

THE BEACON SCHEME 2006

APPLICATION FORM

PART 1 - AUTHORITY INFORMATION	
Authority Name	Derby City Council
Beacon Theme	Healthy schools
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This application can be made available on the IDeA web site once Beacon awards have been made	Yes
Application Number	1950
Application Status	Submitted

2.1 Please summarise the excellent practice for which you are seeking Beacon Status.

Derby City is top of the East Midlands league table with the highest percentage of schools that have achieved Healthy School Status (HSS) and 6th in the Country overall. We have 87(82%) schools that have achieved Level 3 status.

We have already exceeded the Government target of 50% of schools achieving HSS by December 2006. We have 99 schools (94%) actively involved in the Programme.

We were approached by the DfES and Department of Health in 2002/03 to research the correlation between HPS and standards in schools. In 2003 we wrote 'How the National Healthy School Standard contributes to School Improvement', published later that year and made available to all schools and LEA's in England and Wales. The Derby HPS team is firmly located within the School Improvement Service and seen as an effective school improvement strategy.

Our Health Promoting School (HPS) Programme in Derby is considered to be an excellent example of partnership working. We receive funding from a wide range of partners including Teenage Pregnancy, Community Safety Partnership, the Primary Care Trust, Children & Young People's Services, Catering and CAMHS. Each of these agencies has a seat on our Management Board. The high level of partnership funding is a reflection of the high reputation and levels of confidence shown in our programme.

We are seen as central to the newly Integrated Children and Young People's Department in Derby and are represented on each of the Every Child Matters Outcome Groups which has informed the current Children & Young People's Plan. We have our HPS targets written into the C & YP Plan, LAA, APA, TP Annual Plan, LDP, CSP plan and CAMHS strategy. Our monitoring and review processes ensure that we have direct access to Directors and Senior Managers within both the Children and Young People's Department and the Primary Care Trust. HPS is seen as a key vehicle in assisting schools to achieve Extended School status and in the development of our Children Centres.

We are heavily committed to sharing good practice both within the Authority and beyond. We regularly utilise teachers, pupils and support staff from schools to deliver workshops at our Conferences and to support other staff in different schools in order to help them to achieve HSS. Many of our 'lead' teachers have later become project workers within the team. Vacancies in our team always attract a high number of quality applications, retention rates are very high.

The schools in Derby City are very supportive of HPS and have welcomed the new standards. They have faith in our local programme and trust the quality, commitment and expertise of the members in the team. We had the vision some years ago to establish a team of project workers each with a specialist area of knowledge and practice and this has prepared us well for the national changes to accreditation. The development of project workers with specialist areas has also provided real focus and engagement with partner agencies and services and high levels of reciprocal trust.

2.2 Leadership, Vision and Strategy.

Health Promoting Schools (HPS) is a key part of the new Children and Young People's Plan. Our targets as they appear in the plan are:

"For all schools to work towards achieving New Healthy School Status

To recruit the remaining 6 schools to the HPS Programme

To increase capacity within the HPS Team

To extend provision and involvement of parents and carers in the HPS Programme."

We were noted as a strength of the city in both the C & YP Plan and the APA.

We are included in the ESSP (Education Service Strategic Plan), which will become the Children and Young People's Departmental Strategic Plan, which ensures HPS remains a priority at strategic level.

Through representation on the Five Outcome groups our targets and practice remain on the agenda at the highest strategic levels. We are accountable to the partners across the City who make up the Children's Strategic Partnership.

The local Coordinator is a key member of the Being Healthy Outcome group. She attends regular meetings at which the HPS targets have a high priority due to the importance placed on HPS in terms of delivering on the ECM agenda in the city.

We enjoy strategic support from:

- The newly appointed Corporate Director for Children and Young People who Chairs the Children and Young Peoples Strategic Partnership.
- The Director for Integrated Children's Services who has attended HPS Management meetings to discuss the changes to the programme, she has also presented awards at our Annual Award Ceremony. She is Chair of the CAMHS Partnership Board who recently committed jointly fund a HPS Project Worker for Emotional Health and Wellbeing.
- We have always enjoyed the full and active support of both the former and current Cabinet Member for Children and Young People.

The Corporate Director for Children and Young People has taken an active part in signing off our local and national plans.

We have a large proportion of information included in the APA.

The following extract appears in our APA Self Assessment this year:

"Be Healthy: co-ordinated policies and a range of initiatives are making a positive impact on children's health. In particular: Health Promoting Schools are firmly embedded, with challenging but realistic targets.

***Make a positive contribution:** at a number of levels there are structures to ensure the participation and input of young people. There are many examples of initiatives designed to encourage young people to participate in decision-making and work to improve coordination is now in hand. Notable outcomes include:*

Effective School Councils sending representatives to the Derby Youth Forum

(Our Programme is responsible for all school council training in the city.)

Derby has a very strong Health Promoting Schools initiative and, in partnership with the PCTs and other agencies, the City Council has developed a Public Health Strategy. We are committed to the National Healthy School Standard (NHSS) target requiring 50% of our schools to be accredited to the new Healthy School Status by December 2006 and all schools to be enrolled on the programme. This priority also addresses issues of anti-bullying, relationships and drugs awareness and education.

