### Achieving Excellence and Equity



# Education & Children's Services Health and Wellbeing Strategy

2018-2021



Strategic Context for Health and Wellbeing Achieving Excellent Health and Wellbeing in Perth and Kinross - The vision







Implementation of Health and Wellbeing Strategy





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### Introduction

"This strategy is ambitious. All children and young people in Perth and Kinross should have excellent Health and Wellbeing. The Health and Wellbeing of all our children and young people is the responsibility of all in Education & Children's Services and requires close work with partners to secure positive outcomes. There is an opportunity in Scotland with Curriculum for Excellence to put Health and Wellbeing principles into practice. This strategy lays out guidance for schools, curricular priorities and standards for practice with links to associated documentation."

Sheena Devlin
Executive Director
(Education & Children's Services)

The purpose of this strategy is to provide core guidance to schools and early years settings in respect of Health and Wellbeing and the curriculum, and to guide partnership working to meet the wider Health and Wellbeing needs of all our children and young people. One of the five key priorities of The Tayside Plan for Children, Young People and Families 2017-20 is 'Our children and young people will be physically, mentally and emotionally healthy'.

Within this Perth and Kinross strategy these three aspects are included, along with social wellbeing, as a core aspect in improving Health and Wellbeing outcomes for children and young people. The principle of equity and equality is highly relevant and this strategy applies to all children and young people.

The curriculum across the four contexts for learning: curriculum areas and subjects, interdisciplinary learning, ethos and life of the school and opportunities for personal

achievement will be the key driver to ensure that progress in Health and Wellbeing continues to improve year-on-year.

This strategy has been written with children and young people, using what they have said matters to them in terms of their Health and Wellbeing. Children and young people have been specifically consulted for this strategy, along with parents and groups of key adults. Children and young people have given strong messages about the importance of:

- being listened to;
- having choices and chances to participate;
- managing peer dynamics and pressures;
- being able to help each other, with ready direct access to the information they need.

Supportive, respectful relationships within all aspects of school are fundamental to achieve these goals.

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### The Vision

Learning in Health and Wellbeing will ensure that children and young people develop the knowledge and understanding, skills, capabilities and attributes they need for mental, emotional, social and physical wellbeing now and in the future.

Each establishment, working with partners, should take a holistic approach to promoting Health and Wellbeing, taking account of the stage of growth, development and maturity of each individual and

the social and community context.

This vision is supported by principles for action and standards for curriculum

delivery.

### Strategic Context for Health and Wellbeing



### Strategic Context for Health and Wellbeing

For this strategy, as drawn out in the table on page 6, account is taken of national and local policy (Appendix 5) and data (Appendix 1), including previous consultations relating to the Health and Wellbeing needs of children and young people in Perth and Kinross.

### Challenges and Opportunities

"There is no public health without public mental health."

Royal College of Psychiatrists, position statement, 2010

Within Perth and Kinross the role of positive mental health and the building of coping skills and resilience is recognised and promoted. This is done whilst enhancing the skills and understanding of staff to prevent mental ill-health and respond to concerns, alongside

### Strategic Context for Health and Wellbeing

health colleagues, supporting clear specialist referral pathways when these are required.

The role of 'Adverse Childhood Experiences' (ACEs), such as poverty, may impact on the Health and Wellbeing of children and young people, now and in the longer term. It is also acknowledged that the

brain development of some children and young people requires more support for emotional and behavioural self-regulation. The Perth & Kinross Council (PKC) approach to ACEs therefore encompasses a focus on Relationships, Resilience and Regulation - all three interventions are represented within this strategy.

		Nati	onal Strat	egic Dire	ction		
Curriculum for Excellence	Getting It Right For Every Child	Children and Young Persons (Scotland) Act 2014	UN Convention on the Rights of the Child	Schools (Health Promotion and Nutrition (Scotland) Act 2007	Mental Health Strategy for Scotland	Education Scotland Act 2016	National Parenting Strategy

	Auth	nority-Wide S	trategic Direc	ction	
Tayside Plan for Children, Young People and Families 2017-2020	Fairer Futures 2017	Perth and Kinross Early Years Strategy 2010	Perth and Kinross Health Inequalities Plan 2017-2020	Enterprise and Employability Policy	Autism Strategy

	E	ducation Ser	vices Strateg	У	
Perth and Kinross Raising Attainment Strategy 2016-2019	Inclusion Review	PEPAS Action Plan	Perth and Kinross Emotional Wellbeing Collaborative	Anti-Bullying Strategy	Exclusion Policy

Establishment Strategic Direction			
Standards and Quality	Curriculum Rationale and Self-evaluation processes including local data		

### **Establishment Improvement Planning**

### What have Perth and Kinross children, young people and partners said about their Health and Wellbeing?

In Scotland, the wellbeing of children and young people is nationally measured in a wide variety of ways, with considerable improvements over the last ten years in many of the key indicators used to measure Health and Wellbeing. Many of these positive trends are echoed in Perth and Kinross data, which shows statistically significantly better ratings than the Scottish average for a number of key measures used to track wellbeing, such as dental health, mental wellbeing, participation in recreational groups/activities and school leaver positive destinations (see Appendix 1).

Additionally, over the last three years several consultations and engagements have taken place with children, young people and practitioners from Perth and Kinross (Appendix 1).

"Young people and practitioners identify that knowing where to get help, feeling listened to and understood are the most important supports for emotional wellbeing."

Health and Wellbeing School Consultations (2017) "Young people highlighted the need for young people to realise that "it's okay to be yourself" and not feeling pressured into doing things they do not want to do."

The Speak Up Innovation Lab Conference (2015)

"I know school will help me for as long as I need help."

> Keeping Safe School Surveys (2015/16-2017/18)

"Children and young people stated that the most important thing for their social health is knowing how to keep safe, experiencing a range of positive relationships and appreciating people for what makes them unique."

Wellbeing Web School Survey (2016-17)

"Conversation is so important. Communication allows you to build relationships and show your personality."

Make it Good Research (2015)

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### Our Priorities in Perth and Kinross

To identify key priorities for improvement, trends in Perth and Kinross and national data have been analysed along with the consultation with children and young people and practitioners. Identified priorities have been reviewed in relation to work already underway in this area (Appendix 1). Four priorities have been identified that will help schools and partners to support the Health and Wellbeing of children and young people in Perth and Kinross. These four improvement priorities are:

#### **Mental Wellbeing**

Being mentally healthy means children and young people:

- have choices in life
- feel listened to
- know what to do to help themselves
- have a sense of purpose

Children and young people welcome and need voice and influence. The importance of being listened to is paramount and it is recognised that work is required on mental health pathways and supports. Therefore the key improvement aim for Mental Wellbeing is:

"To improve the universal responses, including peer owned and targeted mental health pathways to meet the concerns of our children and young people."

