Enhanced Healthy Schools
Achieving Southwark's Enhanced Healthy Schools Accreditation

This document includes both the "Planning Template Tool" and the "Reporting Template Tool".

- *Your Plan must be for what your school is planning to do, with a focus on Wellbeing, perhaps related to your school's "Recovery approach" (cannot be retrospective)*

- *To apply for Enhanced accreditation, please complete both the Planning & Reporting Tools attached -the Report is to present the activities and interventions that your school completed and their outcome/results.*

Planning Tool – Enhanced

A school will identify a main wellbeing & health priority for their pupils and devise new projects, practices and interventions to target the priority. Example wellbeing & health priorities might include emotional resilience, mental health, keeping safe, positive relationships, healthy weight, etc.

In order to achieve the Enhanced Accreditation, a school should:

- Undertake a needs analysis of the unique wellbeing & health issues affecting your school, and identify and define group/s and number of pupils e.g. whole school or year group,   any smaller targeted group.

- Develop planned measurable outcomes and an action plan to achieve the wellbeing & health priority.

- Show how it will monitor and evaluate the project to measure success and demonstrate improvements.

- **NOTE:** Projects and interventions/activities undertaken as part of an Enhanced Plan should run over at least one term, or 3 months.

Reporting Tool – Enhanced

We recognise good practice in demonstrating, sustaining (and learning from) outcomes and impact in supporting children and young people to achieve and maintain good wellbeing & health.

In order to achieve the Enhanced Accreditation, a school should:

- Have achieved the Healthy Schools Gold Award and completed the Planning Tool

- Record results and outcomes.

- Detail approach taken.

- Provide analysis of results.

- Explain how activity/intervention is being sustained.

SCHOOL DETAILS

Applying for accreditations.

Complete the three tables below when applying for Enhanced accreditation:

Name of School		Borough	
Key contact		Job title	
Action Plan Start Date		Action Plan End Date	

Date achieved **HSL Gold Award**	
Consent to share Enhanced Plan	**Yes** ☐ *Plan can be used as an example of good practice to be shared with other schools and partners.* **No** ☐
Headteacher sign off	*Name and date:*
School Council Representative sign off	*Name and date:*

Consent to share Enhanced Report	**Yes** ☐ *Report can be used as an example of good practice to be shared with other schools and partners.* **Yes** ☐ *Report without photographs can be shared with other schools and partners.* **No** ☐
Headteacher sign off	*Name and date:*
School Council Representative sign off	*Name and date:*

Southwark's Enhanced Healthy Schools Accreditation <u>Planning Template</u>

PURPOSE
WELLBEING & HEALTH PRIORITY: Describe the issue that you are trying to improve.
EXAMPLES: mental health and emotional wellbeing; improving participation in physical activities; unhealthy weight;
Emotional Wellbeing and Mental Health, by further building and improving the resilience and emotional wellbeing of all our pupils. To include: • Increasing pupils' understanding of wellbeing • Developing pupils' abilities to deal with emotions • Reducing pupils' anxiety/stress/trauma levels • Building pupils' personal and social resilience competencies
GROUP: Define your group/s and number of pupils who will benefit from the action plan (whole school or year group,   any smaller targeted group e.g. SENDS, LAC, EAL).
EXAMPLES: • *All children Year 1 to Year 6 (225 pupils), OR* • *KS 2 pupils (120) and Reception children (30)*
Add numbers of pupils

NEEDS ANALYSIS

NATIONAL AND LOCAL DATA AND EVIDENCE: Ask your local Wellbeing & HS Lead for help with completing this section.

Include:

- details that provide evidence that your selected Wellbeing & Health Priority is an issue at national, regional or local level
- how the evidence base indicates that your planned work will be effective for your group/school or any adaptation you'll need to make

The **Department for Education**, in the June 2014 guidance "**Mental health and behaviour in schools**" states:

> *"…{improved wellbeing and resilience} seems to involve several related elements. Firstly a sense of self-esteem and confidence: secondly a belief in one's own self efficacy and ability to deal with change and adaptation; and thirdly a repertoire of problem solving approaches"*

> *"the role that schools play in promoting the resilience of their pupils is important, particularly so for some children where their home life is less supportive. School should be a safe and affirming place for children where they can develop a sense of belonging and feel able to trust and talk openly with adults about their problems."*

The Department for Education – Statutory Guidance for Relationships Education, Relationships and Sex Education and Health Education

Most of PSHE education becomes statutory for all schools from September 2020 under the Children and Social Work Act 2017. This includes Relationships Education at key stages 1 and 2, Relationships and Sex Education (RSE) at key stages 3 and 4, and Health Education in both primary and secondary phases. The Department for Education published Statutory Guidance for Relationships Education, Relationships and Sex Education (RSE) and Health Education in June 2019.