There is a strong appreciation of the child health agenda across all schools and effective working with other key agencies, notably the PCT. There is an excellent take up by City schools of the Health Promoting Schools scheme. With an achieved NHSS target of 78/105 schools at level 3 this is amongst the highest in the country. A co-ordinated approach across schools ensures that all of the 7 key themes are addressed. There is good multi-agency partnership in place through the Health Promoting Schools initiative. The Public Health Strategy supports this with a focus on obesity, teenage pregnancy and sexual health." APA 2006

In order to keep updated on school's progress we regularly review Ofsted inspection reports and always send a follow up letter to school to comment on the areas linked to HPS.

We regularly feed into the Desktop Analysis for School Improvement. We have the opportunity to raise any issues we have discovered in schools around HPS or other problems. The issues are then discussed with the School Improvement Team and issues are resolved together. The SIP Team also discuss progress in HPS with their Cluster

of schools and they can then feedback to our team where more support may be needed. We have regular briefings with the School Improvement Officers to update them on Healthy Schools and Social Cohesion data. We are currently working alongside the team to support schools in completing their SEF. This has led to our team leading a training day on supporting school inspections, which was very successful and engaged Headteachers, senior managers and other members of staff.

We were commissioned by the National Healthy School Programme to research and write a briefing on how the NHSP contributes to school improvement. This was published and widely circulated and featured a number of Derby Schools as examples of good practice.

2.3 Community and customer engagement.

We feel we are very inclusive in terms of involving and engaging our stakeholders, our achievements include:

- Headteachers in Derby are very supportive of our Programme, evidenced by the number of schools who are signed up (94%).
- Including a Headteacher on the interview panel for a new HPS team member.
- Visiting 40% of Primary schools to support new Headteachers in the areas of HPS and PSHE since 2004.
- Midday Supervisor training - for behaviour management and general lunchtime issues. Headteachers request the training and sign a service level agreement to agree to a post training meeting to feedback concerns, issues or positives that have been drawn from the MDS.
- Teachers PSHE CPD Programme. Headteacher must give their consent, many undertake lesson observations and must write a supporting statement on completion to allow the teacher to proceed. This has proved to be a very supportive process and Headteachers have become more involved in teachers work as a result.
- School Meals Working Group made up of Headteachers, Catering Services, HPS and other C & YP Staff.
- Presentations to Heads Liaison group, Secondary Heads and City Heads meetings on issues such as drugs, bullying, SRE & Healthy Eating.
- Annual HPS Conference for new schools, Coordinators, key partners and young people to take part and showcase good practice. Schools are encouraged to send their PSHE/HPS Coordinator, a member of Senior Management and a Governor. Last year 43 different schools attended and delegates included 6 Headteachers as well as senior managers who share a Healthy School role within school. There were 16 pupils present from 13 schools who took an active part in presenting and joining in with Brain Gym and Aerobics.
- A half termly Newsletter. This is a chance to share practice across the City as well as congratulating schools on evaluation of HPS.
- Training programme to support teachers, teaching assistants, Deputy Heads, MDS, Governors & Pupils. We cover topics including Circle Time, School Councils, Peer Mediation, Drug Education, SRE, PSHE, nutrition, playtimes etc. Schools can also request specific INSET in order to adopt the Whole School Approach.
- Annual Drug Education Programme for parents/carers. We have engaged participants through involving external agencies such as the PSHE team, Police, Youth Service and Addaction (drug treatment). Participants evaluate the four week course including: their degree of enjoyment and learning, what else they would like to see included in future. Parents/carers overwhelmingly feel the course increases their knowledge of the risks and effects of drugs and drugs and the law, their awareness of the range of support services available to them and young people, their skills and confidence in talking to their children about drug issues and an understanding of how they can support school in the delivery of drug education. Suggestions for improvement are regularly incorporated into the programme.
- Governor training programme including SRE, Drug Education and Anti-Bullying. This is cross phase training and adopts a wide variety of interactive techniques to increase knowledge of key issues and what constitutes good practice. Example feedback

'Good 1-2-1 support'

'I feel very supported by the staff and wish to say thank you to all'

'It would be helpful if training could be held in the evening to ensure I can attend' (We now offer two dates, one daytime and one evening to be more accommodating)

- Training on setting up an action group where we stress the importance of the participants. We encourage teacher representation, SMT, MDS, TA, Governor, school nurse, pupils, caretaker, catering staff, parents and any relevant member of the local community who may be able to offer tailored support.
- Twice yearly network meetings for PSHE/ HPS Coordinators. To update on National and Local Developments and share good practice. We have a high turnout at these meetings and all evaluations show how beneficial the attendees find them. Attendance over the last year has seen 26/81 Primary teachers and 14/15 Secondary.
- Healthy Lunchbox project for parents including how to make healthy food on a budget.
- Staff meetings including introductions to the HPS Programme for new schools and very tailored staff meetings depending on specific school targets within their HPS action plan.
- Parents evenings mostly around the themes of SRE and Drug Education. We have seen 400 parents since 2002.
- Engaging teachers in developmental work. We have held working parties to produce Schemes of work for SRE and Drug Education and exemplar policies, which have been distributed across all Primary and Secondary schools and agencies.
- Active encouragement of school council members to attend the Youth Forum where they have played an active role. They have been involved in consultation exercises linked to transport, education, crime and Every Child Matters, which has helped to shape the city's Children and Young People's Plan. We are planning to use the Youth Forum website to consult with young people on the effectiveness of the HPS Programme in Derby.
- Theatre in Education. We always offer a preview performance where schools have the opportunity to comment on the production and also make changes. This way schools feel consulted and know their concerns will be taken into account. It also gives them chance to set learning objectives for their pupils directly linked to the theatre. Following any TIE we undertake extensive evaluation with staff and pupils to ensure the objectives we originally set have been fully met.
- Through extensive consultation with young people in Derby City for the C & YP plan we have ensured our objectives are meeting the needs of the young people in the city and set our targets directly related to these.
- Alcohol survey with 750 secondary age pupils. Our drug education project worker has been the key link to the Community Safety Partnership in ensuring schools are consulted about the process and supported when conducting the surveys. 384 pupil surveys will then be used to produce a study of views on alcohol.