#### **Emotional Wellbeing**

Being emotionally healthy means children and young people can:

- recognise emotions well
- understand and control emotion
- respond appropriately to emotion

There is a need to support the coping skills of those who show enhanced levels of worry. It is also important for young people to recognise themselves when to seek help and support. The key improvement aim for Emotional Wellbeing is:

"To improve the coping skills and resilience supports for children and young people."

#### **Social Wellbeing**

Being socially healthy means children and young people can:

- recognise emotions in others
- have positive emotions
- have a variety of social experiences
- experience safe relationships

Feedback from schools and partners suggests that there has been a rise in cyber-bullying. There are also concerns about how best to support young people to manage peer pressure. Counselling partners identify that young people need an increased level of support when dealing with issues around relationships and sexual health.

Therefore the key improvement aim for Social Wellbeing is:

"To improve the ability of children and young people to manage complex social relationships, particularly online, with an emphasis on knowing how to help themselves."

#### **Physical Wellbeing**

Being physically healthy means children and young people:

- are active
- eat healthy food
- get enough sleep
- look after their body and brain

With rising obesity rates in P1, the on-going importance of information and education on alcohol, drugs and sleep and the need to understand the links between physical health and mental health. The key improvement aim for Physical Wellbeing is:

"To improve equitable access to physical opportunities and enhance the understanding of the contribution physical and nutritional health can play in mental health."

### What are we already doing?

Perth and Kinross has been developing supports and interventions to improve Health and Wellbeing for many years. This includes significant investment in parenting programmes, following 'Evidence2Success', and very positively evaluated approaches such as Bounce Back and nurture groups in primary school. These have taken place along with physical education programmes and the award-winning resource to support delivery of the 'Relationships, Sexual Health and Parenthood' framework.

A summary of the major Perth and Kinross developments is given in Appendix 1 and has sections on parenting, curricular and wellbeing interventions.

### **Principles for Action**



## Expectations and Standards for Health and Wellbeing Curriculum

Curriculum for Excellence has an important role to play in promoting the Health and Wellbeing of children and young people in all of our communities within Perth and Kinross. At its heart lies the aspiration that all children and young people should be successful learners, confident individuals, responsible citizens and effective contributors. To achieve the Perth and Kinross vision, clear standards are laid out for the delivery of the curriculum, under the headings of learning environment, curriculum rationale, staff responsibilities and progression.

### The Learning Environment

Children and young people should expect the learning environment to support them to:

- develop self-awareness, self-worth and respect for others;
- meet challenges, manage change and build relationships;
- experience personal achievement and build resilience and confidence;
- understand and develop physical, mental and spiritual wellbeing and social skills:
- understand how eating, activity levels and making decisions about behaviour and relationships affect physical and mental wellbeing;
- participate in a wide range of activities which promote a healthy lifestyle;

- understand that adults in the school community have a responsibility to care, to listen to concerns and involve others where necessary;
- learn about where to find help and resources to inform choices;
- assess and manage risk and understand the impact of risk-taking behaviour;
- reflect on strengths and skills to help make informed choices when planning next steps;
- acknowledge diversity and understand that it is everyone's responsibility to challenge discrimination.

The learning environment that successfully develops these skills will allow children and young people to be:

- mentally healthy
- socially healthy
- physically healthy
- emotionally healthy

### Health and Wellbeing Curriculum Rationale

Perth & Kinross Council Education & Children's Services (ECS) are committed to improving the outcomes for children and young people. There will be a continued commitment to supporting Health and Wellbeing mainly through the Perth and Kinross Curriculum Framework for Health and Wellbeing (Appendix 2).

### Staff Responsibilities

This section identifies the key educational responsibilities and actions of all stakeholders involved in delivering excellent Health and Wellbeing for all children and young in Perth and Kinross.



## Responsibilities of Education & Children's Services

- Support and manage the development of national and local policy and practice guidelines in relation to Health and Wellbeing.
- Manage PEPAS and Active Schools Programme.
- Develop and maintain strategic partners and relationships.
- Provide support and Guidance to Health and Wellbeing Leaders and associated networks.
- Develop and review the Perth and Kinross Curriculum Framework for Health and Wellbeing.
- Develop tools to support the measure of wellbeing across individual establishments and Perth and Kinross.
- Share good practice in Health and Wellbeing.

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### Responsibilities of Individual School and Early Learning and Childcare Settings

Each individual establishment has a crucial role in delivery of the Health and Wellbeing Curriculum. It is important that every establishment takes account of the local context and uses the data available to them to develop programmes and courses that will meet the needs of their community. Appendices 2 and 3 give detailed guidance on the curriculum rationale and self-evaluation measures. It is important to consider the totality of the Health and Wellbeing curriculum and how it permeates through the ethos and life of the school with Health and Wellbeing truly being the Responsibility of All.

#### Responsibilities of individual establishments:

- Embed nurturing ethos and culture within the Vision, Values and Aims of the establishment.
- Nominate a Health and Wellbeing Leader (see Appendix 4).
- Develop curriculum rationale for Health and Wellbeing.
- Embed Health and Wellbeing curriculum across the establishment, including across the 4 Contexts for Learning.
- Ensure that Responsibility of All is embedded across the establishment.
- Embed national and local policy into school practice and routines.

- Embed processes to measure progress that children and young people are making in relation to their Health and Wellbeing.
- Track and monitor the quality of learning, teaching, progress and achievement within Health and Wellbeing across the establishment.

#### Quality Assurance and School Improvement Planning

Every establishment could ensure that they have processes in place that continuously review and develop approaches to Health and Wellbeing. This should relate to Standards and Quality, Curriculum Rationale (Appendix 3) and Self-evaluation processes including local data and effective School Improvement Planning (see Appendix 2).

#### All schools could:

- complete 'How good is our Health and Wellbeing?' using 'Health and Wellbeing Self-evaluation Framework';
- complete 'Health and Wellbeing strengths' and 'Health and Wellbeing areas for development' using individual establishment's data in relation to Health and Wellbeing;
- complete 'Health and Wellbeing Improvement Planning Overview';
- incorporate Health and Wellbeing into School Improvement Planning processes.



