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The Health Promoting School: a school self-assessment guide

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Introduction

Raising school standards is the Government's most important educational priority.

The commitment of many schools in Northern Ireland to improvement, and in particular, to self-improvement has been well recognised by the Department of Education, Northern Ireland in its document 'School Improvement: The Northern Ireland Programme'¹. Indicators to improve quality have been provided by this programme in relation to three areas:

- the ethos of the school;
- the quality of teaching and learning;
- the quality of management.

These three areas are seen to 'influence strongly the school's capacity to meet its own expectations and those of the community which it serves.'

The Health Education Liaison Group (HELG) is a long established group representing the four Health and Social Services Boards, the five Education and Library Boards, the Department of Education, Northern Ireland, the Department of Health and Social Services, the Catholic Council for Maintained Schools, the Northern Ireland Council for the Curriculum, Examinations and Assessment (CCEA) and the Health Promotion Agency for Northern Ireland. Its purpose is to share information on developments to support the teaching of health education, eg training initiatives, resource development, policy advice. Several of its members have been involved from 1995-1998 as members of the Regional Planning Group established by the Health Promotion Agency to take forward the European Network of Health Promoting Schools initiative in Northern Ireland. Following

the successful completion of this three year project, the Agency approached HELG to establish a sub-group to make accessible to all schools the criteria laid down for a health promoting school in the form of indicators for self-assessment. Within the School Improvement Programme, HELG and the Agency recognised that many indicators outlined for the quality of the school's ethos, the quality of teaching and learning and the quality of management reinforced the criteria and indicators for a health promoting school.

These criteria and indicators are represented in this guide to assist schools to develop their work in relation to promoting health.

Why children's health is of concern in Northern Ireland

- The Regional Strategy for Health and Social Wellbeing 1997-2002 shows concern regarding accidents, smoking, alcohol, nutrition, sexual health and physical activity.² A range of issues are identified as being important to tackle before habits are ingrained, because it is very hard to change them later.
- Within Northern Ireland there is clear evidence of inequalities in health. The direct impact of poverty in children can be seen in a poorer level of general health, poor employment prospects, poor quality housing and physical environments, higher risk of abuse, neglect and social problems.
- In a 1992 study which collected clinical data on the prevalence of coronary risk factors in schoolchildren in Northern Ireland, relatively high risk factor levels were found, with at least one risk factor present in 45% of children.³

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- The Health Behaviour of Schoolchildren in Northern Ireland survey examined a number of health-related activities, behaviours and attitudes of first, third and fifth form pupils aged 11 to 16.⁴ Indicators from the study were that, even in first form, many pupils engage in behaviours which put their health at risk. For instance:
 - only half of all schoolchildren ate fruit and vegetables daily;
 - girls of all ages continued to exercise less frequently and for shorter periods than boys of the same age;
 - in relation to alcohol the proportion of drinkers and frequent drinkers among 11-15 year olds continued to rise. Fifty two per cent of 11-15 year olds in this survey were classified as drinkers (they had drunk more than a whole drink) and 13% drank at least once weekly. At all ages boys were more likely than girls to have tasted alcohol, to be current drinkers and to have been drunk;
 - the proportion of young people who experimented with tobacco had fallen since 1992 – but children who do experiment were more likely to continue smoking. Twelve per cent of 11-15 year old boys and 14% of 11-15 year old girls smoked at least once a week;
 - nearly nine per cent of the sample (349) pupils were using drugs or solvents at the time of the survey;
 - more than one third of pupils had been injured in an accident during the year leading up to the survey and there was a strong association between high risk behaviour, such as smoking and drinking, and injury.

There were clear indications in this survey that the ability to communicate with (or refer to) other people is an important factor in young people's feeling of wellbeing, self-ratings of health and the number of self-reported symptoms. Strong social support networks are increasingly being recognised as offering an important protective effect in terms of health. The likelihood of smoking, drinking and taking drugs was increased in pupils who were unable to communicate easily with other people (parents, teachers and friends).

Why the school is an important setting for health promotion

People sometimes think of education as the accumulation of facts and basic skills. They sometimes think of health as the opposite of illness. But education and health are broader, richer concepts - and they are inseparably linked.

Education is about **learning**. It is about the ability to combine knowledge, attitudes and skills to shape one's life and contribute to the lives of others. Throughout the world, a higher level of education often allows people to have better jobs, lead healthier lives, and contributes to family and community wellbeing.