2.4 Actions.

Our HPS team consists of a full time Coordinator, Project Workers for Healthy Eating, Physical Activity, Drug Education, SRE and Emotional Health. PSHE & Citizenship Consultants for Primary and Secondary, 2 school nurses with dedicated time for HPS and a part time admin assistant. The HPS staff are based partially within the Children and Young Peoples Service and partially in the PCT.

We feel that this structure enables us to give dedicated support to schools and we are very well placed to support schools through the new themes of Healthy Schools Status due to the Project Worker specific roles.

We currently have 82% of schools who have achieved Level 3 status, which means we have already met the December target of 50%. We have 29 schools (30%) who will achieve New Status by December and we feel confident that by July 2007 we will have achieved 50%. Once schools have achieved HSS they will be encouraged to

address the Themes of Citizenship, School Environment, Safety, Local Priority or work towards an enhanced Status in one of the Core Themes. These will include a Bronze, Silver and Gold Award for the effectiveness of their school council, an Anti-Bullying Award, the Bog Standard Award for improving toilet facilities and some further themes which are currently in development.

The local Coordinator has been recently appointed although has been part of the HPS team for 4 years now and acting Coordinator for over 12 months. She is accountable to the HPS Management Group which consists of the PSHE Adviser, Public Health Strategy Manager, Teenage Pregnancy Coordinator, Community Safety Partnership Drug Team Young Peoples Substance Misuse Coordinator and Inclusion Adviser.

She represents the Health Promoting Schools Team at the Integrated Children's Services Be Healthy Outcome group, Teenage Pregnancy and CSP Drug Team Reference groups. In Derby City most high-level meetings are discussed through the Outcome groups to minimise duplication of information.

We have a very focused recruitment & retention strategy for schools through our annual Conference, a dedicated team and use of teachers to share good practice with colleagues. We also support new Headteachers schools who may be experiencing difficulties and those who are not currently engaged.

We have targeted schools for Healthy School Status who had already achieved two of our previous Key Areas.

We will continue to re-evaluate schools every two years to ensure sustainability.

Our School Improvement Service has the termly ARC (Annual Review Cycle) meetings with Headteachers. We are asked to contribute to the agenda via the Desktop Analysis and SIO's discuss HPS with all of their schools as a matter of importance. This enables schools to see that HPS has a central role in school improvement.

We have developed solid links with the School Meals Review Panel. Our Healthy Eating Project Worker has become a key member of this group and the Headteachers who represent the rest of the city consistently look to her for advice and support. It is through this group that we were able to secure £5,000 of funding from Grant 5a for the next three years to enable a Healthy Lunchbox project, nutrition training and much more.

We have numerous example of creative and innovative working some of which are outlined here:

SHAP Project (Safe Healthy & Positive): please refer to section 3.

PIG group: we host a multi agency Playtime Improvement Group where a range of agencies (e.g. Educational Psychology, PSHE, HPS, Behaviour Support) work in collaboration on MDS training commissioned by the SSCO Partnership.

Healthy Lifestyle Event: 10 primary schools were involved in a project to deliver healthy lifestyle messages through physical activity, including the importance of exercise, healthy eating, decision-making, risk taking and personal safety. These were reinforced through a celebratory day where all 10 schools came together at Derby County training ground.

FAB: See section 4 for more detail.

Creativity Conference. Workshops for staff from ten schools on Creativity in PSHE/HPS, active learning, teaching SRE and Drug Education.

Team building activities promote cohesion and focus for our staff. We feel investment in the team is crucial to the success of our Programme.

Millennium Centre Health Day: a multi agency day packed with Health Related workshops to engage 6th form students from across the City. We led workshops such as self-esteem, drug education and citizenship.

Ontario Visit: 9 teachers and PSHE/Citizenship Consultant visited Ontario for a week as part of the Teachers International Professional Development programme. We observed health professionals from the Ontario Healthy Schools Coalition on tobacco control, sexual health and risk programmes. We made presentations to this group and the Algoma District School Board about HPS and the National Healthy Schools programme. The Canadians felt HPS was at a more advanced state of development, has a higher profile locally and is of national significance.

Dining Room Project: Out of hour's staff, nutritionalist, Sports Development, School Nursing & HPS facilitated a Dining Room Project in two Primary schools. Children designed healthy eating boards during February half term.

They used clay, paints, collage and lettering taken from magazines. They spent a whole day designing, made a healthy lunch and tasted smoothies and healthy snacks during the day.

TA Training on making dinner, developing practical skills, how to prepare simple healthy meals with children, developing games from resources.