In June 2020 the DfE released an update on the implementation of the guidance due to the impact of coronavirus. The update outlined that the guidance remains statutory from September 2020 but schools who are not ready to start teaching the curriculum from September 2020, due to school closures, can delay until Summer term 2021. All schools should prioritise teaching the content linked with mental wellbeing in the Autumn term 2020 to support the return to school.

The Department for Education – Education and Childcare during Coronavirus – Pastoral Care in the Curriculum (June 2020)

Schools are aware that some pupils will require additional emotional and pastoral support when they return to school, so making time for pastoral care is a priority.

Emerging evidence: Coronavirus and children and young people's mental health, Evidence Based Practice Unit (Anna Freud Centre)

Key mental health challenges for children and young people during the pandemic:

- The pandemic can influence many different aspects of mental health.
- In addition to impact being seen in the short-term, this pandemic may have longer-term consequences for mental health.
- Higher than usual levels of stress, anxiety, depressive symptoms and fear have been found in children and young people.
- Mental health challenges during the pandemic have been attributed to several events or conditions including school closures, increased time away

from peers, health concerns, and media over-exposure.

Vulnerable groups (think Southwark context, ACEs, etc)

- The disruption to routine may be particularly challenging for young people with additional support needs such as Autism Spectrum Condition (ASC) and Attention Deficit Hyperactivity Disorder (ADHD).

- Existing mental health conditions can make some young people more vulnerable to the stay-at-home measures.

- Difficulties are likely to persist as adjusting back to school and uncertain futures pose further challenges.

- Ethnic minority groups may face stigma and/or find it harder to access support.

- Children in temporary or residential care are at greater risk of distress caused by sudden, relocation or difficult housing situations.

- Levels of domestic violence and reported child abuse have risen during school closures, further increasing mental health risks for these young people.

Key school events can act as anchors in a child's world, and the current uncertainty and disruption in relation to these can be a great source of worry. For example, not knowing when or if exams will take place and not having graduation ceremonies to mark the end of a school year. The reduction in outdoor activities has been linked to increases in depressive symptoms, stress and anxiety. Extended home confinement is also likely to exacerbate sleep problems in young people, perhaps a result of decreased physical activity, disruption to daily schedules usually provided by school, and feelings of loneliness.

Teachers and school staff play a vital role in education about the coronavirus, identifying any early mental health concerns, and in care and advocacy of positive mental health.

Trauma Informed Schools UK

Rising numbers of children are presenting with mental health difficulties in schools and current teaching environments are struggling to keep up. Many children have a high ACE score (meaning multiple adverse childhood experiences) known to leave children at risk of mental and physical ill-health later in life and even early death' (The ACE study Felitti and Anda, a study involving over 17,000 people).

The government Green Paper 'Transforming Children and Young People's Mental Health Provision' (December 2017) wants a Mental Health Lead in every school (trained member of school staff). Their research found that appropriately trained teachers /teaching assistants can achieve results comparable to those of trained therapists. To quote, "There is evidence that appropriately-trained and supported staff such as teachers, school nurses, counsellors, and teaching assistants can achieve results comparable to those achieved by trained therapists in delivering a number of interventions addressing mild to moderate mental health problems (such as anxiety, conduct disorder, substance use disorders and post-traumatic stress disorder)".

Add any local authority guidance and data : https://www.southwark.gov.uk/health-and-wellbeing/public-health/health-and-wellbeing-in-southwark-jsna

https://www.southwark.gov.uk/health-and-wellbeing/public-health/health-and-wellbeing-in-southwark-jsna/southwark-profile

DfE Wellbeing for Education Return: https://schools.southwark.gov.uk/pshe-healthy-schools/mental-health-wellbeing

Anecdotal Evidence

Below are some example observations from staff:

Primary

- *Children who are in now are excited to be back, some quite nonchalant about being in and others finding it all strange*
- *Pupils are anxious about coming back but then so pleased to see others when they have come back in*
- *I think the media's label of a 'Lost Generation' makes parents and children all more anxious*
- *Experienced and felt isolation, lack of communication in English language, lack of socialisation, lack of play, disappointment for not having a birthday party, lonely because they miss family and friends*
- *From my experience it has been interesting that actually the older children who have returned appear not to have been affected as much as the teachers anticipated and were keen to get back into the school routine rather than talk too much about it*
- *Some children have better self-care skills because they have been at home for so long*
- *Some children have made huge progress at home*
- *Anxiety about leaving parents*
- *The school is calmer!*
- *Some year 6 children didn't leave their house*
- *Lots of children want to focus on the now and the future e.g. planning their new playground*

The observations above give an indication of the variety of experiences children will have had during this time.

