

Investment for Health Action Plan Template

Objective 2 Education

Version

1

Last Updated

8/7/03

Section 1 – Context

The health and well-being of children and young people are affected by a broad spectrum of social, economic and cultural influences. There are wide variations in the health status of young people across the East Midlands. These differences are present at birth and without intervention are likely to continue throughout life.

There is clear evidence of a strong correlation between education attainment and current and future health status. Research with 100 LEA's found a significant association between attainment at 15/16 years and coronary heart disease and infant mortality. Educational qualifications are a determinant of an individual's labour market position, which in turn influences income, housing and other material resources. Education also enhances social capital, preparing children with practical and social skills to play a part in wider society (Acheson). Programmes aimed at raising education attainment and the adoption of educational targets as a proxy health inequalities measure provides a valuable way of linking health and educational agendas.

The provision of a health-promoting ethos and environment from the years in pre-school and school education can influence and encourage the formation of good habits and protective behaviours that may endure into adult life. Children who do well in education tend to report healthier behaviour in adult life in relation to diet, smoking and exercise. Investing in child-centred strategies therefore has the potential to yield both immediate and long term benefits.

The promotion of healthy school programmes, especially in disadvantaged areas is identified in the Acheson Report (1998) and the Cross-Cutting Review (2002) as a key Government strategy contributing to tackling health inequalities. The National Healthy School Standard has the target of working with all schools with more than 20% of its school population eligible for free school meals, thus providing more support in areas of highest deprivation.

Programmes providing opportunities for young people to develop personal and social skills alongside teaching and learning about specific health topics are proven to be most effective. Focusing on increasing healthy eating and physical activity will contribute to other public health targets and reduce the numbers of overweight and obese children. Working on issues such as substance misuse and tobacco and alcohol education will support Tackling Drugs, reduce coronary heart disease and strokes. A comprehensive programme of sex and relationships education underpins the preventative work of the Teenage Pregnancy Strategy. The work on safety and school travel plans will encourage physical activity and reduce accidents. The contribution to the emotional health and well-being of children will impact significantly on the numbers currently developing mental health problems and requiring referral to CAMHS teams.

All children need to have access to high quality health promotion programmes. This will require partnership working with those specialising in early years e.g. nursery and SureStart programmes and those working in Higher and Further Education.

Section 2 – Stakeholder needs and expectations

Stakeholder involvement and commitment will be central to the development of a Regional Education Action Plan.

A Healthy School East Midlands Regional Network already exists. Each local programme is working within the National Healthy School Standard to recruit and support the schools having 20% or more free school meals. The quality of provision is assured through moderated self-review, regular monitoring and sampled re-assessment.

Programmes of health promotion in pre-school and post-16 settings are more varied in quality and quantity.

A key action to realise this objective will be to identify and engage with a range of stakeholders across the region. This will help us to understand the current position more clearly and to adopt appropriate and achievable targets.

We hope the stakeholders for pre-school may include Early Years Forums, Sure Start, Home Start, Neighbourhood Nurseries etc. For the 16 plus age group stakeholders will be further and higher education, New Start, Connexions and Pupil Referral Units.

We hope to identify ways of consulting and involving young people in planning, delivery and monitoring. There will be a particular emphasis on involving those who work with vulnerable groups or deprived communities

Section 3 – (Education) Action Plan

Please note: To help you keep entries in the template lined up with one another it is highly recommended that you use a separate row for each **activity**. You will therefore need to insert additional rows as necessary. The template has been set up so that rows will break over pages and each new page should have the column headings.

Investment for Health Objective	Number / priority	Tasks	Resources required & Major risks	By when	Targets and Measures	Lead Responsibility	Review Monthly / quarterly / etc.
Education	Objective 2	Regional Meeting of all local programme co-ordinators, Regional Adviser		March 03 & June 03	Local Action Plans and deliver stepped targets re recruitment of 20%+ free school meals schools for all local Healthy School Programme	Janet Flett	Quarterly
Education	Objective 2	Identification of key stakeholders	Requires co-operation and support from others	May 03 July 03	Local programmes feedback All key stakeholders identified	Janet Flett	Quarterly
Education	Objective 2	Meet with HDA Regional Director, Regional NHSS Adviser and Ass. DPH (Region)		July 03	Actions clarified Role agreed	Janet Flett	Quarterly
Education	Objective 2	Organise regional stakeholder conference	£2,500 Conference depends on funding	December 03	Funding secured Conference held Key objectives identified	Janet Flett	
Education	Objective 2	Regional Action Plan developed informed by key objectives from conference		March 04		Janet Flett	Year End
Education	Objective 2	Monitor engagement and progress of targeted schools	Standard Fund Availability	Ongoing	Local NHSS programmes meeting stepped targets	Janet Flett	Quarterly

Created on 3/12/03 11:32 AM