'Taste the Rainbow' Resource pack to provide inspirational ideas around healthy eating & healthy living weeks e.g. growing activities, making healthy snacks, vitamin and mineral treasure hunts, smoothie making, healthy living activity books. Children participating in the project have designed a logo and reward stickers.

Passport scheme to reward children on their healthy eating card for eating vegetables or salad during lunchtimes. When 30 stamps are collected, the children receive a 'Healthy Eating Certificate' and are entered into a prize draw for a sporty prize.

Healthy Lunchbox project including lunchbox audit, parent/carer workshops on how to provide a balanced diet and school guidance to develop a packed lunch policy.

2.5 Partnerships.

HPS has been held up as an excellent example of partnership working in the following:

APA *"There is good multi-agency partnership in place through the Health Promoting Schools Initiative."*

C & YP Plan *"Strengths: Partnership work Health Promotion in schools."*

The Health Promoting Schools Management Board is made up of the Local Coordinator, the PSHE Advisor, a Public Health Strategy Manager, Teenage Pregnancy Coordinator, the Young Peoples Substance Misuse Coordinator and the Inclusion Advisor. Each member of the board shares an equal role in the decision making process and all are active members of the team both in and out of scheduled meetings.

The Coordinator shares her time between a base in the Local Authority and the Primary Care Trust. Representatives from the HPS team attend stakeholder meetings at the Teenage Pregnancy Reference Group and CSP Drug Team Reference group. We have shared targets within our own local plans and within the collaborative C & YP Plan.

We have two school nurses who work within our Operational Healthy Schools Team. This ensures we have a link into the School Nursing Service and they are able to keep their teams informed regarding changes to HPS. We invite school nurses to our Conferences as participants and speakers.

Through the PSHE Certification Programme we have held the Teachers & Nurses Programmes together establishing links and ways they can support each other. We have also included the TP Coordinator, the Young Peoples Substance Misuse Coordinator and Child Protection Officer to give their perspectives on where PSHE links to their area of expertise.

There are an increasing number of agencies who support schools within the Derby City HPS Programme. We have produced a Quality Assurance Tool to ensure effective collaborative working with external agencies. This ensures there is a service level of agreement in place before the agency begins the work in school and all parties are clear on their objectives and that the practice they are offering is clearly contributing to school in the best way.

The **PCT Nutritionist** has been training local people called 'Community Health Educators' to enable them to gain an OCN qualification in nutrition. Through HPS, they have facilitated healthy eating sessions in primary schools to develop communication & health education skills. We have provided shadowing experience and feedback to the trainees regarding skills and effectiveness. Together we have organised training sessions for Teaching Assistants in nutrition with 46 attendees to date who have, through our evaluation process already influenced classroom practice.

The Being Healthy Outcome group is a multi agency partnership, which comprises Youth Service, Social Services, CAMHS etc. This ensures we are aware of each other's targets as held in the C & YP Plan.

We seconded a member of the **Youth Service** to deliver Drug Education sessions in secondary schools and to spend two days per week working with some of the most vulnerable young people in the Local Authority within

our PRU to ensure a comprehensive PSHE programme was in place and that HPS was embedded.

HPS are represented at the **School Meals Working Group** who have developed and improved school meals and healthier lunchboxes. Minutes from May 06: *"The group wish to thank HPS for their hard work in developing the reward scheme, TA and MDS nutrition training and lunchbox project."*

Examples of achievements in collaboration with Catering Services:

- Combined visits, presentations and workshops to Headteachers re: Healthy Eating Reward Scheme.
- Collaboration on development of Reward Scheme.
- Delegation of a proportion of the School Meals Grant 5A used for TA training.
- Joint marketing to include HPS and Catering Service logo on the Reward Scheme Certificates and Merchandise.

"I have pleasure in confirming that Catering Services has worked in effective partnership with HPS over the recent months."
Catering Development Manager.

We have begun working closely with the **Extended Schools team**. We meet half termly to update on progress in each school ensuring cohesion between our programmes.

We work closely with the **Road Safety and Travelwise team**. With the introduction of the New Status we are implementing two proformas provided by the Travelwise team to ensure HPS schools are working towards the National Standards for a Travel Plan. This increases the capacity of the Travelwise team through HPS supporting the Travel Plan agenda.

We have worked effectively with the **School Sport Partnership(SSP)** on:

- Huff and Puff: Developing structured high quality physical activity in primary school playgrounds by providing CPD for MDS. From this we have developed our PIG group. For more details see section 2.4.
- We have liaised where schools have been applying for Activemark, particularly in relation to the provision of Physical Activity in primary schools. This has helped over 30 schools achieve Activemark.
- We have been part of the team leading on the LPSA2 project looking at the % of children in Derby undertaking 7 hours physical activity a week. This has involved extensive research undertaken with Leeds Carnegie Institute. We are currently supporting the SSCO's with the research process.
- National PE Professional Development Programme: We have been trained as tutors to deliver the Learning about Health in PE module, which has involved working closely with the SSP and the Education Officer for PE as part of the Local Delivery Agency.

The CAMHS Partnership have part funded an Emotional Health & Wellbeing Project worker post for 2 years. The new project worker will become part of the CAMHS Tier 1 multi-agency training team from September.

The Police support the work we do in schools by being members of the Drug Alliance, helping to produce a drug related incident flow-chart, facilitating part of our adult education sessions around illegal drugs and have an understanding of their role in delivering drug education to schools.

