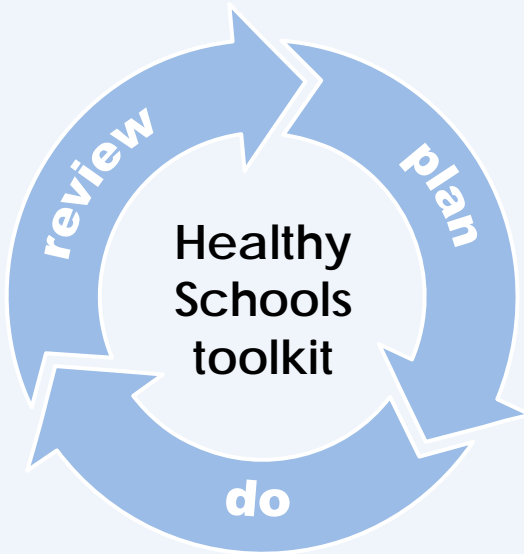




# Welcome to the Healthy Schools toolkit



Schools play an important role in supporting the health and wellbeing of children and young people.

Healthy Schools continues to offer a practical, 'plan-do-review' approach to improving health and wellbeing in children and young people.

This toolkit contains school examples, adaptable templates, and information.

[Read on](#)

## Schools say:

'I would like a toolkit that I can dip in and out of, that allows the school to download what is useful to work with.'

Deputy head teacher, primary school

## The Government says:

'We will make sure that schools have access to evidence of best practice, high quality materials ... which they can choose to use.'

The Schools White Paper 2010



# Toolkit index

You can read this toolkit from front to back like a document, or click around it like a website using the menu bar at the top and links within the text.

[Where should I start?](#)

Phase overviews [PLAN phase](#) [DO phase](#) [REVIEW phase](#)

School examples [Go to school examples index](#)

Useful templates [Healthy Schools planning template](#) [School story template](#)  
 [Healthy Schools whole school review template](#)

Information pages [Health and wellbeing group](#) [Activities/interventions](#) [Reviewing your priority](#)  
 [Using data](#) [Monitoring progress](#)  
 [Outcomes and milestones](#)  
 [Activities/interventions](#)

Further reading [Go to further reading index](#)



# Where should I start?

If you're new to Healthy Schools, start by reading the [PLAN](#), [DO](#) and [REVIEW](#) phase overviews to understand the purpose of each phase of the Healthy Schools approach. Then read the [school examples](#).

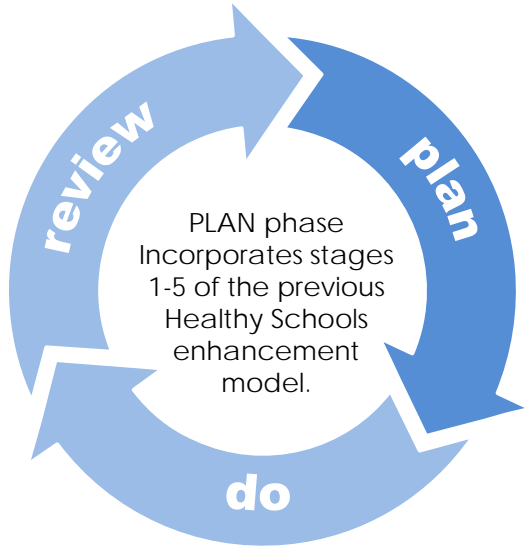
If your school previously...	...then you may find it helpful to:
<p>...achieved <b>National Healthy School Status</b> (NHSS) and/or used the <b>Healthy Schools annual review</b>...</p>	<ul style="list-style-type: none"> <li>• Read the <a href="#">PLAN</a>, <a href="#">DO</a> and <a href="#">REVIEW</a> phase overviews to understand the purpose of each phase of the Healthy Schools approach.</li> <li>• Read the <a href="#">school examples</a>.</li> <li>• Read the information pages for the <a href="#">PLAN</a> phase.</li> <li>• Look at the <a href="#">whole school review template</a>, which replaces the NHSS audit and annual review.</li> <li>• Note that if your school completed NHSS and/or a Healthy Schools annual review online before 11<sup>th</sup> March 2011, we emailed the whole school review template to you in March 2011 containing your school's NHSS or annual review responses.</li> </ul>
<p>...and also worked on the Healthy Schools enhancement model, using the 'HWIT' tool...</p>	<p><i>As above plus:</i></p> <ul style="list-style-type: none"> <li>• Continue working on the <a href="#">PLAN</a>, <a href="#">DO</a> and <a href="#">REVIEW</a> phases, depending on where you had got to with the enhancement model.</li> <li>• Look at the <a href="#">planning template</a>, which incorporates key elements of the online HWIT tool but is simpler to use.</li> <li>• Note that if your school previously entered priorities, outcomes and milestones into the HWIT tool before 11<sup>th</sup> March 2011, we emailed the planning template to you in March 2011 containing your school's responses.</li> </ul>



# PLAN phase overview



PLAN



The purpose of the **PLAN** phase is to:

- establish a group to lead health and wellbeing improvement;
- select your school's current health and wellbeing (HWB) priority/ies based on data about children and young people's needs;
- define the outcomes you plan to achieve, and identify milestones along the way; and
- identify activities/interventions.

## Schools say...

**'It would be good to have our own style of action plan and targets for Healthy Schools.'**

Head teacher,  
Voluntary-aided primary school

## You will need...

Your school improvement plan

Children and young people's health and wellbeing data for your school/cluster/area

## You may find helpful...

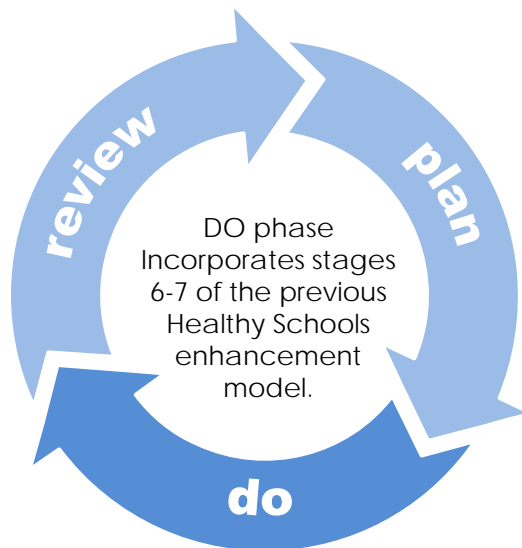
- [Health and wellbeing group](#)
- [Using data](#)
- [Outcomes and milestones](#)
- [Activities/interventions](#)
- [Healthy Schools planning template](#)
- [School examples](#)



# DO phase overview



DO



The purpose of the **DO** phase is to:

- select and implement activities/interventions that will help achieve your outcomes;
- monitor progress towards your milestones and outcomes; and
- make any necessary adjustments to milestones and outcomes.

## Schools say...

**'Health and wellbeing is embedded in ongoing school systems. The standing items for senior leadership team meetings are the priorities in the school improvement plan.'**

Head teacher, special school

## You will need...


Your school improvement plan

Information about evidence-based health and wellbeing activities/interventions


## You may find helpful...

 [Activities/interventions](#)

 [Monitoring progress](#)

 [Healthy Schools planning template](#)

 [School examples](#)

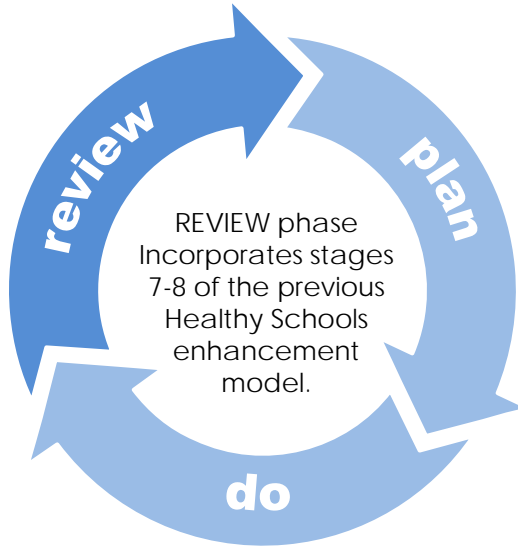
 Principles and examples of evidence-informed practice ([further reading](#))



# REVIEW phase overview



REVIEW



The purpose of the **REVIEW** phase is to:

- evaluate your achievement of outcomes;
- review, share and celebrate your improvements in children and young people's health and wellbeing; and
- review your school's provision for health and wellbeing.

