

By: Representative Scott

To: Education

HOUSE BILL NO. 496

1 AN ACT TO AMEND SECTION 37-13-134, MISSISSIPPI CODE OF 1972,
 2 TO REQUIRE SCHOOL DISTRICTS TO COLLECT AN ANNUAL BODY MASS INDEX
 3 (BMI) PERCENTILE BY AGE FOR EACH STUDENT IN KINDERGARTEN AND IN
 4 EVEN NUMBERED GRADES THROUGH GRADE 10, AND TO PROVIDE THAT
 5 INFORMATION TO PARENTS WITH AN EXPLANATION; TO ALLOW ANY PARENT TO
 6 REFUSE TO HAVE THEIR CHILD'S BMI PERCENTILE ASSESSED AND REPORTED,
 7 BY PROVIDING A WRITTEN REFUSAL TO THE SCHOOL; TO PROVIDE THAT
 8 STUDENTS IN GRADES 11 AND 12 ARE EXEMPT FROM THE REQUIREMENT TO
 9 MEASURE AND REPORT THEIR BMI PERCENTILE; AND FOR RELATED PURPOSES.

10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

11 **SECTION 1.** Section 37-13-134, Mississippi Code of 1972, is
 12 amended as follows:

13 37-13-134. (1) The Legislature recognizes that there is a
 14 problem with Mississippi student inactivity and obesity, and
 15 therefore requires the following guidelines for school district
 16 physical education, health education and physical activity and
 17 fitness classes:

18 (a) Kindergarten through Grade 8: One hundred fifty
 19 (150) minutes per week of physical activity-based instruction and
 20 forty-five (45) minutes per week of health education instruction,
 21 as defined by the State Board of Education.



22 (b) Grades 9 through 12: One-half (1/2) Carnegie unit
23 requirement in physical education or physical activity for
24 graduation. Beginning with the 2015-2016 Ninth Grade class, an
25 instructional component on the proper administration of
26 cardiopulmonary resuscitation (CPR) and the use of an automated
27 external defibrillator (AED) shall be included as part of the
28 physical education or health education curriculum. The curricula
29 shall incorporate into the instruction the psychomotor skills
30 necessary to perform cardiopulmonary resuscitation and use of an
31 automated external defibrillator as follows:

32 (i) An instructional program developed by the
33 American Heart Association or the American Red Cross;

34 (ii) An instructional program which is nationally
35 recognized and is based on the most current national
36 evidence-based Emergency Cardiovascular Care guidelines for
37 cardiopulmonary resuscitation and the use of an automated external
38 defibrillator;

39 (iii) A licensed teacher shall not be required to
40 be a certified trainer of cardiopulmonary resuscitation, to
41 facilitate, provide or oversee such instruction for
42 noncertification; and

43 (iv) Courses which result in a certification being
44 earned must be taught by an authorized CPR/AED instructor.

45 For purposes of this paragraph (b), the term "psychomotor
46 skills" means the use of hands-on practicing to support cognitive



47 learning. Cognitive-only training does not qualify as
48 "psychomotor skills."

49 The requirements of this paragraph (b) shall be minimum
50 requirements. Any local school district shall be authorized to
51 offer CPR and AED instruction for longer periods of time than
52 required herein, and may enhance the curriculum and training
53 components.

54 (c) The State Department of Education shall establish a
55 procedure for monitoring adherence by school boards to the
56 requirements set forth in this section.

57 All instruction in physical education, health education and
58 physical activity must be based on the most current state
59 standards provided by the State Department of Education.

60 (2) Beginning with the 2006-2007 school year, each local
61 school board shall, consistent with regulations adopted by the
62 State Board of Education, adopt a school wellness plan which shall
63 promote a healthy lifestyle for Mississippi's school children and
64 staff. Beginning with the 2008-2009 school year, the school
65 wellness plan shall also promote increased physical activity,
66 healthy eating habits and abstinence from the use of tobacco and
67 illegal drugs through programs that incorporate healthy lifestyle
68 choices into core subject areas which may be developed in
69 partnership with the Institute for America's Health.

70 (3) Beginning with the 2012-2013 school year, the State
71 Board of Education, in consultation with the State Department of



72 Health, shall have the authority to establish a school health
73 pilot program to improve student health so that all students can
74 fully participate and be successful in school. The school health
75 pilot program shall be implemented in local school districts, as
76 provided in Section 37-13-134.1.

77 (4) Beginning with the 2018-2019 school year, each school
78 district shall require the schools in the district to collect an
79 annual body mass index (BMI) percentile by age for each student in
80 kindergarten and in even numbered grades through Grade 10, and
81 provide that information to parents. Any parent may refuse to
82 have their child's BMI percentile assessed and reported, by
83 providing a written refusal to the school. Students in Grades 11
84 and 12 are exempt from the requirement to measure and report their
85 BMI percentile. The information provided to parents shall include
86 an explanation of the BMI percentile, benefits of physical
87 activity, benefits of proper nutrition, and resources for parents
88 that promote and encourage a healthy lifestyle. The State Board
89 of Education shall provide resources, training and technical
90 assistance to school districts on the collection and dissemination
91 of the BMI percentile. The school districts shall treat the
92 students' BMI information as private information in the same
93 manner as other student records are treated.