We have worked with **Derby College** to implement a drug policy that addresses drug related incidents with a support system in place. Information was provided at Freshers Fayre about drugs and staff training has been held to develop confidence and knowledge in delivering drug awareness through tutorial sessions.

2.6 Equalities and Diversity.

Equality and diversity issues are identified explicitly in:

- Derby City Local Authority Healthy Schools Action Plan
- PSHE and Citizenship Business Plan (the HPS team is located within the PSHE team)
- The Local Authority Children and Young Peoples Plan

- The Local Area Agreement (LAA)

The PSHE Adviser is also the local authority officer responsible for social cohesion. Annually he collates and analyses the school returns to the local authority on racist, bullying and drug related incidents. This data is shared with schools and across the Children & Young People's Service, as well as with key partners e.g. Police, REC, PCT, CAMHS etc. To further improve the strategic use of the social cohesion data we are also committed through our corporate planning to:

- Reviewing on an annual basis, in consultation with the Police and other partners, current procedures for monitoring and recording racist incidents
- Developing a broad strategy group within the Children and Young People's Service including Early Years, Youth Service, Adult Service, EWO, Social Care and Citizenship/PSHE.
- Devising an action plan to identify and develop effective responses across the Service, with clear links to corporate initiatives
- Circulate action plan to schools and partners and identify professional development needs
- Produce an annual analysis of data and recommendations incorporating feedback from School Improvement Officer's monitoring of school visits
- To extend the dissemination of annual data based on school returns with external partners including the Police, REC, MECAC, Community Safety Partnership Hate Crimes Working Party, SACRE and where appropriate to do so with supporting contextual statement

Issues associated with Equality and Diversity feature strongly in the Annual Review Cycle (ARC) meetings between all School Improvement Officers (SIO's) and senior managers/Governors in schools. This takes the form of identifying underachieving groups of students and supporting targeted strategies to raise attainment. In our local authority this is often white working class boys and British Asian boys of Pakistani origin. We also use this dialogue with senior managers to address issues around race equality and in particular the responsibilities of schools. This is based on The Race Relations Amendment Act. We have provided all schools with an exemplar Race Equality Policy and guidance on the Act and have embedded this work firmly within the Health Promoting Schools agenda.

Every member in the current HPS team when interviewed for their post was asked about their understanding of the relationship between health promotion and inclusion and what additional issues and opportunities would need to be taken into account when working in a multi-ethnic, pluralistic, urban authority.

34 schools out of 105 have supported their PSHE co-ordinator through the national PSHE CPD certification. We have provided four days of central support and training to the co-ordinators of which one day was entirely spent exploring issues in response the concepts of 'Difference and Diversity'. Each participant has written a reflection following this session, the Assessor for the Nurses CPD Programme commenting that:

"The training that you delivered on difference and diversity has been excellent as demonstrated by the planning and delivery of lessons that sensitively covered a wide range of issues such as pregnancy, abortion, bullying and racism."

Equality and diversity is addressed through our Healthy Schools audit. The criteria requires schools to evidence how they consider equality and diversity. One good example of this is from an infant school who have broken down barriers to participation in physical activity by identifying and making appropriate adjustments to PE lessons to include a child restricted to using a wheelchair. The DfES have made an inclusion video of the schools sports day to be disseminated Nationally. Teaching staff from other schools have visited to observe the schools' effective practice.

We have collaborated with the Inclusion team on the following:

- Mapping of the National Healthy Schools Standards with Inclusion Indicators to develop Inclusion Standards for all schools
- Training on the NHSP standards delivered by Health Promoting School team to Primary and Secondary Special Educational Needs coordinators
- Joint training, consultancy and support for schools on the Primary Strategy Behaviour and Attendance Social Emotional Aspects of learning materials

We are aware of schools having very diverse needs depending on their populations. We have led separate gender parent's evenings in some schools to show respect to cultural and religious traditions.

Following a survey of the children in one inner city school 30% were found to be anaemic. The HPS School Nurse facilitated several sessions for parents whose children were identified as anaemic to discuss the symptoms of anaemia, healthy eating and iron rich foods.

We have supported school cluster group meetings to discuss school meal requirements in areas of high ethnic diversity. We have worked closely with S&A Foods who supply Asda with their World Cuisine products to improve the quality of rice and curries, introducing new foods like paneer cheese, chickpea and potato curry and vegetable korma so they taste more authentic. There will be taster evenings for parents in fifteen schools piloting the new foods.

- We have been part of the multi-agency team linked to the Gatsby Project (a project for Looked After children) providing peer mentoring training and support for 10 secondary schools
- We have managed the Show Racism The Red Card competition for Derby City schools since 2004
- We have initiated anti-racist peer mediation training leading to peer support groups in six secondary schools
- Contributed to development of policies including Drug Education, SRE policy which emphasise inclusivity and equal opportunities
- Devised and utilised training materials designed to counter prejudice, stereotyping and discrimination for use with FAB groups and peer mentors
 - Recommend and provide resources for schools which address issues such as racism, sexism, bullying and homophobia proactively.
 - Provided detailed policy guidance on Confidentiality and dealing with sensitive issues in school.

2.7 Outcomes.

We have 87 schools who have achieved Level 3 status(82%). By December we will have 29 schools(30%) at New Status.

