

**National Healthy Schools Programme
National Audit**



Healthy Schools

Healthier Living and Learning

Introduction

This document clarifies the minimum evidence required by you to achieve National Healthy School Status. Evidence is listed against each criterion of the four core themes of National Healthy School Status. It is designed for you to be able to determine:

- You have achieved National Healthy School Status, or
- The areas you need to develop in order to achieve National Healthy School Status

Following on from the criteria and minimum evidence listed against them within each theme, there are exemplar questions that you should consider and adapt accordingly to determine if you have fulfilled each criterion. There are also appropriate web links, local contacts for support within each theme and the documentation that you will need to examine in considering your achievement of each criterion.

At the end of each theme is a list of exemplar outcomes that link to criteria within the Every Child Matters Framework and sections of the Ofsted Self Evaluation Form. These outcomes are qualitative and quantitative and are best judged for success by involving children/young people in their monitoring and evaluation. These outcomes could indicate a number or a % decrease or increase.

Evidence from staff and other stakeholders can be oral, written or observed and you may want to combine different sources of evidence when making a judgement on your achievement of each criterion. This should include discussions with staff, children/young people, parents/carers and governors using the proposed questions, examining the suggested documentation and observing practice. There is space for you to record the type of evidence used to help you make a judgement against the minimum evidence and also where the evidence is stored.

The audit should be carried out within the process advocated by the National Healthy Schools Programme, which is:

- A representative group to steer the process
- Carrying out the audit – involving a range of members of the school community
- Identifying targets/outcomes and areas for development and outcomes to be achieved
- Securing baseline data which can be used to measure achievement
- Clarifying actions to achieve the outcomes
- Monitoring progress and review impact against the outcomes
- Identifying success

When you have completed putting in place all the minimum evidence, you should send the Self-Evaluation Form to the named person indicated at the bottom of the form.

Your Local Programme will be able to support you in all of the stages outlined above and it is recommended you contact them and involve them in your progress towards achieving National Healthy School Status.

NATIONAL AUDIT

Personal Social and Health Education including Sex and Relationship education(SRE) and drug education (including alcohol, tobacco and volatile substance abuse)					
<ul style="list-style-type: none"> • PSHE contributes significantly to all five national outcomes for children/young people: being healthy, staying safe, enjoying and achieving, making a positive contribution and economic well-being • PSHE provides children/young people with the knowledge, understanding, skills and attitudes to make informed decisions about their lives 					
Criteria	Minimum evidence	Date completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where found
A Healthy School: 1.1 Uses the PSHE framework to deliver a planned programme of PSHE, in line with relevant DfES/QCA guidance Ofsted self evaluation 4a, 4b, 4c, 4e, 5a, 5b, 5c	<ul style="list-style-type: none"> • The Programme of Study (PoS), and supporting Schemes of Work (SoW) within the school clearly reflect the QCA/DfES guidance in particular social and emotional aspects of learning • Schemes of Work also include the involvement of external agencies (see 1.7 below) 				
1.2 Monitors and evaluates PSHE provision to ensure the quality of teaching and learning Ofsted self evaluation 4a, 4b, 4c, 4d, 4e, 4f, 5a, 5b	<ul style="list-style-type: none"> • The school can evidence how the views of both teaching staff and children/young people are used to monitor and evaluate PSHE • Methods of involving children/young people in monitoring are clear from the Schemes of Work • The Programme of Study and Schemes of Work are regularly reviewed for appropriateness and relevance to children/young people • Teaching and Learning in PSHE is in line with the school's Teaching and Learning Policy 				

Criteria A Healthy School:	Minimum evidence	Date completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
<p>1.3</p> <p>Assesses children/young people's progress and achievement in line with QCA guidance</p> <p>Ofsted self evaluation 4a, 4b, 4c, 4d, 4e, 4f, 5a</p>	<ul style="list-style-type: none"> The school must have considered the QCA end of key stage statements in assessing progress and achievement, and this must help to inform school practice The PSHE Co-ordinator has a clear plan on how pupil progress and achievement in PSHE is assessed, recorded and reported on Children/young people and staff can clearly identify progress Children/young people are aware of how their progress and achievement in PSHE is assessed PSHE is referred to in the school's Assessment Policy or the assessment system within the school 				
<p>1.4</p> <p>Has a named member of staff responsible for PSHE provision with status, training and appropriate Senior Management support within the school</p> <p>Ofsted self evaluation 6a</p>	<ul style="list-style-type: none"> The named member of staff reports that s/he has appropriate SMT support within the school The named member of staff can clarify that s/he receives time to complete the role in line with other subject Co-ordinators The named member of staff has had recent training on aspects of PSHE (within the last two years) 				