The Ottawa Charter (1986) for Health Promotion recognises that **“Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love. Health is created by caring for oneself and others, by being able to make decisions and have control over one's life circumstances, and by ensuring that the society one lives in creates conditions that allow the attainment of health by all its members.”**⁵

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- In almost every community, the school is a setting which many people live, learn and work. It is a place where pupils and staff spend a great proportion of their time. It is a place where education and health programmes can have their greatest impact because they can reach pupils at influential stages in their lives – childhood and adolescence.

The Government's complementary strategy 'Well into 2000' endorses the Regional Strategy and is committed to encouraging 'healthy and supportive environments which help people to maintain good health and wellbeing.'⁶

Thus, schools are not merely one of the institutions and settings in which health can be created, but are among the most important. Because we know much about the relationship between education and health, we can use that knowledge to help create health promoting schools, *which improve education and learning potential* as they improve health.

• Good health supports successful learning

We know that healthy children learn well. If young people are healthy, they can take full advantage of every opportunity to learn.

We also know that a child's ability to attend school is affected by health. Health and health-related conditions, for example illness among children and their families, or fear of violence or abuse en route to school or at school, can reduce attendance, thus reducing the value of investments in education. If health supports learning, making school a healthy place becomes an objective of all schools.

• Successful learning supports health

Schools can make it possible for children and adolescents to gain the knowledge, attitudes, values and skills they need to be healthy and to avoid important health problems. The promotion of health can contribute to children's and adolescents' health now and in their lives as adults, enabling them to contribute to their communities now and in the future.

We know that there are too few safe places for children today. Many children live and suffer through physical, social or cultural conditions that jeopardise their physical safety, emotional health or security. For much of the day, a school can provide safety and security, if it is a *healthy* place, as well as a place of learning.

As educators, parents, policymakers, and concerned community members, we can advance both education and health by creating health promoting schools. We can contribute to the child's whole development.

In addition consideration needs to be given to keeping all staff in the school safe and well. Opportunities to improve the organisation and management of the school can impact positively on the morale, self-esteem and stress levels of both teaching and non-teaching staff.

Health education as a cross-curricular theme

Health education is one of the educational (cross-curricular) themes in the Northern Ireland Curriculum. It seeks to:

- enable pupils to achieve their physical, psychological and social potential, and to improve their self-esteem;
- promote positive attitudes towards health;
- provide a sense of responsibility in respect of individual, family and community health;
- provide a knowledge-base and enable pupils to acquire an understanding of this knowledge and the skills to interpret it.

Since September 1992, schools have been legally required to ensure that the objectives of health education are promoted through their whole curriculum provision.

The inclusion of health education in the curriculum in this way highlights the value placed on health as a key issue in Northern Ireland.

As the objectives for health education concern both the cognitive and affective domains, schools will not be able to achieve them solely by the provision of health education within the classroom.

Many aspects of school life will be involved in their achievement and to this end the concept of a health promoting school which had been developed across Europe in recent years, has considerable significance.

The health promoting school

Health promotion in schools can be considered as a combination of health education and all the other actions which a school takes to protect and improve the health of those within it. It is a whole school approach to health.

The health promoting school is one in which the Board of Governors, staff and relevant agencies work together, in a planned way, to promote the health of everyone in the school community by:

- promoting the objectives of health education as a cross-curricular theme through the contributory subjects of the curriculum;
- ensuring that all aspects of school life, in addition to the formal curriculum, support positive health messages promoted in the classroom;
- encouraging the active involvement of the community and school health services and the wider community in the school's health education programme.

The interdependency of these three aspects is crucial to the success of the school as a health promoting setting. This was recognised in the proposals of the Ministerial Working Group for Health Education in Northern Ireland.⁷

“To ensure the successful outcome of classroom activity in the field of health education, two factors are particularly significant. These are the general atmosphere of the school and the active cooperation and support of the parents and the home.

“The quality of personal relationships in the school, the physical environment and the ‘hidden’ curriculum are crucial in achieving the aims of health education.

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“It is essential that these aspects, whether in relation to discipline, the condition of toilet and changing facilities, the food available in the tuck shop and the dining hall or the general attitude to safety in the school, do not conflict with the concepts, principles and presentation of health education in the classroom.”