### Responsibilities of All Practitioners

Every member of staff, within each establishment, shares the responsibility for creating a positive ethos and climate of respect and trust, one in which everyone can make a positive contribution to the wellbeing of each individual within the school and the wider community.

#### All staff should:

- promote Health and Wellbeing in the Ethos and Life of the School;
- support every child or young person in their Health and Wellbeing and development;
- follow school policy and guidance in Health and Wellbeing;
- plan for teaching, learning and assessment in Health and Wellbeing;
- commit to CLPL in Health and Wellbeing related to own development needs.

In early years and primary establishments practitioners have the responsibility for the planning and delivery of all aspects of Health and Wellbeing. Within secondary schools all practitioners have Responsibility of All and specific departments have responsibilities in relation to certain aspects of Health and Wellbeing curriculum.



#### **Curriculum Responsibilities**

#### **Physical Education**

- Physical competencies
- Cognitive skills
- Personal qualities
- Physical fitness

#### **Food and Health**

- The food experience
- Developing healthy choices
- Nutritional needs
- Keeping safe and hygienic
- The journey of food
- Food and textile technologies

#### **Personal and Social Education**

- Substance misuse
- Planning for choices and change
- Relationships, sexual health and parenthood
- Physical activity and health

### Curriculum and Progression

Important aspects of Health and Wellbeing are the responsibility of all staff in educational establishments, this may include working with partners. Due to the importance of Health and Wellbeing to pupil learning and development, everyone should be clear about their areas of responsibility and their roles in assessment. In Health and Wellbeing, assessment has to take account of the breadth and purpose of the wide range of learning experienced

by children and young people within this curriculum area. It will focus on children and young people's knowledge and understanding, skills and attributes in relation to physical education, food and health, substance misuse, relationships, sexual health and parenthood, and their social and life skills.

Teachers and learners can gather evidence of progress as part of day-to-day learning inside and outside the classroom and, as appropriate, through specific assessment tasks. From the early years through to the senior stages, children and young people's progress will be seen in how well they are developing and applying their knowledge, understanding and skills in, for example, key features of healthy living and relationships, and in approaches to personal planning, assessing risk and decision-making.

Assessment is integral to learning and teaching and is an ongoing process.

Achievement is based on teachers' overall professional judgement, informed by evidence. The benchmarks for Health and Wellbeing should be used to support the assessment and professional judgement in specific elements of Health and Wellbeing; including physical education and food and health.

Across the country and within Perth and Kinross there are a number of tools and measures that are available to support the measure of wellbeing across the establishment and for the individual learner; they include:

- Attendance
- Exclusion
- PKC How Good is Our School at Helping Me to Stay Safe?
- Wellbeing Tool
- Strengths and Difficulties Questionnaire, SDQ
- Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)
- Boxall Profiling

At this time the Scottish Government are consulting about measures of progress in Health and Wellbeing and are proposing to include data about social, emotional and behavioural development of children and young people aged 4-12 years via the Strengths and Difficulties Questionnaire (SDQ). ECS can also utilise data on young people's mental wellbeing from the Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) Establishments may use the the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS). ECS will work with schools to support the development and rollout of national Health and Wellbeing measures when they become available. Locally, as part of the Health and Wellbeing Improvement Plan the Wellbeing Tool will be reviewed and developed and support will be offered to all establishments for the overall measurement of Health and Wellbeing for an individual child or young person.

### Implementation of Health and Wellbeing Strategy



# Implementation of Health and Wellbeing Strategy

### How will we achieve our intended outcomes?

The Health and Wellbeing strategy will be implemented through a three year action plan, overseen by a monitoring group. The action plan will be developed through both a systems level approach using the data that identifies priorities across schools in Perth and Kinross and from the establishment level identifying areas for development to allow for specific and focussed work.

### Next steps for schools and early years settings

As detailed in the appropriate sections, school/s and early years setting/s should now review the standards, expectations and responsibilities set out to clarify the self-evaluation path (Appendix 2) and how a Health and Wellbeing curriculum rationale can be developed (Appendix 3).

Schools and settings should review the four priorities for improvement laid out in this strategy against their current developments

### Implementation of Health and Wellbeing Strategy

and local partnerships and appoint a Health and Wellbeing Leader. Small schools may wish to collaborate within their localities to have one lead. It is recommended that large schools consider agreeing a 'Health and Wellbeing Improvement Group'. School priorities should be shared with ECS through the Health and Wellbeing network to inform some of the ECS and partners development of wider initiatives and the future actions within this strategy.

### Monitoring and Review of the Health and Wellbeing Strategy

A multi-agency group will be established from the existing consultative group in order to oversee the implementation of the strategy and action plan. This will continue to be led by the Principal Educational Psychologist, with support from the Service Manager and the Quality Improvement Officer (Health and Wellbeing). The group will meet twice per session and review the actions for each of the aspects contained within the plan.

Where necessary and appropriate, specific actions will be supported by the formation of short life working groups.

The progress of the identified improvement themes will be scrutinised by the Early Years, Early Intervention Programme Board, led by the Head of Education (Early Years and Primary). This partnership group reports to the Children, Young People and Families Partnership, an Outcome Delivery Group of Perth and Kinross Community Planning Partnership.

#### Action Plan 2018-2021

Key partners will respond to the local needs of individual establishments and link strategically to support interventions in the areas of mental, emotional, social and physical wellbeing

Education & Children's Services will: Individual schools and Early Learning and Childcare settings will: In partnership Education & Children's Services will:

- Complete a pilot for the rollout of Bounce Back.
- Investigate a curricular programme for positive digital skills.
- Develop policy and practice in relation to Inclusion Review recommendations clarified in respect of nurture in Perth and Kinross.
- Set up a working group to review 'autonomy supportive teaching' where linked to school priorities.
- Develop a strategy for 'resilience for exams', with exploration of link to DYW, where linked to school priorities.
- Work with targeted schools and Tayside Contracts on further curriculum approaches to food preparation, decisionmaking and linking food, sleep and physical health to emotional wellbeing.
- Review Health and Wellbeing self-evaluation and progression and tools.
- Lead implementation of a Play Framework for Perth and Kinross.
- Lead implementation of Perth and Kinross Parenting Strategy.