Criteria A Healthy School:	Minimum evidence	Date completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
<p>1.5</p> <p>Has up-to-date policies in place – developed through wide consultation, implemented and monitored and evaluated for impact - covering Sex and Relationship Education, Drug Education and Incidents, Safeguarding, and Confidentiality</p> <p>Ofsted self-evaluation 2a, 4a, 4b, 4d, 4f, 6a</p>	<ul style="list-style-type: none"> • Children/young people, staff, parents/carers and governors have been consulted about these policies • Children/young people, staff and other relevant stakeholders can outline their role in the review of these policies • The school has a Confidentiality Policy or it is referred to in a range of other policies • The school has a SRE Policy approved by governors • The school has a Drug Education Policy in line with DfES guidance • The school has a Managing Drug Related Incident Policy (can be part of Behaviour Policy or Drug Education Policy) • The school has a Safeguarding Policy 				
<p>1.6</p> <p>Has an implemented Non-Smoking Policy, or is working towards being smoke-free by Summer 2007</p> <p>Ofsted self evaluation 2a, 4a, 4d, 4f, 6a</p>	<ul style="list-style-type: none"> • The school is a smoke-free site or plans are in place for it to be so by May 31st 2007 (please note the exception of the caretaker's house) • Children/young people, staff, parents/carers and governors have been involved in the development of a smoke-free site • The school is proactive in providing information and support for smokers to quit e.g. promoting access to smoking cessation classes 				
<p>1.7</p>	<ul style="list-style-type: none"> • Schemes of Work reflect appropriate 				

Criteria A Healthy School:	Minimum evidence	Date completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
<p>Involves professionals from appropriate external agencies to create specialist teams to support PSHE delivery and to improve skills and knowledge, such as a school nurse, sexual health outreach workers and drug education advisers</p> <p>Ofsted self evaluation 4b, 4f, 5b, 6a</p>	<p>involvement of outside agencies</p> <ul style="list-style-type: none"> • The roles of such professionals are planned into the Schemes of Work and their contribution evaluated • There is a policy or guidelines about the role of external visitors to support the Schemes of Work including monitoring and evaluation of their input/contribution 				
<p>1.8</p> <p>Has arrangements in place to refer children/young people to specialist services who can give professional advice on matters such as contraception, sexual health and drugs</p> <p>Ofsted self evaluation 4b, 4f, 5c, 6a</p>	<ul style="list-style-type: none"> • The school has clear protocols that are understood by staff • In secondary schools, children/young people and staff are aware of how to access specialist services • In primary schools, staff are aware of how to access specialist services • Information for staff and children/young people from appropriate support agencies is promoted • Children/young people report that they have accessed specialist services when required 				

Criteria A Healthy School:	Minimum evidence	Date completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
<p>1.9</p> <p>Uses local data and information to inform activities and support important national priorities such as reducing teenage pregnancies, sexually transmitted infections and drug/alcohol misuse</p> <p>Ofsted self evaluation 4a, 4b, 4c, 4f, 5b, 6a</p>	<ul style="list-style-type: none"> The school uses local data to inform curriculum provision, where appropriate, and takes advice from health professionals such as a member of the school nurse services or local PCT about how the activities of the National Healthy Schools Programme supports national priorities 				
<p>1.10</p> <p>Ensures provision of appropriate PSHE professional development opportunities for staff – such as the Certification Programmes for teachers and nurses offered by DH/DfES</p> <p>Ofsted self evaluation 6a</p>	<ul style="list-style-type: none"> There is a planned programme for CPD linked to PSHE This programme is accessible to all teachers of PSHE and, where appropriate, is well attended Staff report effective impact on their professional development by the programme 				
<p>1.11</p> <p>Has mechanisms in place to ensure all children/young people's views are reflected in curriculum planning, teaching and learning and the whole school environment, including those with special educational needs and specific health conditions, as well as disaffected children/young</p>	<ul style="list-style-type: none"> The school has well-embedded mechanisms, such as a school council, year or class councils, circle time or structured and collated consultation, sessions that allows both consultation and feedback The school can demonstrate what has changed in aspects of curriculum planning, teaching and learning and the school environment as a result of children/young people's views 				

Criteria	Minimum evidence	Date completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
A Healthy School: people, young carers and teenage parents Ofsted self evaluation 2a, 2b, 4c, 4d, 4f, 5a, 5b					

Questions for children/young people:	Questions for staff:	Questions for parents/carers and governors:
<ul style="list-style-type: none"> • How are you involved with planning your PSHE? • How do you know how well you are doing in PSHE? • How do you ensure your ideas help influence school policies? What is the process for this? • What does the school say about smoking? • (For Secondary) Where would you go to get help for a range of health issues e.g. contraception, sexual health and drugs? • (For Primary) Where would you go if you needed help e.g. with friends, school work? • How do you contribute to making school life enjoyable? • How does your school celebrate your success? • What things have you been involved in, in your school that have made a difference? • How do you know that your suggestions and ideas are used to bring about changes in the school? How are you told and by whom? 	<ul style="list-style-type: none"> • How do you monitor PSHE? • How do you assess/report achievement for children/young people in PSHE? • How does this link to the Assessment Policy? • How does assessment inform future planning? • (To PSHE Co-ordinator) How do you feel you are supported in your role? • (To PSHE Co-ordinator) What CPD opportunities have you had and how have you benefited? • What involvement is there of external agencies and how is this managed? • What support agencies are you aware of and, if appropriate able to 	<ul style="list-style-type: none"> • How have you been involved in the development and monitoring of the Sex and Relationship Education and Drug Education Policies? • How is the schools' Non-Smoking Policy implemented? • How are you being involved in the school becoming a smoke-free site? • How are you kept up to date with developments in the school?