“The supportive role of parents is vital throughout the pupils’ school career. The degree of interest of parents and the quality of the relationship between the school and the home may greatly influence the academic progress of a pupil, but perhaps to a greater degree, those affective aspects of development with which health education is so much concerned.”

Health Promoting Schools in Northern Ireland

From the early 1980s schools in Northern Ireland have had a long history of involvement in health education projects such as the 13-18 Schools Health Project, the National Nashers Programme and the My Body Project.

In the Western Board area a health promoting schools project has been established for a number of years. The project is based on each participating school completing a self-audit of health promotion activities and receiving support and feedback on developmental issues. One of the reasons for the project’s longevity and ongoing success is the unique health alliance forged between Environmental Health, Health and Education Boards and the business sector.

Guidelines

Following the introduction of health education as a cross-curricular theme, the Health Promotion Agency for Northern Ireland joined with the Northern Ireland Curriculum Council (now CCEA) to produce guidelines for schools to become health promoting. Copies of the guidelines were made available to all schools in 1994.⁸

The guidelines were aimed at helping schools to:

- develop as health promoting institutions which contribute to the health of everyone within the school community;
- develop an understanding of the processes involved in the teaching of, and learning about health-related issues;
- enhance their understanding of the nature of health education;
- develop a planned and coherent approach to the coordination, monitoring and evaluation of health education in the curriculum.

The European Network of Health Promoting Schools (ENHPS) Project in Northern Ireland

Following a recommendation from the conference, ‘The Promotion of Health’, held in Strasbourg in September 1990, the ENHPS project was jointly planned by three sponsors: World Health Organisation Europe (WHO), Commission of the European Community (CEC) and the Council of Europe (CE).

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The ENHPS is a research and development initiative involving almost 40 European countries, each supporting a network of pilot schools.

Twelve criteria were originally established for the project. Schools have helped to develop indicators for these criteria.

The UK officially joined the Network in 1993. Schools from England, Scotland, Wales and Northern Ireland, though with different educational structures, were involved in investigating ways in which they can contribute effectively to the health of pupils, staff and the wider school community through the development of a health promoting environment. Each country had its own procedures for the selection of schools, evaluation and the provision of support to individual school projects.

The ENHPS project in Northern Ireland provided the opportunity to obtain documentation on examples of good practice in our schools in achieving the criteria laid down for a health promoting school, and in further refining these criteria.

The ENHPS project had three phases:

Year 1: 1995/96 – primary schools including special schools with primary aged pupils.

Year 2: 1996/97 – post-primary schools including special schools with post-primary aged pupils.

Year 3: 1997/98 – dissemination of learning from the project.

- All schools were offered the opportunity to be selected to receive the small grant available to enable time for planning and action. In Year 1 eight schools volunteered to take part and in Year 2 sixteen schools volunteered.

- The project commissioned external evaluation and from the reports of both years two good practice publications have been produced and widely disseminated.
- The first publication relating to work in primary schools was launched and disseminated to primary schools in October 1997.¹⁰ The second publication, for Key Stages 3 and 4, was disseminated following a conference in May 1998.¹¹ All schools in Northern Ireland received the publication relevant to their Key Stages.

Participating schools provided:

- examples of good practice on a range of issues, such as self-esteem, drug education, sex education and environmental education;
- school policies on a range of issues;
- examples of whole school curricula;
- evaluation models.

The project provided:

- baseline information to each school on pupil health behaviour and on the status of health promotion in the school;
- a further refinement of the original 12 criteria to 8 criteria;
- training for teachers;
- reports of action for other schools;
- recommendations for supportive work to consolidate health promotion in schools in Northern Ireland.

Part of the supportive work recommended was to further develop indicators for the achievement of the criteria for a health promoting school. This information should then be made available to all schools in Northern Ireland.

The criteria for a health promoting school

Schools in Northern Ireland further refined the original 12 criteria for a health promoting school, and felt that the following eight criteria were most useful to them.