Through HPS we have evidence to show:

34 schools and 200 MDS have been trained in managing the lunchhour more effectively. Staff have reported increased confidence in managing pupil behaviour/ resolving conflict at lunchtimes and improved pupil behaviour at the beginning of the afternoon.

"The midday supervisory staff do a good job at lunchtimes. They have been trained to lead play activities such as parachute games and this promotes good teamwork and co-operation. They also have the necessary skills to resolve minor disputes and so children say they are confident to turn to them for help if they are worried or upset." Breadsall Hilltop Infant School: Ofsted 2005

42% of pupils aged 5 - 16 access 2 hours of quality PE within the curriculum.

51 schools have travel plans. Schools report this has impacted on health and safety by reducing traffic congestion and promoting physical activity.

100% of KS1 pupils have the opportunity to eat 1 portion of fruit/vegetable a day through School Fruit and Vegetable Scheme. Evaluation has shown that as a result of the scheme, children are eating more fruit/vegetables at home.

943 children have taken part in healthy eating activities in targeted areas where fruit/ vegetable consumption was low. Evaluation has been excellent re:children learning something new or tasting an unfamiliar fruit/ vegetable.

9 schools have taken part in a Healthy Lunchbox Project. Parent workshops on healthy lunches, design a sticker competition, parents leaflets, packed lunch policy.

21% of schools provide access to fresh water during the school day. Schools have observed an increase in the amount of water the children drink during school, with a reported impact on pupil behaviour and concentration levels.

Reduced number of processed foods on the menu and an increase in the number of homemade meals.

100% of secondary schools and 65% of Primary schools have effective school councils, which are enabling pupils to have a voice.

"Through their very active school council, pupils have really influenced school life and the community." Ravensdale Junior School: Ofsted 2005.

40% of schools run peer mediation services enabling pupils to be included in conflict resolution of their peers, to date 580 pupils have been trained. Schools report a reduction in playground incidents and staff time spent resolving conflict as this responsibility is devolved to pupils.

"Older pupils act as 'peer mediators' and younger pupils as 'squabble stoppers', quickly resolving playground disputes." St. Werburgh's C of E Primary School: Ofsted 2006.

103 students in 6 schools are acting as mentors to other pupils in The Friends Against Bullying groups.

"One boy who had arrived in Year 7 from a private school had been subjected to physical and emotional bullying but had been transformed by attendance at FAB and was now much more confident and enjoying school." Teacher from a FAB school.

79% of schools returned bullying incidents data to the LA last year.

70% of year 10 pupils received TIE. '4Play' was well received by 12 secondary schools: verbal feedback from staff and students was very positive, there was a high level of pupil engagement and interest. Teacher feedback:

'Provides an excellent opportunity for pupils to be part of a drama and to be involved in the decision making process.'

Pupil feedback:

'The story is based on situations we all will come across in life.'

Extensive anti-bullying work has been undertaken in one junior school. 237 pupils, parents and staff were surveyed. With our ongoing support the school has implemented a very successful programme of support for the whole school community.

14 pupils received the Diana Princess of Wales Memorial Award for Anti-Bullying. Evidence demonstrates these pupils have made a perceptible difference to anti-bullying in their schools.

100% of schools have received exemplar policies and guidance on Drug Education, SRE, Anti-Bullying, PSHE, Confidentiality and Smoking. Schools have responded favourably that these provide a clear framework for staff teaching and can be utilised as a monitoring tool to ensure effective delivery in these areas.

Pupils in Pyramid Clubs are taking a greater part in school life and teachers reported increased self-esteem in pupils.

High quality multi agency SRE is linked to a reduction in TP rates. Citywide rates are down 14.2% (04) since the 98 baseline. U18 conception rates in Derwent Ward are beginning to show a slight downturn 109.79 2000-2002 to 89.86 in 2001-2003. This ward is where we have had an enhanced HPS programme over the last 3 years and are now beginning the SHAP project. (See section 3). In Derwent there was a significant increase in SRE in that time but very little or no change in the provision of health services.

Sexual health directory disseminated to over 3,000 Year 10 students and young people which has provided information and guidance on where and how to access support services. This has led to an increased take-up of such services.

24 teachers and 2 nurses have achieved certification in PSHE. 100% of teachers reported an increase in knowledge and understanding and increased confidence in the core skills of teaching and managing pupils learning in PSHE. Participants reflections:

"Encouraged me to think more about how I consult pupils about their learning in PSHE"

"Children are now more sensitive to the needs and feelings of others."

Consultation with over 600 young people showed that young people generally felt that drugs information and

education were getting better.

As a result of staff training in smoking cessation schools have been able to provide opportunities for pupils to attend sessions in which activities encourage and support pupils to quit smoking. One school offered this provision to their pupils. Nineteen pupils attended the sessions of which two have successfully quit smoking so far.

11 schools have developed healthy breakfast clubs.

450 pupils have achieved a First Aid Certificate through taking part in Play Your Part, a First Aid Programme in collaboration with HPS & St. John Ambulance.

3 Outline, with reference to a specific case (a geographical area, a particular section of the community, an individual or particular issue) how you have taken action to address an issue and the impact that this action has had.

What is the SHAP project?

SHAP stands for: Safe, Healthy and Positive schools.