SCHOOL DATA AND EVIDENCE

We are aware that many members of our school community will be experiencing a range of emotions and reactions due to bereavement and loss, isolation, caring for someone by shielding, living with a frontline NHS worker or carer, and coping with additional factors of stress.

Our Action Plan outlines the steps we want to take to support our staff, pupils and families through this difficult time and period of recovery. We will be basing our response upon the following guidance:

A Recovery Curriculum: Loss and Life for our children and schools post pandemic *(Barry Carpenter, CBE, Professor of Mental Health in Education, Oxford Brookes University and Matthew Carpenter, Principal, Baxter College, Kidderminster, Worcestershire)***.**

- ***Lever 1: Relationships*** *- we can't expect our students to return joyfully, and many of the relationships that were thriving, may need to be invested in and restored. We need to plan for this to happen, not assume that it will. Reach out to greet them, use the relationships we build to cushion the discomfort of returning.*

- ***Lever 2: Community*** - *we must recognise that curriculum will have been based in the community for a long period of time. We need to listen to what has happened in this time, understand the needs of our community and engage them in the transitioning of learning back into school.*

- ***Lever 3: Transparent Curriculum*** - *all of our students will feel like they have lost time in learning and we must show them how we are addressing these gaps, consulting and co-constructing with our students to heal this sense of loss.*

- ***Lever 4: Metacognition*** - *in different environments, students will have been learning in different ways. It is vital that we make the skills for learning in a school environment explicit to our students to reskill and rebuild their confidence as learners.*

- ***Lever 5: Space*** - *to be, to rediscover self, and to find their voice on learning in this issue. It is only natural that we all work at an incredible pace to make sure this group of learners are not disadvantaged against their peers, providing opportunity and exploration alongside the intensity of our expectations.*

  We suggest the Recovery Curriculum is built on the 5 Levers, as a systematic, relationships-based approach to reigniting the flame of learning in each child. Many children will return to school disengaged. School may seem irrelevant after a long period of isolation, living with a background of silent fear, always wondering if the day will come when the silence speaks and your life is changed forever. Our quest, our mission as educators, should be to journey with that child through a process of re-engagement, which leads them back to their rightful status as a fully engaged, authentic learner.

Add further school data and background evidence (links to School Development Plan, results from any surveys, staff observations etc.).

- surveys

-add observations/data from lockdown period e.g. number of children not accessing home learning, number of families not engaging with school, language barriers etc and consider how these relationships can be rekindled.

Support and Resources

E.g. The following local partner agencies and resources will be supporting the implementation of our Action Plan:

- DfE Wellbeing for Education training team

- Borough Healthy Schools Lead & IMHATS & HS Champions

- Educational Psychology Service

- School Health Service

- Trailblazers (mental health support teams in schools) or similar support

- Healthy Schools London – Resources to support schools

- Southwark's PSHE & Wellbeing curriculum framework, Resource Bank & Reading List: https://schools.southwark.gov.uk/pshe-healthy-schools/pshe-sex-

relationship-education-sre-wellbeing-2

- DfE Wellbeing for Education Return: https://schools.southwark.gov.uk/pshe-healthy-schools/mental-health-wellbeing

- PSHE Association: Discussing coronavirus (COVID-19) with children and young people

- PSHE Association: Developing a recovery curriculum webinar

- The Resilient Classroom (Young Minds and Boing Boing)

- Anna Freud – Resources to support children, staff and families

- Anna Freud – Managing the transition back to school: a guide for schools and colleges

- Mentally Healthy Schools: Coronavirus toolkit #6: resources for building resilience

- Healthy London Partnerships – Schools Mental Health Toolkit

- Domestic Abuse Prevention Coordinator

- NAHT: Guidance on coronavirus and supporting pupils' mental health and wellbeing

WELLBEING & HEALTH INEQUALITIES: Describe how you will ensure that your activities support all groups, including special educational needs, disabilities, Pupil Premium pupils etc.