## Schools say...

**'Recognition from children and parents is most important.'**

Head teacher,  
Primary school


## You will need...

Your school improvement plan

## You may find helpful...

 [Reviewing your priority](#)

 [School story template](#)

 [School examples](#)



# School examples index

This section contains examples of Healthy Schools' work in the form of school stories and examples of schools' planning.

Primary schools	Secondary schools
<p><a href="#">Alwyn Infant and Nursery School</a> – behaviour and emotional literacy</p> <p><a href="#">Brading C of E Primary School</a> – involving governors</p> <p><a href="#">Carlton Hill Primary School</a> – healthy weight <b>(includes an example of school planning)</b></p> <p><a href="#">Davigdor Infant School</a> – emotional wellbeing <b>(includes an example of school planning)</b></p> <p><a href="#">Oakington Manor Primary School</a> – involving parents</p>	<p><a href="#">Pimlico Academy</a> – violent crime and weight management <b>(includes an example of school planning)</b></p> <p><a href="#">Tideway School</a> – healthy eating and emotional wellbeing <b>(includes an example of school planning)</b></p> <p><a href="#">Hazel Lodge pupil referral unit</a> – emotional wellbeing</p>





# School story

## Alwyn Infant and Nursery School Windsor and Maidenhead (1/2)



February 2011

Alwyn Infant School is a large infant school and our children are from culturally diverse backgrounds. Healthy Schools is a central part of our school's ethos and, having gained National Healthy School Status, we've been working on the 'enhancement model' prioritising emotional health and wellbeing.

### What needs did we identify?

Many of our children were spending large amounts of time at home playing computer games and watching television, which we felt could adversely affect their social interaction and emotional development. We decided to conduct an audit of emotional health and wellbeing following an increase in incidents of poor behaviour.

We followed this audit by conducting a survey about behaviour with parents/carers and subsequently set out to:

- reduce recorded instances of poor behaviour;
- reduce the number of children with poor social skills; and
- reduce the number of children referred to our emotional literacy support assistants (ELSAs).

### What activities/interventions did we develop to meet these needs?

We spent time developing a comprehensive positive behaviour policy, exploring interventions, and coordinating activities with social and emotional aspects of learning (SEAL) and Targeted Mental Health in Schools (TaMHS).

We looked at social interactions in class. We asked children to respond confidentially to questions about who they play with and turned the results into a sociogram (a graphic representation of social links that a person has). This revealed many different levels of skill in social interaction. Teachers could then focus on the children who were having weaker interactions. We used the sociogram to track the success of our interventions, which ranged from SEAL small group activities to constant informal attention and praise to encourage a change in perception of others towards these children.

To support certain children who find mornings difficult we used nurture groups, which children go to first thing in the morning to participate in calming social activities. Teachers have found the groups have helped children deal more easily with the rest of the day.





# School story

## Alwyn Infant and Nursery School Windsor and Maidenhead (2/2)



**Emotional literacy support assistants** (ELSAs) provide support for many identified children. They are teaching assistants who have been trained to help develop emotional literacy. At lunchtimes our ELSAs help identified children to play better with others and are available for all children to talk to.

We also implemented a Fun Friends programme for all our children to enjoy. Fun Friends has been designed to build emotional resilience, social skills and self-confidence. We ran a successful pilot scheme involving parents/carers before rolling out to all classes. Weekly sessions included play-based activities such as role-play, puppets, games, stories, music, movement and art, and focus on particular skills.

### What did we achieve and how did teachers know?

At the end of last year we completed another audit and set of behaviour surveys. These clearly indicated an increase in appropriate behaviour from our children. The children also told us that they felt happier. Parents/carers, who completed surveys, provided us with additional anecdotal evidence that their children were happier.

Our specific achievements have included:

- Eight per cent reduction in the number of recorded instances of poor behaviour
- Six per cent reduction in the number of children highlighted as having poor social skills
- Seven per cent reduction in the number of children being referred to an ELSA.

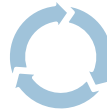
### What next?

Spurred on by the success of our interventions we intend to continue our Healthy Schools work. We will review to check that children's social and emotional development continues to improve. We plan to do more work with parents/carers and the wider community to strengthen these vital partnerships.

*'Everything we do, we do as a whole school ensuring that all our children benefit. We could not achieve this success without the commitment and enthusiasm of every member of staff.'* **Head teacher**

**Description:** Maintained infant and nursery school. 302 children.

**Context:** 10% FSM, 17% SEN, 20% BME



# School story

## Brading C of E Primary School Isle of Wight (1/2)



February 2011

We are a small, voluntary-aided, rural primary school at the heart of Brading village, on the eastern side of the Isle of Wight. We currently provide education for years R to 5. From September 2011 we will retain year 6 children, becoming an all-through primary. Our families have a range of needs such as a high level of free school meal entitlement and poor access to transport.

Our school motto is: 'We are a TEAM that TRUST each other'. Our ethos has developed around: TEAM (Together Everyone Achieves More) and TRUST (Truth Respect Unity Sincerity Tolerance). These have been central to our Healthy Schools work, which has focussed over recent years on emotional health and wellbeing (EHWB) and healthy eating.

### How are our governors involved?

The governors' Standards and Achievement Committee is where improvement relating to Healthy Schools is formally reported. Our governors see themselves as being actively involved the daily life of the school too. They act as vital links between the school, church, community and other facets of village life. A number of governors, including our chair, have been a driving force behind the growing and healthy eating aspects of Healthy Schools at Brading. We also have a 'link

governor' for our School Council who attends every meeting. This demonstrates to the children their direct connection to school decision-making and involvement with the wider community.

### Growing and cooking fruit and vegetables

During 2007 we discussed offering a range of activities to our children and the idea of gardening was proposed. The chair of governors went to the village church and community members, who agreed to help with the development of raised beds. Our garden benefited from donations of plants, seeds and most importantly time by the community, parents/carers and the town council.

The chair of governors has driven the project. We found the children enjoyed the gardening project from day one. During the following two years we were donated a poly tunnel, which was constructed by local residents. We now have our own thriving market garden. All these developments continue to be overseen by our chair and vice chair of governors, together with a team of volunteers from the village.

As a result, we include healthy eating and gardening in our Friday afternoon choosing time; our 'university afternoons'. All the children work together in mixed age



# School story

## Brading C of E Primary School Isle of Wight (2/2)



groups, on a rotation of practical, enrichment activities. This includes the chance to garden all year round, supervised by volunteers. We also offer groups the chance to cook healthy food with produce from our own garden. We even grow sufficient produce for our school kitchen to use as ingredients in some school meals, while other fruit and vegetables are sold to raise money to make the garden sustainable.

The children love the practical opportunities and their learning about fresh food has increased. They are very proud of what is grown and enjoy entering competitions. We have won prizes in the Horticultural Show, including several coveted cups, and were runner-up for growing potatoes in a national competition.

### What difference has this made for the children?

The garden gives our children an opportunity that is not available to most of them outside school, namely to collaborate and experience gardening. The experience of eating produce from their own school garden is a very tangible achievement for the children. The opportunity for our children to work with adult volunteers is enriching and is drawn into 'speaking and listening' in literacy lessons. We see it as an embodiment of our school values - TEAM in action!

### Next steps

The garden has led to other opportunities for our children. For example we have just begun a herb growing project with the nearby Brading Roman Villa. The children will develop a herb garden at the villa, and be able to draw upon this to enrich their learning in key stage two history. EHWP will continue to feature for us as we expand to become a year R to year 6 primary school, linked to the cooperative learning opportunities our garden provides.

*'The development of a garden has been a real learning journey. The children have learned so many skills outside the classroom.'* **Chair of governors**

**Description:** Reception to year 5 primary school. 86 children.

**Context:** 36% FSM, 25% SEN, 5% BME



# School story

## Carlton Hill Primary School Brighton and Hove (1/3)



February 2011

We are a small, one class entry primary school in central Brighton. The school is surrounded by social housing and many of our families have complex needs. There is a high turnover of children at the school as a significant proportion of families move to other parts of the city within a couple of years. We have worked closely with our community for many years through partnerships - such as with the unemployment centre and Tarnerland Community Association - and by providing facilities for local groups to use.

