

Student Health and Fitness

(Adopted 2013; amended 2016, 2017, 2018, 2019, 2020)

WHEREAS, local boards of education are committed to providing school facilities, school meals, and programs of instruction designed to promote the physical and mental health and fitness of students and to prepare them to maintain a healthy lifestyle as adults; and

WHEREAS, federal and state standards for student health and fitness, especially regarding nutrition, continue to be reformed and enhanced to address the alarming national epidemics of juvenile diabetes and obesity; and

WHEREAS, local boards of education are committed to providing quality physical education programs in Maryland's public schools within the current State and federal statutory and regulatory framework; and

WHEREAS, regulations require that physical education programs provide an "individualized, developmentally appropriate, and personally challenging instructional program that advances the student's knowledge, confidence, skills, and motivation to engage successfully in a lifelong healthy and active lifestyle" (COMAR 13A.04.13.01); and

WHEREAS, State Board regulations require yearly physical education instruction for all students in grades kindergarten through 8, and elective classes for students in grades 9 through 12; and

WHEREAS, COMAR also requires each school system to develop physical education curriculum guides for the elementary and secondary schools under its jurisdiction; and

WHEREAS, legislation enacted in 2010 required MSDE to adopt regulations requiring public school buildings that are newly constructed or completely renovated and occupied on or after January 1, 2013, to include a gymnasium and support spaces for physical education instruction; and the regulations governing facilities required in public schools for physical education programs were updated to include a gymnasium in the list of minimum spaces required in all new schools; and

WHEREAS, federal requirements are playing an increasing role in State and local education policy, including physical education and school nutrition; and

WHEREAS, the 2004 Child Nutrition and Women, Infants and Children (WIC) Reauthorization Act required all local school districts to put "wellness" programs in place by the beginning of the 2006-07 school year; required school districts to appoint wellness councils responsible for developing plans to address the types of food sold in schools, physical education, and nutrition. School districts are also required to appoint monitoring officers to ensure compliance; and

WHEREAS, the 2010 Child Nutrition and WIC Reauthorization Act, entitled the "The Healthy, Hunger-Free Kids Act", mandated major reforms in school meal programs to improve the nutritional value of the meals served to Maryland students each day; and

WHEREAS, child hunger impacts many students as an obstacle to learning and therefore school systems are increasingly involved in summer and weekend meal programs and partnerships to help ensure daily access to healthy food for all students; and

WHEREAS, Maryland has enacted legislation to allow eligible school systems to use the Community Eligibility Provision (CEP) program to provide free school meals to all students in a school system or school based on rates of free and reduced price meal (FRPM) eligibility, while also reducing administrative paperwork and personnel hours; and

WHEREAS, in 2017 legislation was enacted to extend the CEP program and to enhance high school student access to free school meals; and

WHEREAS, in 2018 legislation was enacted to make the State responsible for the student share of the costs of (1) reduced-price breakfasts provided under the federal School Breakfast Program by FY 2022 and (2) reduced-price lunches provided under the National School Lunch Program (NSLP) by FY 2023; and legislation passed to extend for one-year program eligibility for schools dropping below the 40% FRPM enrollment threshold; and

WHEREAS, in 2020 legislation passed requiring local school systems to revise school meal policies to prohibit practices identifying and stigmatizing students unable to pay for school meals; and

WHEREAS, in 2020 the COVID-19 pandemic and resulting school closures necessitated the distribution of millions of school meals to all eligible students, which required unprecedented investments of staff and volunteer time and unbudgeted resources to distribute meals from outside schools and other sites; and

WHEREAS, in 2017 legislation was enacted to require a needs assessment of student school-based behavioral health services; and to develop best practices for local boards of education to provide to students (1) behavioral needs assessments and (2) individualized or group behavioral health counseling services with a health care provider through a school-based health center or community-partnered school-based behavioral health services; and

WHEREAS, in 2017 legislation was enacted to require annual training of all certificated school personnel who have direct contact with students on a regular basis to complete training by December 1 each year in the skills required to (1) understand and respond to youth suicide risk and (2) identify professional resources to help students in crisis; and

WHEREAS, in 2017 legislation was enacted to require school systems to respond to the opioid and heroin abuse crisis by (1) expanding the existing drug addiction and prevention education curriculum to include a unit on opioids and heroin; (2) requiring local boards to establish a policy requiring each public school to store naloxone and authorize school personnel to administer it; and (3) requiring local boards or local health departments to hire a county or regional community action official or existing personnel to coordinate public outreach including school-based community forums; and

WHEREAS, Governor Hogan's Executive Order establishing a compressed school year beginning after Labor Day and ending by June 15 created a greater need for school systems to provide meals for students during the extended summer break; and

WHEREAS, in 2018 the Safe to Learn Act included requirements for local school systems to designate the position of Mental Health Services Coordinator and the following responsibilities:

- To coordinate existing mental health services and referral procedures for mental health services within the local school system;
- To work in collaboration with the local health department, the local department of social services, and other local entities that provide mental health services, to ensure that a student who is referred for mental health services obtains the necessary services;
- To maximize external funding for mental health and wraparound services; and
- To develop plans for delivering behavioral health and wraparound services to students who exhibit behaviors of concern; and

WHEREAS, in 2020 the Blueprint for Maryland's Future legislation (HB 1300) passed in the General Assembly, and was subsequently vetoed by Governor Hogan, with an amendment to establish the Maryland Consortium on Coordinated Community Supports to develop a statewide framework for the creation of coordinated community-based behavioral supports partnerships, and to require each local school system to develop a plan to enhance and expand behavioral health service availability; and

WHEREAS, in 2020 legislation passed to require MSDE, the Maryland Department of Health and Department of Human Services to develop guidelines for schools on trauma-informed education, including methods for understanding and responding to an individual with symptoms of chronic interpersonal trauma or traumatic stress; and

WHEREAS, in 2020 federal funding was provided to assist local school systems in meeting the costs of providing school meals during school closures in response to the COVID-19 pandemic; and

WHEREAS, many legislative proposals intended to enhance student health and fitness would impose significant costs on local school systems;

NOW, THEREFORE, BE IT RESOLVED, that MABE supports local board discretion to adopt policies and to allocate resources to support improvements in student mental and physical health, fitness, and nutrition; and

BE IT FURTHER RESOLVED, that MABE supports state and federal laws to preserve and enhance the ability of local school systems to choose to participate in the Community Eligibility Provision (CEP) program as an option to provide free school meals to all students; and

BE IT FURTHER RESOLVED, that MABE will work collaboratively with stakeholders in urging the Governor and General Assembly to increase funding for school nutrition programs to support summer meal programs for students; and

BE IT FURTHER RESOLVED, that MABE opposes state or local government unilateral determination of the methods of delivering student health services, including the employment status of school health providers; and

BE IT FURTHER RESOLVED, that MABE opposes the unfunded mandating of additional physical, mental, and behavioral health services; and

BE IT FURTHER RESOLVED, that MABE opposes the unfunded mandating of increased physical education instruction which would impose significant costs for additional school facilities and instructional staff; and

BE IT FURTHER RESOLVED, that MABE opposes the unfunded mandating of additional requirements for school-based nutritional programs; and

BE IT FURTHER RESOLVED, that MABE will urge the Governor and the Legislature to fully fund the increased costs of the behavioral and mental health services requirements in the Safe to Learn Act of 2018 or mandated by other legislation or regulations.