SHAP is a three-year project (2005 -08) funded by Derwent Community Partnership (New Deal for Communities) in partnership with Derby City Children & Young Peoples Service and the Derby Primary Care Trusts (PCTs). The project involves the active participation of eight schools based within the Derwent ward, a cross section of schools including one secondary, three primary, one junior, one infant and two special schools. The ward has the second highest teenage conception rate in the city and one of the highest free school meal populations.

Aims

To raise the self-esteem of all individuals in the school and to establish emotionally literate communities of learners. It is underpinned by the conviction that educational and health inequalities go hand in hand, as such there is a strong commitment to using the National Healthy Schools programme as an explicit school improvement strategy within this project.

Milestones, Outputs and Outcomes area

There is a clear recognition that the following strategic goals remain a high priority for the Derwent Community Partnership:

To continue to address health and educational inequalities

To continue to develop strategies and good practice to ensure a safer community

To improve the quality of life

To build the capacity of the local community

Factors hindering progress include:

Low levels of self-esteem amongst many young people in the area

Low levels of 'emotional literacy', i.e. the ability to express and manage ones feelings and to respond appropriately to those of others

Low levels of 'practical, participative, citizenship' frequently reflected in an inability to distinguish between rights and responsibilities

Low levels of engagement with health promotion activities

The above impact on a range of social and health concerns including:

- Pupil attainment remains below national average at the end of Key Stages 1-4 in all schools within the Derwent area.
- Racism and negative attitudes to people who are perceived as different.
- Poor decision making skills.
- Poor or inappropriate approaches to conflict resolution.
- Bullying and the fear of bullying remain as a high concern for pupils and parents.
- Poor health choices e.g. drug abuse, high smoking levels amongst young people, binge drinking and above average levels of teenage conception and pregnancy.
- Poor diet, growing numbers of young people overweight or obese.

The SHAP project aims to make a contribution to the strategic aims of the Derwent Community Partnership (NDC).

The Project is managed by the PSHE Adviser who in turn line manages the local authority Health Promoting Schools team. Key partners to the project are:

- CAMHS
- Community Safety Partnership (CSP) Team
- Derby City Children & Young Peoples Department including Assistant Director, Education Psychologists, Education Welfare, School Improvement Officers, Youth Service
- Derwent Community Team, staff and local residents
- Derby CSP Drug Team
- Derwent Schools
- Teenage Pregnancy Team
- Health Promoting Schools Co-ordinator and project workers
- PCT including Public Health Strategy Manager and School Nurses
- Police Community Liaison Officers

Establishing a base-line

A number of initiatives specific to the SHAP project allowed the eight schools to create a measurable base-line profile at the start of the project, they were:

1. Participation in the Children's Social Behaviour Research project lead by Dr Robin Banerjee from The University of Sussex targeting identified cohorts of students
2. A whole school healthy lifestyle survey commissioned from the Schools Health Education Unit (SHEU) targeting identified cohorts of students
3. An emotional health and well-being survey of staff

The following school based data will also be important in establishing a base line:

- Pupil Achievement
- Exclusions: fixed and permanent
- Rates of attendance
- The number of bullying, racist and drug related incidents
- Data around staffing e.g. recruitment, retention, staff absence
- Data on health promotion and outcomes known through the active participation of the schools in the National Healthy Schools Programme

Details of the explicit health initiatives as given in the SHAP project prospectus to schools are as follows:

a) Healthy Schools and Healthy Communities

. The SHAP project provides a significantly enhanced resource to allow participating schools to fast-track to accredited Healthy School status, as well as providing tailored health promotion for young people, parents and carers in the community.

What do schools get from this strategy?

- The support of a dedicated professional from within the Primary Care Trust (PCT) who work closely and uniquely with participating schools
- Specialist support, training and consultancy from members of the SHAP team
- On-going support, monitoring and evaluation of progress to healthy school status over the three years of the project, including the use of student and adult health surveys/data analysis commissioned from the Schools Health Education Unit
- Opportunities to share local and national best practice in the progress towards Healthy School status

- Access to and support for the Parents/Carers Healthy Share programme
- Funding for resources, training and supply cover if required

b) The 'Healthy Share' Programme for Parents/Carers

The 'Healthy Share' family learning programme focuses on building the adult's emotional health and well being, self-esteem and supports parents and carers in assisting their child to develop a healthy lifestyle and make informed health choices.

The programme provides parents and carers with the information and skills they need to support both their own and their child's emotional, social and behavioural development. The Programme is extremely versatile but typically lasts for ten one hour sessions and covers the following areas:

- Emotional health and well-being
- Healthy eating
- Physical health
- Healthy attitudes to medicines, drugs, alcohol and tobacco
- Keeping children safe
- Health and Safety in the home and community

At present the eight schools have signed up to relevant initiatives within the SHAP project and have begun setting baselines. We will monitor this year on year as we proceed through the project to gain an insight into the impact SHAP has had on the pupils, school and wider community.

4.1 Factors that underpin your success.

Since HPS began in Derby (1994) we have undergone many changes and overcome many difficulties. It is due to our resilience that we have emerged a healthier and strengthened partnership. Our Programme is now firmly embedded in all elements of the Partnership and due to the hard work of the whole team is now seen as a school improvement tool. We are highly respected and therefore gain a high level of engagement from schools and other partners.

We work effectively with partner agencies and provide mutual collaboration and cooperation on our respective strategies. This enables schools to view HPS as the umbrella strategy, which encompasses Extended Schools, PSHE provision, Every Child Matters, SEAL, Travel Plans and many more.