Healthy Schools has been an important feature of school life for over six years, helping to meet the social and health needs of our families. Our Healthy School group has always benefited from the participation of parents/carers and a governor representative, and the School Council has two representatives.

### What needs did we identify?

Our Healthy School group looked through local public health data and found information on the local authority's priorities. We then explored data and information we hold in school, including:

- data from our Ofsted SEF, attendance and behaviour reports, our annual Safe and Healthy at School Survey (SHSS), and our annual student, parent and staff surveys;

- feedback from the School Council, summarised in our Healthy Schools annual review, recommending that food and drink provision could be improved;
- feedback from a year 5 'child research' project, which looked at lunchtimes and food; and
- specific concerns about vulnerable children, for example the attendance, involvement in incidents and progress of children with behavioural, emotional and social difficulties (BESD).

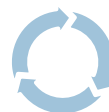
Based on this information and our school improvement plan we chose childhood weight management and improving emotional wellbeing as our priorities.

### How do we plan to address these needs?

Some of the specific measurable outcomes we are aiming for are shown in our [school planning example](#).

### What activities are we developing?

We wanted to launch our latest Healthy School drive in a high profile, fun way. Our School Council decided a fun way to encourage healthy eating at lunchtimes would be our own healthy eating mascot.



# School story

## Carlton Hill Primary School Brighton and Hove (2/3)



We ran a competition for the design and 'Frutti Tutti' was born. We then had a costume made and 'Frutti Tutti' went round at lunchtimes throughout the summer term rewarding children for eating healthily, based on a weekly theme. Children received tokens as rewards and these went into a draw to be 'Frutti Tutti', or one of the helpers, the following week. These tokens also provided feedback on healthy eating choices being made by children. 'Frutti Tutti' was rested after a term.

Our emphasis has now shifted to redesigning school lunches to give more of a restaurant feel. Packed lunch eaters and school meal eaters sit together and we use a seating plan to encourage socialising with others across the school while eating.

We keep an informal eye on vulnerable key stage one children, noticing what they bring to school to eat and encouraging parents/carers to take up their free school meal entitlement. We've noticed improvements on both these fronts. We also provided subsidised places for more of our vulnerable children at our breakfast club. As a consequence, their attendance has improved and teachers report they are better prepared for learning in the mornings.

### What next?

We will soon receive the findings from our SHSS, which is coordinated by our local authority. This will give us important feedback about a number of our milestones. We plan to increase the range of clubs for children after school, including more physically active clubs. Work is also planned with the School Council to develop child-friendly guidelines for healthy and sustainable packed lunches, which will be incorporated into the school's food policy.

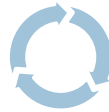
And, no doubt, 'Frutti Tutti' will return!

*'All staff at our school understand that emotional and physical health is crucial for children to learn well and so the time we invest in these areas results in greater achievements by our children.'* **Head teacher**

**Description:** Maintained primary school. 212 children.

**Context:** 29% FSM, 40% SEN, 25% BME

Key stage 2 level 4 - English 69%, maths 69%



# School planning example – healthy weight

## Carlton Hill Primary School Brighton and Hove (3/3)



February 2011

### Outcomes

Increase from 55 to 75 per cent the number of children participating in 3+ hours a week of physical activity in and out-of-school

Increase from 31 to 50 per cent the number of children who report eating two or more portions of fruit and vegetables for lunch daily

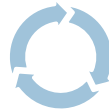
Increase from 25 to 50 per cent the number of FSM children and their families who report satisfaction with their school meals

### Milestones

- The range of physical activity clubs offered to children has increased.
- A greater number of children have attended after-school clubs regularly.
- Timetabled time for PE has been increased in all year groups.
- Physical activity promoted through homework grids.
- Stepped increase to 65% in the number of children participating in greater than three hours exercise per week.
- School Council guidelines on healthier packed lunches have been produced.
- Packed lunch policy has been reviewed and includes the School Council guidelines.
- Child-led reward system for healthy eating choices implemented.
- The number of children eating two portions of fruit and vegetables for lunch has increased to 40%.
- The number of unhealthy choice items in lunchboxes is on a firm, downward trend, term on term.
- Improvements to the school dining hall have been completed.
- School menu changes have been implemented.
- Science/PSHE planning includes lessons on healthy eating and exercise in all year groups.
- The number of children reporting that they are satisfied with school dinners has increased from 25% to 50%.
- 35% of children and families eligible for free school meals have reported they are satisfied with school meals.

Priority: To encourage healthy weight





# School story

## Davigdor School Brighton and Hove (1/3)



February 2011

We are a large infant school in central Hove, which has recently increased to four class entry. We share a site with the local junior school and our families cover a wide socio-economic range. We aim to provide our children with a vibrant learning environment and this includes our work to improve their emotional and physical health, which is overseen by our well-established Healthy School group.

We believe emotional wellbeing underpins the ability of children to learn well and fulfil their potential. We have been involved in social and emotional aspects of learning (SEAL) for the past six years and have been pleased with the improvements in learning opportunities for our children. However, this also provided us with information about other emerging needs.

### What needs did we identify?

When considering which needs to prioritise, our Healthy School group looked through local public health data and local authority priorities as well as school data including:

- hard data such as that in our Ofsted SEF, behaviour and attendance reports and information from SEAL surveys;

- feedback from discussions with the School Council about health and wellbeing; and
- school meals data and feedback about vulnerable groups of children.

As a result of our needs analysis, and linked to our school improvement plan, we chose to address childhood weight management and improving emotional wellbeing as our priorities.

### How do we plan to address these needs?

Some of the specific measurable outcomes we are aiming for are shown in our [school planning example](#).

### What activities are we developing?

Echoing what our data had told us, some children told us they felt unhappy during lunchtimes. We found this out when monitoring our new behaviour policy. We decided to extend the new behaviour system to lunchtimes, to be consistent with lesson time. This involves a routine of warnings for children: sun (all OK), sun-and-cloud (warning) then cloud (lose some playtime). Our midday supervisors had a series of meetings about the new approach and ways to reward children's good behaviour. We then had a 'snapshot week' where we closely monitored the recording of



# School story

## Davigdor School Brighton and Hove (2/3)



incidents. This both tested out the new arrangements and provided the baseline for one of our Healthy School outcomes. We also found that a good 'handover' arrangement is needed so that class teachers know about incidents and can ensure consistency. We now take a snapshot once a term to monitor the system and give us data for our Healthy School milestones.

We have included SEAL learning activities in PSHE education so children recognise difficult emotions and practice ways to calm down. This is supported by all of our classrooms having a calming down box. These boxes contain a range of equipment to help a child who is feeling stressed or upset; a child can go to the designated area and take a short time-out. All of our teachers have been trained in and have introduced 'bubble time'. This offers children one-to-one time with a member of staff, or with another child, in order to talk about and resolve a situation that is making them feel unhappy or anxious.

We introduced the children to our Healthy School plans, such as 'bubble time', as part of our Health and Wellbeing Week. This worked well and they were excited about the changes. Over the week we also organised activities such as skipping, yoga, healthy lunchbox workshops and music therapy.

### What next?

Our next focus is the redevelopment of our playground following recent building work to expand the school. The School Council has already been involved in design ideas. The playground will include a quiet area and an activity trail. While this work is happening we will maintain the systems for responding to incidents and introduce other initiatives including a 'game of the week' and organised exercises for all at the end of lunch-break.