	<p>signpost children/young people to?</p> <ul style="list-style-type: none"> • (To Headteacher) What is your perception of PSHE? How does it contribute to school development? What support has been offered through the performance management of the PSHE Co-ordinator? • How is the implementation of the Non-Smoking Policy monitored? • What specialist services can be accessed by this school? • (To PSHE Co-coordinator/Headteacher) How is your work on the National Healthy Schools Programme aligned with national priorities and informed by local data e.g. Director of Public Health's Annual Report? • How does the school gather views from its learners about the curriculum and the school in general? • How do you celebrate success? 	
Web links	Documentation	Contacts

<p>www.qca.org.uk/pshe www.dfes.gov.uk/sreguidance/sexeducation.pdf www.teachernet.gov.uk/wholeschool/behaviour/drugs www.teachernet.gov.uk/wholeschool/familyandcommunity/childprotection/schools</p>	<ul style="list-style-type: none"> • Sex and Relationship Education Policy • Drug Education Policy • Managing Drug Related Incidents Policy (may be referred to in other policies or part of Drug Education Policy) • Safeguarding Policy in line with Local Children Safeguarding Boards • Confidentiality Policy or referred to in other appropriate policies • Non-Smoking Policy or an equivalent policy outlining the school's commitment to being smoke-free with timeline included • School's CPD file • Teaching and Learning Policy • Programme of Study/Schemes of Work for PSHE 	
<p>Examples of key outcomes achieved for this theme</p>		
<ul style="list-style-type: none"> • Children/young people report that they are developing the skills and attitudes to make informed decisions about their health • Children/young people know how to access specialist services on issues such as contraception, sexual health and drugs • Staff and children/young people agree the school has an effective school council • Children/young people feel involved in school life • Parents report they are aware of what is happening in school • The PSHE Co-ordinator reports feeling empowered and supported in school • The school is a smoke-free site • Children/young people report an increase in knowledge in health matters due to the programme for PSHE • Staff report enjoying teaching PSHE • There is a reduction in fixed term exclusions for smoking • There is a decrease in the number of staff and children/young people who smoke • There is a reduction in drug related exclusions • There is a reduction in teenage pregnancies • Children/young people report feeling safe to express their opinions and feelings • Children/young people regularly report that the input from external contributors has enhanced their knowledge and skills • Staff are involved in Continuous Professional Development in PSHE 		

- Children/young people regularly report that the programme for PSHE meets their needs
- Children/young people regularly report that through review they know how well they are doing in PSHE
- Children/young people report there is a variety of teaching methods used in PSHE

Healthy Eating

- Healthy eating contributes significantly to the being healthy national outcome for children
- Children/young people have the confidence, skills, knowledge and understanding to make healthy food choices
- Healthy and nutritious food and drink is available across the school day

Criteria A Healthy School:	Minimum evidence	Completed date	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
<p>2.1</p> <p>Has an identified member of the senior management team to oversee all aspects of food in schools</p> <p>Ofsted self evaluation 6a</p>	<ul style="list-style-type: none"> • There is named member of the Senior Management Team (SMT) to oversee all aspects of food in schools • The person's role in relation to healthy eating is known by staff 				
<p>2.2</p> <p>Ensures provision of training in practical food education for staff, including diet, nutrition, food safety and hygiene</p> <p>Ofsted self evaluation 6a</p>	<ul style="list-style-type: none"> • This criterion should directly support 2.9 • The school's CPD file evidences how staff needs regarding practical food education are identified • Staff (such as Food Technology and PSHE teachers) can discuss their experience of appropriate CPD – examples might include the local training by community dietitians, DfES Food Partnerships Programme, food safety and hygiene courses etc. 				
<p>2.3</p> <p>Has a whole school food policy – developed through wide consultation, implemented, monitored and evaluated for impact</p>	<ul style="list-style-type: none"> • Parents/carers, governors, caterers and children/young people are/have been involved in policy development and can describe their involvement • A policy is available covering all aspects of food and drink at school, including appropriate curriculum links, 				