EXAMPLES:

- *We are aiming to increase participation in physical activities for all pupils. Data from a survey undertaken in 2014 showed that there was a significant difference in up-take of after-school clubs between pupil premium recipients and non-recipients. Those who qualified for pupil premium were far less likely to be involved in any after-school clubs, including those incorporating physical activity. We have therefore set separate measurable outcomes and actions for Pupil Premium pupils as a targeted group.*

In Month 2021, the total number of SEN pupils is ? (?%) and the number of Pupil premium children is ? (?%)

Our planned activities will be accessible to all pupils with class teachers taking care to differentiate activities and deploy support staff effectively. For example, students with special education needs will be given additional support as necessary during wellbeing activities.

Effort will be made to ensure that pupil premium students are involved in the interventions planned across the year groups.

Add any further details of vulnerable groups identified and support that will be provided.

INTENDED RESULTS	
PLANNED OUTCOMES (there should be a minimum of 3 and maximum of 7 measurable outcomes). • **INDIVIDUAL:** List the specific measurable changes that you expect to result from your activities e.g. changes in attitudes, behaviours, knowledge or skills of your pupil group/s • **WHOLE SCHOOL:** List any organisational changes which you expect to result from your activities and how you will measure them	**MONITORING METHODS** List the tools and methods that you will use to monitor whether your activities are being implemented as planned.
Some example measurable outcomes – to be decided after surveys with pupils and staff (figures, percentages and any measurement scales to be added). **Individual Pupil Outcomes e.g.** • To increase the percentage of pupils who report they feel safe at school. • To increase the percentage of pupils reporting that they know where to get help when they feel unsafe. • To increase the percentage of pupils who have learnt some ways to calm themselves down when they feel angry or upset. • To increase the percentage of pupils who report they feel they belong at school. • To increase the percentage of pupils responding with "Always" to the statement "I am able to stay positive when things feel a bit more difficult" • To reduce the percentage of pupils reporting they feel lonely. • To increase the percentage of pupils who report they can ask for help if they are finding something difficult. • To reduce the percentage of pupils who cannot or are not sure of how to work well in groups with different types of people. • To increase the number of pupils who report that they are able to express myself clearly when I want to. • To increase the number of pupils who report there is an adult they can talk to if/when they need support. **Individual Staff Outcomes e.g.** • To increase the percentage of staff who report they feel safe at school. • To increase the percentage of staff who report they feel listened to at school	• Pre and post pupil surveys • Pre and post staff surveys • Record keeping • Staff feedback and evaluation of training • Teacher assessment on pupil personal and learning development targets • Behavioural monitoring reports

- To increase the percentage of staff who report they can manage their workload
- To increase the percentage of staff who report they know what to do if they feel anxious or stressed out at school

Whole School - Staff Professional Development e.g.

- To increase the number of staff who received Pupil Wellbeing training e.g. mindfulness programme; relaxation; strategies for safety and wellbeing; trauma and mental health informed schools.
- To increase the number of staff who feel confident to deliver the updated PSHE & Wellbeing curriculum
- To increase the number of staff who feel confident to be part of a trauma informed approach
- To increase the number of staff who feel confident to support children who have experienced bereavement
- To increase the number of staff who received stand-alone domestic abuse training.
- To Improve staff confidence in delivering healthy relationships and domestic abuse curriculum.

ACTION PLAN – whole school approach		
ACTIVITIES AND INTERVENTIONS: List the specific activities that you have planned (for staff, pupils or parents) to achieve your improvements, including any resources or partner services that will be providing support.	**TIMESCALE:** List the month & year when you expect each activity to take place.	**LEAD:** List the staff member responsible for each activity.
The following are some example activities.	Add monthly timescales each row.	Add lead staff names and job titles to each below.
Staff wellbeing and development		
Review staff needs and concerns through a staff wellbeing survey and create action plan based on findings		
Staff training for preparation in meeting the new DfE guidance for Relationships Education, Relationships and Sex Education (RSE) and Health Education. - This will be an opportunity for the staff to address any concerns or worries they have with the new curriculum. - Will support staff in understanding the curriculum better.		