*'Health and emotional wellbeing are central to effective learning. Through our in-depth and evidence-based focus on these areas our practice has really developed and is clearly having a positive impact on the children.'*

### Head teacher

**Description:** Maintained infant school. 360 children.

**Context:** 13% FSM, 10% SEN, 27% BME





# School planning example – emotional health

Davigdor School Brighton and Hove (3/3)



February 2011

## Outcomes

## Milestones

Priority: Emotional health of children

Reduce from 34 to 17 the number of incidents at lunchtime play recorded each week

Increase from 65 to 75 per cent the number of children who feel they have someone to talk to when angry, worried or anxious

Increase from 17 to 35 per cent the number of year two boys who feel they are able to calm down quickly when angry

- Pupils’ emotional HWB has been promoted through special curriculum weeks.
- Monitoring of PSHE education tracking has effectively identified children for nurture groups and counselling.
- All midday supervisors have received refresher training for lunchtime play.
- New playground equipment has been installed in the playground.
- Two nurture groups have been provided for identified boys in KS1.
- Bubble time has been implemented consistently across the whole school.
- Calm areas with appropriate resources have been established in every classroom.
- A quiet area has been established in the playground.
- All staff report they are confident dealing with bullying including racial or homophobic bullying.
- The PSHE education curriculum includes increased learning opportunities for children to focus on calming down strategies and managing difficult emotions.
- In Reception, PSED has included teaching of calming down strategies.
- Teachers report feeling confident at teaching anger management strategies to children.
- A sample playtime incident log taken over a week shows that, after one year, there is a stepped reduction from 34 to 25.
- SEAL survey shows that after one year the number of children who enjoy playtimes increased from 80 to 90 per cent.
- Pupil surveys show that after one year the number of children being kind towards others in the playground increased from 66 to 75 per cent.
- The number of children who feel they have someone to talk to when angry, worried or anxious increased from 65 to 70 per cent after year one.
- Questionnaires indicate that, after one year, teachers report children are using bubble time effectively.
- SEAL survey shows that, after one year, there is a stepped increase from 17 to 25 per cent of boys in year 2 who report they are able to calm down quickly when angry.



# School story

Oakington Manor Primary School London Borough of Brent (1/2)



February 2011

We are a large urban primary school located under the shadow of the new Wembley Stadium. Our children bring a wide range of needs to school. We see our commitment to health and wellbeing as an essential feature of school life.

Our work on Healthy Schools and extended services embodies our community education ethos. These areas of school life are led by one of our deputy head teachers, with support from our Healthy Schools coordinator.

## How do we work with parents?

We have made great strides with opportunities for children to learn about health and wellbeing and be fit and well at school. All children are given a water bottle when starting school and the School Council works closely with our kitchen staff on the menus. Our children are also actively involved in making the school a safe and caring place by acting as Playground Pals and Lunchtime Officers.

However, children's health and their readiness to learn are most influenced at home, by their parents/carers.

We place great emphasis on communicating every week with parents/carers through our newsletter, our parent-staff association meets regularly and organises

events and parents/carers are invited to weekly class assemblies. As a school we survey our parents/carers three times a year and listen to concerns and ideas. Recent surveys have focused on school meals, children's safety, and communication with the school.

In response to feedback from our parents/carers we have developed two particular programmes with partner organisations:

- Short courses, including family learning (with Brent Adult and Community Education Services), family wellbeing classes with MEND (a social enterprise dedicated to reducing overweight and improving weight management) and after-school cooking sessions with the school chef.
- A programme of NVQ level 2 and 3 training for parents/carers based at the school.

## Short courses

These learning opportunities take place in a custom-built chalet on the school site. We consult parents/carers about course times and crèche facilities are available. Uptake has been excellent and the main feedback we hear is 'more courses please!'.



# School story

## Oakington Manor Primary School London Borough of Brent (2/2)



Examples of courses we have hosted include:

- Ten week 'Learn English with your child' course, which supports parents/carers to learn English themselves and work with teachers on developing their child's English.
- A 'Bringing up confident children' course over six weeks, delivered by Parent Line.
- ICT training, including internet safety, offered several times a year.

### NVQ programme

Our parents/carers are very motivated about their children's education. However, a lack of awareness of support services and the challenge of English as a second language sometimes present significant barriers.

In response to these challenges we now run a one year course for up to 16 parents/carers. Central to this programme is time spent every week volunteering at the school. During the rest of the course parents/carers take literacy and numeracy classes up to National Certificate level 2, and an NVQ Teaching Assistant training programme.

The contribution of the trainees is valued across the school and has been particularly positive for their own children. As a result of last year's programme seven parents/carers completed NVQ level 2 and two more went on to level 3. Others are employed in child care or seeking work as teaching assistants.

### Next steps

We see our parents/carers as key members of our school community and key to improving the health and wellbeing of our children. We will continue to respond to their requests for access to courses and for opportunities to be involved throughout the school day.

*'Healthy Schools has been helpful in building community cohesion and relationships with parents in our very diverse community. It's an important ingredient in ensuring that our children are ready to learn, happy and confident to deal with life.'* **Deputy head teacher**

**Description:** Mixed nursery and primary. 730 children.

**Context:** 30% FSM, 48% SEN, 80% BME.

86% level 4 English, 88% maths.



# School story

## Pimlico Academy City of Westminster (1/3)



February 2011

### What was our starting point?

The health and wellbeing of our students has underpinned our transformation at Pimlico Academy. We aim, every day, to provide students with an excellent educational experience. We believe this has to be based on them feeling safe, and continually improving their physical wellbeing.

When the Academy opened in September 2008 following the closure of the predecessor school we:

- redesigned the tutor system around 'houses' and vertical tutor groups;
- entered into a contract with a new caterer and rebuilt the canteen, which has resulted in 55 per cent of students eating a school lunch regularly, rather than little more than 20 per cent; and
- reviewed our curriculum to inspire students as learners, including developing a new PSHE education programme.

In the initial phase, the National Healthy School Status criteria provided us with a structure and focus for our health and wellbeing improvements.

### How do we plan to continue addressing health and wellbeing needs?

Following a review the leadership team selected two priorities: weight management and students' experience of violent crime. This decision was informed by our evaluation of existing provision, surveys of students, local public health data and an analysis of relevant management information.

These priorities are the focus of our health and wellbeing work for the next two years and will be monitored through our Ofsted SEF. We identified the following outcomes:

- Increase the number of students participating in at least three hours per week physical activity in and around school from 55 to 75 per cent.
- Increase the number of students eligible for FSM and PE-refusers that report healthier eating at school and home to 80 per cent of boys and 50 per cent of girls.
- Increase by at least 25 per cent the number of students who report feeling safe at school.
- Halve the number of students who are vulnerable to gang membership.



# School story

## Pimlico Academy City of Westminster (2/3)



### Activities we have developed

#### Weight management:

We put particular emphasis on year 7, aiming to build good habits from students' first day at the Academy. All have been given a pedometer and work on challenges to increase daily walking. We commissioned an extension of the year 6 weighing and measuring programme into year 7 to give us a baseline measure. We aim to reduce the proportion of students who are overweight by the time they reach year 11. Our caterers find creative ways to encourage eating of fruit and vegetables throughout the day. Vulnerable students and families have access to specialist nutritional advice and support from a key member of staff.

#### Violent crime:

Many of our students have expressed anxieties about their lives outside of the Academy, including the journey to and from home. A peer research project by year 12 students will provide detailed insights into ways to address these anxieties. There are also opportunities for key stage 4 and 5 students to be involved in activities and enrichment, learning opportunities until 6pm every day. Closer working with the families of vulnerable students is developing and our peer mediation programme is becoming established.

### Next steps

We are actively monitoring our Healthy Schools activities to identify where improvements are progressing successfully and where some may need further adaptation and revision. We passionately believe that health and wellbeing improvement has to be part of our Academy-wide vision.

*'The swift pace of change at Pimlico over the past three years has given me the opportunity to put healthy lifestyles at the heart of our innovation. On reflection, it is this holistic approach to school improvement that has led to so many of our developments being sustainable.'*

#### Assistant principal

**Description:** Mixed, 11 – 19 secondary. 1262 students.

**Context:** 33% FSM, 37% SEN, 76.3% BME, 59% A\*-C GCSEs (including English and maths)



February 2011

# School planning example – violent crime

Pimlico Academy City of Westminster (3/3)

## Outcomes

## Milestones

**Priority:** To reduce students' experience of violent crime

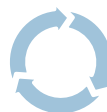
Decrease from 80 to 30 the number of students involved in violent activities

Increase by at least 25 per cent the number of students who report feeling safe at school

Halve the number of students who are vulnerable to gang membership

- Options for students, staff and parents/carers to report bullying incidents have increased.
- Systems to follow up violent incidents have improved.
- After one year the number of violent incidents reported has increased by no more than ten per cent.
- After two years the number of violent incidents has reduced by at least ten per cent from our baseline.
- Annual dissemination of a student-friendly summary of the anti-violence policy and information about how to report violence now takes place.
- The number of occasions when the seriousness of violence is communicated to the whole school has doubled.
- PSHE education has been reviewed to include SEAL opportunities for every year group.
- Most students can describe the nature of violence and express a range of appropriate ways to respond to it.
- A partnership anti-violence sub-group meets termly to monitor progress toward reducing the number of incidents of violence.
- All staff report they are clear and confident about their role in managing violent incidents.
- Effective peer mediation programme has been implemented.
- Increased numbers of students report they have been helped by peer mediation.
- Stepped increase (to 80 per cent after year one) in the number of children who report that they think the school deals well with violence.
- The academic progress of vulnerable students is tracked and additional support is provided to individuals.
- Increase to 75 per cent the participation of vulnerable students in extracurricular activities at school.





