



# **Healthy Schools London (HSL) Silver and Gold Awards Supporting Document**

Guide to Achieving Healthy Schools London Silver and Gold Awards

October 2019



# Content

The Healthy Schools London Silver Award Planning Template and Gold Award Reporting Template have been combined in to 1 document.

This document provides details of:

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### The new HSL Silver Award Planning Template and the HSL Gold Award Reporting Template

Following a consultation between the HSL Team and Healthy School Borough Leads from across London it was agreed the processes and documentation for the HSL Silver and Gold Awards needed to be reviewed and improved.

The main aim of the changes was to:

- Avoid repetition in the information being asked
- Make the document easier to use e.g. wording, design and providing further prompts
- Provide greater evidence of the value of Healthy Schools London
- Agree minimum standards of evidence required

### Summary of updates

- The Healthy Schools London Silver Award Planning Template and Gold Award Reporting Template have been combined in to 1 document. Previously much of the information had to be entered in both separate documents e.g. needs analysis, measurable outcomes.
- Schools will now record details of how they have developed their Silver Action Plan and upload it to the HSL website when applying for the HSL Silver Award. Then when ready to report on the outcomes and impact add the details to the original copy of the document and upload again to apply for the HSL Gold Award.
- Against all sections of the document prompts and examples have been provided.
- The Needs Analysis table of the Silver Award Planning Template has been divided down into 3 sections (*National and Local Data and Evidence, School Data and Evidence, and Health Inequalities*). Completing details for the *Health Inequalities* section will help in identifying any targeted group of pupils that will require additional support or focus to meet the Silver Action Plan health priority.
- For Planned Outcomes a minimum of 3 and a maximum of 7 measurable outcomes should be set, which can be a combination of *Individual* and *Whole School* outcomes.
  - *Individual outcomes* will be specific measurable changes in the attitudes, behaviours, knowledge or skills of pupils.
  - *Individual outcomes* could be a combination of measurable outcomes for all pupils and for a particular target group.
  - *Whole School outcomes* will be details of any organisational changes and how they will be measured.



## Processes for achieving HSL Silver and Gold Awards

This document includes both the HSL Silver Award Planning Template and the HSL Gold Award Reporting Template.

- A school should only complete the *HSL Silver Award Planning Template* section to apply for the HSL Silver Award. The Silver Plan must be for work that the school is planning to do and cannot be retrospective.
- A school can then complete *HSL Gold Award Reporting Template* section when ready to apply for the HSL Gold Award.

### Silver Award

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

In order to achieve the Silver Award, a school should:

- Have achieved and hold a current HSL Bronze Award (needs renewing every 3 years)
- Undertake a needs analysis of the unique health and wellbeing issues affecting the school.
- Use the needs analysis to identify and define group/s and number of pupils e.g. whole school or year group, plus any smaller targeted group.
- Develop planned measurable outcomes and an action plan to achieve the health priority.
- Show how it will monitor and evaluate the project to measure success and demonstrate improvements.

**NOTE:** Projects and interventions undertaken as part of a Silver Plan should run over at least 2 terms or 6 months.

### Gold Award

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

In order to achieve the Gold Award, a school should:

- Have achieved and hold a current HSL Bronze Award
- Have achieved the HSL Silver Award
- Record results and outcomes
- Detail approach taken
- Provide analysis of results
- Explain how activity is being sustained



## Completing the HSL Silver Award Planning Template

### PURPOSE

#### HEALTH AND WELLBEING PRIORITY

Describe the issue that you are trying to improve.

This opening section should be finalised once the needs analysis has been completed. The *Health and Wellbeing Priority* will be informed by a school's needs assessment and might focus on healthy eating, increasing physical activity and reducing sedentary behaviour, improving mental and emotional health and wellbeing, improving dental health and health protection, drugs and alcohol and sexual health, and link to school improvement outcomes.

#### EXAMPLES:

- *Improving participation in physical activities*
- *Healthy Lifestyles – Improve Healthy Eating*
- *Emotional Health and Wellbeing: Improve social skills and behaviour*
- *Emotional Health and Wellbeing: Build and expand upon current pupil voice mechanisms*
- *Emotional Health and Wellbeing: Improve resilience in preparation for SATs, exams, and secondary transfer*
- *Improving oral health*
- *Improving pupils' attitudes and understanding of healthy relationships through PSHE and engagement with the local Domestic Abuse Prevention Programme for Schools.*

#### GROUP

Define the group/s and number of pupils who will benefit from the action plan (whole school or year group, plus any smaller targeted group).