94 (* * *5) The Legislature shall appropriate sufficient
95 state-source funds for the State Department of Education to employ
96 a physical activity coordinator to assist districts on current and



97 effective practices and on implementation of physical education
98 and physical activity programs.

99 (* * *6) The physical activity coordinator employed under
100 Section 37-13-133 must have the qualifications prescribed in any
101 of the following paragraphs, which are listed in the order of
102 preference:

103 (a) A doctorate in physical education, exercise science
104 or a highly related field, and at least three (3) years of
105 experience in teaching physical education in Grades K-12 or in
106 physical activity promotion/fitness leadership; or

107 (b) A master's degree in physical education, exercise
108 science or a highly related field, and at least five (5) years of
109 experience in teaching physical education in Grades K-12 or in
110 physical activity promotion/fitness leadership; or

111 (c) A bachelor's degree in physical education, a
112 teacher's license, and at least seven (7) years of experience in
113 teaching physical education in Grades K-12 or in physical activity
114 promotion/fitness leadership.

115 (* * *7) The Governor's Commission on Physical Fitness and
116 Sports created under Section 7-1-551 et seq., the Mississippi
117 Council on Obesity Prevention and Management created under Section
118 41-101-1 et seq., the Task Force on Heart Disease and Stroke
119 Prevention created under Section 41-103-1 et seq., the Mississippi
120 Alliance for Health, Physical Education, Recreation and Dance, and
121 the Mississippi Alliance for School Health shall provide



122 recommendations to the State Department of Education regarding the
123 employment of the physical activity coordinator. The department
124 shall consider the recommendations of those entities in employing
125 the physical activity coordinator.

126 (* * *8) The physical activity coordinator shall present a
127 state physical activity plan each year to the Governor's
128 Commission on Physical Fitness and Sports, the Mississippi Council
129 on Obesity Prevention and Management, the Task Force on Heart
130 Disease and Stroke Prevention, the Mississippi Alliance for
131 Health, Physical Education, Recreation and Dance, and the
132 Mississippi Alliance for School Health.

133 (* * *9) The physical activity coordinator shall monitor
134 the districts for adherence to current Mississippi school
135 accountability standards and for implementation of the physical
136 education curriculum on file with the State Department of
137 Education. The State Department of Education shall monitor and
138 act as a clearinghouse for the activities of the local school
139 health councils established pursuant to subsection (* * *10) of
140 this section.

141 (* * *10) (a) The local school board of each school
142 district shall establish a local school health council for each
143 school which shall ensure that local community values are
144 reflected in the local school's wellness plan to address school
145 health. Such councils shall be established no later than November
146 1, 2006.



147 (b) The local school health council's duties shall
148 include, but not be limited to, the following:

149 (i) Recommend age-appropriate curriculum and the
150 number of hours of instruction to be provided in health and
151 physical activity-based education, provided that the number of
152 hours shall not be less than that required by this section;

153 (ii) Recommend appropriate practices that include
154 a coordinated approach to school health designed to prevent
155 obesity, cardiovascular disease, Type II diabetes and other health
156 risks, through coordination of:

- 157 1. Health education;
- 158 2. Physical education;
- 159 3. Nutritional services;
- 160 4. Parental/Community involvement;
- 161 5. Instruction to prevent the use of tobacco,
162 drugs and alcohol;
- 163 6. Physical activity;
- 164 7. Health services;
- 165 8. Healthy environment;
- 166 9. Counseling and psychological services;
- 167 10. Healthy lifestyles; and
- 168 11. Staff wellness * * *;

169 (iii) Provide guidance on the development and
170 implementation of the local school wellness plan.



171 (c) The local school board shall appoint members to the
172 local school health council. At a minimum, the school board shall
173 appoint one (1) person from each of the following groups:

174 (i) Parents who are not employed by the school
175 district;

176 (ii) The director of local school food services;

177 (iii) Public schoolteachers;

178 (iv) Public school administrators;

179 (v) District students;

180 (vi) Health care professionals;

181 (vii) The business community;

182 (viii) Law enforcement;

183 (ix) Senior citizens;

184 (x) The clergy;

185 (xi) Nonprofit health organizations; and

186 (xii) Faith-based organizations.

187 (* * * 11) Nothing in this section shall be construed to
188 prohibit or limit the sale or distribution of any food or beverage
189 item through fund-raisers conducted by students, teachers, school
190 groups, or parent groups when the items are intended for sale off
191 the school campus.

192 **SECTION 2.** This act shall take effect and be in force from
193 and after July 1, 2018.

