



**your
choice**

to healthy living

Highland Council and NHS Highland



**do
roghainn-sa**
beatha fhallain



implementation plan 2005/06
plana-gnìomh 2005/06

Background

This plan is a joint health improvement initiative that is currently active across Highland.

NHS Highland and The Highland Council have in partnership developed this 40 point implementation plan that covers a wide range of health improvement activities. A significant section of the plan embodies the implementation of 'Hungry for Success' the Scottish Executive's national policy on improving school meals. Hungry For Success (HFS) is the first step on a long journey of revitalising the school meal service, encompassing a whole school approach to food in all schools in Scotland. The Health Promoting Schools initiative is also embedded within 'Your Choice' and is seen as key contributor in building health promoting capacity in all Highland schools and communities.

The plan originated in February 2003 and was based on a paper produced by The Highland Council Director of Education, Culture and Sport, Bruce Robertson, as a direct result of the Scottish Executive's, 'Towards a Healthier Scotland' 1999. The plan has been regularly updated to provide further challenging targets as we build on the success of the original plans and work with schools and communities to achieve positive outcomes for children and young people.

'Your Choice to Healthy Living' features many of the key outcome targets for children and young people that have been set in the multi-agency service plan, 'For Highland's Children 2 (FHC2)' and the Joint Health Improvement Plan 2004/07. It is recognised that there are a wide range of plans in existence and where possible this has been cross-referenced. FHC2 has seven themes that have been developed to ensure that all Highland Children and young people are valued because they are:

- Safe
- Nurtured
- Healthy
- Achieving
- Active
- Respected & responsible
- Included

These seven cross-cutting themes underpin the 'Your Choice to Healthy Living' – implementation plan which ultimately aims to contribute to the Joint Committee on Children and Young People's aim to ensure that 'all Highland's children have the best possible start in life, enjoy being young and are supported to develop as confident, capable and resilient, to fully maximise their potential.

The title and logo for 'Your Choice' originated from a group of young people from three Highland Schools. When asked about health and fitness they stated that people young and old were always being told what to do about health and they felt it should be 'your choice to healthy living'. Thus the title was adopted and through working with a design company the logo was produced that accompanies the 'Your Choice' theme. It features on school menus, leisure centres, museums, websites and newsletters.

If you have any suggestions or comments on the Implementation Plan please contact:

Louise Thomas
Health Promoting Schools
Development Manager
NHS Highland & Highland Council
NHS Highland
Assynt House
Beechwood Park
Inverness
IV2 3HG

Telephone Numbers:
01463 704959
(NHS Highland – Monday,
Tuesday and Friday)
01349 868223
(Highland Council ECS Quality
Development Team –
Wednesday, Thursday).

This plan is monitored by the multi-agency group: 'Your Choice – Health Action Group', which meets six times per year. A wider focus group meets biannually to ensure consultation with all stakeholders and partner agencies.