- *Whole school or year group:* The school's actions will impact on all pupils, class, year group or entire school community through a whole school approach
- *Targeted group:* School's actions will also impact on a particular subset of pupils who, through completing the needs assessment were identified as having specific health needs, which require a targeted approach

#### EXAMPLES:



- *All children Year 1 to Year 6 (225 pupils), OR*
- *KS 2 pupils (120) and Reception children (30)*

## NEEDS ANALYSIS

### NATIONAL AND LOCAL DATA AND EVIDENCE

Ask your local Healthy Schools Lead for help with completing this section.

Include details that provide evidence that your selected Health and Wellbeing Priority is an issue at national, regional or local level.

Sources might include:

- Data - Local Authority Child Health Profiles (data)
- Guidance and Reports – Public Health England, Department for Education, Local Authority Health and Wellbeing Strategy
- Evidence Base – reference strategies, research or best practices e.g. NICE, Cochrane Database of Systematic Reviews (include how the evidence base indicates that your planned work will be effective for your group/school or any adaptation you'll need to make)

#### EXAMPLES:

- *In our ward, 61.9% of households have one or more dimensions of deprivation (35.4% = 1, 18.2% = 2, 7.1% = 3, 1.2% = 4). The local authority's Joint Strategic Needs Assessment 2017-18 reported that our school fell within the worst 20% of wards in London for self-reported bad/very bad health.*
- *The **2019 Child Health Profile** for the borough shows that 10.2% of children aged 4-5 years and 18.5% of children aged 10-11 years are classified as obese. If you also include children who are overweight this increases the percentage to 23.2% of 4-5 year olds and 33.5% of 10-11 years.*
- *The **Department for Education**, in the June 2014 guidance "**Mental health and behaviour in schools**" states that schools should: "ensure that pupils and their families participate as fully as possible in decisions and are provided with information and support. The views, wishes and feelings of the pupil and their parents should always be considered" and "work with parents and carers as well as with the pupils themselves, ensuring their opinions and wishes are taken into account and that they are kept fully informed so they can participate in decisions taken about them."*
- *The NICE guidance **Social and emotional wellbeing in primary education, 2008**, recommends schools provide: "Integrated activities to support the development of social and emotional skills and wellbeing and to prevent bullying and violence in all areas of school life. For example, classroom-based teaching should be reinforced in assemblies, homework and play periods (in class as well as in the playground)."*



- ***Silence is not always golden: tackling domestic violence by the National Union of Teachers** encourages teaching pupils about relationships before the age of 11, before attitudes begin to harden.*
- ***NICE (2006) Obesity Prevention.** Recommendations for schools based on a review of the best available evidence for the prevention of overweight and obesity in children in England and Wales includes children and young people eating meals (including packed lunches) in a school in a pleasant, sociable environment. Younger children should be supervised at mealtimes and, if possible, staff should eat with children.*

## SCHOOL DATA AND EVIDENCE

The needs analysis is an assessment of the unique health and wellbeing issues affecting your school. Schools can use borough wide data, but each school must assess the data in relation to the needs of their pupils and school. For example, data may show that the borough has high levels of overweight and obesity, but the school may have lower than borough average levels and through their needs analysis find that their pupils have higher needs around mental health and wellbeing.

School evidence might include:

- School Development Plan
- Survey data
- Staff observations
- Incident data

### EXAMPLES:

- *A key area for development that has been identified within the SIP is “implement Mindfulness in Schools.”*
- *The school development plan for 2018-2019 has a clear focus on improving the safety and wellbeing of the student population. The following items have been highlighted as a priority and it is intended that the outcomes as part of this Silver plan will form an important part of successfully progressing the school development plan.*
  - *High standards of safety and well-being of pupils are embedded in the school culture*
  - *Pupils’ behaviour is outstanding in the classroom and throughout the school. (corridors, playground, assemblies etc.)*
  - *Pupils are confident, objective and enthusiastic learners who are proud of their achievements, school and community.*
- *A recent school survey completed by 86 pupils from Years 1-3 out of a total number of 120 pupils, in March 2018 entitled ‘Emotional Literacy and Self Esteem’ highlights the need to address issues around building strategies for mindful approaches to learning and behaviour, through raising children’s ability to be self-aware and to be able to self-manage and self-regulate.*