# School story

## Tideway School East Sussex (1/3)



February 2011

### What needs did we identify?

The health and wellbeing of students is a very important aspect of daily life at Tideway School. Two assistant head teachers lead our Healthy Schools work, coordinating our health and wellbeing group, whose members include student reps, a member of the kitchen staff, teaching assistants and teachers. The group also pulls together our Healthy Schools annual review (note: now renamed whole school review) which summarises provision across the school.

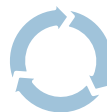
Our annual Healthy School survey, across all year groups, provides vital information. The findings from this, together with behaviour and attendance data and 'softer' information from the student council and from tutors is reviewed by our health and wellbeing group. We also had access to localised public health data via East Sussex County Council and valued discussions with other local primary schools as part of our Newhaven cluster.

As a result we identified two health and wellbeing priorities: improving weight management through better diets, and improving emotional health and wellbeing.

### How do we plan to address health and wellbeing needs?

Our senior leadership team agreed to achieve the following outcomes over the next two years:

- Increase from 30 to 60 per cent the number of children who demonstrate an understanding of healthy eating.
- Increase from 45 to 65 per cent the children and young people who select, buy and eat healthy food options throughout the day.
- Increase by 50 per cent the number of children and young people who access appropriate support to improve their emotional wellbeing.
- Increase to 75 per cent the number of children and young people who report a low score for emotional difficulties.



# School story

## Tideway School East Sussex (2/3)



### What activities have we developed?

#### Healthy eating:

We now provide food and nutrition lessons to all our year 8 and year 9 students, and a GCSE food technology option in year 10. Also all students in years 7 and 11 have access to 'Let's Get Cooking' clubs.

A 'Come Dine With Me' scheme has been developed with a community chef. It is for year 10 students eligible for free school meals. Nominated students are invited to attend with a parent/carer. They then prepare a meal together and eat what they have cooked as a whole group. This has been very popular both with the students and parents/carers.

#### Emotional health and wellbeing:

The referral arrangements for school counsellors have been reviewed and improved, so that a speedier first appointment can be offered to students.

Our learning mentors are working much more closely with tutors and follow up on any concerns about students in the tutor groups they have been assigned to.

### Next steps

We now include our Healthy School outcomes in the school improvement plan, and progress is monitored by our senior leadership team alongside other school priorities.

We are building on our strong partnership with local community groups, to work on having an impact on the food and drink students consume at home, as well as during the school day.

*'Health and wellbeing is key to everything we do. Developing a healthy body has a knock-on effect on attendance, on learning, on the concentration and energy levels of the students. It means they are ready to learn.'* **Assistant head teacher**

**Description:** Mixed secondary. 630 students.

**Context:** 18% FSM, 20% SEN, 5% BME, 45% A\*-C GCSE (including English and maths)



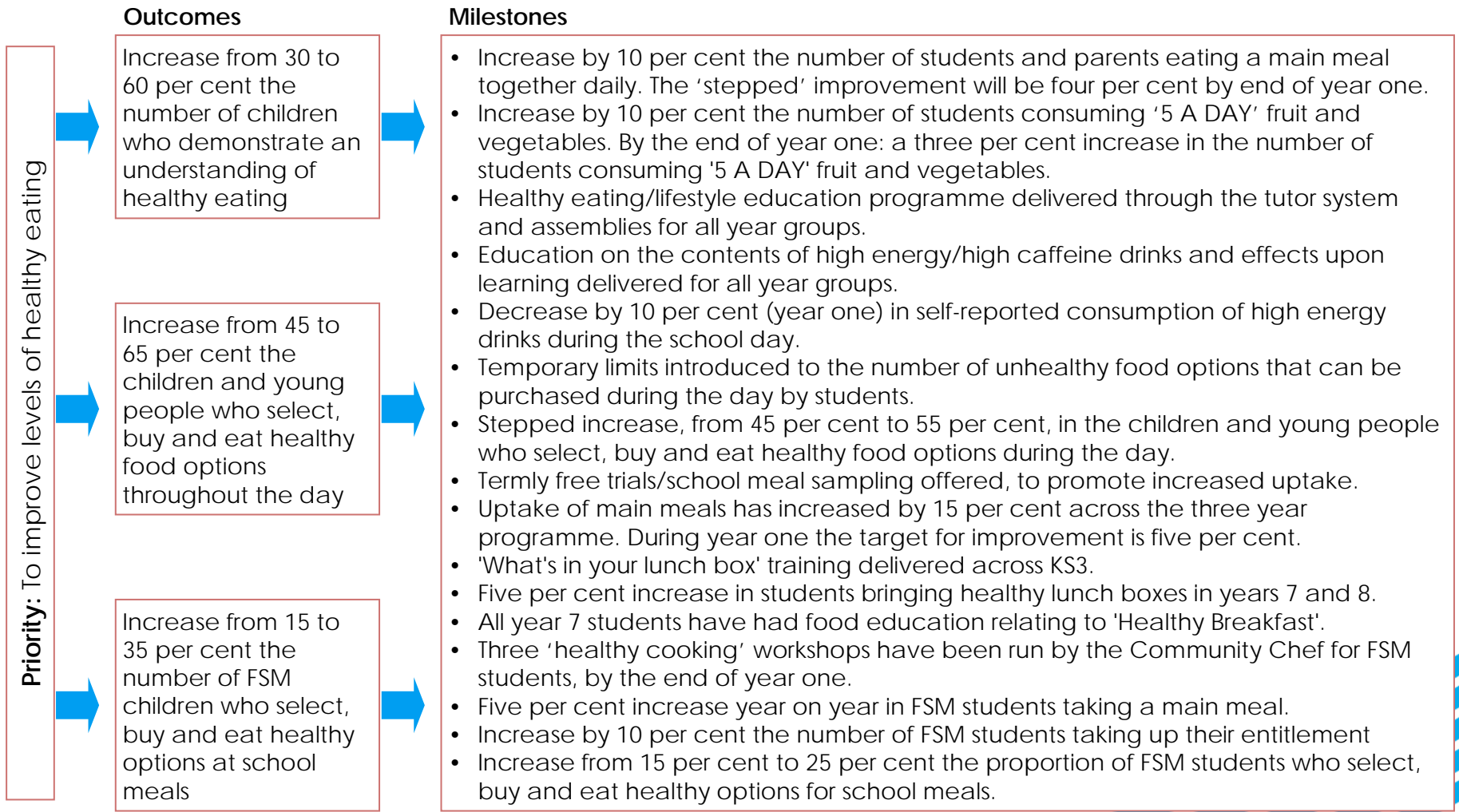


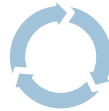
# School planning example – healthy eating

Tideway School East Sussex (3/3)



February 2011





# School story

## Hazel Lodge Pupil Referral Unit East Riding of Yorkshire (1/2)



February 2011

We are a pupil referral unit (PRU) for key stage 3 children and young people with behavioural, emotional and social difficulties (BESD). Placements are referred to us through the local Behaviour Support Panel. Our students travel from all over the East Riding of Yorkshire. Most are dual-registered with their mainstream school. The re-integration of students back into their mainstream schools is our primary aim and is an ongoing, individualised process. We provide learning for up to ten students at a time, but the process of re-integration means that an average of 20 -25 are taught through the course of a year.

Healthy Schools has been an integral part of our school for six years now, and underpins everything we do. The unflinching belief and support of all staff in the importance of health and wellbeing has been central to our journey. We have a Healthy School committee involving parents/carers, teachers, non-teaching staff and the school nurse to lead our Healthy Schools work. The committee is currently focused on improving emotional health and wellbeing and participation in positive activities.

