Character Forming Schools – Building **Resilient** Individuals

May 2nd 2014 in the Coram Weston Gallery

Summary Report

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Character Forming Schools – Building Resilient Individuals

Introduction

Coram was pleased to host in its 275 year as a children's charity this first event in its new Weston Gallery. The event bought together a panel of speakers and small selected guest of experts whose organisations have as their focus improving the outcomes for children and young people. This report summarises the presentations made by our speakers and records some of the conclusions which were shared during the event. I believe that together we agreed to build on these concluding actions by inviting further observations from those that joined us on the day but also from those who were unable to attend that have yet to contribute. You will find in the last section of this report the questions that event posed and we would very much welcome your further input.

Dr Carol Homden CBE CEO Coram.

Health and well being – a cornerstone for effective education

From a range of perspectives the conference highlighted the urgent need for effective promotion of health and well-being in schools. Children and young people prosper in supportive environments where their personal health and well being is nurtured. They achieve their academic potential and develop into well rounded individuals when they are happy and feel safe. Schools therefore have a responsibility to actively promote the health and well being of their students.

Presentations and discussion indicated that effective practice in this area required a concerted and thought-out approach:

- Teachers needed to integrate support for social and emotional development into the curriculum and pastoral care.

- Regulatory frameworks needed to give appropriate weight to supporting health and well being to school inspection regimes.

- Schools and local health services needed a coordinated approach and should employ evidence-based early intervention to improve health and well being outcomes for students.

Various perspectives were offered as to how these themes could be put into practice within the current landscape.

Sir Al Aynsley-Green

(Professor Emeritus of Child Health at University College, London) set the scene for the debate by stressing the importance of children at the current juncture. Society will be reliant on contemporary generations of children, Aynsley-Green argued, to support the increasing proportion of older people in future years. It is therefore vital that we create an environment in which children can fulfil their potential and become healthy and resilient individuals.

To achieve this end, Aynsley-Green argued, we need to adopt a more community-based model of children's services. Schools should become a community hub of services for children encompassing education, health care and play. Only with commitment by politicians to child-friendly policy are we likely to see improvement on children's health and educational outcomes, he concluded.

Why should we take resilience seriously in children and young people today?

Setting a context

Sir Al Aynsley-Green

Professor Emeritus, University College London

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Celebrating truly outstanding young people:
The Diana Princess of Wales award

Why and how are these youngsters so resilient?

Why should we care about children?

The old age dependency ratio – number of working age adults per pensioner:

- 1971 was 3.6
- Fell to 3.2 in 2009
- Projected to be 2.2 by 2034

Hard reality

Children today will be the productive adults to support an ever aging population

We need healthy, educated, creative and resilient children now

The 'Man from Mars': *Investing in children should be your nation's top priority! – Is it?*

What do we need to achieve these outcomes?

An exquisitely vulnerable and entirely dependent newly born __citizen__

The vital importance of attachment

What does she __Need__? The __Nurture__ of children

She __needs__ from:
1. Parents & families:
   – Love and care
   – Physical contact, comfort
   – Security and stability
   – Nutrition, warmth and protection
2. Community:
   – Play, Exercise, Exploration, Encouragement, Managed risk
   – Friends, Role models, Spirituality
3. Education:
   – Core skills, Expectation, Values and Purpose in life
4. Government:
   – Services based on **needs & evidence** with protection of her **Human Rights.**

The nurture of children should be everybody's business: It Takes a Village!

- Parents and families
- Communities
- Schools
- Faiths
- Voluntary organisations
- Professional staff
- Local government
- National government
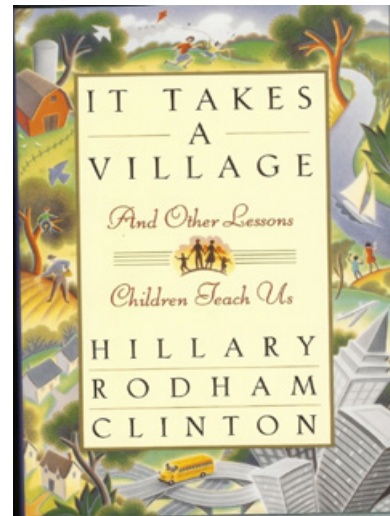
How do we build '*Villages with resilient children at their hearts*'?
How well are we doing for our children?

Much to celebrate:
- Children, generally, are healthy with major advances in understanding diseases & preventing ill health
- Motivated staff and some stunning new resources
- Some examples of great policy eg *Early Years, Early Intervention*

But: enormity of dismal outcomes for too many compared to other countries
  - Inequality
  - Health and wellbeing
  - Education
  - Social care
  - Youth justice
 - Public attitudes

WHY?

How many are aware of this enormity?

Libraries of reports

Child poverty in perspective:
An overview of child well-being in rich countries

A comprehensive assessment of the lives and well-being of children and adolescents in the economically advanced nations

BMJ
TACKLING INEQUALITY
Get them while they're young

Doing Better for Children

Social determinants of health and well-being among young people

Breaking the cycle
Believe in children
Barnardo's

Child well-being in rich countries
A comparative overview

unicef

The harsh reality:

The UK ***was bottom*** of the UNICEF league table in 2007, rose by 2013, but *is likely to fall again*

- High poverty
- Poor health - high infant mortality & low birth weight
- Poor family and peer relationships
- Risky behaviour – alcohol, early sex & teen pregnancy
- Low expectations and high NEETs
- Low self-assessed well being

WHY?