- Review vision, values and aims to ensure nurturing ethos and culture is embedded throughout the school community.
- Identity a Health and Wellbeing Leader.
- Identify the tools and data used to measure Health and Wellbeing.
- Complete 'How good is our Health and Wellbeing?' selfevaluation.
- Identify Health and Wellbeing improvement priorities and develop associated improvement plan.
- Review/develop Health and Wellbeing curriculum rationale.
- Embed curriculum pathways across the Health and Wellbeing curriculum.
- Review Health and Wellbeing improvement plan and identify priorities for further development.
- Support the delivery of parenting programmes and family learning opportunities that support positive wellbeing.
- Promote play and embed playful approaches to learning in the curriculum and in family learning opportunities to build personal and social skills, including resilience and confidence.
- Link with the new School Nursing pathways to support work in their schools.

- Develop and pilot staff wellbeing supports and programmes in partnership with HR.
- Enhance integrated working to support key areas that affect emotional wellbeing for children and young people through the Emotional Wellbeing Collaborative.
- Set up working consultations with young people and key partners to further develop a directory of social media resources that provide direct support for young people.
- Ensure HWB Strategy and Play Framework outcomes link appropriately.
- Agree a plan to better support P7-S1 transitions during the summer holidays, where linked to school priorities.
- Work with Health, TSI and ECS to review and develop referral pathways for mental health interventions.
- Build on the MHIF project to agree a strategy to sustain emotional wellbeing training for all staff and listening skills modules for secondary staff.
- Work across CPP to provide a strategic direction for staff working on ACEs.
- Establish multi-agency working group to develop a peer-led wellbeing intervention, where linked to school priorities.
- Develop small-scale pilot to work with young people on peer support for improved sleep hygiene, where linked to school priorities.
- Work across CPP to review impact of Health and Wellbeing strategy developments.
- Support development of a Tayside Mental Health Strategy for Young People.

### Appendix 1

Health and Wellbeing - summary of data, consultations and specific consultation, analysed in relation to work already being undertaken.

To ensure a full understanding of current priorities for the children and young people of Perth and Kinross, a specific consultation was undertaken for this strategy, building on data already known and previous consultations. A consultative exercise was undertaken with groups of children and young people looking at understandings, important factors and perceived gaps in the areas of mental wellbeing, emotional wellbeing, social wellbeing and physical wellbeing. This exercise was carried out in five schools and repeated with specific groups of adults (parents, Pupils Support Assistants, School Nurses, Active Schools team and the general strategy consultative group). The results were analysed and themes drawn out.

To identify key priorities for improvement, trends in Perth and Kinross and national data (Perth and Kinross Health and Wellbeing data for children and young people (2) were analysed alongside of previous consultations with children and young people in Perth and Kinross (Perth and Kinross consultations with children and young people (2). The consultation with young people and practitioners carried out for this strategy and this collated evidence was analysed in relation to work already underway in this area (Perth and Kinross Health and Wellbeing **developments** ②). This has resulted in the ability to triangulate a set of four priorities that will help schools and partners to support the Health and Wellbeing of children and young people in Perth and Kinross. These four improvement priorities are outlined below under the agreed aspects of Health and

Wellbeing, Mental Wellbeing, Emotional Wellbeing, Social Wellbeing and Physical Wellbeing.

#### **Mental Wellbeing**

Being mentally healthy means children and young people:

- have choices in life
- feel listened to
- know what to do to help themselves
- have a sense of purpose

According to the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS), in Scotland, overall mental wellbeing scores have remained relatively stable over time. Perth and Kinross is statistically significantly better than the Scottish average.

In Perth and Kinross, responses from primary age children to the annual Keeping Safe in School survey have remained high (86%) with regard to the statement 'I feel listened to, understood and respected, when I talk to that member of staff', however there appears to be a declining trend for young people in secondary school (decreasing from 85% to 73% over the last 3 years).

Children and young people have consistently stated that being able to share views and having opportunities to influence decisions is important for mental health. This supports the research finding that one of the key aspects of personal resilience is having a sense of 'personal agency' (Brooks, 2006).

Young people feel they should be encouraged to express themselves and have opportunities to represent their school or class. They also want to be able to protect themselves, with an ability to deal with peer pressure. A key theme was the importance of being supported to develop self-awareness and understanding of strengths/talents; this includes getting help to set goals. Young people also identified the importance of discussing mental health issues.

At the same time, adults consulted expressed concern over the lack of clarity at times over support pathways.

The key improvement aim for Mental Wellbeing should be:

"To improve the universal responses, including peer-owned and targeted mental health pathways to meet the concerns of our children and young people."

This, linked to current actions, suggests a focus on:

- partnership working on mental health referral pathways;
- training for, and working with, all staff on listening skills and supporting emotional and mental wellbeing;
- staff resilience and wellbeing training and support;
- working with schools to review autonomy supportive teaching and cross curricular links within a mental wellbeing framework:
- working with secondary school pupils on mental health needs, supports and preventative actions.

#### **Emotional Wellbeing**

Being emotionally healthy means children and young people can:

- recognise emotions well
- understand and control emotion
- respond appropriately to emotion

Over the last 10 years there has been an increase in the levels of anxiety and depression in young people across Scotland. Girls were considerably more likely than boys to have a borderline or abnormal emotional problems score, 15 year old girls in particular. The proportion of 15 year old girls saying that they worry a lot increased considerably (from 31% in 2010 to 50% in 2015), with a similar trend for 13 year old girls.

Perth and Kinross young people have stated that feeling loved, safe and secure matters for their emotional health. Some young people can feel pressured by speaking out in class, exams or pressure to make decisions about the future. Within Perth and Kinross, it has also been found that young people with high levels of worry are most likely to 'spend time alone' or 'do nothing', when asked what they do to help themselves.

Young people and practitioners identify that knowing where to get help, feeling listened to and understood are the most important supports for emotional wellbeing. The Keeping Safe in School surveys however show a worsening trend for secondary age pupils in these key areas (2015/16 to 2017/18). A key factor of good emotional wellbeing is the importance of building personal resilience, including self-confidence, coping strategies and having supportive relationships at home and in school.

The key improvement aim for Emotional Wellbeing should be:

"To improve the coping skills and resilience supports for children and young people."

This, linked to current actions, suggests a focus on:

- development of Secondary Bounce Back;
- development and roll out of 'resilience for exams;
- training for, and working with, all staff on listening skills and supporting emotional and mental wellbeing;
- more working with TSI partners on what would support young people in the area of emotional wellbeing;

- Strengthening Families programme;
- self-regulation input and coaching for all staff.

#### **Social Wellbeing**

Being socially healthy means children and young people can:

- recognise emotions in others
- have positive emotions
- have a variety of social experiences
- experience safe relationships

Pre-school milestones data for the last 2 years suggests that, on average, 7.4% children entering Perth and Kinross primary schools may have challenges in demonstrating age appropriate social development.