Contact List for Lead Professionals

Name	Job Title	Organisation	Telephone No.
Alan Clark	Active Schools Manager	Highland Council	01349 868616
Alan Richards	Parent Programme Development Officer	NHS Highland	01463 711176
Bill Alexander	Head of Children's Services	Highland Council/NHS	01463 702870
Cath King	Health Improvement and Community Safety Officer	Highland Council	01463 702139
Cathie Lush	Clinical Dental Manager	NHS Highland	01463 706841
Cathie Way	Integrated Risk Project Co-ordinator	Fire Service	01463 227180
Cathy Steer	Health Promotion Manager	NHS Highland	01463 704945
Charles Stephen	Integration Manager	Highland Council	01349 867801
Colin MacAulay	Integration Manager	Highland Council	01463 663825
Dave McCartney	Quality Development Officer	Highland Council	01349 868220
Dave Rex	Child Health Lead Dietician	NHS Highland	01463 701314
Donalda Williams	Catering Services Manager	Highland Council	01463 251301
Fiona Clarke	HP Specialist Food & Nutrition	NHS Highland	01463 704905
Fiona Timmins	Healthy Hearts Coordinator	Highland Council	01445 781394
Graham Watson	Community Development Manager	Highland Council	01463 702050
Ian Murray	Head of Community, Learning and Leisure	Highland Council	01463 702048
Innis Mitchell	Integration Manager	Highland Council	01408 622060
Irene McCulloch	Health Screening Nurse	NHS Highland	01463 703093
Jane Groves	Health Promotion Manager	NHS Highland	01463 704945
Janet Williams	HP Specialist Smoking Cessation	NHS Highland	01463 704980
Jean MacKay	Project Coordinator – Janny's Hoose	Highland Council	01463 226348
Jermaine Allison	HP Specialist Mental Health & Physical Activity	NHS Highland	01463 704805
Julia Nelson	Health Development Officer	Highland Council	01463 711176
Lisa Graham	Road Safety Officer	Highland Council	01463 702690
Liz Stephenson	Public Health Practitioner Mid Highland CHP	NHS Highland	01397 709864
Lorraine Mann	HP Specialist Sexual Health & Young People	NHS Highland	01463 704937
Louise Thomas	Health Promoting Schools Development Manager	Highland Council/NHS	01463 704959
Malina McDonald	Play Development Officer	Highland Council	01463 711176
Margaret Kinsella	Integration Manager, Lochaber, Nairn, B & S	Highland Council	01479 812966
Margaret Walker	Public Health Practitioner South East CHP	NHS Highland	01667 493734
Miles Greenford	Public Health Practitioner North CHP	NHS Highland	01955 605128
Miranda Fraser	Oral Health	NHS Highland	01349 868779
Norma Murray	Catering and Cleaning Manager	Highland Council	01463 702045
Pablo Mascarenhas	Principal Youth Development Officer	Highland Council	01463 702026
Pauline Chapman	Policy Officer	Highland Council	01463 702063
Rosanna Proudlock	Education Home Worker	Highland Council	01381 621929
Sally Amor	Child Health Commissioner	NHS Highland	01463 704819
Sam Brogan	Senior Childcare & Family Resource Officer	Highland Council	01463 711176
Susan Russell	Public Health Practitioner Mid Highland CHP	NHS Highland	01349 863313
Suzy Calder	Substance Misuse Strategy & Implementation Manager	HDAAT	01463 704907

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Action	Standard/target	Strategy	Who must take action	Monitoring mechanism
	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
1 Improve the oral health of children and young people.	FHC2, Healthy, 16. Increase the number of 5yr olds free of dental caries. Decrease the mean DMFT for 12 yr olds. Increase the percentage of under 18's under the care of an NHS dentist.	HPS Development Manager to liaise on strategic developments with clinicians and consultants. Increased tooth brushing in nursery and primary schools through "Adventures in Food Land" and oral health education. Promote dental registrations. Two levels of School Nutrition Action Group (SNAG) training provided by Health Promoting Schools team, SNAG training will incorporate oral hygiene at both levels.	Head Teachers. HPS Development Manager. Oral Health Education Co-ordinator.	Your Choice Health Action Group. For Highlands Children 2.
2 Decrease the number of young people aged 12-15 engaging in drug, alcohol and substance misuse	FHC2, Healthy, 17, 18 & 19. Reduce the proportion of 13-15 yrs olds self-reporting using alcohol in the last week. Reduce the proportion of 13-15 yrs olds self-reporting smoking regularly each week. Reduce the proportion of 13- 15 yrs olds self-reporting using drugs in the last month.	Youth Action Teams continued to be enhanced to ensure pan-Highland services. Work in schools: introduce new teaching materials; revise Drugs Misuse Incidents Policy; extend drama work to include alcohol; provide in-service in liaison with SAD; experiential training in Secondary Schools in next 18 months; extend current drugs education secondment. In Secondary schools, the STNX project will be recommended to schools not currently participating. Substance Misuse Strategy.	Health Education Co-ordinators. Guidance/PSE staff. Youth Workers. Quality Development Officer. Smoking Cessation Strategy Officer. HPS Development Manager. Substance Misuse Strategy & Implementation Manager.	Your Choice Health Action Group. For Highlands Children 2. Drug and Alcohol Action Team. Local Area Drug & Alcohol Forum. Local Health Improvement Groups.