Ofsted self evaluation 2a, 2b, 4d, 6a	reference to policy regarding packed lunches/food brought into school and				
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Criteria A Healthy School:	Minimum evidence	Completed date	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
	children/young people going off-site to purchase food <ul style="list-style-type: none"> The policy is referred to in the school prospectus/profile The policy is regularly communicated to the entire school community The policy and its impact is reviewed on an ongoing basis to reflect current DfES standards 				
2.4 Involves children/young people and parents/carers in guiding food policy and practice within the school, enables them to contribute to healthy eating and acts on their feedback Ofsted self evaluation 2a, 2b, 4d, 6a	<ul style="list-style-type: none"> Children/young people and parents/carers are/have been involved in guiding the School's Food Policy and can describe their involvement Children/young people and parents/carers agree that their feedback relating to policy has been appropriately considered 				
2.5 Has a welcoming eating environment that encourages the positive social interaction of children/young people (see Food in Schools guidance) Ofsted self evaluation 4a, 6a	<ul style="list-style-type: none"> The school has developed healthy/welcoming aspects of the dining room environment - including display and labelling of food, promoting healthy eating, ready availability of water, appropriate queuing arrangements, adequate time available to purchase and eat meal, non-stigmatisation of FSME 				

	children/young people, social dining and cleanliness <ul style="list-style-type: none"> Children/young people and staff feel that the dining area makes a positive contribution to the dining experience – 				
Criteria A Healthy School:	Minimum evidence	Completed date	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
	including adequate time available to eat their meal and avoiding stigmatisation of FSME children/young people				
2.6 Ensures that breakfast club, tuck shop, vending machine and after school food service (where available in school) meets or exceeds current DfES school food standards Ofsted self evaluation 4a, 6a	Where service is provided: <ul style="list-style-type: none"> The breakfast club meets or exceeds the current DfES standards The tuck shop meets or exceeds the DfES standards The vending machine meets or exceeds the DfES standards The after school food service meets or exceeds the DfES standards The governing body, the named member of the SMT (and Head Caterer where involved in service provision) agree that the non-lunch standards are being met and reviewed regularly 				
2.7 Has a school lunch service that meets or exceeds current DfES standards for school lunches Ofsted self evaluation 4a, 6a	<ul style="list-style-type: none"> The school lunch service meets or exceeds the current DfES standards for school lunches The governing body, the named member of the SMT and Head Caterer agree that the DfES standards for school lunch are being met and review this regularly (at least termly) 				

	<ul style="list-style-type: none"> • Healthy options are promoted • The caterer can say how minority ethnic and medical/allergy needs have been considered/incorporated in menu planning 				
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Criteria A Healthy School:	Minimum evidence	Completed date	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
	<ul style="list-style-type: none"> • There is appropriate guidance (promoting healthier options) given to children/young people who have packed lunches and their parents/carers 				
2.8 Monitors children/young people's menus and food choices to inform policy development and provision Ofsted self evaluation 2a, 2b, 4a, 6a	<ul style="list-style-type: none"> • The school has developed a system for monitoring menus and choices • The governing body, the identified member of the SMT and the School Caterer can demonstrate that they use data and how it influences developments 				
2.9 Ensures that children/young people have opportunities to learn about different types of food in the context of a balanced diet (using the Balance of Good Health), and how to plan, budget, prepare and cook meals, understanding the need to avoid the consumption of foods high in salt, sugar and fat and increase	<ul style="list-style-type: none"> • There are Schemes of Work for Healthy Eating found in Food Technology, PSHE and other subject areas • The Schemes of Work and/or out of hours activity incorporates age and ability appropriate lessons on a balanced diet, planning, budgeting, preparing, and cooking skills, for ideas and support • The curriculum considers the emotional aspects of food, the nature 				

<p>the consumption of fruit and vegetables</p> <p>Ofsted self evaluation 4a, 4f, 5b</p>	<p>of eating disorders, the role of the media and is appropriately connected to aspects of emotional health and well-being.</p> <ul style="list-style-type: none"> • A curriculum map is being developed or is in place 				
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Criteria A Healthy School:	Minimum evidence	Completed date	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
<p>2.10</p> <p>Has easy access to free, clean and palatable drinking water, using the Food in Schools guidance</p> <p>Ofsted self evaluation 4a, 4f, 6a</p>	<ul style="list-style-type: none"> • Children/young people and staff say they have access to free, clean and palatable drinking water at lunch time and throughout the day, and have been consulted about where it is located • The school is monitoring the availability of water and ensures it is being used by children/young people • Water consumption is encouraged and promoted 				
<p>2.11</p> <p>Consults children/young people about food choices throughout the school day using school councils, Healthy School task groups or other representative pupil bodies</p> <p>Ofsted self evaluation 2a, 4a, 4d, 4f</p>	<ul style="list-style-type: none"> • Children/young people say that they are regularly (at least termly) and appropriately consulted about food choices – including school meals and food and drink other than lunch 				

Questions for children/young people:	Questions for staff:	Questions for parents/carers and governors:
<ul style="list-style-type: none"> • Tell me about lunch and lunchtimes in your school i.e. the food on offer, is it fun? • Do you like and enjoy the places the school provides for you in which you eat? Why/why not? • How have you been involved in the development of the School Food Policy,? What bits in particular? • Where do you get access to water? • What kind of lessons do you have about food? Do you enjoy them? Do you learn a lot from them? 	<ul style="list-style-type: none"> • (To SMT responsible for all aspects of food in school) What is your role and the responsibilities in relation to healthy eating? • How are you implementing the guidance from the School Food Trust on school food standards • How are children/young people's food choices monitored and how does this data inform the policy? • How do children/young people contribute to the Food Policy? • How is the Food Policy implemented and monitored? • What CPD opportunities have you had? • How has the Food in Schools Guidance been used? • How do you make food and eating a positive experience for all? • How do you access fresh, palatable water? • How have you used data from monitoring 	<ul style="list-style-type: none"> • How have you been involved with the development and monitoring of the whole-school Food Policy? • Does your child enjoy eating at school? • How has the school supported your understanding of healthier eating? • Do you believe the food provided at school meets or exceeds the school food standards? How do you know?