### What needs did we identify?

Before selecting our priorities, we reviewed health and wellbeing data, including that from our entry and exit surveys. We work with a small number of children and

young people who we get to know well, but the detailed profile across the school varies from one term to another due to the re-integration process. We were able to build a picture of the typical needs of our 11-14 year olds. We were also informed by local authority information from our local Healthy Schools team.

Typically our students are:

- Boys, and below National Curriculum level 4 on entry;
- From poor socio-economic backgrounds;
- Known to the Youth Offending Team or have had Anti-social Behaviour Contracts; and
- Persistent absentees (below 85 per cent attendance on admission).

We carry out entry and exit surveys with all students and have regular 1:1 reviews to monitor progress.

### How do we plan to address these needs?

The outcomes we plan to achieve include:

- Increase from 10% to 75% the proportion who participate in positive activities.
- Increase to 80% the year 9 boys who participate in extracurricular activities at their mainstream school.



# School story

## Hazel Lodge Pupil Referral Unit East Riding of Yorkshire (2/2)



- Increase from 10% to 30% the proportion of students successfully reintegrated into mainstream schools.
- Increase from 20% to 50% the proportion of students who have access to appropriate support services.

### What activities are we developing?

In 2010 we trained all staff in circle time approaches and in restorative practice. We have timetabled a daily 'check-in' session and a 'check-out' session; the students have responded very well. This eases them into the school day and their concentration in lessons has improved. These sessions also form the foundation for our School Council and have increased the confidence and ability of students to talk in front of a group. They give us a practical way for student voices to be heard, bearing in mind the turnover at Hazel Lodge.

Partnerships are a key feature of our work as a PRU, both with mainstream schools and with external agencies. We have reviewed arrangements with the local 'Positive Futures' team, who provide activities for targeted young people. All our students now have 1:1 meetings at school with them and work to an agreed action plan, which is shared with PRU staff. As a result 80 per cent participate in positive activities, including all of year 9. We have also had a drive with our mainstream schools to increase the support for shared-placement students

to take part in extra-curricular activities. We now have over 80 per cent of year 9s involved in activities at their mainstream school.

### What next?

Buoyed by achieving two of our Healthy School outcomes our focus is now shifting onto our emotional health and wellbeing priority. Ofsted recently commented on the significance of PSHE at Hazel Lodge and we are reviewing the learning opportunities so students build their skills and confidence to seek help and support. We have increased liaison with our local CAMHS service to improve the referral process for our very vulnerable students. We constantly challenge ourselves to find solutions to the challenges students face and to celebrate success.

*'Healthy Schools has been a significant factor in improving outcomes for our young people. It has provided a framework for school development that has enabled us to achieve success not only in terms of Ofsted but, more importantly, in improving the life chances our young people.'* **Head teacher**

**Description:** Local authority key stage 3 pupil referral unit. 10 full time equivalents; approximately 25 students per year in total.

**Context:** 60% FSM, 100% SEN, 0% BME






# Useful templates index



The Healthy Schools toolkit offers three downloadable templates. All three templates are designed so that you can adapt them to suit your school, cluster or local area context.

If you have not already downloaded the templates, go back to the [Healthy Schools toolkit](#) landing page or navigate to the page via [www.education.gov.uk](http://www.education.gov.uk)

Template	Purpose	Format
Healthy Schools planning template	You may find the Healthy Schools planning template helpful for recording and monitoring your priority/ies, outcomes and milestones. There is an example of a completed planning template in the 'school examples' download.	 MS Excel
School story template	Having achieved one or more outcomes you may want to share your success within the school community and beyond. The school story template suggests some headings to help you tell your story.	 MS Word
Healthy Schools whole school review template	You may find the Healthy Schools whole school review template helpful for self-reviewing your school's provision for children and young people's health and wellbeing.	 MS Word



# Information

## Health and wellbeing group (1/1)



It is good practice for schools to have a health and wellbeing (HWB) group to coordinate Healthy Schools work. Consider whether any existing group in your school could serve as your health and wellbeing group.

Your health and wellbeing group can help make sure:

- strategic decisions at governors' meetings and senior leadership team (SLT) meetings reflect your school's commitment to the health and wellbeing of children and young people;
- health and wellbeing is included in your school improvement plan; and
- consideration is given to health and wellbeing in budget decisions.

When setting up your HWB group, try to:

- include a representative from the senior leadership team and be clear about reporting to senior leadership;
- include a member of staff who is confident handling data;
- include a member of staff who is aware of special educational needs, inclusion and pastoral issues;

- involve the whole school community including children and young people; and
- agree roles and responsibilities.

### Reflection

- Does the health and wellbeing group represent the whole school community?
- What roles and responsibilities has the health and wellbeing group agreed?
- How does the health and wellbeing group report to the SLT?



# Information

## Using data to determine needs and priorities (1/3)



Schools are good at collecting, analysing and interpreting data about attainment and attendance. The following information may help you analyse and interpret data about the health and wellbeing of children and young people.

The purpose of a needs analysis is to help you build a clear understanding of health and wellbeing needs in your school.

### Collecting data

Consider what data is already available and what additional data to collect:

#### 1. Data from outside your school

- Your local area's Joint Strategic Needs Assessment (JSNA), which identifies the health and wellbeing needs of the local population.
- The [Association of Public Health Observatories](#) publishes health profiles, which are snapshots of health data for each local area in England.
- The national Child and Maternal Health Observatory ([ChiMat](#)) also provides local area data for Healthy Schools.

#### 2. School data

Your school holds quantitative and qualitative data that is relevant to the health and wellbeing of children and young people.

- Examples of quantitative data include attendance figures and data about fixed-term exclusions, take-up of school lunches, travel to school, and behaviour, bullying and racist incidents.
- Examples of qualitative data include children and young people's perceptions and self-reported behaviour from surveys, focus groups, and interviews. You can tailor this data to your school by asking specific questions, for example about whether the school promotes healthy eating or promotes equality.

Data will enable your HWB group to discuss what health and wellbeing priorities are most pertinent to your school. Be sensitive when collecting and storing information gained from children and young people.

**Further reading:** [Using qualitative data](#)





# Information

## Using data to determine needs and priorities (2/3)



### Analysing data

You will want to collate and analyse the data you have collected. It is important to assess both the reliability of your data and its relevance to your school. Information is more likely to be useful if it is current and enables comparisons with schools similar to yours.

### Surprises

Sometimes data is misleading, especially if it was collected for a different purpose or is out of date. While it is important not to dismiss unexpected results too quickly, it is also wise to apply common sense to your data.

### Comparison

Your school will already have experience of benchmarking attainment results both within and outside your school. If possible it is also useful to benchmark your health and wellbeing data.

### Trend data

It is good practice to collect and interpret data over a number of years as some health and wellbeing behaviour change takes a considerable time to achieve.

### Interpreting data

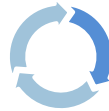
Consider whether the data highlights any particular needs for your school, which will inform your selection of priorities.

### An approach to interpreting data

1. Organise your data under three headings by using comparative data to identify high, acceptable or low performance.

These examples may help you.

High performance	95 per cent of children and young people walk to school.
Acceptable performance	The number of children and young people who say they have someone to talk to about bullying is comparable with local and national statistics.
Low performance	Attendance rate of 80 per cent (with a lower rate amongst young carers) is lower than other schools.



# Information

## Using data to determine needs and priorities (3/3)



### Interpreting data, continued.

2. Take an area of low performance and ask two questions:

- Does this need link to any priorities in the school improvement plan?
- Does this need link to the priorities identified in a key local document such as the Joint Strategic Needs Assessment (JSNA)?

This exercise will identify a range of needs.

**Further reading:** [Needs analysis, priorities and outcomes](#)

### Reflection

- What school and local health and wellbeing data have you considered?
- Have you considered data on children and young people in challenging circumstances?
- Is your data up to date?

### Selecting your priority

Your needs analysis will have given you a list of health and wellbeing needs at your school. You can develop these needs into a priority, which is the key area of health and wellbeing you plan to focus on.

A priority is usually an issue your school can contribute towards but cannot tackle alone, such as improving weight management or reducing under-18 conceptions. Some schools may choose to work in clusters on shared priorities.