Having the vision some years ago to recruit HPS Project Workers with a specialist area of expertise and experience means we are able to offer support to schools in the form of specialist training, 1-2-1 support, signposting, evaluation, critical feedback and much more.

The commitment at a strategic level within the city has enabled us to progress and work at a more strategic level ourselves. Being part of the Outcome groups related to the Children and Young Peoples Plan has been a fantastic opportunity to raise our profile with key partners.

Inclusion of stakeholders is an enormously important factor in our success. We consult teachers and pupils when developing resources and sharing good practice is at the forefront of our Programme.

4.2 Successful initiatives.

The SHAP Project (section 3) is an excellent example of how enhanced resources can enable us to raise expectations. We are working with a range of agencies to enable young people and adults within a deprived community to excel and achieve through the vehicle of emotional literacy and self esteem. In three years time we will have some very clear outcomes to show how self esteem and emotional literacy have improved which will support us in disseminating the project to other areas.

The PSHE Certification within Derby City has been extremely successful. The National and Regional Advisor consider us an excellent programme. The National Self Evaluation form for CPD showed us as a functioning programme with examples of good practice (green). Resources from our Programme have been included in the National Leads Handbook. We have one of the highest recruitment and retention records in the Country.

The Friends Against Bullying Project has been extremely successful.

Comment from a FAB leader:

"I enjoy the feeling that I am making a difference. I also enjoy helping people and having responsibility. It has made me more confident and I listen to people more. It has also given me a lot more responsibility and the teachers give you lots of respect for doing it. I think that it has given people a place if they need to talk to anyone. If it was me, I would feel comforted at the fact that I do have somewhere to go."

4.3 Who are the key target audiences that would benefit from hearing your key messages?

Local Authorities: To learn about our successful structure and partnership and how to embed Healthy Schools into School Improvement and help address both health and educational inequalities.

Primary Care Trusts: To understand the value Healthy Schools can have towards meeting National Health Care

targets and ways to support Healthy Schools in their Local Authority.

Healthy School Programmes: To learn about our partnership, structure, recruitment and retention strategy, how to engage stakeholders and working with external agencies successfully.

Agencies such as Teenage Pregnancy, CAMHS, DAAT: To disseminate the benefits of cross partnership working and how funding can be used to support Healthy Schools whilst meeting targets from their own agency.

Agencies who support PSHE work in school: To share quality assurance tool and give guidance on the most effective way of working with and supporting schools.

Regional networks e.g. PSHE Certification, Healthy Schools, SEAL: To share effective ways of linking multiple strategies to the Healthy School Programme in the most structured way.

Schools, teachers, pupils, Governing Bodies, parents: To explain the benefits of Healthy Schools, how they can engage more with the Programme in their school and to explain the links between Healthy Schools, raising standards and Emotional Health. To share our expertise in linking Every Child Matters, the Ofsted Self Evaluation and HPS.

Other Beacon authorities: See 4.4

4.4 Beyond the national Learning Exchange conference and Open Day, how might you work with other Beacons within your theme to maximise the impact of your learning activities?

Twice yearly networks to disseminate new initiatives within Beacons and with other areas.

Collaborate on training for other authorities to enable a sharing of expertise.

Work together to minimise duplication and disseminate as widely as possible.

Share areas of the Country/ work regionally to ensure an even spread of expertise.

Share policies and other developed resources between ourselves including reviewing resources in order to improve.

Formulate an action plan to maximise output.

Mentoring/ coaching each other in our relevant areas of expertise and other authorities to share outside Beacon Authorities.

Conferences and events using teachers/ pupils from our area.

Master classes/ workshops on our successful initiatives.

Share our website and newsletters and create Beacon newsletter to share with other areas.

Full time Beacon Coordinator to coordinate all Beacon related activity and ensure maximum output in terms of sharing good practice.

We have the skills, expertise and networks gained over many years of organising Conferences and training. We feel this will stand us in good stead to work effectively with other Beacon Authorities.

4.5 What experience does your authority have with sharing lessons with others? Give examples of where your authority has supported others to improve.

We were commissioned by the NHSP to write a briefing linking HPS and School Improvement. This was launched at National and Regional Conferences and disseminated nationally to teachers, School Improvement Officers, Local Authority Advisors and Healthy School Coordinators.

Our PSHE Advisor was invited to give a presentation at a Regional Every Child Matters Conference to showcase our successful Programme.

We were involved in the induction of a New Healthy School Coordinator in Bradford. This included development of a Case Study linked to Drug Education which would aid her in developing her own in the future.

After development of our own successful school council training in Derby we trained the Healthy Schools team in Derbyshire to enable them to deliver the training to their own schools.

We were involved in the induction of the Derbyshire Drug Education Project including sharing our scheme of work to support development of a scheme for her schools.

We contributed to a National Home Office article for the Blueprint Research Programme to illustrate what constitutes effective drug education.

We hosted several Regional Drug Advisor events where members of the team highlighted successful drug education practice in Derby.

We organised and hosted a Regional Anti Bullying Alliance good practice event for all members of the steering group. This was to promote effective practice in anti-bullying with a particular emphasis on pupil participation.

We have a highly praised team website. This consistently utilised site has provided a wealth of material to colleagues Regionally, Nationally and even worldwide.