	and review to make improvements to ensure healthy eating?	
Web links	Documentation	Contacts
<ul style="list-style-type: none"> • www.foodinschools.org • www.foodinschools.org/policies_reports/whole_school.phpe • www.schoolfoodtrust.org • www.food.gov.uk 	<ul style="list-style-type: none"> • CPD file • Whole-school Food Policy • Schemes of Work for Healthy Eating 	
Examples of key outcomes achieved for this theme		
<ul style="list-style-type: none"> • Children/young people choose healthy and nutritious food across the school day and enjoy it • The whole school is aware of how they are transforming school food • The school meets the new school food standards • Children/young people can plan, prepare and cook healthy food • There are snacks available that are low in fat, salt and sugar • There is increased fruit and vegetable consumption • There is an increase in healthier snacks and lunch boxes supplied by parents/carers • There is an increased take up of school meals • There is an enhanced atmosphere at lunch time • Children/young people have enough time to consume their meal • Staff are confident and knowledgeable in delivering practical food education • There is a reported increase in better concentration/behaviour/attendance (e.g. after breakfast club, in the eating areas etc.) • There is an increase in consumption of water and a decrease in consumption of less healthy drink options • Parents/Carers report an increase in their children making healthier choices at home • Children/young people opt to stay in the school and eat (healthy options) rather than go offsite (to the local chip shop etc) • More children/young people understand the importance of a healthy breakfast to start the day • The school community understands issues around obesity and know what to do to keep themselves healthy 		

Physical Activity					
<ul style="list-style-type: none"> Physical activity contributes significantly to the being healthy national outcome for children Children/young people are provided with a range of opportunities to be physically active They understand how physical activity can help them to be more healthy, and how physical activity can improve and be a part their every day life 					
Criteria	Minimum evidence	Date Completed	Actions if not completed	Evidence type	Evidence
A Healthy School:				Written/Oral/Observed	Where Found
3.1 Provides clear leadership and management to develop and monitor its physical activity policy Ofsted self evaluation 6a	<ul style="list-style-type: none"> There is a named person in the school who leads policy and practice development on physical activity and is known to all staff in that role 				
3.2 Has a whole-school physical activity policy – developed through wide consultation, implemented, monitored and evaluated for impact Ofsted self evaluation 2a, 2b, 4d, 6a	<ul style="list-style-type: none"> A Physical Activity Policy is in place Clear monitoring procedures are in place to review and amend the policy Parents/carers, children/young people, staff and governors were/are actively involved in the development and review of the policy and can describe their involvement The policy supports the curriculum for PE and the wider programme for Physical Activity and school sports 				
3.3 Ensures a minimum 2 hours of structured physical activity each week to all of its children/young people in or outside the school	<ul style="list-style-type: none"> The curriculum for PE includes health related fitness Children/young people can access a range of activities that add up to a minimum of 2 hours structured physical activity each week The school's Inclusion Policy refers to 				

curriculum Ofsted self evaluation 4a, 4f, 5b	how it is addressing the needs of all its children/young people with				
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Criteria A Healthy School:	Minimum evidence	Date Completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
	reference to physical activity				
3.4 Provides <i>opportunities</i> for all children/young people to participate in a broad range of extra curricular activities that promote physical activity Ofsted self evaluation 4a, 4f, 5b	<ul style="list-style-type: none"> Children/young people and staff are aware of the extra-curricular physical activity opportunities that are available to them The school has a range of activities for individuals and groups 				
3.5 Consults with children/young people about the physical activity opportunities offered by the school, identifies barriers to participation and seeks to remove them Ofsted self evaluation 2a, 2b, 4a, 4d, 4f	<ul style="list-style-type: none"> Children/young people say they are consulted about what types of physical activities they would like to be offered to them The school can specify the activities that have been introduced, influenced and adapted as a result of consultation The school has a system in place to monitor the increase in participation of children/young people in physical activity 				
3.6 Involves Schools Sport Co-ordinators (where available) and other community resources in provision of activities	<ul style="list-style-type: none"> The school has a representative who attends School's Sport Co-ordinators network meetings The school uses Physical Education School Sport and Club Link (PESSCL) materials 				