Is all well for children today?
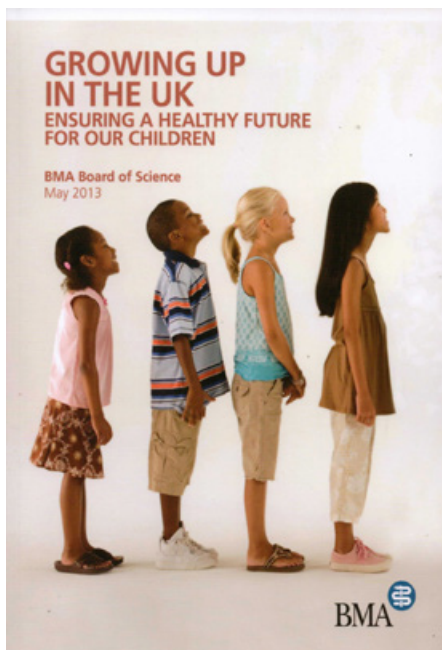## The Good Childhood Inquiry 2009
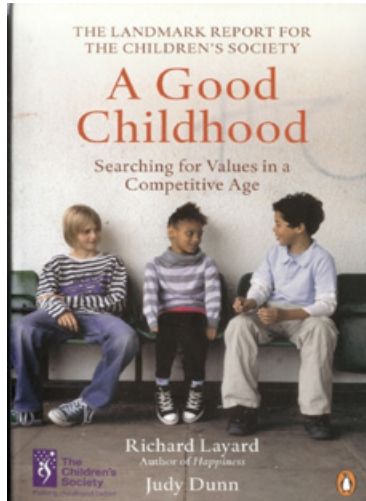
Children in many ways have never had it so good

BUT: A searing commentary on childhood today:

- Excessive individualism
- Soaring family breakdown
- Commercialisation
- Overly-competitive education
- Dire poverty

How does this affect resilience?

The BMA report May 2013

'Politicians are failing children on a grand scale'

Poor outcomes for even common conditions

1900 children die unnecessarily each year

Especial challenges for disability and mental health

Lack of political will

The CMO for England's report 2012*
Published 24th October 2013

'We should feel profoundly ashamed of our record on child health'.

Our Children Deserve Better: Prevention Pays

*The most important report from a senior Government official for 30 years

Will anything of substance follow now?

Acknowledgement: Kids Company

- 54% adults believe children behave like animals
- 45% agree they are feral
- 49% believe they are a danger to each other and to adults
- 43% agree something has to be done to protect us from children
- 35% feel the streets are infested with children
- Believe that 50% crime is committed by children, (reality 12%)

Where do these appalling data come from? What effects do they have?

Society's intolerance of children

DOGS WELCOME INSTORE

w.fatface.c

AS FROM NOW ALL SCHOOL CHILDREN,UNLESS THEY ARE ACCOMPANIED BY AN ADULT,ARE ONLY ALLOWED IN STORE 2 AT A TIME,THEY ARE NOT TO CARRY THEIR BAGS AROUND THE SHOP,THEY CAN EITHER LEAVE THEM BY THE TILL,OR LEAVE THEM OUTSIDE.THIS IS TO BE A PERMANANT ARRANGEMENT.THANKS

Information

Why do you English so hate your children?

One of very few places that welcomes children – Coram's Fields in London

Coram's Fields and the Harmsworth Memorial Playground is run by an independent charitable trust.

Coram's Fields is not a public park and adults may only enter if accompanied by a child

Is there anywhere in your locality that welcomes children?

What about emotional and mental health in childhood?

- 1 in 10 children has a <u>diagnosable</u> mental health disorder
- Highest rate of self harm in Europe
- Particularly vulnerable groups
    - Asylum seekers
    - Young carers
    - Children in care
    - Disability
    - Children who have been abused
    - Hidden harm - young people with drug or alcohol issues
    - Bereavement and loss

    Who can they turn to?

The burden of mental health for schools

In a 1000 student secondary school, at any one time:

- 100 will be suffering significant mental illness
- 50 pupils will be seriously depressed
- 10-20 pupils will have an obsessive compulsive disorder
- 5-10 girls will be affected by eating disorders
- 35-60 are bereaved of someone close

BUT:
Only 25% of CYP with clinically significant mental
health problems will be accessing the services they need.