### Reflection

- Is there expertise and capacity within the school, or from the wider school community, to support a particular priority?
- Can the school build on existing partnerships?
- Is there an opportunity to build on some existing good practice?
- Has your priority been included in the school improvement plan?





# Information

## Defining outcomes and identifying milestones (1/3)



After selecting your priority it may help to refer back to your needs analysis to check it reflects those health and wellbeing needs.

### Defining your outcomes

By now you will have a clear picture of the health and wellbeing needs of children and young people in your area. The next step is to define the specific impacts your school plans to have on health and wellbeing, usually over a period of two to three years. The best way to do this is through outcomes.

Outcomes can be quantitative and qualitative:

- Quantitative outcomes are measured on objective, factual information, such as the number of children and young people recorded as obese at your school.
- Qualitative outcomes are measured on subjective information, such as children and young people's perceptions or self-reported health behaviour. Qualitative outcomes can still be demonstrated in figures and percentages, but the data is based on the results of surveys and opinions, rather than objective measures.

Whenever possible, consider including outcomes that are targeted at specific groups of children and young people in challenging circumstances.

### An approach to defining outcomes

1. Begin with the health and wellbeing priority identified from your needs analysis. Work out what health behaviour changes would contribute to achieving this priority.
2. Now decide which behaviour changes your school can realistically influence. For example, how can a school influence the number of children and young people maintaining a healthy weight?

More influence	Less influence
Take-up of school lunches	Food at home and outside school
Physical activity within the curriculum and during the school day	Physical activity outside school
Attendance at after-school clubs involving physical activity	Time watching television and playing computer games
Walk/cycle to school	General car travel



# Information

## Defining outcomes and identifying milestones (2/3)



Once you have identified your priority you can define your outcomes, which are specific, based on existing data sources, have a clear timeframe, and are realistic for your school to achieve.

- Here's an example of a strong outcome: Reduce the level of persistent absenteeism from 11 per cent to four per cent by July 2012.
- And an example of an outcome that is not very strong: Increase the number of students who say they eat '5 A DAY'.

### Identifying your milestones

Milestones are key points of progress towards one or more of your outcomes. Milestones will help you monitor whether your activities/interventions are having the impact you need in order to achieve your outcomes.

**Process milestones** show the changes your school is making in a process to enable the behaviour change of the children and young people. These could include raising staff knowledge of a particular area of health and wellbeing, developing a policy or reviewing the curriculum.

**Impact milestones** show incremental improvements in the behaviour or attitudes of children and young people. For example, in a school whose outcome is to reduce the proportion of students who are persistent absentees from 11 per cent to four per cent, a milestone might be to reduce the figure to eight per cent in the first year.

### An approach to identifying and planning your milestones

1. Think about what milestones need to be achieved for your outcome(s).
2. Review the range of milestones. You can use the following planning framework for milestones to help with this.
3. Make sure you have enough impact milestones to be able to monitor your progress effectively. It can be helpful to work out which milestones relate to process and which to impact.
4. Decide on the data to measure your milestones.
5. Organise your milestones chronologically on a timeline, perhaps using the [Healthy Schools planning template](#).



# Information

## Defining outcomes and identifying milestones (3/3)



### A planning framework for milestones

This framework is based on best practice recommended by the National Institute for Clinical Excellence (NICE). It will help you consider whether you have a wide enough range of milestones and the most appropriate order for them.

**1. Senior leadership team perceptions** Do members of the senior leadership team understand the issues for children and young people relating to your priority and outcomes? Are they aware of the impact of their own views and that of all staff on children and young people?

**2. Staff attitudes and perceptions** Do staff have an informed understanding of the issues for children and young people relating to your priority and outcomes? Are they aware of the influence of their own values on children and young people?

**3. Establishing the learning needs of children and young people – dispelling myths** What preconceptions do your children and young people have about your priority and outcomes? What increase in knowledge, understanding and skill development do they have?

**4. Staff professional development** What do staff need to know to be able to facilitate learning on your priority and outcomes? Are they aware of appropriate teaching methods?

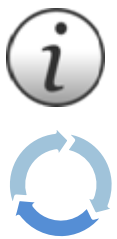
**5. Curriculum design and development** How can the curriculum be designed to increase the knowledge, understanding and skills development of your children and young people? How can you challenge their attitudes?

**6. Health-promoting environment** How does your environment support the health and wellbeing improvements planned for your children and young people? Do your processes, systems and procedures support your key messages?

**7. Pastoral support or external services** What types of pastoral support or services need to be in place for the health and wellbeing improvements planned for your children and young people?

**8. Parents'/carers' attitudes, perceptions, knowledge and understanding** What do parents/carers need to understand about your priority and outcomes?

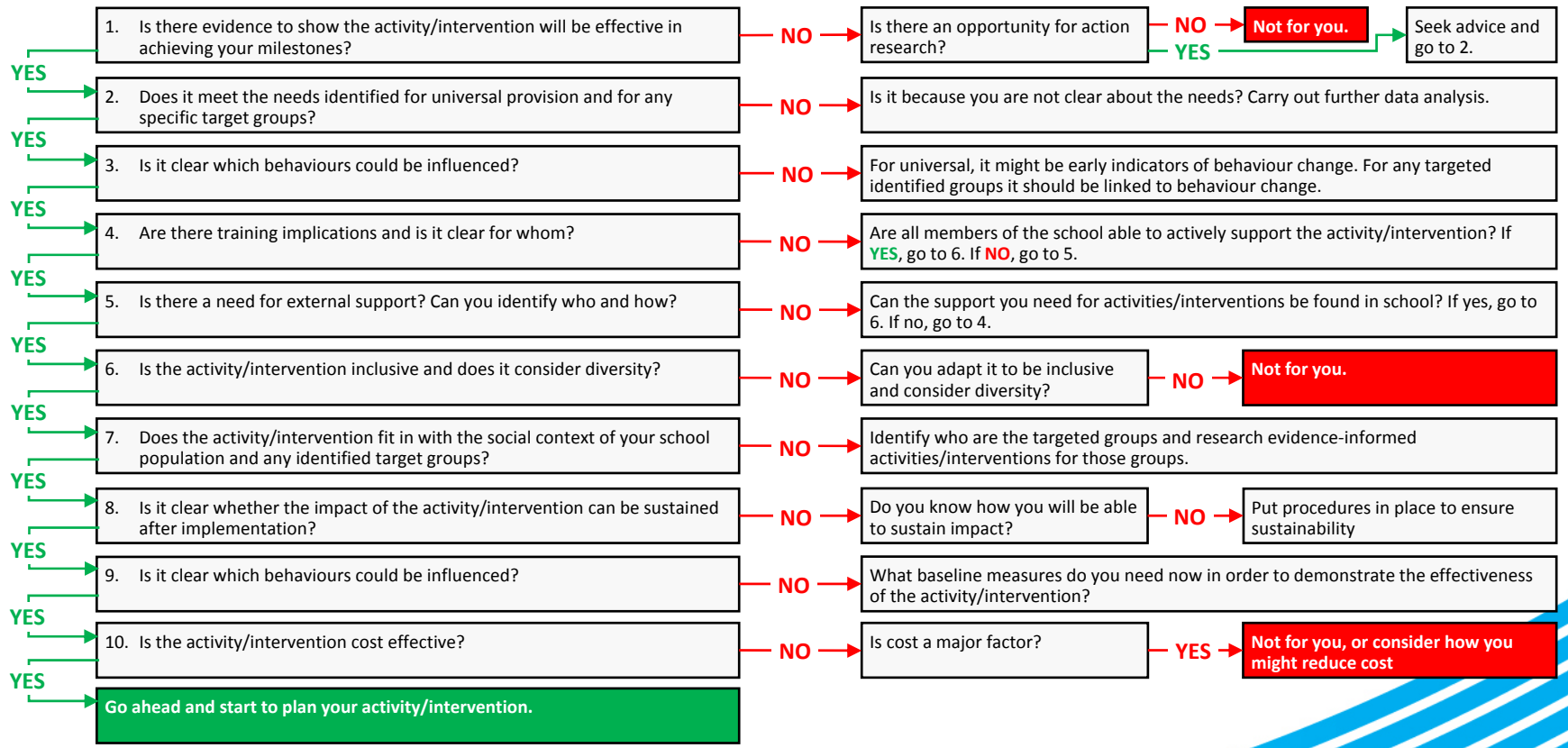
**9. Wider community** Are there members of the wider community that need to have increased knowledge, understanding and skills development, or their attitudes challenged?