Ofsted self evaluation 5b, 6a					
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Criteria A Healthy School:	Minimum evidence	Date Completed	Actions if not completed	Evidence Type Written/Oral/Observed	Evidence Where Found
3.7 Encourages children/young people, parents/ carers and staff to walk or cycle to school under safer conditions, utilising the school travel plan Ofsted self evaluation 4a, 5b, 6a	<ul style="list-style-type: none"> • The school is engaged with representatives from the Safe Routes to School programme and School Travel Plan (STP) Scheme • The school has a School Travel Plan in place or is working towards one being in place • Parents/carers have received information regarding the School Travel Plan via newsletter articles/letters etc. • The school has used STP surveys to develop the broader physical activity agenda • Throughout the school year there is a planned promotion of walking and cycling to school • Pedestrian and cycle skills training are available for children/young people and staff 				
3.8 Gives parents/carers the opportunity to be involved in the planning and delivery of physical activity opportunities and helps	<ul style="list-style-type: none"> • Parents/carers are aware of the opportunities to learn about the benefits of physical activity • Parents/carers say they are actively encouraged to take part in the planning and delivery of physical 				

<p>them to understand the benefits of physical activity for themselves and their children</p> <p>Ofsted self evaluation 2a</p>	<p>activity</p> <ul style="list-style-type: none"> • Most parents/carers report that they know why physical activity is good for them and their children 				
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Criteria	Minimum evidence	Date Completed	Actions if not completed	Evidence Type Written/Oral/Observed	Evidence Where Found
<p>3.9</p> <p>Ensures that there is appropriate training provided for those involved in providing physical activities</p> <p>Ofsted self evaluation 6a</p>	<ul style="list-style-type: none"> • There is a planned annual programme of CPD for appropriate staff • Staff involved in providing physical activity for children/young people can evidence that they have received appropriate training/CPD. (These may be teachers, lunchtime, breakfast or after school supervisors and coaches and others from the community) • The school operates an appropriate Visitor Policy, which addresses risk management and relevant training/qualification 				
<p>3.10</p> <p>Encourages all staff to undertake physical activity</p> <p>Ofsted self evaluation 6a</p>	<ul style="list-style-type: none"> • Staff are aware of the opportunities they have to increase their levels of physical activity • Staff have been involved in informing and developing opportunities for them to increase their levels of physical activity 				

Questions for Children/Young People:	Questions for staff:	Questions for parents/carers and governors:
<ul style="list-style-type: none"> • How do you contribute to the school's Physical Activity Policy? • What makes you feel good/not so good about physical activity? • How much physical activity do you do a week? • What other physical activity opportunities do you have? • How do you share your ideas to make physical activity the best it can be? • What cycle training do you have? • How have you been encouraged to travel to school? 	<ul style="list-style-type: none"> • (To Physical Activity (PA) Co-ordinator) What is your role and what are your responsibilities? • How do you monitor the school's PA Policy? • How do you ensure a minimum of 2 hours physical activity a week? • What other physical activity opportunities are there? • How do you target specific groups for physical activity? • How do you consult with children/young people about physical activity and how have their views influenced the policy? • How do you support children/young people who do not participate or who need extra support? • How do you make use of the School Sport Partnership/PESSCL network and materials? • What cycle training is offered? • How is the School Travel Plan 	<ul style="list-style-type: none"> • How did you contribute to the school's PA Policy? • What methods did the school use to find out your views on the schools physical activity programme? • How has the school offered you the opportunity to take part in physical activity within the school? • How are you supported to encourage your child to walk or cycle to school? • How has the school encouraged you to increase your physical activity?

	<p>implemented and monitored?</p> <ul style="list-style-type: none"> • How are parents/carers encouraged to be involved in physical activity? • How are staff encouraged/supported in participating in physical activity? e.g. walking/cycling to school? • What CPD opportunities are there to ensure that staff can do their job effectively? • How were you involved in developing the staff physical activity programme? 	
Web links	Documentation	Contacts
<ul style="list-style-type: none"> • www.teachernet.gov.uk/doc/5062/LTPES.pdf • www.teachernet.gov.uk/sdtravel • www.bhfactive.org.uk/resources/index.htm 	<ul style="list-style-type: none"> • List of activities • CPD file • Physical Activity Policy • Inclusion Policy • Scheme of Work for PE • School Visitor Policy 	
Examples of key outcomes achieved for this theme		
<ul style="list-style-type: none"> • Children/young people are actively involved in the development of the healthy lifestyles agenda in their school and can demonstrate achievement in physical activities • Increasing numbers of children/young people report positive attitudes to learning in PE • There is an increase in the number of children/young people and parents/carers who walk or cycle to school under safe conditions • There is an increase in the number of children/young people who have changed their method of travelling to school to a more physically active one • There is a reduction in behaviour incidents post lunch time • There is a reduction in bullying incidents linked to lunch and break times • There is an increase in the number of children/young people participating in PE and physical activity • Children/young people, parents/carers and staff know and understand the health benefits of physical activity • X% of children/young people say they do one hour of physical activity per day • Y% of children/young people understand how physical activity contributes to their healthy lifestyles • Z% of parents/carers say that they are doing more physical activity with their children 		

- A% of children/young people say that they have learned to incorporate physical activity into their everyday lives
- B% of children/young people say they enjoy PE and schools sport