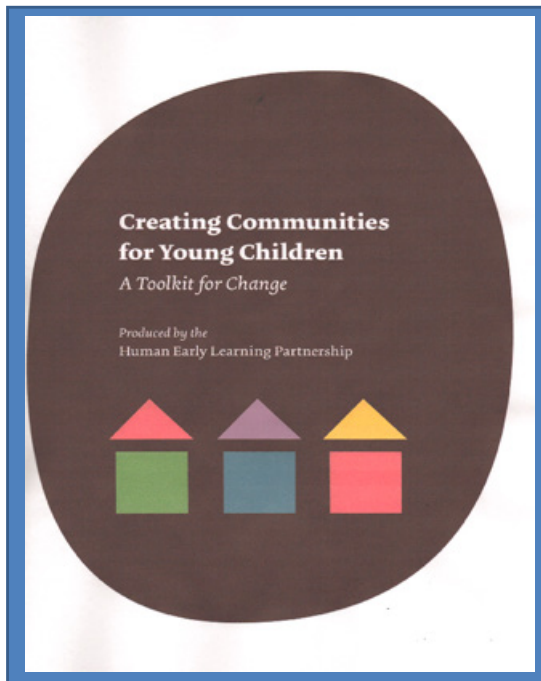*Who can they turn to?*

School-based integrated health centre

The Bywa (Place of Life) Centre, Penair School, Cornwall

Amazing community initiatives
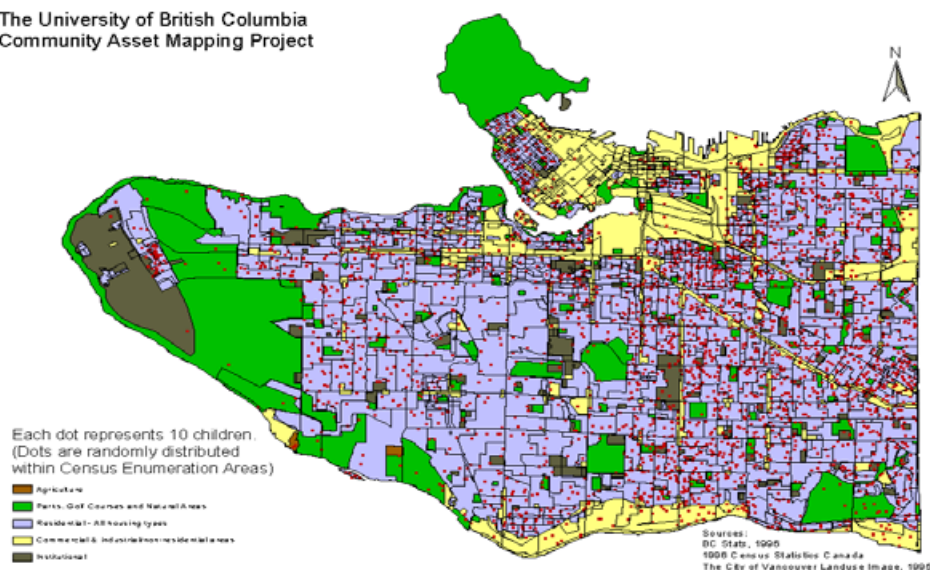
Creating communities for children

A proven toolkit in British Columbia – mapping *'nurturative assets'* to school locality level
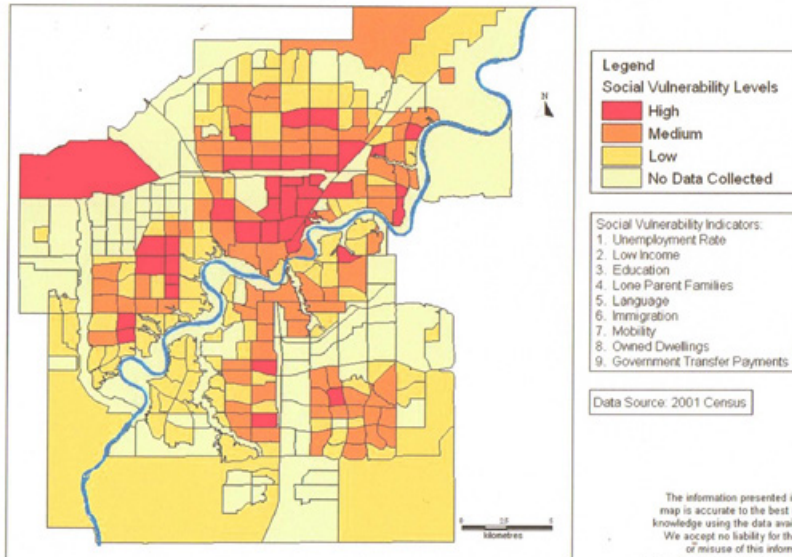
Could this be lifted to our localities?

Building community responsibility for children
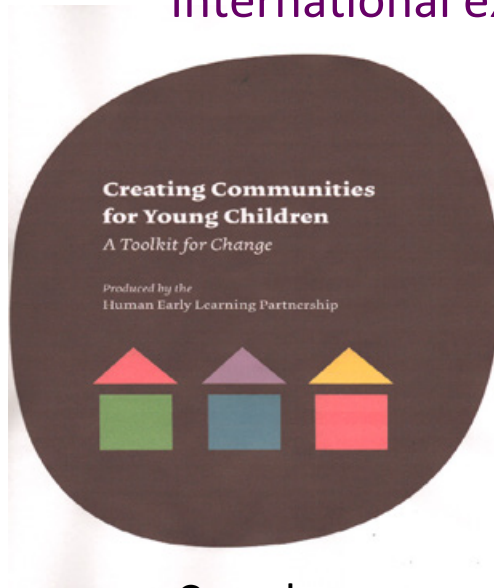## Mapping their lives - Vancouver HELP programme

The amazing HELP resource + EDI

Early Childhood Development Community Mapping Project (Edmonton)
Social Vulnerability Levels of Edmonton Neighbourhoods

Legend
Social Vulnerability Levels
- High
- Medium
- Low
- No Data Collected

Social Vulnerability Indicators:
1. Unemployment Rate
2. Low Income
3. Education
4. Lone Parent Families
5. Language
6. Immigration
7. Mobility
8. Owned Dwellings
9. Government Transfer Payments

Data Source: 2001 Census

The information presented in this
map is accurate to the best of our
knowledge using the data available.
We accept no liability for the use
or misuse of this information.