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3 Reduce the pregnancy rates of 13-15 year olds.	FHC2, Healthy, 20. Sustain a downward trend in the number and rate/1000 of teenage pregnancies.	‘SHARE’ training Additional funding for clinical sessions by Brook Work in schools: Extend SHARE training to all schools; Provide teaching materials and training for upper primary; Conduct pilot project involving school medical service and parents Walk the Talk initiatives into schools; New Sexual Health Strategy.	Health Education Co-ordinators. PSE/Guidance staff. School Nurses. Youth Workers. Brook Advisory centre. Health Promotion Specialist. Sexual Health & Young People. HPS Development Manager.	For Highlands Children 2. Highlands Sexual Health Strategy. Local Sexual Health Forums. Quality Development Team. Your Choice Health Action Group.
4 Schools to achieve Health Promoting School status.	FHC2, Healthy, 22. Ensure that all schools achieve health promoting status by the end of December 2005 and undertake continuous improvement thereafter. 126 (57%) of schools (out of 222) officially recognised as being a Health Promoting School, with at least another 30 schools with visits pending in the autumn of 2005.	Revise the current HPS Toolkit and accreditation system for schools and establishments so that it conforms to emerging national guidelines. Provide support to schools and establishments in the form of training and development projects to meet identified need. Provide support to schools and establishments in the form of dedicated HPS officers working in partnership with agencies and individuals in the community. Review PSE provision in schools and establishments and make recommendations for improvement. Information and school accreditation reports to be disseminated to stakeholders. Hungry For Success specific feedback to be presented to NAG/Catering & Cleaning Manager.	Head Teacher. School Nurse & Health Visitors. 2.5 WTE Health Promoting Schools Development Officers (Posts currently vacant). HPS Development Manager. Quality Development officer. Health Promotion Department Manager. Integration Managers. Public Health Practitioners.	For Highlands Children 2. Your Choice Health Action Group. Scottish Health Promoting Schools Unit.

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	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
5 Increase participation in sports, arts and cultural activities.	FHC2, Active, 31 & 32. Initiate a cultural pledge for school age children as a result of 2007, the year of Highland Culture. Increase the numbers taking part in sports and cultural activity by 3% maintaining the balance of participation across the population. Increase the proportion of 13-17 yrs olds taking part in sport in addition to the school curriculum more than once a week.	<p>HOF Out of School Hours Activity Programme Eight programmes, covering the whole Highland area, have now commenced. These include a mix of sport, outdoor activities, dance, physical theatre and non contact martial arts.</p> <p>NOF Active Steps Programme (using PE and sport as diversionary activity across Highland). Recruitment completed. Each of the Active Steps projects have made a presentation to the Youth Action Service Managers Group in Highland to promote the programme and to discuss referral processes. NCH Scotland have run their first 'taster session' within the Positive Options programme. Approval process took longer than expected and project approval was not finalised until end of July 2003. A Thematic Group has been set up for each to oversee the delivery of the programme. The first detailed monitoring report on progress from each component of projects is due 7/12/ 03. Thereafter there will be quarterly reports to the NOF Project Team. Active schools co-ordinators to develop the range and number of physical activity and sports clubs in each primary cluster and in each secondary school and to promote the opportunities to take part in sport and physical activity at leisure centres and in community clubs.</p>	Appropriate school staff. Active Schools Manager. HPS Development Manager. Community Development Manager. Cultural Co-ordinator. Health Development Officer – Early Years.	For Highlands Children 2. Your Choice Health Action Group. Active Schools Steering Group. Early Years Team.