- *A group of 12 boys had been identified by both the year 1 and 2 teachers with regards to the way they play at break times and the way in which they deal with incidents that occur. We carried out observations over a number of break times across 3 different days and from these we identified that the targeted group often took part in physically aggressive fighting games leading to conflicts and some of the children becoming upset. We observed that a large number of these pupils were unable to resolve the conflicts by themselves and resorted to telling a teacher. For us 'improving resilience' means giving these children strategies to avoid conflict in the playground and be able to deal with difficult situations when they arise without going straight to an adult.*
- *As a result of meetings that we have as an Inclusion team on a fortnightly basis it has been demonstrated there is a universal need for us to develop the resilience of students so they have the self-awareness and skills to identify their needs, both emotionally and physically, and knowledge of where to access support when required. Through these meetings, we have identified an increase in the numbers of students requiring support from CAMHS/ learning mentor / Child and Wellbeing Project/MIND/School Counsellor/social services and those with persistent absence due to MH concerns across Years 7 – 13.*
- *Behaviour records for KS1 were analysed and from the data we can identify that:*
  - *Over the course of the Autumn Term 2018 in Year 2, 48 incidents, resulting in Yellow cards were recorded in the behaviour log for boisterous behaviour both in the classroom and on the playground.*
  - *Over the course of a week in Year 1, 28 incidents were recorded for inappropriate behaviour in and outside of the classroom.*

## HEALTH INEQUALITIES

Describe how you will ensure that your activities support all groups, including special educational needs, disabilities, Pupil Premium pupils etc. You may identify a particular subset of pupils who will require a targeted approach with specific measurable outcomes set to measure success.

### EXAMPLES:

- *Data from a survey undertaken in 2018 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. Data from the Autumn term 2018 showed that 22% (8/36) of Pupil Premium children were attending a morning, lunchtime or after school sporting club on a regular basis (3+ per week).*
- *10 of our pupils that are on the Autistic spectrum often have difficulty regulating their emotions. This is known as Sensory Processing Dysfunction. Symptoms of this can include; difficulties with engaging in activities/remaining calm (overstimulation), hyperactivity, appearing lethargic/in a daydream (under stimulated), self-harming, aggression towards others, inappropriate behaviour, shouting/crying. All of this profoundly affects the pupil's ability to learn and engage in activities not just in school but in their daily lives at home and in the community. It is essential that they are taught to self-regulate to help them reach an optimum level to function effectively.*

## INTENDED RESULTS





PLANNED OUTCOMES	MONITORING METHODS
<p>There should be a minimum of 3 and maximum of 7 measurable outcomes, which can be a combination of <i>Individual</i> and <i>Whole School</i> outcomes.</p> <ul style="list-style-type: none"> <li>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</li> <li>WHOLE SCHOOL: List any organisational changes which you expect to result from your activities and how you will measure them</li> </ul> <p>The outcomes should be SMART (specific, measurable, attainable, realistic, timely).</p> <ul style="list-style-type: none"> <li>SMART = All lunches meet the standards outlined in the schools healthy lunchbox policy</li> <li>Not SMART = Improve the quality of lunchboxes</li> </ul> <p>Include both actual numbers and percentages.</p> <p><b>EXAMPLES:</b></p> <ul style="list-style-type: none"> <li><i>Individual - To increase the percentage of students reporting the school helps them to understand and know how to manage their thoughts and feelings. From a baseline of 16% (45/278) to an endline of 70%.</i></li> <li><i>Individual - To increase the percentage of targeted Year 6 pupils reporting the school has helped prepare them for secondary school. From a baseline of 41% (11/27) to an endline of 80%.</i></li> <li><i>Individual - To increase the percentage of targeted Pupil Premium children attending a morning, lunchtime or after school sporting club on a regular basis (3+ per week). From a baseline of 22% (8/36) to an endline of 40%.</i></li> <li><i>Whole School - To increase the number of days that salad and fruit are offered at tables rather than children self-serving from counter. From a baseline of 1 day per week, to an endline of 5 days per week.</i></li> <li><i>Whole School – To increase the confidence scores on the Staff PSHE Audit to deliver PSHE (from a baseline average score of 2 to an end line score of 4).</i></li> <li><i>Whole School – To increase the number of active clubs that are available to pupils each week. From a baseline of 8 to an endline of 14.</i></li> <li><i>Whole School – To increase the number of teachers who have put into place Restorative Justice contracts for their class. From a baseline of 0% (0/13) to an endline of 54% (7/13).</i></li> </ul>	<p>Show what you will use to measure your success and demonstrate your improvements.</p> <p>List the tools and methods that you will use to monitor whether your activities are being implemented as planned.</p> <p>Use a range of qualitative and quantitative evaluation and monitoring tools.</p> <p><b>EXAMPLES of qualitative tools include:</b></p> <ul style="list-style-type: none"> <li><i>pupil, staff and parent feedback</i></li> <li><i>focus groups</i></li> <li><i>suggestion boxes and pictures.</i></li> </ul> <p><b>EXAMPLES of quantitative tools include:</b></p> <ul style="list-style-type: none"> <li><i>questionnaire or survey data</i></li> <li><i>increases in pupils attending activities</i></li> <li><i>recorded behaviour incidents</i></li> <li><i>take up of school meals and audits</i></li> </ul>