Should local civil society reclaim children and childhood? How do we build 'villages'?

1. Understanding the _local_ context
2. 'Mapping' from routine data collections
    a) Defining the 'patch'
    b) The population and its demography
    c) Who's who? What's where? Who's doing what?
3. Developing a strategy
    a) Responsibility & accountability
    b) Defining objectives and metrics
    c) Listening to children, young people & families
    d) Partnerships & working with the media

International excellence

**Creating Communities
for Young Children**
A Toolkit for Change

*Produced by the
Human Early Learning Partnership*

Canada   L4WB & Eurochild

What do we need from government?

1. Political ideology that sees children as a vital priority and as citizens in their own right
2. Explicit commitment from the very top especially for the most vulnerable
3. Intellectual framework for an *overall* policy
4. Integrated responsibility for *all* aspects of policy affecting children across Government
5. Clear vision, objectives and measured outcomes
6. Resources
7. Delivery framework
        How much of this do we have?
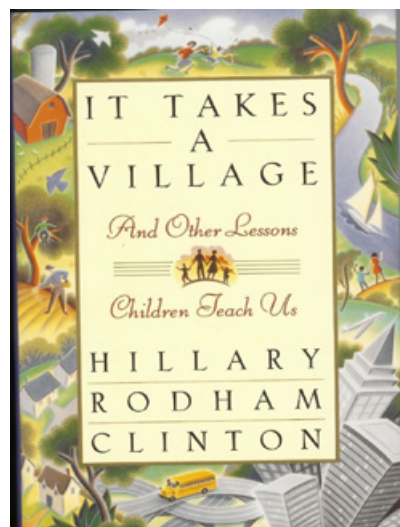
*What are **you** going to do now?*

Does this portray an inadvertent 'silo' of schools out-with the 'village'?

Chris Bonell

(Professor of Sociology and Social Policy at the Institute of Education, University of London) argued that current education policy pitted attainment against health and well being and favoured the former at the expense of the latter. Education policy had a narrow understanding of the basis of economic productivity suggesting that an individual's attainment alone determined his or her employability. This view, he argued, had led to the Department for Education focussing rigidly on attainment and downplaying the importance of health and well being within schools. Symptomatic of this stance, Bonell said, was the downgrading of the Healthy Schools programme, an initiative that had had some success in helping schools in this area.

The assumption that the pursuit of attainment and well being was a zero-sum game was flawed, Bonell argued, because research indicated that well being was in fact supportive of attainment: a child or young person was more likely to succeed academically if he or she was happy and felt confident.

The evidence from research suggested the benefits of a more supportive framework for Personal, Social and Health Education (PSHE) and Sex and Relationships Education (SRE), Bonell concluded. He suggested that the provision of PSHE and SRE should be made statutory and Ofsted school inspections should place stronger emphasis on performance on health and well being.

The potential impact of school based programmes on student health and attainment: results from systematic reviews

Chris Bonell
Professor of Sociology and Social Policy
www.ioe.ac.uk

Education policy in England neglects health/wellbeing

•League tables focused narrowly on attainment

•Healthy Schools programme no longer national

•PSHE non-statutory, schools spend less and less time teaching it[1]

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SSRU
Social Science
Research Unit

IoE Leading education
and social research
Institute of Education
University of London

Might these developments be underpinned by two ideas?

1) Promoting attainment and health/personal development is "zero-sum game"

2) Improving attainment is sufficient to increase economic competitiveness[2]

Both these ideas are flawed.

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SSRU
Social Science
Research Unit

IoE Leading education
and social research
Institute of Education
University of London

Zero sum game?

Students in better health achieve more academically[3]

Student progress in education and personal developmental interact over time[4]

Schools where students do better than expected academically also have better health[5]

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Zero sum game?

Personal development and wellbeing get more attention in e.g. Finland, Sweden, Australia and Singapore that do better in PISA rankings[6]

THE CLINCHER: Meta-analyses of experimental evidence report that physical and mental health programmes in schools also boost academic learning[7-9]

9

Attainment all that matters economically?

An effective labour force also requires non-cognitive skills, such as resilience and team work skills[10]

Productivity is improved by better health of workers[11]

10

Balance and synergy

Schools need to teach students academic knowledge/ cognitive skills

But also develop wider personal skills, ensure wellbeing and promote health

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But how?