Wellbeing Web data shows that primary age pupils report very high ratings for feeling nurtured (9.3/10) but score lower for feeling respected (8.5) and safe (8.9). The percentage of primary school pupils using social media to communicate with their friends continues to rise, as does the number playing 15 and 18 aged rated games online. Perth and Kinross data also shows primary age pupils are increasingly less likely to have to ask an adult before using the internet. More than 95% of pupils report feeling that they know what to do keep safe online. At the same time it appears that experience of cyber-bullying is increasing (23% to 32% in the last three years).

Research would suggest that a significant minority of people are dissatisfied with their bodies, and that this can start young. Perth and Kinross data shows that almost half of questions to the Cool2Talk online service relate to either sexual health or relationships, with most coming from young females.

Children and young people stated that the most important thing for their social health is knowing how to keep safe, experiencing a range of positive relationships and appreciating people for what makes them

unique. Being part of a group was also important and feeling listened to, as was knowing who to go to if needed. Adults consulted considered that mechanisms for managing peer pressure are important, along with knowing how to manage social media and online communication, beyond knowing how to protect online safety.

Some adults felt that more could be done to support transition to secondary school, perhaps by further input during the summer holidays.

The key improvement aim for Social Wellbeing should be:

"To improve the ability of children and young people to manage complex social relationships, particularly online, with an emphasis on knowing how to help themselves."

This, linked to current actions, suggests a focus on:

- link to review of nurture, development of nurturing approaches across Perth and Kinross;
- support for the development of peer mentoring;
- working with young people in respect of improvement of direct access to helpful forms of appropriate information for young people, as part of this work TSI to highlight to schools what voluntary sector can offer;
- considering development of a wellbeing week for children and young people;
- development of curricular materials/ approaches to support positive digital communication skills, management of peer dynamics and support for good brain health;

working with TSI to consider widening summer holiday support work around key school transitions.

#### **Physical Wellbeing**

Being physically healthy means children and young people:

- are active
- eat healthy food
- get enough sleep
- look after their body and brain

A recent international study (Active Healthy Kids Global Alliance, 2016) found that Scotland had one of the best environments and infrastructure for outdoor play among the 38 nations that took part, but was ranked joint worst for exercise, and for screen times. Participation in recreational groups and the Active Schools programme is increasing, with higher average levels of participation in Perth and Kinross than the national average (85% compared with 71% - S4 pupils).

National data shows that around 10% of children in P1 are at risk of being obese; this is reflected in local data with Perth and Kinross performing slightly better than Scottish average. Localised data indicates some areas in Perth and Kinross where the proportion is as high as 26.1%.

Pilot studies in three Scottish schools suggested that 52% of teenagers were sleep deprived. The study identified a lack of general knowledge about sleep. Adults consulted felt work should be done with young people to develop what helped them address and understand sleep needs.

There is a decreasing trend in the number of young people who report having alcohol regularly, who report using drugs and who are regular smokers.

In recent consultations young people identified the most important aspect of

physical wellbeing was being active, they also identified the importance of sleep and diet. The adults consulted considered that work could be done on helping young people to be aware of the link between physical health, nutritional health, sleep and emotional and mental wellbeing. It was noted that more could be done to promote good nutrition through the school meal service. Adults felt there needed to be a focus upon equitable access to extra-curricular opportunities, including no-charge opportunities within outdoor local environments. Feedback from multiple consultations over the last three years shows that it is important to young people to have an awareness of drugs and alcohol.

The key improvement aim for Physical Wellbeing should be:

"To improve equitable access to physical opportunities and enhance the understanding of the contribution physical and nutritional health can play in mental health."

This, linked to current actions, suggest a focus on:

- implementing Physical Education, Physical Activity and Sport action plan and support for local PEPAS groups;
- active under 10s;
- Eat Well, Play Well, Learn Well;
- fitness and fun Tayside resources used in schools (POST);
- Better Eating Better Learning;
- consideration of a small pilot to work with young people on peer support for improved sleep hygiene;
- development of further curriculum approaches to food preparation, decision-making and linking food and health

### Appendix 2a

HWB Self-Evaluation and School Improvement Planning

#### **Contents**

Health and Wellbeing Self-evaluation Framework

How good is our Health and Wellbeing?

Health and Wellbeing strengths and areas for development

Health and Wellbeing Improvement Planning Overview

#### **Guidelines**

The Health and Wellbeing Self-evaluation Framework can be used specifically for Health and Wellbeing or as part of whole-school self-evaluation in relation to individual quality indicators or whole school themes.

### Suggested Self-evaluation Calendar when using specifically for Health and Wellbeing

How good is our Health and Wellbeing?					
Year 1	Year 2	Year 3			
1.3 Leadership of change	1.3 Leadership of change	1.3 Leadership of change			
2.3 Learning, teaching and assessment	2.3 Learning, teaching and assessment	2.3 Learning, teaching and assessment			
Additional QIs	Additional QIs	Additional QIs			
2.1 Safeguarding and child protection	1.2 Leadership of learning	1.1 Self-evaluation for self-improvement			
2.4 Personalised support	2.2 Curriculum	2.7 Partnerships			
2.6 Transitions	2.5 Family Learning				
3.1 Improving wellbeing, equality and inclusion					

### Appendix 2b

How good is our Health and Wellbeing?

Quality Indicator	Themes	Questions to consider			
Leadership and management					
This indicator defines rigorous self-evaluation as a responsibility of all stakeholders. It highlights the importance of partnership approaches to self-evaluation and continuous improvement. It emphasizes the need for strong leadership and robust analysis of a range of intelligence and data as essential features of effective continuous self-improvement. A key factor in this indicator is demonstrating the impact of self-evaluation in relation to outcomes for all learners. Their active participation in self-evaluation is therefore essential.	Collaborative approaches to self-evaluation  Analysis and evaluation of intelligence and data  Ensuring impact on learners' successes and achievements	<ul> <li>Challenge questions</li> <li>How well do we use digital solutions to support the interrogation of data?</li> <li>How do we ensure improvement for the learner is central to all self-evaluation activity?</li> <li>Do all staff have sufficiently high aspirations and expectations for all children and young people?</li> <li>Do all staff and partners have up-to-date knowledge about the local community and understand circumstances affecting children's lives and learning?</li> <li>How well do we take action to remove barriers to success?</li> <li>How well have we identified our whole-school, departmental and individual strengths and areas for improvement through self-evaluation?</li> <li>How well do we involve all stakeholders (children, staff, parents and carers, families and partners) in self-evaluation and planning for improvement?</li> <li>How effective are we at ensuring an inward, outward and forward focus in our evaluation and improvement activities?</li> <li>How do we know that the changes we have made have improved outcomes for children?</li> <li>How well is evidence from self-evaluation being used to drive forward change?</li> </ul>			