ACTION PLAN		
ACTIVITIES AND INTERVENTIONS	TIMESCALE	LEAD
<p>The action plan should focus on new activities designed to achieve the priorities identified through the school's needs assessment.</p> <p>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.</p>	<p>Show when individual activities will start and finish.</p>	<p>List the staff member responsible for each activity.</p>
<p><b>EXAMPLES:</b></p> <ul style="list-style-type: none"> <li>• Staff training on emotional health and wellbeing</li> <li>• Impacts of sugary drinks included in parent cooking sessions</li> <li>• Across the curriculum, work with children about how to avoid conflict and work with children on to how to solve problems</li> </ul>	<p><b>EXAMPLES:</b></p> <ul style="list-style-type: none"> <li>• September to October 2019</li> <li>• November 2019</li> <li>• December 2019 to February 2020</li> </ul>	<p><b>EXAMPLES:</b></p> <ul style="list-style-type: none"> <li>• D. Shaw, PSHE Coordinator</li> <li>• J. Jones, Healthy Schools Lead</li> <li>• D. Shaw, PSHE Coordinator</li> </ul>



## Completing the HSL Gold Award Planning Template

### RESULTS AND IMPACT

#### RESULTS

Describe your results and whether you were able to achieve your planned outcomes.

Check your data reflects the planned outcomes and that you are referring to both percentages and numbers. Examples of results include: graphs, examples of work, evaluations, and survey results. Make sure graphs have numbers/ percentages clearly stated on them. If you had to make modifications to activities along the way explain what and why.

#### 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.*

*1. To increase the percentage of children eating a portion of salad with their lunch. Target 40%.*

- In September 2018, 17% (23/135) of children ate a portion of salad with their lunch. In July 2019, this had increased to 56% (98/175). EXCEEDED*

*2. 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.*

#### UNINTENDED OUTCOMES

Describe any unintended outcomes (positive or negative).

This could be anything that happened as a result of the interventions you made which were not necessarily planned for but still had a positive or wider impact aspect on the health and wellbeing of pupils, staff, parents and carers, community etc. for example changes in policy, practice, ethos, behaviour, attendance, staff values – health and well-being.

#### EXAMPLES:

- Healthy Eating week had a fantastic impact upon the whole school and had a wider impact upon the snacks children are choosing after school. We had at least one third of each class enter the competition, which prompted discussion around what children were eating after school and their understanding of what is*



*healthy and unhealthy. The competition meant that children wanted to share with their parents their ideas for recipes and parents were happy to engage with their children to develop healthy snacks.*

- 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).*
- The raising of the profile of the emotional health and well being of the children has led to the school successfully joining the Trailblazer programme for the coming year.*

## 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.*

## 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.*

## LESSONS LEARNT

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

### EXAMPLES:

- *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.*

## SUSTAINABILITY

Describe what you will do in future to sustain the project. This could be achieved by:

- Embedding in the school development plan, curriculum, timetable, assembly, enrichment programme
- Continued funding/ allocation of resources/changes to schools and/or local environment
- Training for staff built into the CPD programme/ staff induction
- Improved relationships and agreements with partners eg school catering, sports coaches etc
- Recognition and celebration of pupil progress in health and well-being built into the school reward system
- A regular slot in school newsletters/ new information on the school website
- Participation in linked schemes as a result of the programme- eg Food for life awards, TfL accreditation

### 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.*
- *We will share what we have learnt from this with our neighbouring primary school with the intention of supporting their improvement of healthy eating and food growing. We will also share use of our new kitchen facilities with them to support their learning. The neighbouring school have space they intend to turn into an edible playground and the intention would be for our school to use this to support our efforts in food growing.*

## PHOTOGRAPHS & QUOTES

Include any photographs, quotes, feedback or other evidence from your project.