Emotional Health and Well-Being

- Emotional health and well-being contributes significantly to all five national outcomes for children/young people: being healthy, staying safe, enjoying and achieving, making a positive contribution and economic well-being
- Emotional Health and Well-Being promotes positive emotional health and well-being to help children/young people to understand and express their feelings, and build their confidence and emotional resilience and therefore their capacity to learn

Criteria A Healthy School:	Minimum evidence	Date Completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
<p>4.1</p> <p>Identifies vulnerable individuals and groups and establishes appropriate strategies to support them and their families</p> <p>Ofsted self evaluation 4b, 4f, 5b, 5c</p>	<ul style="list-style-type: none"> • Drawing on relevant DfES guidance, schools are able to identify children/young people experiencing or at risk of experiencing behavioural, emotional and social difficulties • Vulnerable children/young people have individual support plans • The school has examples of planned and structured intervention work to address the issues of identified children/young people • The school has plans and protocols in place for working with other agencies to support individuals and their families • Vulnerable children/young people report feeling supported • Children/young people with specific behavioural, emotional or social difficulties have planned and structured interventions matched to their needs 				
<p>4.2</p> <p>Provides clear leadership to create and manage a positive environment which enhances</p>	<ul style="list-style-type: none"> • The school has a behaviour policy that strikes a healthy balance between rewards and sanctions and clearly explains how positive behaviour is promoted 				

emotional health and well-being in school – including the management of the behaviour	<ul style="list-style-type: none"> The Vision/Mission Statement, Aims and Prospectus refer to 				
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Criteria A Healthy School:	Minimum evidence	Date Completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
and rewards policies Ofsted self evaluation 6a	the emotional health and well-being of the children/young people <ul style="list-style-type: none"> The Senior Management Team demonstrate an effective leadership role emotional health and well-being 				
4.3 Has clear, planned curriculum opportunities for children/young people to understand and explore feelings using appropriate learning and teaching styles Ofsted self evaluation 4a, 4b, 4c, 4f, 5a, 5b	<ul style="list-style-type: none"> The school can demonstrate that teaching social and emotional skills is an integral part of its curriculum for PSHE The school ensures that there is a planned and comprehensive programme for teaching social and emotional skills and either uses, is planning to use or has considered using the DfES recommended SEAL programme The school has a Teaching and Learning policy which considers the effect of teaching on emotional well being and the promotion of social and emotional skills Children/young people can describe how they learn to explore, express and manage their feelings and are able to empathise with others 				
4.4 Has a confidential pastoral support system in place for children/young people and staff	<ul style="list-style-type: none"> Children/young people say they understand the pastoral system and are able to easily access it The school has identified routes of 				

<p>to access advice – especially at times of bereavement and other major life changes – and that this system actively works to combat</p>	<p>referral for children/young people and staff</p> <ul style="list-style-type: none"> Children/young people and staff report they know how to seek help if they are upset or troubled 				
<p>Criteria A Healthy School:</p>	<p>Minimum evidence</p>	<p>Date Completed</p>	<p>Actions if not completed</p>	<p>Evidence type Written/Oral/Observed</p>	<p>Evidence Where Found</p>
<p>stigma and discrimination</p> <p>Ofsted self evaluation 4b, 4f, 5c</p>	<ul style="list-style-type: none"> Children/young people and staff are aware of and can identify how the school is actively combating stigma and discrimination 				
<p>4.5</p> <p>Has explicit values underpinning positive emotional health which are reflected in practice and work to combat stigma and discrimination</p> <p>Ofsted self evaluation 5b, 6a</p>	<ul style="list-style-type: none"> The school has clear values in its prospectus or in another appropriate public place that can clearly be linked to the promotion of positive emotional health and the development of social and emotional skills Children/young people and staff can identify practice and activities, which actively combat stigma and discrimination The school has clear policies setting out its position on stigma and discrimination 				
<p>4.6</p> <p>Has a clear policy on bullying, which is owned, understood and implemented by the whole school community</p> <p>Ofsted self evaluation 2a, 2b, 4b, 6a</p>	<ul style="list-style-type: none"> The school signs the Anti-Bullying Charter and uses it to draw up an effective Anti-Bullying Policy Staff know and understand the policy on bullying including their role within it Staff feel supported and are able to identify and manage bullying Children/young people and parents/carers know and understand the policy on bullying and feel that they have the opportunity to regularly 				