Quality Indicator	Themes	Questions to consider
This indicator focuses on collaborative leadership at all levels to develop a shared vision for change and improvement which is meaningful and relevant to the context of the school within its community. Planning for continuous improvement should be evidence-based and linked to effective self-evaluation. Senior leaders should ensure the need for change is well understood and that the pace of change is appropriate to ensure the desired positive impact for learners.	Developing a shared vision, values and aims relevant to the school and its community  Strategic planning for continuous improvement  Implementing improvement and change	Challenge questions  To what extent does our school community have ownership of our vision, aims and values?  What range of data and information do we utilise to understand the social, economic and cultural context of the local community?  What strategies do we employ to translate our vision, values and aims into daily practice within our school? How effective are these?  Does everyone in the school have a clear understanding of our collective strengths and area for development? Are conclusions about these drawn from a wide range of data and evidence?  How effective are our approaches to evaluating and monitoring the impact and sustainability of our professional learning?  How effective are our approaches to planning for continuous improvement? How do we ensure a continued focus on improvements in outcomes for learners?  To what extent are our tools for change impacting positively on staff and improving outcomes for all learners?  Health and Wellbeing Specific  What aspects of PSE/Health and Wellbeing have featured on school improvement plans in recent years?

Learning Provision

Quality Indicator	Themes	Questions to consider
2.1 Safeguarding and child protection  This indicator focuses on the wide range of duties required of all staff and partners to ensure that all children and young people are safe, well cared for and enabled to flourish. This indicator looks to how the school takes account of statutory requirements in relation to child protection to ensure the needs of all learners are met. Safeguarding all children and young people requires strong partnerships to be established between the school and its local community. This includes well-planned progressive learning opportunities so that children and young people can become more resilient and develop a sound understanding of how they can keep themselves safe.	Arrangements for safeguarding, including child protection  Arrangements to ensure wellbeing  National guidance and legislation	Challenge questions  Are safeguarding arrangements regularly reviewed as an integral part of our self-evaluation processes?  How do we ensure that staff are kept up-to-date with safeguarding practice including, for example, e-safety, extremism, female genital mutilation and child sexual exploitation?  How well are children and young people supported following a safeguarding or child protection concern?  How effectively are incidents related to equalities acted upon to prevent future occurrences?  How effective are our approaches to support wellbeing (e.g. buddies, mentors, safe areas)? How do you measure the impact of these approaches?  Does the school promote an ethos and culture of positive engagement and participation with its pupils and parents?

Quality Indicator	Themes	Questions to consider
Quality Indicator  2.2 Curriculum  This indicator highlights the importance of placing the needs of learners at the centre of curriculum design and development. The structure and delivery of the curriculum should take good account of local and national circumstances. The curriculum is the totality of learning experiences across the four contexts as delivered by the school and its partners. An effective curriculum results in strong outcomes for all learners.	Themes  Rationale and design  Development of the curriculum  Learning pathways  Skills for learning, life and work	Challenge questions  To what extent do we take account of all the factors that make our school unique?  To what extent does our curriculum promote equity and raise attainment for all children and young people?  How well are children and young people involved in planning and identifying opportunities for personalisation and choice?  Do we have a shared understanding of what progression looks like?  How effective is our whole school overview in ensuring children's knowledge and skills are built appropriately over time?  Do we make best use of our partners, including international partners, to provide opportunities for young people to develop skills and achieve?  Health and Wellbeing Specific  What factors have been taken into account in designing PSE/Health and Wellbeing curriculum - ie national guidance (entitlements), local
		<ul> <li>To what extent do you develop and refresh your PSE/Health and Wellbeing curriculum?</li> <li>How well are the principles of curriculum design reflected in PSE/Health and Wellbeing?</li> <li>How well does your PSE/Health and Wellbeing curriculum meet the needs of all learners?</li> </ul>

Quality Indicator Themes	Questions to consider
assessment  This indicator focuses on ensuring high-quality learning experiences for all children and young people. It highlights the importance of highly skilled staff who work with children, young people and others to ensure learning is motivating and meaningful. Effective use of assessment by staff and learners ensures children and young people maximise their successes and achievements.  Effective use of assessment  Planning, tracking and monitoring	<ul> <li>in all aspects of school life?</li> <li>How confident are we that all learners experience activities which are varied, differentiated, active, and provide effective support and challenge?</li> <li>How well do our questioning strategies enhance the learners' experience and enable higher-order thinking skills?</li> <li>How well do we apply the principles of planning, observation, assessment, recording and reporting as an integral feature of learning and teaching?</li> <li>How well do we make use of a range of valid, reliable and relevant assessment tools and approaches to support the improvement of children and young people's learning?</li> <li>How well do we record, analyse and use assessment information to identify development needs for individual learners and specific groups?</li> <li>How effectively do we involve learners and parents in planning and evaluating learning?</li> <li>Health and Wellbeing Specific</li> <li>How effectively is the issue of sexual consent taught within relationships, sexual health and parenthood within your establishment?</li> <li>How well are the new Health and Wellbeing benchmarks being used to assess learners' progress and to deliver improved outcomes? How meaningfully are learners engaged in the process?</li> </ul>

Quality Indicator	Themes	Questions to consider
2.4 Personalised support	Universal support	Challenge questions
This indicator focuses on the provision of high quality support that enables all children and young people to achieve success. It highlights the importance of wellbeing and involving children and young people in decisions about how their needs should be met. Strong partnerships with parents and other partners who support children and young people are essential. Monitoring the impact of interventions and making timely adjustments to practice are key to providing highly-effective universal and targeted support.	Targeted support  Removal of barriers to learning	<ul> <li>How well do staff know learners as individuals?</li> <li>Are there robust arrangements in place to ensure all learners have regular communication and discussions with a key adult to review their learning and plan next steps?</li> <li>Do staff consider whether their learning and teaching and assessment approaches meet the needs of diverse learners?</li> <li>How good is our understanding of differentiation? Do staff and partners use a range of approaches that meet the needs of all learners?</li> <li>How well does our curriculum planning meet the needs of different groups of learners?</li> <li>How effectively do we involve parents and partner agencies to ensure learners benefit from the right support at the right time including next steps in learning, changes and choices?</li> <li>How do we know if personalised support is having the desired impact of improving outcomes for learners?</li> <li>To what extent is our school an inclusive learning environment?</li> <li>Health and Wellbeing Specific</li> <li>To what extent do the ethos, climate and relationships within the learning environment support help all learners meet their learning potential?</li> <li>How does your educational establishment ensure all children and young people receive their full entitlement to universal support (tutors, houses systems, class teacher, key adult etc)?</li> <li>What do you understand to be the definition of "counselling" in your setting?</li> <li>How effectively are children and young people identified for targeted wellbeing interventions?</li> </ul>