### EXAMPLES:

#### **Quotes from children:**

*'This workshop has taught me that it is ok to not feel good all the time and how to improve my health and wellbeing.'*

*'I learnt that you can talk to different people to make yourself be okay, like Childline, GP, parents, relatives.'*

*'My experience so far has been wonderful and I've tried my hardest to use everything they teach me.'*

*'I learnt the five ways to wellbeing. Also if I need help I know who to go to.'*



### Supporting information - Needs analysis and data sources

Schools need to conduct their own needs assessment. Schools may use borough wide data, but this should specifically relate to the unique needs of their pupils and staff.

Below are examples of data sources which can be used to assess needs and some example outcomes for these needs.

Health Area	Evidence of needs	Sources of Data	Develop SMART outcomes around:
Healthy Eating	Levels of overweight and obesity	National Child Measurement Programme (NCMP) data	<ul style="list-style-type: none"><li>• Pupils eating a healthy breakfast</li><li>• Take up of hot school meals</li><li>• Pupil/family cooking skills</li><li>• Vegetable and fruit consumption</li><li>• Take up of Free School Meals</li><li>• Lunchtime experience and behaviour</li></ul>
	Levels of deprivation in the school catchment area	Child Health Profiles	
	Children who eat breakfast	School data	
Physical Activity	Levels of overweight and obesity	National Child Measurement Programme (NCMP) data	<ul style="list-style-type: none"><li>• Pupils engage in physical activity outside of school</li><li>• Pupils walking or cycling to school</li></ul>
	Take up of after school activity provision	School data	
	Opportunities to be physically active outside of school hours	Child Health Profiles	
Mental health and emotional health and wellbeing	Levels of self-esteem, resilience and emotional wellbeing	School data	<ul style="list-style-type: none"><li>• Pupils feeling safe at school</li><li>• Staff have the skills to support pupils</li><li>• Pupils know who to approach if they have worries or concerns</li></ul>
	Bullying and playground incidents		
	Family homelessness in the borough	Child Health Profiles	
	Levels of child poverty and deprivation in the borough	Local Authority JSNA	
	Children admitted to hospital as a result of self-harm		
Dental Health	Levels of decayed, filled or missing teeth	Child Health Profiles	<ul style="list-style-type: none"><li>• Children cleaning their teeth twice a day</li><li>• Reduced consumption of sugary drinks</li></ul>
	Low levels of dentist registrations	Dentist registrations	



Health Area	Evidence of needs	Sources of Data	Develop SMART outcomes around:
			<ul style="list-style-type: none"> <li>Pupils regularly visiting the dentist</li> </ul>
<b>Alcohol, substance misuse and smoking</b>	Reported alcohol misuse	Child Health Profiles Local Authority JSNA	<ul style="list-style-type: none"> <li>Increased knowledge of the health effects of alcohol, drugs and smoking</li> <li>Pupils have the skills to deal with peer pressure</li> <li>Parents have the skills talk to their children about drugs and alcohol</li> <li>Parents know where to access help if they are worried about drugs and alcohol</li> </ul>
	Reported drug misuse		
	Levels of hospital admissions for alcohol or drug related illness amongst under 18s		
<b>Sexual Health and positive relationships</b>	Levels of sexually transmitted infections amongst under 18s	Child Health Profiles Local Authority	<ul style="list-style-type: none"> <li>Pupils recognise what they want and value from a relationship</li> <li>Pupils know what types of health services they can access and where they are</li> <li>Pupils can identify unsafe behaviour in relationships</li> <li>Pupils know about how to prevent STIs and pregnancy</li> </ul>
	Pupils withdrawn from SRE lessons	School data	
	Qualitative feedback from school nurse	School Nurse	
<b>Health protection</b>	Number of children killed or seriously injured in road traffic accidents	Child Health Profiles	<ul style="list-style-type: none"> <li>Pupils know how to cross the road safely</li> </ul>
	Uptake of vaccinations	Child Health Profiles School Nurse	<ul style="list-style-type: none"> <li>Reception children are up to date with their immunisations</li> </ul>

#### Resources for assessing need

- Child health Profiles [www.chimat.org.uk](http://www.chimat.org.uk)
- Local Authority Joint Strategic Needs Assessment via Local Authority website
- Pupil health and wellbeing surveys, e.g. SHEU [www.sheu.org.uk](http://www.sheu.org.uk); School Wellbeing Survey, Health Education Partnership, <http://www.healtheducationpartnership.com/consultation/public/>