	<p>discuss its implementation</p> <ul style="list-style-type: none"> • The school has a system that ensures prompt reporting back to parents/carers on any concerns raised • The school has a system for recording bullying incidents and a follow up process to monitor children and young 				
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Criteria A Healthy School:	Minimum evidence	Date Completed	Actions if not completed	Evidence type Written/Oral/Observed	Evidence Where Found
	<p>people involved in bullying incidents</p> <ul style="list-style-type: none"> • Children/young people report that they feel safe in school 				
<p>4.7</p> <p>Provides appropriate professional training for those in a pastoral role</p> <p>Ofsted self evaluation 6a</p>	<ul style="list-style-type: none"> • The school has a planned CPD programme for all staff linked to personal and social development and to support the teaching of social and emotional skills • Staff are aware of their role in responding to emotional issues e.g. children/young people and bereavement 				
<p>4.8</p> <p>Provides opportunities for children/young people to participate in school activities and responsibilities to build their confidence and self-esteem</p> <p>Ofsted self evaluation 4d, 5b</p>	<ul style="list-style-type: none"> • Children/young people can specify opportunities they have to participate in e.g. year, class and school councils; PSHE lessons / SEAL lessons; circle time; focus groups and questionnaires • The school has regular celebration activities and displays reflecting achievement 				
<p>4.9</p> <p>Has a clear confidentiality policy</p> <p>Ofsted self evaluation 4b, 4d, 6a</p>	<ul style="list-style-type: none"> • The school has a Confidentiality Policy which may be discrete or included in other policies • The policy specifies who is bound by it 				

	<p>e.g. school staff and who is not</p> <ul style="list-style-type: none"> • All staff are aware of the policy and understand their role within it • Children/young people and staff are consulted on the development and the renewal of the Confidentiality Policy • Children/young people and parents/carers are aware of the Confidentiality Policy and understand what it means for them 				
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Questions for children/young people:	Questions for staff:	Questions for parents/carers and governors:
<ul style="list-style-type: none"> • How is positive behaviour rewarded in school? • What happens to children/young people who do not behave appropriately? • What opportunities do you have to explore and manage feelings? • What can you do if you want to talk about something that concerns you or affects one of your friends? • Who can you ask for help from? Is it confidential? • What opportunities do you have to take responsibility in everyday school life? • How can you get involved in the organisation of the school? • How do you celebrate success? • Do you feel safe in school? Why/Why not? • How do you give your opinions and influence developments? 	<ul style="list-style-type: none"> • How does the school's Behaviour Policy encourage positive behaviour? How does it respond to inappropriate behaviour? • How is your school developing the social and emotional skills of children/young people e.g. through SEAL? • What does the school promote in its Teaching and Learning Policy about the emotional health and well-being of children/young people? • How can staff seek confidential help and/or support through school? • How does the school combat stigma and discrimination? • How is the Anti-Bullying Policy developed, implemented and monitored? What is your role in this? • How is your school using the SEAL programme as part of its Anti-Bullying strategy? • What professional training has been offered to staff on the emotional health and well-being of children/young people and the 	<ul style="list-style-type: none"> • How have you been involved in the development and monitoring of the Anti-Bullying Policy? • How does the school manage discrimination? • (To parents/carers of identified appropriate children/young people) Do you feel your child is supported by the school? Are you supported by the school? • Have you heard about how the school is developing the social and emotional skills of your child through SEAL?

	<p>development of social and emotional skills?</p> <ul style="list-style-type: none"> • How does the school identify and support vulnerable groups/individuals or those clearly experiencing significant or persistent behavioural, emotional and social difficulties? • What mechanisms does the school have for sharing learning about supporting and managing children and young people with more complex needs? How does it draw on relevant DfES, OFSTED and National Strategy's guidance? • How do you celebrate success? • How do you monitor the development of social and emotional skills in children and young people? • Do you feel safe in school? Why/Why not? 	
Web links	Documentation	Contacts
<ul style="list-style-type: none"> • www.teachernet.gov.uk/seal 	<ul style="list-style-type: none"> • Behaviour Policy • Teaching and Learning Policy • Schemes of Work/Programmes of Study for emotional health and well-being and the development of social and emotional skills • Safeguarding Policy (ref 1.5) • Inclusion Policy • Examples of good practice in combating stigma and discrimination • Examples of practice in tailoring support around more vulnerable children/young people • Prospectus • School Vision/Mission Statement and Aims (if not in Prospectus) • Anti-Bullying Policy • CPD file 	

	<ul style="list-style-type: none"> Confidentiality Policy (discrete or part of another policy) 	
Examples of key outcomes achieved for this theme		
<ul style="list-style-type: none"> Children/young people report they can understand their feelings and are becoming more confident in expressing and managing them Children/young people report improvements in their relationships and that they know how to resolve conflicts Children/young people report that they feel they belong in school and that other children/young people are more welcoming and friendly There is less reported bullying in school (after a possible initial increase in reporting of incidents) There are fewer incidents of discrimination Children/young people report they know where they can access relevant information and support when they need it Staff report better relationships with children/young people and greater confidence in dealing with emotional difficulties where they arise Children/young people report better relationships with staff Staff report they know how to support on more common emotional issues amongst children/young people e.g. as a result of bereavement Families report they feel supported at times of crisis There is improved attendance for children/young people and staff There is an increase in participation/involvement of parents/carers within school life There is a decrease in fixed term and permanent exclusions Children/young people report feeling safer within the school environment Staff report feeling safer within the school environment There is a decrease in lateness to school of children/young people There is a reduction in 'on-call' incidents throughout the school day There is reported easier, and more appropriate, referrals to, and joint working with, specialist services including Children and Mental Health Services (CAMHS) 		