Quality Indicator	Themes	Questions to consider
Quality Indicator  2.5 Family Learning  This indicator focuses on increasing the positive impact of working with families to improve learning and achievement. The emphasis is on schools working in partnership with others in the community to support families to secure better outcomes through programmes which enable them to improve literacy, numeracy and Health and Wellbeing.	Themes  Engaging families in learning  Early intervention and prevention  Quality of family learning programmes	Challenge questions  To what extent are we sure of what meaningful engagement with families looks like?  Are outcomes for children improving as a result of their participation in family learning? How do we know?  How is family learning improving their capacity to learn?  How is our family learning helping promote the wellbeing indicators? How do we know?  How are we ensuring that provision is responsive to the needs of families?  How effectively do we use current available data about levels of poverty in our community to help
		<ul> <li>us target interventions?</li> <li>How well do we match the right programme to the right families?</li> <li>How well are families supported in developing strategies which lead to positive relationships, better learning and better behaviour?</li> </ul>

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Quality Indicator	Themes	Questions to consider
This indicator aims to capture the school's success in developing and maintaining strong partnership approaches which improve outcomes for learners and continued self-improvement for the school and community. All partnerships are based on mutual trust and respect for the particular contribution each partner brings. Partnerships are integral to the way a highly effective school works.	The development and promotion of partnerships  Collaborative learning and improvement  Impact on learners	<ul> <li>Challenge questions</li> <li>How do we ensure that relationships with parents, carers and families, the local community and partners are characterised by trust and respect?</li> <li>How well do we enable parents, carers and families and the local community to contribute to the life of the school and be involved in school improvement?</li> <li>How well do we seek out and respond positively to potential partnerships which will lead to better outcomes for the children and young people we work with?</li> <li>How clear are the partnership agreements we enter into? Do we involve partners at the earliest stages of planning?</li> <li>How well do we identify priorities, communicate, plan, monitor and evaluate our work with partners?</li> <li>Are we clear what added value each partnership brings?</li> <li>Health and Wellbeing Specific</li> <li>How effective are the services at improving learners' wellbeing?</li> <li>How well are these services monitored and evaluated by the school?</li> </ul>

Quality Indicator	Themes	Questions to consider
	Successes and	Achievements
3.1 Improving wellbeing, equality and inclusion	Wellbeing	Challenge questions
This indicator focuses on the impact of the school's approach to wellbeing which underpins children and young people's ability	Fulfilment of statutory duties	<ul> <li>How well do all staff know and understand GIRFEC, the wellbeing indicators, and the United Nations Convention on the Rights of the Child?</li> <li>How well do all staff understand their role and responsibility in supporting learners' Health and Wellbeing?</li> </ul>
to achieve success. It highlights the need for policies and practices to be well grounded in current	Inclusion and equality	How well do children and young people show consideration for others and demonstrate positive behaviour and relationships?
legislation and a shared understanding of the value of every individual. A clear focus on ensuring wellbeing		■ How well do we listen to and involve children and young people in making decisions about their wellbeing, their lives and their future?
entitlements and protected characteristics supports		■ How well do we communicate with parents, partners and learning across these key themes?
all learners to maximise their successes and achievements.		■ How well do we know the steps we have taken have improved outcomes for children?
demevements.		How well can we demonstrate improved attainment for groups and individuals facing barriers to learning, including poverty?
		■ Have we successfully established an inclusive learning environment? How do we know?
		■ To what extent does our school celebrate diversity?
		Health and Wellbeing Specific
		■ How well does your establishment ensure that PSE/ Health and Wellbeing programmes promote an understanding of different equality groups (including LGBTI+) and teaches children and young people about prejudice?
		■ What is the role and remit of pastoral care staff? How many learners are allocated to each pastoral care/guidance teacher? How well is this understood and shared across the establishment and local authority? How effectively is universal support delivered?
		■ How well do pastoral care staff/guidance meet the needs of children and young people? Please include any examples of particularly effective support?
		■ How is the effectiveness of the provision of pastoral/ guidance support evaluated?
		In what ways does your establishment/learning environment promote positive mental health?

### Appendix 2c

How good is our Health and Wellbeing? Strengths and areas for development

		How good is our He	alth and We	llbeing?	
	Quality Indicator	How well are you doing?	How do you know?	What are you going to do now?	Evaluation against 6 point scale?
			Source of evidence	Next steps	scale:
		Leadership and	l management		
1.1	Self- evaluation	Collaborative approaches to self-evaluation			
	for self- improvement	Analysis and evaluation of intelligence and data			
		Ensuring impact on learners' successes and achievements			
1.2	Leadership of learning	Professional engagement and collegiate working			
		Impact of career-long professional learning			
		Children and young people leading learning			
1.3	Leadership of change	Developing a shared vision, values and aims relevant to the school and its community			
		Strategic planning for continuous improvement			
		Implementing improvement and change			

	How good is our Hea	alth and We	ellbeing?	
Quality Indicator	How well are you doing?	How do you know?	What are you going to do now?	Evaluation against 6 point scale?
		Source of evidence	Next steps	seuic.
	Learning an	d Provision		
2.1 Safeguarding and child	Arrangements for safeguarding, including child protection			
protection	Arrangements to ensure wellbeing			
	National guidance and legislation			
2.2 Curriculum	Rationale and design			
	Development of the curriculum			
	Learning pathways			
	Skills for learning, life and work			
2.3 Learning, teaching and	Learning and engagement			
assessment	Quality of teaching  Effective use of assessment			
	Planning, tracking and			
	monitoring			
2.4 Personalised	Universal support			
support	Targeted support			
	Removal of barriers to learning			
2.5 Family	Engaging families in learning			
Learning	Early intervention and prevention			
	Quality of family learning programmes			
2.6 Transitions	Arrangements to support learners and their families			
	Collaborative planning and delivery			
	Continuity and progression in learning			
2.7 Partnerships	The development and promotion of partnerships			
	Collaborative learning and improvement			
	Impact on learners			

	How good is our Health and Wellbeing?				
	Quality dicator	How well are you doing?	How do you know?  Source of evidence	What are you going to do now?  Next steps	Evaluation against 6 point scale?
		Successes and	Achievements		
	proving	Wellbeing			
equ	ellbeing, uality and	Fulfilment of statutory duties			
inc	lusion	Inclusion and equality			

### Appendix 2d

How Good Is Our Health and Wellbeing?