The criteria for a health promoting school are:

1. The health promoting school should provide a safe, secure and stimulating environment which encourages pupils to be health and safety conscious both in and out of school.
2. The health promoting school should actively promote pupils' self-esteem and self-confidence through the provision of opportunities to contribute widely to the life of the school, successfully enabling pupils to take initiatives, make choices and exercise responsibility for their own health and that of others.
3. The health promoting school should create a climate throughout the school in which good relationships, respect and consideration for others flourish, encouraging individuals to make a valuable contribution through their respective skills and personal qualities.
4. The health promoting school should formulate, implement and review regularly a range of health-related policies for staff and pupils which are in accord with the school aims, eg policies addressing issues such as nutrition, physical activity, substance misuse, bullying and smoking.
5. The health promoting school should plan and implement a coherent health education curriculum which complies with the statutory requirements and is accessible to all pupils.
6. The health promoting school should provide stimulating challenges for all pupils through a wide range of physical, academic, social and community activities.
7. The health promoting school should develop good liaison with parents/those with parental responsibility, other schools and the local community on a range of health-related initiatives.
8. The health promoting school should make effective use of appropriate and qualified outside agencies and specialist services to advise, support and contribute to the promotion of health, directly or through the curriculum.

Using this guide in school

The indicators of quality outlined in the Northern Ireland School Improvement Programme document, namely:

- the ethos of the school,
- the quality of teaching and learning,
- the quality of management,

and the evaluation framework outlined in the 'Health Promoting School: A Guide for Teachers' have been used in an attempt to highlight how these criteria for a health promoting school can assist schools in setting targets for improvement in relation to the wellbeing of the school community.^{1,8}

The following eight self-assessment grids, representing the eight criteria for a health promoting school give **examples** of indicators which would assist schools to assess how health promoting they are for the benefit of staff and pupils. The increasing use of self-evaluation approaches in schools depends on indicators to establish a baseline from which improvement can be measured.

The examples listed as evidence of ethos, teaching and learning, and management are by no means an exhaustive list and should be used only as prompts for self-assessment. It is recognised that evidence indicators will vary to some degree from school to school and from primary to post-primary level, and that schools may develop their own.

In 1998 teachers in the North Eastern Education and Library Board area tested these self-assessment grids during two in-service courses for primary and post-primary schools.

Teachers found the following method a useful process to assist planning. It is offered here as a means of helping in-school debate on the issues.

1. Photocopy the blank sheets outlining the eight criteria for a health promoting school (Appendix 1).
2. Ask teachers to provide examples of evidence indicators using the headings linked to each criteria.
3. Record their collective views.
4. Use the examples provided (pages 11-18) in the guide to compare ideas.
5. Identify the school's strengths or weaknesses in the areas identified.
6. Use the 'Action Plan for furthering the health promoting school' sheets in Appendix 2 to prioritise action to improve identified weaknesses. These sheets could be photocopied to A3 size to allow sufficient space for recording.

Self-Assessment Grid: The Health Promoting School

1. 'The health promoting school should provide a safe, secure and stimulating environment which encourages pupils to be health and safety conscious, both in and out of school.'

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • a welcoming reception area; • an orderly atmosphere around the school, particularly at breaks and change of lessons; • availability of a range of healthy foods and drinks in the school. Discouragement of the use of sweets as rewards; • consideration of changes that could be made to the tuck shop and/or vending machines; • playground markings used, both to encourage activity and to enhance their environment; • a school environment free of graffiti and litter; • pupils' work on display. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • pupil involvement in the creation of posters and signs relating to health and safety; • safety education for pupils; • displays of pupils' work relating to health issues; • anti-litter and recycling projects; • encouraging pupils to become involved in extra-curricular physical activity; • a personal safety programme. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • a regular audit of health and safety procedures relating to the internal and external environment of the school including checks on: <ul style="list-style-type: none"> – use of crossing patrols, pedestrian subways etc by pupils; – control of speed of vehicles within school grounds; – safety of all school equipment and facilities; – evacuation procedures in case of emergencies; – availability of member(s) of staff possessing current first aid certificate; – first aid equipment, location, stock etc; – procedures for the identification of and appropriate action relating to unauthorised persons on school premises; – maintenance of toilet and changing room facilities; – an orderly atmosphere around the school particularly at breaks and change of lessons. • a no-smoking policy; • directional signage; • risk assessment procedures.

Self-Assessment Grid: The Health Promoting School

2. ‘The health promoting school should actively promote pupils’ self-esteem and self-confidence through the provision of opportunities to contribute widely to the life of the school, successfully enabling pupils to take initiatives, make choices and exercise responsibility for their own health and that of others.’