• Ensure that the PSHE & Wellbeing programme enables all pupils to have the confidence to try new things, work well and confidently with others and be able to express themselves clearly in personal, social and emotional issues.		
Incorporate domestic abuse training into staff meeting agenda to promote the wellbeing of staff and an understanding of the impact of domestic abuse on CYP		
Look at opportunities for staff to complete training around recognising trauma / becoming a trauma informed school / adverse childhood experiences		
Ensure that a member of SLT has been designated as the Mental Health Lead and received relevant training e.g. Mental Health First Aid Youth		
Look at creating a 'Wellbeing Team' to incorporate the Mental Health Lead / PSHE Lead / SENCo / Safeguarding lead / PE lead etc. Access Mental Health First Aid Youth training for this core team so responsibility is shared		
Policy Development		
Review and update current safeguarding policies to see the extent to which domestic abuse is addressed within it and adjust accordingly.		
Review and update PSHE & WB/RSE Policy in line with statutory guidance from the DfE. Consult with key stakeholders as part of process.		
Review and update Mental Health & Emotional Wellbeing Policy to include staff wellbeing.		
Share updates and new policies at staff meetings and publish on website for parents and partners to view		
Ethos and Environment		

Creating safe classrooms that provide a reassuring environment e.g. following the latest government and scientific guidelines, co-constructing ground rules with groups and classes focusing on how to keep ourselves and each other as safe as possible.		
Carry out an activity across the school to find out whether all children have a trusted adult to go to for help and support if needed, both at school and at home. These staff members may include office staff and midday meal supervisors – consider how these staff are supported to meet this need.		
Set up a project for the school council to look at what it means to be resilient, what it means to be a good friend and tasks and projects to look forward to over the year		
School council produce guidance (e.g. school leaflet, whole school display, section on website) for the whole school on how to be more resilient around the whole school.		
To develop our use of Peer Mediators to solve low level disputes which arise in the Playground. Peer mediation work will focus on emotional language, vocabulary/ use of Mood boards etc.		
Review the playground reward system to ensure that children that enter the 'Tornado zone' are recognised for using positive strategies to self-regulate more.		
Obtain posters and leaflets for pupils on how to access support around safeguarding issues such as domestic abuse and child abuse and place around the school including on the back of toilet doors		
Teaching and Learning		
Programmes such as Zones of Regulation, designed to develop pupils' understanding of what emotional regulation is, through building skills and understanding, identifying and developing strategies for managing their emotions.		

Review the PSHE & Wellbeing Education curriculum to ensure that immediate need of children are met. Use a baseline assessment e.g. survey, draw and write, mind map to find out how children are feeling, what they have missed out on, what they are looking forward to etc. Use this to inform any changes to curriculum content in the first half term.		
Deliver activities promoting connectedness and resilience. Discussions in each year group will involve what it means to be resilient, exploring growth mindset resilience to build academic resilience and also explore issues relating to personal, social and emotional competencies linked to resilience.		
Review teaching strategies to include active teaching and learning methods. These methods support group work, debate, reflection and critical thinking skills and can be used as self-assessment methods to demonstrate impact		
Review and update fiction books to support PSHE & Wellbeing e.g. ensure they reflect ethnic diversity, different families, disabilities etc		
Review teaching resources to support updated PSHE & Wellbeing curriculum		
Targeted Support		
Administer Sociograms from Reception to Year 6. • Sociograms are a tool used to identify social groups with a class as well as identifying socially vulnerable, controversial, neglected and successful children. • This data can be used to support children in developing social skills and friendships if they are identified as vulnerable. • It also can help staff identify SEMH needs and begin to implement appropriate provision as a result (interventions, CAMHs, educational psychologist etc). • The vulnerable children are followed up by the Inclusion Manager and actions are planned. • The Sociograms are re-administered later in the year to look for new		

trends and to monitor children.		
Review and update list of partner organisations to support vulnerable children and families		
Ensure staff are confident through CPD to identify vulnerable children and understand the pathways for support.		
Parents and Carers		
Review current communication methods sued with parents – is this inclusive e.g. language barriers / accessing technology / confidence using technology etc		
Parent voice – how are families feeling, what have they experienced etc and therefore how best to support		
Parents Information meeting (may have to be online so consider accessibility) - to outline the positive approach we are taking to building a sense of self, ability to be more resilient and improve positive relationships.		
Raise awareness around domestic abuse amongst parents by disseminating information through the following methods: newsletter, school website, parents' evenings etc.		
Review and update list of local partner organisations to support families and consider different methods of dissemination		
Build on successful methods of home learning engagement with families		

Southwark's Enhanced   Healthy Schools Accreditation Planning Template

Complete this section when your above Enhanced Action Plan activities/interventions have been concluded and you are ready to apply for the Enhanced accreditation

RESULTS AND IMPACT
RESULTS: Describe your results and whether you were able to achieve your planned outcomes.