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	How many/how often/by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
6 The year on year increase in Highlife Club membership with a particular focus in 2003/04 on young people.	FHC2, Active, 35 & 36. Achieve a 5% increase in uptake of the Hi Life Scheme including budget card and family inclusive packages. Ensure Highlife Scot Cards are available to 100% of school pupils aged 12+. Achieve year on year increase in number of visits to Hi Life Young Scot Website.	Youth Strategy.	Community Development Manager.	For Highlands Children 2.
7 As part of the Active School Sports Co-ordinators scheme, introduce health and fitness checks for young people with advice about appropriate activity and sporting opportunities. Pilot health and fitness checks in secondary P.E. programmes.	FHC2, Active, 34. By Dec 2005, at least 12 secondary schools to have introduced health/fitness checks with appropriate advice/activity and sporting opportunities in conjunction with local leisure centres – focus on P7s and teenage girls. By Dec 2005, all primary schools to have introduced health/fitness checks with appropriate advice/activity and sporting opportunities as part of the out-of-hours physical activity and sport programmes and where appropriate in conjunction with local leisure centres – focus on P7s. In 2005/06, train secondary P.E staff to deliver fitness tests to secondary age children and link into active schools programmes and make links to community clubs to encourage children to lead more active lifestyles.	Each identified school to liaise with local Leisure centre and integrate process in ACSF local action plan.	Schools sports co-ordinator and named officer from local Leisure centre. Active Schools Manager. Specialist P.E staff. HP Specialist Mental Health & Physical Activity.	For Highlands Children 2. Your Choice Health Action Group. Active Schools Steering Group. Early Years Team.

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	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
8 Increase participation in play, including outdoor and unstructured play.	FHC2, Active, 33. Audit and increase by 20% the number of communities with play areas shared with nursery/schools. Audit and increase by 30% the number of Highland Primary Schools with Playground Supervisors and/or Play Monitors trained in promoting positive play in the playground. Introduce Toptots and Topstart to 50% of Nurseries in Highland Increase participation in play, including outdoor and unstructured play Develop playground games as part of the Active schools programme.	The new Play Policy heralds a step forward in work on the development of play issues, opportunities and spaces. A Play Strategy will form the next stage of development which will gather the ideas, opinions and support of partner agencies, community groups, voluntary organisations and young people. Play Highland have been successful in paving the way for the development of a policy for the Management of Risk in Outdoor Play Areas. This will mean that children and young people will have greater opportunity to have and take greater risks. Risk taking is an essential aspect of a child's physical, emotional and social development. Practical developments include promoting the outdoor space within both the PPP Schools and existing schools as valuable child friendly spaces which should be utilised to promote active outdoor play. This work is reflected in the work carried out by Play Scotland and Sport Scotland into how school grounds are currently used by children and young people. In addition to this another aspect of play development is that of developing inclusive play opportunities for children with varying abilities. A current research project titled 'P.Inc (Play Inclusive)' was piloted in Beauly Primary with encouraging results as to how play can be used as an inclusive tool. The resource pack produced as a result of this research is to be rolled out by the Scottish Executive throughout all primary schools.	All services which develop spaces and provide opportunities for children and young people. Active schools Co-ordinators to deliver sessions, train senior pupils, volunteers and paid officers to develop active playgrounds. Play Development Officer. Community Development Officer. Play Highland. Active Schools Manager.	For Highlands Children 2. Active Schools Steering Group.