# Information

## Selecting activities/interventions (1/4)

Once you have planned outcomes and milestones, the next step is to select activities/interventions. Careful selection and planning of activities/interventions will help ensure the desired impact. Where possible, select activities for which there is evidence of impact achieved - see our [school examples](#) for some ideas. Be sure to measure your baseline position before any activities/interventions start.





# Information

## Selecting activities/interventions (2/4)



### A planning framework for implementing activities/interventions

Many activities/interventions will involve the whole school. This framework will help you consider implementation from several important angles.

#### 1. Context – build on what is happening now

Who	What/How	When
Who is best to lead on this activity? Who has relevant previous experience?	What recent or current activities can you build on? How will the activity contribute to one or more outcomes? How can your school ethos, including policies and procedures, support successful implementation of this activity?	When is the best time to start this activity?

#### 2. Engagement - ensure the whole school community is engaged

Who	What/How	When
Who needs to benefit from this activity? Who should be involved in implementing this activity? Which partners can help you plan and successfully implement this activity? Who is the contact for partners of the school?	What support is needed from the SLT? What policies/procedures do you need to review to ensure the whole school community engages with this activity? How can you ensure relevant children, young people, parents/carers and governors know about and are involved in the activity?	When will you share your plans with children and young people, parents/carers, governors and the wider school community?



# Information

## Selecting activities/interventions (3/4)

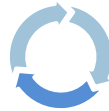


3. Capacity - manage issues such as human and material resources

Who	What/How	When
Do you have the relevant expertise or will you need external experts? Who is responsible for ensuring the appropriate resources (time, space and finances) are available?	What barriers will you need to overcome for the activity to be effective? How do you ensure that all staff are confident to support the activity? How can your curriculum provision support the successful implementation of this activity? What services need to be commissioned or procured?	When will you have capacity to implement this activity?

4. Review, monitor and evaluate your activities – collect baseline measurements

Who	What/How	When
Who is responsible for collecting data about this activity? Who is responsible for monitoring and reporting information to the SLT?	What baseline data needs to be in place so you can measure impact? What are the best methods of collecting baseline measurements? How will you involve your HWB group in monitoring against milestones? How will you involve parents/carers in evaluating the effectiveness of the activity? How can you best share and celebrate your achievements?	When do monitoring reports need to be seen by the SLT? When will you arrange for evaluation with children and young people to happen?



# Information

## Selecting activities/interventions (4/4)



### Baseline measures

It is helpful to have baseline measures in place so you can effectively monitor the progress of activities/interventions towards outcomes.

While some baseline measures can come from your needs analysis, you may also wish to take new baseline measures once you have selected activities/interventions. Aim to have sufficient baseline measures so you can monitor and measure your progress effectively.

### Reflection

- What activities/interventions are already happening that will contribute to your achievement of milestones and outcomes?
- How are resources being used to implement the activities/interventions?
- Which activities/interventions benefit children and young people in challenging circumstances?
- Having selected activities/interventions, what additional baseline measures do you need (if any)?
- How will you overcome any challenges or barriers in delivering your selected activities/interventions?
- Which partners are involved in implementing your activities/interventions?





# Information

## Monitoring progress (1/1)



By monitoring progress against your milestones you can judge whether you are making effective progress towards the health and wellbeing outcomes you have planned, within your planned timescales. Consider:

- Are your activities having the impact you expected? Are the changes occurring within the agreed timescales?
- Are there any internal or external factors that are affecting your school's ability to achieve your milestones?
- Have there been any unexpected developments as a result of your activities?
- What changes can you make to get back on track, if necessary?

Your school systems should be collecting the necessary data to monitor your milestones. While it is good practice to monitor both process and impact milestones, the impact milestones are especially important as they will offer early signs that behaviour change is occurring. How and when you monitor and who is responsible should all be in your school improvement plan. Consider:

- **Who** should coordinate monitoring your milestones? This person should have strategic support from the

senior leadership team (SLT), so that monitoring can feed into the school improvement plan review process.

- **What?** Consider if all milestones need the same degree of scrutiny.
- **How** are you going to monitor? Potential methods include surveys, focus groups, interviews and observations with members of the school community such as children and young people, staff and parents/carers.
- If you are working with other schools in a cluster, **how** might you share your results with them?
- **When** should monitoring happen to fit in with the timescales for each milestone?

**Further reading:** [Using qualitative data](#)

### Reflection

- Is the evidence/data sufficient to demonstrate progress against each milestone?
- What progress does the monitoring of each milestone show towards an outcome?
- Do you need to revise any activities/interventions as a result of monitoring?





# Information

## Reviewing your priority (1/2)



A review process will highlight the extent of the improvement you have achieved, enable you to learn from your experience, and may start to identify other HWB needs and priorities.

### Evaluation using data

You will have used specific data to find out if you have achieved most or all of your outcomes. Evaluating a wider range of health and wellbeing information will tell you whether your Healthy Schools achievements are consistent across the school, how well embedded the changes are, and how you now compare with similar schools. Consider:

- Over time has there been a sudden change or does the data indicate steady improvement?
- Are there improvements recorded in other relevant data that are consistent with the health and wellbeing outcomes achieved?
- Can you compare your data and improvements with that from similar schools?
- Is there relevant, external data available? If so, is there a similar pattern of improvement in your area?

### Evaluation with children and young people

Evaluation with children and young people will help confirm that your outcome data provides an accurate picture. It will provide insight about how well-established the health and wellbeing improvement is and may also identify additional, unplanned benefits. Approaches to evaluation used by schools include focused discussion groups, student interviews, surveys, and written feedback from learning opportunities.

**Further reading:** [Using qualitative data](#)

### Evaluation with staff and parents/carers

Health and wellbeing improvement is most effective when supported by the whole school community. You could ask staff for their views on the changes achieved and any lessons learnt for the future.

Similarly, consistent messages about health and wellbeing at home and at school will help achieve and sustain health behaviour change.



# Information

## Reviewing your priority (2/2)



Parents/carers are likely to provide information about additional benefits as a result of your Healthy Schools work.

### External evaluation

An external evaluation gives additional rigour to your review, providing you with objective feedback. Options to consider include:

- establishing focused, 'peer review' or 'learning walk' arrangements with a partner organisation or across a family of schools; and
- commissioning an external review visit by a specialist organisation.

You will want to consider to what extent the external evaluation's findings are consistent with your data and internal evaluation.

### What next?

When you have completed your review and have confidence in the health and wellbeing outcomes achieved, you may wish to consider:

- reporting achievements – for example to your governing body, local public health professionals, or local commissioners;

- sharing practice with other schools - the [school story template](#) may be of use;
- updating your [Healthy Schools whole school review](#) - to provide you with a current picture of your health and wellbeing provision; and
- updating your health and wellbeing data and reviewing your needs analysis.

### Reflection

- Do you have a range of evidence that your outcomes have been achieved?
- Have members of the school community been informed that outcomes have been achieved?
- Have you recognised and celebrated your success?
- Can you sustain your success?
- Having updated your data and needs analysis, should the priority still be a focus for the school?
- Have you noticed additional benefits resulting from your activities/interventions?



# Further reading index



Some colleagues may be keen to extend their knowledge about children and young people's health and wellbeing and the Healthy Schools approach. For these colleagues we have provided some further reading.

If you have not already downloaded the further reading listed below, go back to the [Healthy Schools toolkit](#) landing page or navigate to the page via [www.education.gov.uk](http://www.education.gov.uk)

Title	Purpose
Introduction to health behaviour change	Information about the theoretical basis of the Healthy Schools approach.
Using qualitative data	Tips for collecting qualitative data from children and young people.
Health and wellbeing needs analysis, priorities and outcomes (training session)	A plan for a school staff training session about analysing and interpreting health and wellbeing data to determine a priority and develop outcomes.
Principles and examples of evidence-informed practice	Principles and examples of evidence-informed practice relating to issues such as alcohol, drugs, healthy eating, physical activity, sexual health and tobacco.
Learning from the Southwest Healthy Schools Plus evaluation	Summary of findings from a qualitative evaluation of schools working on improving the health and wellbeing of children and young people.
Considerations for special schools	Information to support special schools using the Healthy Schools toolkit