EXAMPLES: *The group of pupils remained the same throughout the implementation of the action plan, September 2018 to July 2019: All pupils (Reception & KS1) = 190. The sample size completing initial and final surveys varied, September 2018 = 135 and July 2019 = 175. Also 40 staff members were surveyed.*
 	
• **To increase the percentage of pupils who report they feel safe at school. Target 40%**
 	
  In September 2018, 17% (23/135) of children reported they feel safe at school. In July 2019, this had increased to 56% (98/175). **EXCEEDED**
 	
• **To increase the number of staff who feel confident to be part of a trauma informed approach. Target 30/40 staff members**
 	
  In September 2018, 8/40 staff members reported they feel confident to be part of a trauma informed approach. In July 2019, this had increased to 35 staff members (35/40). **EXCEEDED**
 	
• ***To reduce the percentage of pupils reporting that they ate an unhealthy snack after school on the previous day. Target 40%.***
 	
  In September 2018, 61% (83/135) of children reported that they ate an unhealthy snack after school on the previous day (Note: unhealthy snack defined as chocolate, sweets, biscuits, pastries, crisps). In July 2019, this had reduced to 46% (81/175). **IMPROVED BUT NOT MET**
  Include tables, graphs and bar charts to demonstrate changes in data.

Details:
UNINTENDED OUTCOMES: Describe any unintended outcomes (positive or negative).
EXAMPLES: • *The review of targeted individual pupil's developmental abilities, emotional wellbeing and behaviour in comparison with levels of communication was so effective that it was extended across the school and similar workshops were held for class teams in each of the learning pathways – autism spectrum disorder (ASD), severe learning difficulties (SLD) and profound and multiple learning disabilities (PMLD).*

Details:

ACTIVITIES: Explain if the activities in your action plan were delivered as intended, or if there were any changes and why. Describe any external or unanticipated factors that had an effect on your project.

EXAMPLES:

- *Activity: A partner organisation offered additional parent workshops, specifically focused on after school snacks and portion sizes. The workshops were well attended by a large group of reception parents - on average 15 parents attended each session. Parents were enthusiastic about the workshop with many requesting further hand-outs for friends. Some were parents who had been identified as needing targeting by teacher observations.*
- *External factor: The Local Authority commissioned an obesity prevention programme for families during the implementation of our action plan which we were able to access and plan for our school. This complemented the aims of our action plan and helped to support its success.*

Details:

OVERALL

STRENGTHS: Describe the overall strengths of your project.

EXAMPLES:

- *A zone structure was developed so that the playground had designated zones for different types of activities. The zones have been the major change to the school environment – the playground has structured titled zones e.g. music zone, construction zone, ball games zone. The children and lunchtime staff are clear about the zones which means that equipment in each zone stays in its designated zone all of the time. This has ensured the playground environment is less chaotic and more organised and structured.*
- *Tasting sessions provided an excellent opportunity for children to discuss unfamiliar fruits and vegetables and try these, then choose these independently in the lunchroom.*

Details:

LESSONS LEARNT: Describe what went well, what didn't go so well, and what recommendations you would you make for the future.

EXAMPLE:

- *We found that there was actually an increase in students accessing support for mental health and well-being. To begin with I felt this was a negative thing and felt concerned that the work we had put in had been unsuccessful. However, after talking to our pastoral managers we realised more students had accessed support because they felt more confident to talk about their own mental health, which is actually a positive thing and was one of our targets.*
- *I received feedback from teachers that cooking can be complex due to the location of our equipment, the need for a second adult to take food to ovens and the time taken for everything to be cleared away from classrooms. All of these things made cooking less desirable and taught less frequently. However, following these discussions I have made a proposal to our head teacher for a classroom to be built specifically for cooking.*

Details:

SUSTAINABILITY: Describe what you will do in future to sustain the project.

EXAMPLES:

- *Mindfulness has become an integral part of our school. The children and staff and many parents have loved doing it and have felt far reaching benefits from the programme. Our aim is now to keep developing our practice and to become a lead school and share our experiences with other schools. The PTA has enthusiastically agreed to support and fund the creation of a mindful area of the school playground. The intention is for the children to design and paint a wall mural in the area; to grow flowers and herbs and to position various items (e.g. wind chimes, glitter bottles etc.) which will create an area of calmness and reflection.*
- *This year we have had a very positive response to our school council deputies becoming salad monitors and encouraging children to eat more salad. Next year, we intend to give every child in KS1 an opportunity to be a salad monitor.*

Details:

PHOTOGRAPHS & QUOTES: Include any photographs, quotes, feedback or other evidence from your project.

Details: