

Health and Wellbeing: The Responsibility of All 3-18 Curriculum Impact Report

Summary of Key Strengths and Aspects for Development



The following table highlights and summarises what those working together in the fields of education and health do well and what needs to be done better to continue to improve the health and wellbeing of children and young people in Scotland.

These findings will help practitioners to reflect on Scotland's existing strong practice and engage in further discussions around the aspects for development.

Professionals will be participating in national professional dialogue about health and wellbeing and share good practice from across the country. As part of the dialogue, professionals will also be able to share what did not work for them, and help others to avoid similar pitfalls.

Centres, schools and communities should continue to work jointly with their partners and stakeholders, in order to create the culture, systems and practice that will tackle health inequalities in Scotland today and in the future, and lead to better outcomes for all of our children and young people.

Key strengths	Aspects for development
Where centres, schools and communities are having most impact:	Where practice needs to improve in order to bring about greater impact:
Culture	Culture
<ul style="list-style-type: none"> Learners' views are valued and they often contribute to planning improvements in health and wellbeing. A strong culture of recognising the 'learners' voice' exists in terms of content, methodology and 	<ul style="list-style-type: none"> In secondary schools, young people would like to be asked more often about what and how they would like to learn within health and wellbeing. Many children and young people still lack in

<p>approach to health and wellbeing.</p> <ul style="list-style-type: none"> Approaches to managing behaviour in most schools are restorative and/or solutions-oriented in nature. This helps to create a supportive and nurturing ethos, positive and supportive relationships and a climate for learning where learners are not afraid to voice their concerns. Health and wellbeing is valued and viewed as a priority in the centre, school or community's work with children, young people and their families at all levels seen as key drivers in increasing achievement and reducing inequality. Strong strategic leadership from the education authority is in place which makes expectations, priorities and the planning process for health and wellbeing clear. A strong culture of partnership working with other agencies exists to more effectively meet the specific health and other needs of all children and young people, but specifically those most vulnerable and their families. 	<p>self-confidence, resilience and coping skills.</p> <ul style="list-style-type: none"> Health and wellbeing is not always well enough referenced in personal learning planning approaches and processes. Greater clarity is needed about how success and progress in health and wellbeing is evaluated, recorded and communicated. Some parents and learners are still to understand fully the importance of ensuring good mental, emotional and social wellbeing. There is scope for greater family-based support to be given, in particular to help young parents in order to improve their own health and wellbeing. Children and young people often experience too many one-off health and wellbeing events with insufficient opportunities for follow up. Health and wellbeing initiatives need to be planned more systematically throughout the academic session in some centres and schools, moving beyond reliance on an annual 'health week' approach. Some staff have difficulty in targeting resources and support for those who need it most.
<p>Systems</p> <ul style="list-style-type: none"> Opportunities for discussion, review and reflection by all members of the school community are planned, include parents and partners, and inform future plans for health and wellbeing. Quality assurance mechanisms include reference 	<p>Systems</p> <ul style="list-style-type: none"> Develop stronger approaches to building on children's and young people's knowledge and skills in health and wellbeing at points of transition, within establishments and across clusters and learning communities. There is a need for a stronger

<p>to addressing health and wellbeing priorities.</p> <ul style="list-style-type: none"> • Transition arrangements, including within schools as well as from school to school, include a focus on health and wellbeing and are supported by information within pupil profiles and records which progresses with the child and young person as they move from stage to stage. • Effective partnerships are in place across the centre or school community with well-planned inputs from parents, health partners, education support services and allied health professionals, voluntary groups and the community. • Plans are beginning to emerge encouraging children and young people to self-report and record their own progress across different aspects of health and wellbeing, identifying their own strengths and development needs. • Well understood and consistent approaches to managing a positive ethos and supportive relationships underpin the centre's, school's and community's approach to enhancing the health and wellbeing of all stakeholders. 	<p>focus on creating opportunities for children and young people to apply their health and wellbeing skills in practical situations and real life contexts.</p> <ul style="list-style-type: none"> • In some schools, pupil councils and committees are perceived by learners to be an ineffective mechanism for gathering and responding to children and young people's views. • Improve approaches to evaluating and measuring success within health and wellbeing, reflecting more on the impact of programmes and planned interventions • Build on existing effective models of local moderation to develop staff confidence in evaluating learners' progress within health and wellbeing.
<p>Practice</p> <ul style="list-style-type: none"> • Children and young people work well together and contribute to the health and wellbeing of others through participation in committees, teams and by taking on responsibility, for example as mentors, buddies and prefects. • Time is created for staff to 	<p>Practice</p> <ul style="list-style-type: none"> • Improve communication between school and CLD professionals to ensure that out-of-class learning is more effectively taken into account as part of broader health and wellbeing experiences. • Develop a more consistent and progressive approach to outdoor learning across

<p>meet, discuss and respond to children and young people's health and wellbeing concerns.</p> <ul style="list-style-type: none"> • Young people co-design health and wellbeing programmes and support delivery through peer education by seniors or juniors. • Children and young people are beginning to evaluate their own progress in health and wellbeing. • Children and young people are very positive about the impact of outdoor learning and /or residential type experiences on aspects of their health and wellbeing. • Well-planned after school clubs provide key opportunities for children and young people at all stages to enhance skills, confidence and achievement and sense of belonging. 	<p>clusters or learning communities, in order to avoid establishments' reliance on individual enthusiasts to provide opportunities.</p> <ul style="list-style-type: none"> • Provide greater resources, support and professional learning opportunities for staff to address key areas of mental, emotional and social wellbeing such as body image, bereavement counselling, suicide prevention, inappropriate sexualised behaviours and the abuse of technology and social media. • Building on learners' existing skills and abilities, place a greater emphasis on self-reporting of progress in health and wellbeing by children and young people themselves. • Many young people in secondary schools would like more input into the content and approach taken to delivering personal, social and health education.
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