HPS programmes promote health via curriculum, whole school actions and parental/community engagement

New Cochrane review – HPS produce significant benefits across health outcomes including diet, exercise, bullying, smoking etc[12]

Health education more feasible when integrated in academic subjects[13]

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Policy environment

Schools can deliver these health interventions now, in support of their mission to raise attainment

But more supportive policy context would help

-PSHE/SRE statutory subjects

-More emphasis in Ofsted inspections

-Metrics/league tables embrace wellbeing (as per PISA moves)

-Resurrection of NHSP but with emphasis on evidence-based programmes

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References

1. PSHE Association. Comments on the National Curriculum proposals published in February 2013 from the PSHE education Strategic Partners' Group. PHSEA; 2013.
2. Gove M. Education for economic success. Education World Forum; 11 January 2012; QEII Conference Centre, London2012.
3. Suhrcke M, de Paz Nieves C. The impact on health and health behaviours on educational outcomes in high income countries: a review of the evidence. Copenhagen: WHO Regional Office for Europe; 2011.
4. Masten A, Cicchetti D. Developmental cascades. Developmental and Psychopathology. 2010;22:491-5.
5. Bonell C, Jamal F, Harden A, Wells H, Parry W, Fletcher A, et al. Systematic review of the effects of schools and school environment interventions on health: evidence mapping and synthesis. Public Health Research. 2013;1(1).
6. Humphrey N. Social and Emotional Learning: A Critical Appraisal London: SAGE; 2013
7. Murray NG, Low BJ, Hollis C, Cross AW, Davis SM. Coordinated school health programs and academic achievement: A systematic review of the literature. J Sch Health. 2007;77:589-600.
8. Durlak JA, Weissberg RP, Dymnicki AB. The impact of enhancing students' social and emotional learning: a meta-analysis of school-based universal interventions. Child Development. 2011;82(1):405-32.
9. Farahmand FK, Grant KE, Polo AJ, Duffy SN, Dubois DL. School-based mental health and behavioral programs for low-income, urban youth: a systematic and meta-analytic review. Clinical Psychology. 2011;18(4):372-90.

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10. Heckman JJ, Stixrud J, Urzua S. The Effects of Cognitive and Noncognitive Abilities on Labor Market Outcomes and Social Behavior: Working Paper 12006. Cambridge MA: National Bureau of Economic Research; 2006.

11. Stewart WF, Ricci JA, Chee E, Morganstein D. Lost productive work time costs from health conditions in the United States: results from the American productivity audit. Journal of Occupational and Environmental Medicine. 2003;45(12):1234-46.

12. Langford R, Bonell CP, Jones HE, Pouliou T, Murphy SM, Waters E, et al. The WHO Health Promoting School framework for improving the health and well-being of students and their academic achievement. Cochrane Database of Systematic Reviews. 2014(4):Art. No.: CD008958. DOI: 10.1002/14651858.CD008958.

13. Anderson R. Project summary for Implementing health promotion and illness prevention programmes in schools: a mixed methods systematic review of research and experience in the United Kingdom. 2013

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Janet Palmer

(Ofsted national lead for PSHE education) brought a perspective to the debate from within Ofsted. She argued that the criteria for an Ofsted school inspection were not narrowly defined and did recognise the importance of student well being to the performance of a school. Under a Section 5 inspection conducted every five years, the performance of a school would be assessed in five areas – achievement of pupils, quality of teaching, behaviour and safety of pupils and quality of leadership and management. Palmer made the case that in consideration of the latter two areas – behaviour and safety of pupils and quality of leadership and management – student well being was integral. For example, inspectors would assess behaviour toward and respect for fellow students and adults in the school as well as make judgements about the appropriateness of language used by students and tolerated by teachers.

Schools that actively promoted the well being and safety of students performed better in these assessments than schools that did not. With the constantly changing landscape of social interaction, Palmer noted, it was imperative that schools adopt a proactive approach to PSHE that improved awareness and increased resilience to the challenges faced by children and young people.

Given the integral relationship of well being to attainment it should be no surprise, Palmer concluded, that the data indicated a strong correlation between performance on PSHE criteria and a school's overall inspection assessment.

How Ofsted assesses school performance in supporting and improving pupils' social and emotional development

Ofsted

Presenter: Janet Palmer HMI (National Lead for Personal, Social ,Health and Economic Education)

Coram Life Education
London 2 May 2014
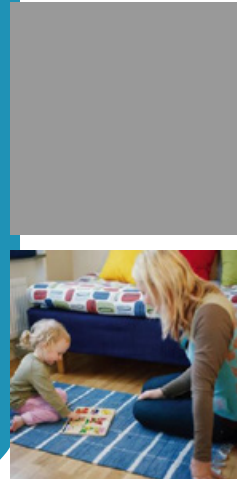
Section 5 framework for Maintained schools, Free Schools and Academies:

Ofsted

4 main judgements: * achievement of pupils
                        * quality of teaching
                        * behaviour and safety of pupils
                        * quality of leadership and management

and within each of the above inspectors must make a judgement about how well the school promotes the pupils' spiritual, moral, social and cultural development.

Inspectors are also looking for evidence that schools are carrying out their statutory responsibilities including in relation to safeguarding

Behaviour and safety

Ofsted

Inspectors will consider:

- pupils' behaviour towards, and respect for, other young people and adults, and their freedom from bullying, harassment, and discrimination

- this may include cyber-bullying and prejudice-based bullying and language related to special educational needs, sexual orientation, sex, race, religion and belief, gender reassignment or disability as defined in the Equality Act 2010

- whether pupils feel safe and their ability to assess and manage risk appropriately and to keep themselves safe

Guidance for inspecting behaviour and safety

Ofsted

- Inspectors should specifically ask pupils about the type of language they hear around the school. This should be compared to responses from staff in order to test the school's attitudes to such issues.

- Inspectors should explore with a range of staff, including teaching assistants, the training they have had about different aspects of bullying, including prejudice-based bullying; how confident they feel as result; how well supported they are by senior staff when they encounter bullying and how they promote an understanding of individual differences through the curriculum.

- In particular, inspectors should consider how pupils are taught about diversity in subjects such as personal, social and health education (PSHE) and citizenship

Spiritual, Moral, Social and Cultural development

Ofsted

Evidence of pupils' spiritual, moral, social and cultural development can be found, for example, where pupils:

- develop and apply an understanding of right and wrong in their school life and life outside school

- develop awareness of and respect for diversity in relation to, for example, gender, race, religion and belief, culture, sexual orientation and disability

- take part in a range of activities requiring social skills

- gain a well-informed understanding of the options and challenges facing them as they move through the school and on to the next stage of their education and training

Guidance for inspecting SMSC

Ofsted

Inspectors should investigate:

- whether there is a coherent approach to the promotion of SMSC through activities such as tutorials, citizenship programmes and discussions with pupils about their work

- the opportunities created by the school for pupils to take part in a range of social, artistic, cultural, sporting, dramatic, musical, mathematical, scientific, technological and, where appropriate, international events and activities that promote aspects of pupils' SMSC development such as volunteering.

Statutory responsibilities

Schools are required to:

- offer sex and relationships education
- promote children and young people's personal and economic well-being

Under the 2014 NC framework every state-funded school **must** offer a curriculum which:

- promotes the spiritual, moral, cultural, mental and physical development of pupils
- prepares pupils for the opportunities, responsibilities and experiences of later life

Safeguarding

- Inspectors must consider the extent to which leaders and managers take steps to promote the safety of all pupils and ensure that they are safe in school.

- This includes how the school helps pupils to build pupils' resilience and understanding of how to safeguard themselves and others physically and emotionally.

Guidance for inspecting safeguarding

Ofsted

Inspectors should:

- discuss with pupils whether the school helps them to keep safe, encourages them to adopt safe and responsible practices, and to deal sensibly with risk

- include e-safety in their discussions with pupils, covering topics such as safe use of the internet and social networking sites and cyber bullying

Safeguarding through the curriculum

Ofsted

It is difficult to see how safeguarding can be good if PSHE provision is poor.

- If pupils are kept ignorant of their human, physical and sexual rights; or how to protect themselves and others, or where to go to for help - that does not constitute good safeguarding.

- These aspects of safeguarding are a priority for Ofsted. Inspectors will be looking at how well schools are helping pupils to protect themselves, from among other things: drug and alcohol abuse, child sexual exploitation, female genital mutilation and forced marriage.

What the children said about PSHE/lifeskills lessons

Ofsted

- 'I think that they would become more useful if you were to be given examples of what you might come up against. I think that you should be taught what to do and how to react in different situations.' *Girl Year 9*

- 'How about something on sex abuse?' *Girl Year 9*

- 'They were really helpful in being educated about important lifeskills that would very soon matter greatly to us.' *Girl Year 10*

- 'We need lessons about the influence of the media such as porn on people's views of sex and the human body.' *Boy Year 10*

- 'The lessons should be aimed at ensuring the pupil knows what they can do to keep safe.' *Girl Year 12*

Thank you

Eustace de Sousa

(deputy Director for Children, Young People and Families, Public Health England) brought to the discussion insight into the health framework surrounding school practice on health and well being. He stressed the need for an integrated approach that encouraged partnership across services and practice informed by evidence. Practice should build on the legacy of previous school-based initiatives – Healthy Schools programme, National Child Measurement programme (NCMP) and Change4Life – to develop effective practice that addresses health inequalities. Public Health England was aiming to collate available information, he noted, to provide a resource for schools and agencies that could inform best practice.
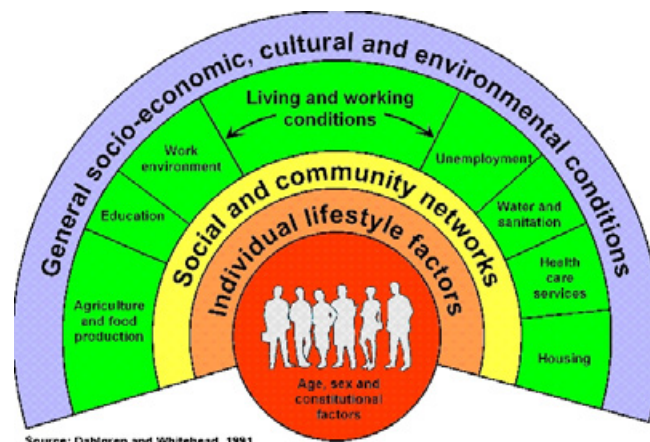
Public Health England

Improving outcomes for school age children and young people

Coram Event, 2nd May 2014

Eustace de Sousa
Deputy Director

Public Health England

Source: Dahlgren and Whitehead, 1991

*'Health is created and lived by people **within the settings** of their everyday life; where they learn, work, play and love'*