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • pupils keen and motivated to come to school; • efforts made to encourage maximum attendance; • an effective system of pastoral care; • pupils feeling encouraged by teachers, that their views are taken into account, and that the school is concerned about their health and wellbeing; • pupils being consulted and involved in the decision-making process for behaviour-related policies, eg school or year councils, bullying forum; • emphasis on home/school liaison. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • pupils participating actively in class work, extra-curricular activities and in the design and delivery of specific health-related activities; • active teaching and learning methods; • a range of activities/opportunities to help pupils develop self-worth and confidence, eg working in the community, as guides for visitors; • skills teaching in problem-solving, personal protection, communication, decision-making, interpersonal relationships and coping with stress and emotions; • regular feedback provided to pupils to encourage personal development. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • a used and appreciated pastoral care system; • an effective system of rewards and sanctions; • a policy for dealing with bullying; • a policy for the integration of pupils with learning difficulties and physical disabilities where appropriate; • non-academic award bearing activities open to all pupils, eg local schemes, Duke of Edinburgh.

Self-Assessment Grid: The Health Promoting School

3. ‘The health promoting school should create a climate throughout the school in which good relationships, respect and consideration for others flourish, encouraging individuals to make a valuable contribution through their respective skills and personal qualities.’

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • commitment by Governors and senior management to the concept of a health promoting school; • pupils being treated with respect by staff; • staff being treated with respect by pupils; • an effective system of pastoral care; • involvement of non-teaching staff in the life of the school; • involvement of those with parental responsibility in the life of the school; • good relationships between staff members, between management and staff, and between pupils. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • a spiral curriculum related to understanding and developing interpersonal and intrapersonal relationship skills; • group work and informal methods of teaching and learning. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • a used and appreciated pastoral care system; • consultation with staff on health promoting strategies for themselves, as well as for pupils; • organisational procedures and management strategies designed to recognise and reduce stress; • effective internal and external communication systems; • sufficient status given to the subjects such as Personal and Social Education, Religious Education, Education for Mutual Understanding, Physical Education, Home Economics which contribute to this indicator.

Self-Assessment Grid: The Health Promoting School

4. 'A health promoting school should formulate, implement and review regularly a range of health-related policies for staff and pupils which are in accord with the school aims, eg policies addressing issues such as nutrition, physical activity, substance misuse, bullying and smoking.'

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • a school development plan which actively promotes health-related policies; • encouragement of all staff to contribute to and be involved in the development and review of health-related policies; • health-related policies in action in the environment, and in the behaviour of staff and pupils. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • school health-related policies being reinforced through curriculum activities. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • policies being implemented and reviewed effectively; • all staff (teaching and non-teaching) aware and involved in the development and implementation of what the school is trying to achieve through its health-related policies; • pupils' families aware of school health policies; • Board of Governors and outside agencies aware of school health policies; • consideration of the effect of health policies on other school policies, for example: <ul style="list-style-type: none"> – drugs, – special needs, – discipline, – anti-bullying, – medication in schools, – personal protection; • collaboration with school meals staff.

Self-Assessment Grid: The Health Promoting School

5. ‘The health promoting school should plan and implement a coherent health education curriculum which complies with the statutory requirements and is accessible to all pupils.’

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • sensitivity to the range of cultural, religious and social values and beliefs of the pupils; • communication with parents about the school’s health education curriculum. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • the existence of a spiral health education curriculum, the teaching of which is coordinated across departments and year groups, and incorporating the personal and social education and personal protection programme, with special attention being paid to the needs of pupils with learning difficulties; • the use of appropriate teaching methods and resources in the delivery of the health education curriculum; • a regular review of provision to develop the curriculum; • teaching resources for health identified and accessible; • all teaching staff involved having a common understanding of the aims and objectives underpinning the health education curriculum; • surveys of pupils’ awareness, needs and behaviour in relation to health; • teachers making effective use of data from local pupils surveys, as well as regional data. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • active support of senior management for the coordination of the curriculum in the school; • a school planning team for health education in the curriculum; • planning for staff development and training for health education; • support for teachers by way of policy in relation to the handling of sensitive issues; • a health education programme which is regularly monitored and shows progression and continuity across year groups and ability groups including provision for pupils with special needs; • school based In Service Training on health and personal protection issues for whole staff.

Self-Assessment Grid: The Health Promoting School

6. ‘The health promoting school should provide stimulating challenges for all pupils through a wide range of physical, academic, social and community activities.’

