Background
Research shows that healthy students learn better. Implementing key school health evidence-based practices not only meet many state and federal laws, but providing whole child and wrap-around supports, including engagement of families, community, and young people, will yield positive academic outcomes. Specifically, school health best practices are correlated to increased learning readiness, school engagement, academic performance, and decreased absenteeism, discipline referrals and behavioral issues, and dropout. This is due to increasing youth confidence, removing barriers to attend school, increasing retention of information, and cultivating relationships between trusted adults and students. Taking a proactive approach and considering implementation of comprehensive health efforts into your systems, structure, culture, and policies will prevent potential and likely challenges that eventually occur in any school. Overtime, comprehensive health efforts will provide a return on investment, including time, money, and staff.

This document highlights the legislative requirements and the key resources needed for new charter schools during the development phase.

Relevant Legislation for New Charter Schools
This section is organized by relevant federal health and education legislation, Colorado specific education legislation, and Colorado specific school health legislation. Each item below is enacted law and is organized by year, with the most recent listed first.

Federal School Health and Education Legislation

- **Public Law 114-95: Every Student Succeeds Act (ESSA)** is the bipartisan federal reauthorization of the Elementary and Secondary Education Act first passed in 1965, which replaces No Child Left Behind (NCLB). ESSA governs federal funding and many primary aspects of the education system, such as accountability and assessment. ESSA calls for equity and ensuring a well-rounded education while giving more control to the local level. There are provisions aimed directly at improving equity, physical health, mental health, and safety in our nation’s schools, including:
  - **Title I Funding**: ESSA allows schools to use this funding to develop school-wide health programs, such as hiring a school nurse/counselor, implementing nutrition and physical activity and PE programs, and positive behavior and social-emotional support strategies.
o **Title II Funding:** ESSA broadens the definition of professional development which now extends to all school staff.

o **Title IV Funding:** ESSA created the Part A: Student Support and Academic Enhancement block grant to support well-rounded education, safe and healthy students, among other topics, such as technology, as directed by a needs assessment.

o **State Accountability Systems:** All states must add at least one measure of school quality and student success, such as school climate and safety. Colorado selected chronic absenteeism for Pre-K-8th grade.

**http://www.nasbe.org/policy-update/new-opportunities-to-support-student-health-under-essa/**

- **Public Law 111-296: Healthy, Hunger-Free Kids Act Healthy, Hunger-Free Kids Act** requires schools participating in the USDA’s School Meal Programs to meet new nutrition standards and strengthen and implement local wellness policies.
  **http://www.cde.state.co.us/nutrition/nutriresources**

**Colorado Education Legislation**

- **House Bill 13-1021: Improving School Attendance Act** requires monitoring student attendance and identifying each student who is chronically absent (10 percent or more of one school year), has a significant number of unexcused absences, and is habitually truant (four unexcused absences in one month or 10 unexcused absences in one school year) (C.R.S. 22-33-104 et seq.).

- **Senate Bill 10-191: Ensuring Quality Instruction Through Educator Effectiveness Act** requires licensed personnel including school nurses, occupational therapists, physical therapists, audiologists, counselors, social workers, and speech language pathologists to be included in the state evaluation system.

- **Senate Bill 09-163: Education Accountability Act of 2009** modernizes the reporting of state, district, and school performance information and establishes a new system of support and intervention that includes turnaround plans. The law requires reporting of all non-tested content areas. Therefore, schools must report school health and wellness indicators as a measurement of school performance. The law requires schools post a link to their district wellness policy and report on specific wellness services, including: 1) recess (for elementary schools), 2) existence of wellness committee or team, 3) required health education and P.E. classes, 4) licensed school nurse, 5) school-based health centers, and 6) breakfast participation.

- **Senate Bill 08-212: Colorado’s Achievement Plan for Kids (CAP4K),** which initiated the creation of the Colorado Academic Standards, including the Colorado Comprehensive Health Education and Physical Education Content Standards, which should be offered to all students.  
  **http://www.cde.state.co.us/standardsandinstruction/standards**

**Colorado School Health Legislation**

- **Senate Bill 18-013: Expand Child Nutrition School Lunch Protection Act** extended the age of eligibility for the Child Nutrition School Lunch Protection Program from kindergarten to eighth
grade. The program now provides free lunch to students in grades K-8 who participate and qualify for reduced-price meals (C.R.S. 22-82.9-104).

- **Senate Bill 14-215: Marijuana-Related Revenue** specifies how sales tax dollars from retail marijuana sales will be spent. It also allocates funds for youth health surveys in middle and high schools and for the school health professional grant program (C.R.S. 39-28.8-501).

- **House Bill 13-1081: Comprehensive Human Sexuality K-12 Education** updates the definition of “comprehensive human sexuality education” as evidence-based, comprehensive, medically accurate, and culturally sensitive. It includes positive youth development principles, meaning it focuses on enhancing the interests, skills, and abilities of youths versus focusing solely on risks and dangers (C.R.S. 22-1-128).

- **House Bill 11-1069: Physical Activity Law** requires all public elementary schools to provide students with a minimum of 600 minutes of physical activity per month (30 minutes per school day). It is recommended that schools offer 225 minutes weekly (45 minutes per school day) of physical activity to middle and high school students.

- **House Bill 11-1254: Colorado’s Anti-Bullying Law** states bullying any student is prohibited for any reason, including disability, race, creed, color, sex, sexual orientation, national origin, religion, ancestry, or need for special education services. The law also defines bullying to include cyberbullying and updates reporting requirements (C.R.S. 22-93-101 et seq.). In addition, **House Bill 15-1072: Harassment Through an Interactive Electronic Medium** amends the harassment statute to include situations in which a person uses an interactive electronic medium (such as a text message or computer) to harass another (C.R.S. 18-9-111 (1)).

- **Senate Bill 97-101: School Health Services Program** requires reimbursement funds to be used to provide enhanced health related services to all district students, not just those that qualify for Medicaid services. Consult with your school district/authorizer on how to access reimbursements.

- **C.R.S. 22-1-116: School Children — Sight and Hearing Tests** mandates vision and hearing screenings in grades K-3, 5, 7, and 9. Parents must be notified when a deficiency is found.

- **C.R.S. 22-1-119: Liability in Dispensing Drugs to Students** exempts school staff from liability for administering medications with parental approval.

- **C.R.S. 22-32-139: Food Allergy and Anaphylaxis Policy Required** ensures school districts have a policy on managing food allergy and anaphylaxis for students.

- **C.R.S. 22-60.5-210: Types of Special Services Licenses Issued — Term** requires all SSPs, including nurses, to be licensed and endorsed by CDE to work in public schools.

- **C.R.S. 25-4-902: Immunizations Prior to Attending School** prohibits children from attending school unless the parent or guardian has presented up-to-date immunizations to the school. Parents or guardians have 14 days from notice of noncompliance to obtain the required immunizations for their child or to have file signed personal, medical, or religious exemptions.
Key Resources for New Charter Schools

With the multitude of state and national resources supporting the integration of health efforts into schools and school districts, additional guidance may be warranted to support users regarding easy access to the existing best practice resources; highlighting coordination amongst these resources. The following outline is a high-level roadmap aimed at informing the user on when to use the various resources listed below based on where the user is in the process of creating healthy schools. Please note that many of these resources could be listed in multiple categories below, but for ease, each resource is listed to maximize and ensure complete utilization. Resources below that span all categories are introduced at the point in which you would begin using the resource.

Roadmap for Best Practice Resources

1. GETTING STARTED
   - WSCC Implementation Guide
   - Destination: Healthy Schools Successful Students
   - AIM-XL Strategic Planning Process
   - Checklist for Creating Youth Advisory Councils
   - Community & Family Engagement: Principals Share What Works

2. ASSESSMENT
   - Healthy Kids Colorado Survey (HKCS)
   - Healthy Schools Smart Source
   - Measuring School Climate: A Toolkit for Districts and Schools
   - Student, Parent, Staff Perception Survey(s)

3. PLANNING & IMPLEMENTATION
   - WSCC Menus of Evidence-Based Practices
   - Connecting Health and Learning
   - Healthy School Champions Magazine
   - Colorado Framework for School Behavioral Health
   - Smart Guides
   - School Nurse Resource
Hyperlinks and References:

- [WSCC Implementation Guide](#) (National Association for Chronic Disease Directors)
- [Destination: Healthy Schools Successful Students](#) (RMC Health)
- [AIM-XL Strategic Planning Process](#) (Center for Rural School Health & Education)
- [Checklist for Creating Youth Advisory Councils](#) (Kaiser Permanente)
- [Community & Family Engagement: Principals Share What Works](#) (Coalition for Community Schools)
- [Healthy Kids Colorado Survey (HKCS)](#) (Colorado Department of Public Health and Environment)
- [Healthy Schools Smart Source](#) (Colorado Department of Public Health and Environment)
- [Measuring School Climate: A Toolkit for Districts and Schools](#) (School Climate Survey(s))
- Student, Parent, Staff Perception Survey(s)
- [WSCC Menus of Evidence-Based Practices](#) (University of Northern Colorado/IDEAS)
- [Connecting Health and Learning is Vital to Student Success: An Overview of Relevant Research](#) (CEI)
- [Healthy School Champions Magazine](#) (success stories) (CEI)
- [Colorado Framework for School Behavioral Health](#) (CEI)
- [Smart Guides](#) (RMC Health)
- [School Nurse Resource](#) (Colorado League of Chart Schools)