World Health Organisation, The Ottawa Charter, 1986, p2

2   Improving outcomes for children and young people

Public Health England

Health, Wellbeing and Achieving in Schools

"You won't get good grades in schools unless you are happy and fulfilled and unless the whole child is looked after"

Michael Gove
Secretary of State for Education
School Food Plan, July 2013

3   Improving outcomes for children and young people

Public Health England

PHE Health and Wellbeing:
Healthy People, Healthy Places, Healthy Communities

For school-age children our ambition is for:

every school and college to be a healthy place to work and learn, and every learner to be equipped with skills for life

4   Improving outcomes for children and young people

Public Health
England

Transformational approach

1 Assets based
•focus on wellbeing as well as prevention and early intervention

2 Integrated – one that recognises
•the contribution of wider determinants
•the significance of health risk factors
•that health and wellbeing is experienced across the lifecourse

3 Evidence informed
•valuing and reflecting a person centred approach
•reflecting local need
•advocating action informed by the evidence base

4 Outcomes-led

5   Improving outcomes for children and young people

Public Health
England

Evidence informed

UK Youth Parliament identified a 'Curriculum for Life' as their top priority campaign for 2013

British Youth Council (2013)
Youth Select Committee 'A curriculum for Life' www.byc.org.uk

In 2013, an Ofsted survey found that there was a close correlation between the grade that schools "*were awarded for overall effectiveness in their last section 5 inspection and their grade for PSHE education*"

Ofsted (2013)

6   Improving outcomes for children and young people

Public Health
England

Evidence informed

Interventions to promote health and wellbeing also promote attainment and conversely schools that deliver value added education also offer value added for health and wellbeing

Murray et al, 2007. J Sch Health. 2007;77:589-600) ; Gutman and Vorhaus, 2012 www.education.gov.uk/publications/standard/publicationDetail/Page1/DFE-RB253 ;

Strong evidence that school-based interventions to tackle social and emotional learning can boost attainment as well as being cost-saving

Durlak JA et al , Child Development. 2011;82(1):405-32; Knapp, M and McDaid, D, Parsonage M (eds) (2011) Mental Health Promotion and Prevention: The economic case. Available at www.lse.ac.uk.businessAndConsultancy/LSEEnterprise/pdf/PSSRUfeb2011.pdf

Good evidence of long-term positive impact of moderate to vigorous physical activity on academic attainment in adolescence

Booth, J. N. et al, 2013, British Journal of Sports Medicine.

Significance of taking a whole school approach

The National Institute for Health and Care Excellence (NICE) has produced a range of public health guidance of relevance to schools and colleges - see www.nice.org.uk

7   Improving outcomes for children and young people
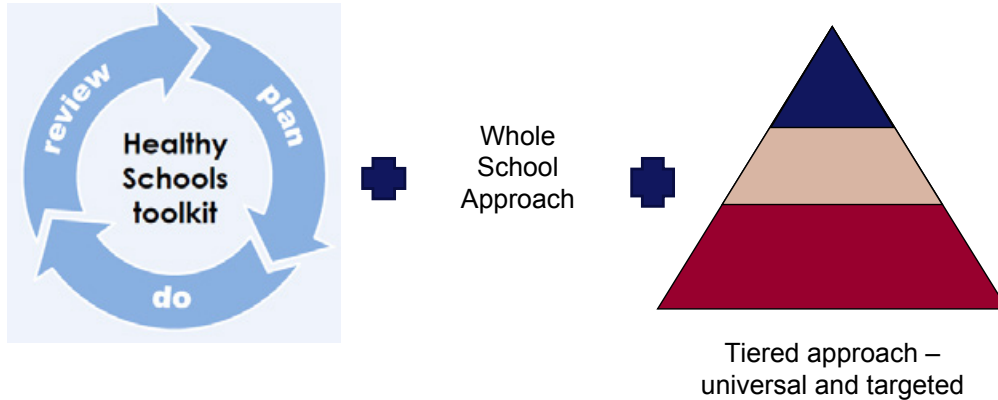
Public Health
England

A whole school approach

1. Leadership, management and managing change

2. Policy development

3. Learning and teaching, curriculum planning and resourcing

4. School ethos, culture, environment and SMSC development

5. Giving children and young people a voice

6. Provision of support services for children and young people

7. Staff continuing professional development (CPD), health and wellbeing

8. Partnerships with parents/carers, local communities, external agencies and volunteers to support pupil health and wellbeing

9. Assessing, recording and monitoring impact and outcomes

8   Improving outcomes for children and young people

Slide 9

Learning from past - legacy of Healthy Schools

Healthy Schools toolkit (review, plan, do)

➕ Whole School Approach ➕

Tiered approach – universal and targeted

Slide 10

PHE Health and Wellbeing
### Healthy People, Healthy Places, Healthy Communities

Our contribution:

•Provide system wide leadership

•Inform local and national decision making through effective use of data and intelligence

•Disseminate evidence of what works to provide a compelling vision for change

•Influence effective practice, supporting local government through our 15 PHE Centres

•Address variation in outcomes, focus efforts to reduce health inequalities and promote equality

Public Health England

PHE - Our contribution

Helping to promote awareness from the evidence of the significance of children and young people's wellbeing and in particular to highlight links with attainment and achievement