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • provision of a range of health-related curricular and extra-curricular activities and experiences for pupils of all abilities, for example: <ul style="list-style-type: none"> – Education for Mutual Understanding projects, – youth club links, – European links, – Duke of Edinburgh awards, – cycling proficiency, – Internet use, – sports and arts. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • opportunities to engage in such activities being known and accessible to all pupils; • active participation of pupils in these activities. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • review of provision; • arrangements for the appropriate recognition of achievement in these activities; • resource provision.

Self-Assessment Grid: The Health Promoting School

7. ‘The health promoting school should develop good liaison with parents/those with parental responsibility, other schools and the local community on a range of health-related initiatives.’

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • parents being informed of the school’s health education curriculum and health-related policies; • parents being consulted on ‘sensitive’ issues, eg Relationships and Sexuality Education (RSE), Child Protection; • parents being invited to health-related activities in the school; • close links with other schools in the locality; • partnerships or links with a range of relevant organisations. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • curriculum activities which enable pupil/school participation in environmental concerns; • participation in local, regional and international health initiatives; • activities which encourage use of leisure and recreation facilities in the community. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • the encouragement of local groups linked to child health and health organisations to associate with school activities; • involving and encouraging the local community in the school’s health initiatives, eg through the use of local media, displays at community events or school open days; • links between schools at transfer from Key Stage 2 to Key Stage 3 ensuring that health-related learning forms part of the induction process to the next key stage, and that prior learning is built upon; • staff with special responsibility for health education and personal protection being deployed effectively and understanding fully their duties to the pupils, parents, other staff and to their employers and relevant external agencies; • The requirements of DENI Circular 1997/4 – Pastoral Care: Child Protection are fully met.

Self-Assessment Grid: The Health Promoting School

8. ‘The health promoting school should make effective use of appropriate and qualified outside agencies and specialist services to advise, support and contribute to the promotion of health, directly or through the curriculum.’

The ethos of the school	The quality of teaching and learning	The quality of management
<p>Evidence of:</p> <ul style="list-style-type: none"> • collaboration and partnership with appropriate and qualified outside agencies on children’s health. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • involvement of appropriate and qualified outside agencies and specialist services in: <ul style="list-style-type: none"> – the planning and design of health promoting activities of the school or special health events; – agreed elements of in-service training of staff; – provision of school resources; – provision of agreed elements of curriculum delivery according to school standards; • involving pupils in designing and evaluating visitor input to curricular activity. 	<p>Evidence of:</p> <ul style="list-style-type: none"> • school guidance on the use of appropriate and qualified outside agencies and specialist services taking into account relevant ELB and DENI guidance.

Conclusion

It is hoped that this guide will contribute to the processes of self-evaluation and self-improvement in schools. The movement towards making schools healthy places supports not only the health of staff and pupils, but also the objectives of health education as a cross-curricular theme which cannot be achieved by the curriculum alone.

This guide is aimed at raising the levels of health promotion in schools and thus developing the knowledge, attitudes and skills of children and young people so that they can gain increasing control and influence over their own health and that of others.

The school itself should be a 'healthy and supportive environment' which promotes effective learning in all areas of the curriculum as well as through good and secure relationships between staff and pupils, and among pupils. School buildings and grounds should be 'safe, secure and stimulating', and promote in pupils a strong sense of interest and pride.

When these are developed with commitment by teachers and pupils, the school will become a health promoting school. Without doubt, the regular and systematic use of this guide by teachers, individually and collectively, will enable a school not only to raise its level of health promotion but also to contribute significantly to the health of its pupils.