Strength and Areas for Development

### How good is my school at keeping me safe?

Our children say:

#### Monitoring of Learning and Teaching and Self-evaluation

What does it tell us:

#### Wellbeing Tool

What the data tells us:

### Appendix 2e

How good is our Health and Wellbeing?

Improvement Planning Overview				
Quality Indicator	Self-evaluation Next Steps	Lead	Date to be Achieved	
1.1 Self-evaluation for self-improvement				
1.2 Leadership of learning				
1.3 Leadership of change				
2.1 Safeguarding and child protection				
2.2 Curriculum				
2.3 Learning, teaching and assessment				
2.4 Personalised support				
2.5 Family Learning				
2.6 Transitions				
2.7 Partnerships				
3.1 Improving wellbeing, equality and inclusion				

### Appendix 3

(Insert school name)
HWB Curriculum Rationale

#### **School Context**

Key questions to consider:

- Size and local area, including SMID and ACORN data
- Data from school, PKC, National, in relation to HWB, eg Attendance, Exclusion, Keeping Myself Safe survey
- Evidence and data from tracking and monitoring
- Evidence and data from local community partners, eg Active School, Community Planning Partnership, Community Council, NHS

We aim to (these should be amended and added to in relation to your own school priorities):

- Embed a nurturing ethos and culture within the Vision, Values and Aims of our school to support and promote positive attitudes and practices conducive to good health and encourage pupils to take responsibility for their own wellbeing. Our children and young people should experience positive aspects of healthy living and activity for themselves and develop the required skills, such as assertiveness, and apply these to the choices they make. We will support pupils to understand themselves and their own bodies and work towards developing a positive self-image, to enable pupils to grow into caring and responsible adults.
- Continuously review and develop our Health and Wellbeing rationale and curriculum.

- Embed Health and Wellbeing curriculum across the establishment, including across the 4 Contexts for Learning.
- Ensure that Responsibility of All is embedded across the establishment.
- Embed national and local policy into school practice and routines.
- Embed processes to measure progress children and young people are making in relation to their Health and Wellbeing.
- Track and monitor the quality of learning, teaching, progress and achievement within Health and Wellbeing across the establishment.

(Insert school name)
Key outcomes for improvement
in HWB

Responsibility of all:

- Socially healthy
- Physically healthy
- Mentally and Emotionally healthy

**HWB Curriculum Areas:** 

Food and Health:

Physical Education:

Personal and Social Education (Planning for choices and change, Physical activity and sport, Relationships, sexual health and parenthood and Substance misuse):

### (Insert school name) HWB Curriculum Rationale

### **Curriculum Areas - Programmes and Courses**

Responsibility of all (Socially, Physically, Mentally and Emotionally healthy):

Food and Health:

Physical Education:

Personal and Social Education (Planning for choices and change, Physical activity and sport, Relationships, sexual health and parenthood and Substance misuse):

### Interdisciplinary Learning - Identified Opportunities

#### Example:

Health Week, Religious Celebrations, links between science and physical education

Successful learners

**Confident individuals** 

**Responsible citizens** 

Effective contributors

Opportunities for Personal Achievement

#### Example:

LGBT Awareness Week, Suicide Prevention Week, HWB Week and Young of Young People Programme of Events

Ethos and life of the School -

whole School Events

#### Example:

School and national representation through sport, Young Leaders Programme, Dance Leader Programme, DofE, John Muir Award

Health and Wellbeing Early Level Personal and Social Education ②
Health and Wellbeing Early Level Food and Health ❷
Early Level Health and Wellbeing (Physical Education) ②
First Level Health and Wellbeing (Personal and Social Education) ②
First Level Food and Health ❷
First Level Health and Wellbeing (Physical Education)
Second Level Health and Wellbeing (Personal and Social Education)
Second Level Food and Health <b>⊘</b>
Second Level Health and Wellbeing (Physical Education)
Third Level Health and Wellbeing (Personal and Social Education) ②
Third Level Food and Health <b>②</b>
Third Level Health & Wellbeing (Physical Education)
Fourth Level Health and Wellbeing (Personal and Social Education)
Fourth Level Food and Health <b>⊘</b>
Fourth Level Health & Wellbeing (Physical Education) ②
Health and Wellbeing Responsibility for All, Early to Fourth Level ②

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### Appendix 4

Role of HWB Leader and Networks

#### **CIN Network**

#### **Purpose of the HWB Network**

- Share information and developments from national/local working groups
- Share good practice
- Provide support and development for HWB co-ordinator
- Work with and develop partnership working
- Curriculum development groups

#### **Role of HWB Leader**

- Lead self-evaluation in relation to HWB within the school
- Lead HWB improvement priorities across the school
- Active member of PKC HWB Network

### Appendix 5

**National Policy Documents** 

**Getting it Right For Every Child** 

Children and Young People (Scotland)
Act 2014 ②

**Curriculum for Excellence** 

Education (Scotland) Act 2016 @

United Nations Convention on the Rights of the Child (UNCRC) **⊘** 

Schools (Health Promotion and Nutrition) (Scotland) Act 2007 ⊘

National Improvement Framework ②

**National Parenting Strategy** 

Child Poverty Strategy for Scotland: Our Approach **⊘** 

**Child Protection Improvement Programme @** 

Youth Employability Strategy @

National Youth Work Strategy 2014/19 @

Carers (Scotland) Act 2016 @

A Refreshed Framework for Maternity Care in Scotland 2011 ②

Improving Maternal and Infant Nutrition: A Framework for Action **②** 

Relevant Key Policies for Adults and Communities

Mental Health Strategy for Scotland ②

Road to Revocery: A New Approach to Tackling Scotland's Drug Problem ②

Equally Safe: Scotland's Strategy for Preventing and Eradicating Violence Against Women and Girls ②

A Fairer Scotland for Disabled People: Our Delivery Plan to 2021 ②

Better Health, Better Care 2

National Clinical Strategy for Scotland 2016 ②

**National Strategy for Community Justice** 

Community Empowerment (Scotland) Act 2015 ②

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