How healthy behaviour supports children's wellbeing

August 2013
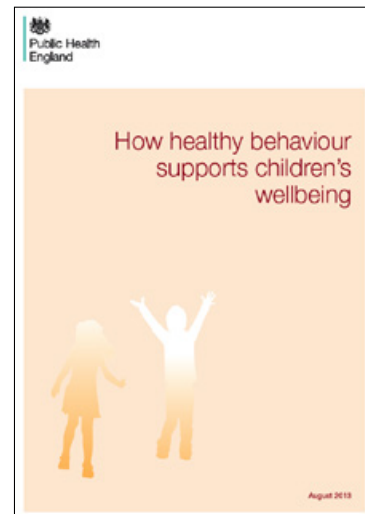
11   Improving outcomes for children and young people

Public Health England

PHE - Our contribution

For school and college audiences:

Briefing for head teachers on *'How actions by schools on wellbeing enables children to achieve and flourish'*

Chapter in book going to all schools - the A-Z of school improvement: Health and Wellbeing

A framework to support implementation of whole school approach in relation to emotional health and wellbeing

For lead members/ public health teams and wider LA audiences:

Adolescent Health Framework

Working with NICE to improve user access to key documents relevant to school-age population

Briefing: '*Promoting children and young people's resilience – the role of schools'*

Literature review on school food and attainment and breakfast and cognition

12   Improving outcomes for children and young people

Public Health England

National Child Measurement Programme – PHE's role

- Supported local authorities to deliver NCMP during first year post transition, achieving participation by 100% of LA's, and over 1 million children nationally

- Provision of operational guidance, template letters, IT system and national data analysis

- Support effective use of NCMP data locally to inform action through online tools, analysis guidance, school feedback tool, slidesets

- Developing the evidence base for sharing results with parents and share best practice approaches

- Facilitate dialogue between PHE and frontline delivery through reference group and networks

13   Improving outcomes for children and young people

Public Health England

PHE - Our contribution

Influence effective practice:

•Working with academic/ research partners to help bridge the research-practice gap

•Supporting local practice networks

•Workforce development

•Peer review process

•Social marketing: Change for Life, Smart Swaps Campaign; Youth Marketing

45   Improving outcomes for children and young people

Public Health England

Forward look 2014/15

Develop a health and wellbeing framework to support local government and education sector to take evidence based action to improve public health outcomes for school-age children

Data, knowledge, intelligence – refresh school-age health dashboard

Evidence – build on translating key messages for school and colleges from the evidence re what works to improve health and wellbeing outcomes for school-aged children

Workforce – focus on opportunities to develop contribution of teachers as part of wider public health workforce

15   Improving outcomes for children and young people

Public Health England

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16   Improving outcomes for children and young people

Sharon Lambert

(Headteacher Allerton Primary School, Bradford) brought a practitioner's perspective to the discussion. She provided a vivid account of how a school could proactively support children's social and emotional development. Lambert stressed the importance of personal qualities - friendship, trust, ambition, collaboration and curiosity – to create an environment in which children were disposed to learn. Although these qualities were integral to child development, she argued, many teachers did not fully appreciate their relevance. It was important that schools reflected on the wider purpose of education and adopted a more holistic approach to working with children. Schools needed a coherent plan to deliver this aspect of education in a meaningful way. Extracurricular activities could include outside visits and trips and involve collaboration, problem-solving, heritage and cultural identity.

Supporting & Improving Pupils' Social and Emotional Development

Sharon Lambert
Headteacher

Creating learning environments

Imagination Creativity Language

Early friendships

**Building trust
Encouraging adults**

Stepping outside the classroom

Encouraging a long term relationship

Connecting with democracy

Ambition
When I grow up I want to
be…………………….?

Solving problems together

Choosing, joining and participating

Linking learning

**Taking risks
Tenacity
Teamwork**

**Pushing boundaries
Developing confidence**

Inspiring curiosity

**Including
Supporting
Enabling
Accomplishing**

**Connecting
Tradition
Culture
Heritage**

**Valuing the
past**

ALLERTON PRIMARY SCHOOL **&** NURSERY

Sense of belonging

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ALLERTON PRIMARY SCHOOL **&** NURSERY

We made this work

Concluding Actions

The conference concluded with delegates proposing action points to take the agenda forward:

- For organisations in the sector to make a pledge to work collaboratively in promoting the school health and well being agenda.

- For evidence to be made more accessible and more clearly linked to forms of practice.

- Campaign to make PSHE statutory in national curriculum and contribute to current PSHE/SRE government enquiry:

http://www.parliament.uk/business/committees/committees-a-z/commons-select/education-committee/inquiries/parliament-2010/pshe-and-sre-in-schools/

- Research and disseminate knowledge on 'Village' concept of community-based schools that provide range of family services and support.

- Delegate contact list to be shared to encourage collaborative working.

Questions to be addressed

- How can education policy best support students' holistic development and wellbeing?

- What role can the regulatory framework play in supporting schools to improve public health outcomes for students?

- How can schools be incentivised to give more attention to students' personal development?

- What role can health and wellbeing programmes delivered in schools play in achieving these outcomes?

- How can universities, public health agencies and schools better collaborate to develop and scale up evidence based interventions?

- What is the role of service providers in building capacity in schools and what will be your contribution?

Please send your observations to cle@coram.org.uk