

How good
is our school?
The Child at the Centre

SELF-EVALUATION SERIES

The Health Promoting School

The Role of Local Authorities and their Partners

HMIe

improving Scottish education

The **Health Promoting School**

The Role of Local Authorities and their Partners

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1. The role of local authorities and their partners: the context

To become effective health promoting establishments which achieve the maximum impact on children, young people and families and on the local community, schools and pre-school centres need to operate within a strategic framework developed at the highest levels within their local council and community area.

Effective councils are committed to promoting health. They have high expectations of what establishments can achieve. They provide the practical support that is essential for effective health promotion. It is their responsibility with all their key partners¹ to establish a strategic framework within which joint working can flourish. The development of health promoting schools requires local authorities to establish integrated processes for assessing needs, for service planning and for monitoring and evaluation. It is not enough for individual establishments and community groupings to develop effective partnerships at an operational level. To achieve sustainability and measurable impact, partnership projects need to be built into strategic planning at the highest levels and rigorously monitored through the authority's structures for accountability. Both continuous improvement and the innovation or step change which is often needed to achieve the greatest impact require a clear vision of what can and should be aimed for and achieved, as well as decision-making and commitment of resources at the highest corporate levels.

Local authorities and key partners need to ensure that the development of health promoting schools is embedded in service planning, school planning and community planning. They need to establish clear links between initiatives and demonstrate how each initiative contributes to the development of health promoting establishments and consequently to better health outcomes for children. Similarly, effective health promoting schools provide important contributions to many other local and national initiatives. Local authorities and key partners themselves need to model the practice they expect to see in establishments by promoting and supporting the health of centrally deployed staff and making clear to establishments their responsibilities for doing the same within their own contexts.

A central role of each local authority and its key partners is to secure and sustain cohesive and meaningful partnerships among the key agencies involved in developing health promoting schools and improving the health and well being of local communities. Promoting improvements in health and reducing health inequalities are priorities for community planning across Scotland. These priorities are reflected in joint plans and joint action for health improvement. It is vitally important that local authorities and key partners work together at the strategic, decision-making level to encourage and support this process. The commitment of elected members is essential in directing and encouraging community planning and involvement.

¹ The partners of local councils in promoting the health of children, young people and their families will include the National Health Service (NHS), Community Health Partnerships, School Nursing Service, Health promotion departments, voluntary organisations and a range of other agencies. The term 'partners' is used to refer to these and other such bodies throughout this document.

Features of effective partnership working include:

- gaining, encouraging and securing the commitment of key partners;
- establishing a culture which encourages people to be involved and seeks and respects their views;
- demonstrating strong leadership by identifying for establishments and key partners the values, aims and key characteristics of health promoting pre-school centres and schools;
- showing commitment to the development of a common understanding of health and health promotion among the local authority, educational establishments and partner agencies;
- promoting an integrated approach to the development and maintenance of health promoting pre-school centres and schools;
- agreeing and establishing the structures for planning, implementation and evaluation for use at corporate and service level, within educational establishments, and within community plans and plans developed with other key agencies;
- establishing partnership structures and seeking opportunities for sharing expertise and resources; and
- working together strategically to influence the key factors which have an impact on the health of the community.

Local authorities, their partners and educational establishments may wish to consider the following issues relating to the key characteristics of health promotion.

2. How good is the strategic leadership of health promotion within the local area?

Key Characteristic: Leadership and management

- To what extent does the local council both present a convincing vision of health promotion, agreed and shared with its key partners, and also communicate this vision effectively to schools and pre-school centres?
- To what extent do elected members, the chief executive, heads of council services and senior managers not only acknowledge and accept their strategic leadership roles in health promotion but also demonstrate their commitment through their own active involvement?
- How clear are the links between priorities and targets for health promotion at the various levels of planning (for example, community plans, Children's Service Plans, educational improvement plans, plans for individual services and development plans for educational establishments²)?
- To what extent can the contributions of individual projects to the overall council and community strategy for health promotion be clearly demonstrated?
- How successful is the council in arriving at agreed shared expectations with its partners about the role of educational establishments in health promotion, and in communicating these expectations to pre-school centres, schools and other key stakeholders?

² Links with the plans of partner agencies are also important.

3. How good is the operational management of health promotion?

Key Characteristic: Partnership working

- To what extent is integrated working among council services and key partners established at strategic level and monitored at operational levels to ensure that it has a positive impact on the health of the community?
- What active steps have council and community leaders taken to involve key stakeholders in planning, delivering and evaluating health promotion activities, and how successful have they been?

Key Characteristic: Environment, resources and facilities

- To what extent has the council's support for health promotion activities achieved best value in the use of resources and long-term sustainability?

4. How good is the delivery of key processes for health promotion?

Key Characteristic: Curriculum, learning and teaching

- How good is the training and support provided for staff from schools and pre-school centres on health education and health promotion?
- To what extent does the council engage partner agencies in the planning, delivery, monitoring and evaluation of health education and promotion?
- How good is the training and advice given to educational establishments about the need for their provision to take account of the range of social, ethnic, religious and cultural backgrounds?

Key Characteristic: Personal, social and health education programmes

- How clear and practical are the council's policies and guidelines on care and welfare, including child protection, and how well supported are they by joint training of all the staff involved in health education and promotion?
- How good is the guidance for educational establishments on developing programmes which enable children and young people to explore the key issues that have a bearing on their health and well-being?
- What support for extra-curricular activities fostering health and well-being does the council provide in partnership with voluntary organisations and other agencies, and how good are any centrally-provided activities?
- To what extent does centrally-provided advice on health education and health promotion programmes take account of local health and social issues?

Key Characteristic: Ethos

- To what extent does the council with its key partners encourage and demonstrate an inclusive ethos in its approaches to health promotion?
- What opportunities does the council with its key partners provide for parents/carers to contribute to the development of approaches to health education and promotion?
- How good is the council with its key partners at harnessing community resources, including contributions from voluntary agencies and adult support groups, to prepare pupils with additional support needs for healthy independent living after leaving school?
- How good is the council with its key partners at helping vulnerable families to access support services?
- How good is the council with its key partners at helping educational establishments, children, young people and families overcome potential barriers to health and well-being caused by their geographical location or social context?

5. What is the impact of the council's strategies for health promotion on the values, attitudes and behaviour of children, young people and families?

- What mechanisms does the council with its key partners use to measure the impact of its health promotion policies and initiatives on children, young people and their families, and what evidence is there that these policies and initiatives are working?
- What impact have health education and health promotion activities had on the views and attitudes of children, young people and their families towards health issues?

6. What are the key performance outcomes of the council's strategy for health promotion?

- What measurable outcomes for health has the council with its key partners set in its corporate and service plans and within the relevant aspects of community and Children's Services plans?
- To what extent have these measures been agreed with key partners?
- What statistical evidence is there that the health of children and young people in the local area is improving?

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