a means to incorporate these for credit requirements.

RESEARCH REFERENCES FOR THIS INDICATOR:

Bailey, R. (2006). Physical education and sport in schools: A review of benefits and outcomes. *Journal of school health, 76(8)*, 397-401.

Centers for Disease Control. (2020). *CDC Healthy Schools: Strategies for Using the WSCC Framework*.

García-López, L. M., & Gutiérrez, D. (2015). The effects of a sport education season on empathy and assertiveness. *Physical Education and Sport Pedagogy, 20(1)*, 1-16.

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Trudeau, F., & Shephard, R. J. (2008). Physical education, school physical activity, school sports and academic performance. *International journal of behavioral nutrition and physical activity, 5(1)*, 1-12.

MI Systems Support

INDICATOR D: Designs / Environment for Physical Disabilities

PREPARATION	GETTING AWARE	The district engages in an accessibility-based review of all school facilities based upon prevalent physical disabilities. The district identifies an accessibility officer who will lead and advocate for needed changes to facilities and policies to ensure access.
	GETTING READY	The district identifies a team to address issues of physical disability for the district and to directly attend to needs identified by community members, students and/or families. The team engages in universal design for learning training to address identified issues. The district identifies possible issues and prioritizes a plan to modify facilities or resources to ensure ADA compliance and accessibility.

PROGRESS INDICATORS	GETTING STARTED	The district has identified physical disabilities of students in accordance with basic requirements of IDEA. The district develops IEPs for students in partnership with families to identify basic accommodations to support student needs, and counsels families to external support if the district does not have capacity to support the students effectively.
	GETTING BETTER	The district provides individualized support for all students with identified physical disabilities. District personnel work with external agencies or partners to provide specialized accommodations and support for students and families where standard accommodations or district capacity is not adequate to address student needs.
	KEEP IMPROVING	The district provides a universal design for learning approach for all learning modalities to ensure the greatest level of student engagement including those with undiagnosed physical disabilities. Districts work with families and specialized partners to provide accommodations for all students with physiological challenges to learning.

RESEARCH REFERENCES FOR THIS INDICATOR:

Black, R. D., Weinberg, L. A., & Brodwin, M. G. (2015). Universal design for learning and instruction: Perspectives of students with disabilities in higher education. *Exceptionality Education International, 25(2).*

Burgstahler, S. (2009). *Universal Design in Education: Principles and Applications.* DO-IT.

Mcguire, J. M., Scott, S. S., & Shaw, S. F. (2006). Universal design and its applications in educational environments. *Remedial and special education, 27(3)*, 166-175.

Rose, D. H., & Meyer, A. (2006). *A practical reader in universal design for learning*. Harvard Education Press.

Rose, D. (2000). Universal design for learning. *Journal of Special Education Technology, 15(3)*, 45-49.

Salmen, J. P. (2011). Universal design for academic facilities. *New Directions for Student Services, 2011(134)*, 13-20.

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