References

1. Department of Education, Northern Ireland. School Improvement: The Northern Ireland Programme. Belfast: The Stationery Office, Northern Ireland, 1998.
2. Department of Health and Social Services. Health and Wellbeing: Into the Next Millennium. Regional Strategy for Health and Social Wellbeing 1997-2002. Belfast: DHSS, 1996.
3. Boreham CAG, Savage JM, Primrose ED at al. Coronary Risk Factors in School Children. Archives of Disease in Childhood 1993, 68, 182-186.
4. Health Promotion Agency for Northern Ireland. The Health Behaviour of School Children in Northern Ireland. A report on the 1994 survey. Belfast: The Health Promotion Agency for Northern Ireland, 1995.
5. World Health Organisation, Health and Welfare, Canada, Canadian Public Health Association. Ottawa Charter for Health Promotion. Copenhagen: WHO Regional Office for Europe, 1986.
6. Department of Health and Social Services. Well into 2000: A Positive Agenda for Health and Wellbeing. Belfast: DHSS, 1997.
7. Report of the Cross-Curricular Working Group on Health Education to the Parliamentary Under Secretary of State for Education. Belfast: 1989.
8. NICC/Health Promotion Agency for Northern Ireland. The Health Promoting School: A Guide for Teachers. Belfast: NICC, 1994.
9. WHO EURO, CEC, CE. The European Network for Health Promoting Schools. A joint WHO/EURO Communication of the European Communities and Council for Europe Project. Copenhagen: WHO, 1993.
10. Health Promotion Agency for Northern Ireland. The European Network of Health Promoting Schools in Northern Ireland: Examples of Good Practice in Health Promotion, Key Stages 1 and 2. Belfast: The Health Promotion Agency for Northern Ireland, 1997.
11. Health Promotion Agency for Northern Ireland. The European Network of Health Promoting Schools in Northern Ireland: Examples of Good Practice in Health Promotion, Key Stages 3 and 4. Belfast: The Health Promotion Agency for Northern Ireland, 1998.

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Appendix I

Blank Self-Assessment Grids

Self-Assessment Grid: The Health Promoting School

1. 'The health promoting school should provide a safe, secure and stimulating environment which encourages pupils to be health and safety conscious, both in and out of school.'

The ethos of the school	The quality of teaching and learning	The quality of management

Self-Assessment Grid: The Health Promoting School

2. 'The health promoting school should actively promote pupils' self-esteem and self-confidence through the provision of opportunities to contribute widely to the life of the school, successfully enabling pupils to take initiatives, make choices and exercise responsibility for their own health and that of others.'

The ethos of the school	The quality of teaching and learning	The quality of management

Self-Assessment Grid: The Health Promoting School

3. 'The health promoting school should create a climate throughout the school in which good relationships, respect and consideration for others flourish, encouraging individuals to make a valuable contribution through their respective skills and personal qualities.'

The ethos of the school	The quality of teaching and learning	The quality of management

Self-Assessment Grid: The Health Promoting School

4. 'A health promoting school should formulate, implement and review regularly a range of health-related policies for staff and pupils which are in accord with the school aims, eg policies addressing issues such as nutrition, physical activity, substance misuse, bullying and smoking.'

The ethos of the school	The quality of teaching and learning	The quality of management

Self-Assessment Grid: The Health Promoting School

5. 'The health promoting school should plan and implement a coherent health education curriculum which complies with the statutory requirements and is accessible to all pupils.'

The ethos of the school	The quality of teaching and learning	The quality of management

Self-Assessment Grid: The Health Promoting School

6. 'The health promoting school should provide stimulating challenges for all pupils through a wide range of physical, academic, social and community activities.'

The ethos of the school	The quality of teaching and learning	The quality of management

Self-Assessment Grid: The Health Promoting School

7. 'The health promoting school should develop good liaison with parents/those with parental responsibility, other schools and the local community on a range of health-related initiatives.'

The ethos of the school	The quality of teaching and learning	The quality of management

Self-Assessment Grid: The Health Promoting School

8. 'The health promoting school should make effective use of appropriate and qualified outside agencies and specialist services to advise, support and contribute to the promotion of health, directly or through the curriculum.'

The ethos of the school	The quality of teaching and learning	The quality of management

Appendix 2

Action Plan for furthering the health promoting school

Action Plan for furthering the Health Promoting School

1. 'The health promoting school should provide a safe, secure and stimulating environment which encourages pupils to be health and safety conscious, both in and out of school.'

Area for improvement	Action required	Priority	When?	Who to consult?	Resources needed?	Success indicators	Monitoring & evaluation
	Ethos: Teaching & learning: Management:						
	Ethos: Teaching & learning: Management:						
	Ethos: Teaching & learning: Management:						

Action Plan for furthering the Health Promoting School

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Action Plan for furthering the Health Promoting School

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Action Plan for furthering the Health Promoting School

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Action Plan for furthering the Health Promoting School

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Action Plan for furthering the Health Promoting School

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Action Plan for furthering the Health Promoting School

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	Ethos: Teaching & learning: Management:						