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	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
9 Continue to promote safer routes to school, encouraging children to walk or cycle.	FHC2, Safe, 3, 4 & 5. Reduce child injuries and fatalities relative to total population for all accidents and specifically for road traffic accidents and home accidents. Increase the proportion of schools participating in accredited “risk reduction” programmes – including “risk watch”, cycling proficiency, etc. Increase the number of schools with 20mph restrictions and increase the proportion of schools with agreed travel plans.	Each school to have their own School Travel Plan and a Safer Routes to School Committee.	Road Safety Officer. HPS Development Manager.	School Travel Plan Team. For Highlands Children 2. Your Choice Health Action Group.
10 Consolidate the out-of-Eden drama activities in schools.	Increased access to drama activities that include a focus on issues relating to self-esteem and health promotion.	Consolidated funding for out-of Eden. Strategic approach built in regarding self-esteem and health promotion.	Community Development Officer.	Community Plan.
11 Emphasise healthy lifestyles in parenting programmes.	FHC2 All Key Outcome Targets.	Webster Stratton programme Janny's Hoose Project Parent Programme.	Head of Children's Services. Parent Programme Development Officer.	For Highlands Children 2.
12 Extend peer support working for particular groups: smokers, the obese, low achievers, etc.	FHC2, Healthy , 21. Ensure all schools achieve and maintain Health Promoting Status. All schools to have peer support in place by 2005.	Extend smoking cessation groups to all schools Introduce similar groups 'out of school' for the obese Extend low achiever ('Listen to me') pilot to five schools	Quality Development Officer. Health Education Worker. Health Promotion Manager. HPS Development Manager.	For Highlands Children 2. Your Choice Health Action Group.

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	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
13 Make all ECS properties smoke-free zones, and offer support to staff and users of facilities who wish to stop.	All Highland premises are smoke free zones by 2005. HC has in place a support programme for smoking cessation.	Joint working group via Council JCG and Teachers Unions. HPS reports to recommend that support is provided for all staff in schools for smoking cessation via SHAW boards. Agree a phased approach to removal of smoking rooms within premises.	Policy Officer. Trade Unions. Corporate Services. HPS Development Manager.	The Highland Council SHAW Working Group. Your Choice Health Action Group.
14 Introduce programmes under the auspices of Scotland's Health at Work to develop staff health and well-being.	Health screening and advice clinics and drop in sessions are available to all staff. Health at work programmes in place.	Involve teacher Support Scotland in Highland schools. Influence content of Highland JHIP on approach to health of workforce. Integration of agreed priorities into ECS. WBA group providing 'toolkit'. SHAW and HPS to increase links within schools.	Policy officer. Health Improvement & Community Safety Officer. HPS Development Manager.	The Highland Council SHAW Working Group. JHIP Wellbeing Alliance Sub-Group on staff health and wellbeing.
15 Introduce programmes to reduce number of accidents by improving risk assessment skills of young people.	FHC2, Safe, 3. Reduce child injuries and fatalities relative to total population for all accidents and specifically for road traffic accidents and home accidents.	Risk Watch is the first, comprehensive injury prevention programme designed for use in classrooms, linking teachers with community safety experts and parents. It teaches children and their families the skills and knowledge they need to reduce the risk from unintentional injuries.	Quality Development Officer. HPS Development Manager. Integrated Risk Project Co-ordinator.	Community Safety Steering Group.
16 Promote self-esteem in children and young people.	FHC2, All Key Outcomes.	Pilot 'Aware' Project operating in seven schools. School Counselling Service. Peer Support Projects. Training organised by HC ECS including staff health and wellbeing and Stigma multi-agency seminars.	Quality Development Officer. HPS Dev Manager. Primary Mental Health Services. Head of Children's Services.	Aware Steering Group. For Highlands Children 2.

Hungry for Success (and related activities)

Joint Health Improvement Plan – Priority Areas1/2. Health of Children, Teenagers and Families.

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	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
17 Develop the existing Your Choice Health Action Group to create robust mechanisms for monitoring Hungry For Success implementation and continuous improvement.	Hungry For Success will exceed expectations of children, young people and families within our communities.	The Your Choice Health Action Group membership to extend to include the Healthy Weight Development Officer and forthcoming strategy. The Your Choice Health Action Group meeting frequency to be increased to six times per year. Administrative support identified within ECS to ensure meetings effectively resourced.	HPS Development Manager. Catering & Cleaning Manager. Catering Manager. Catering Providers. HP Specialist Food & Nutrition. Child Health Lead Dietician.	Your Choice Health Action Group.
18 HFS2. Develop a policy for delivering, in partnership with parents and carers, medically prescribed diets and appropriate provision for children with special educational needs.	Policy developed, distributed and implemented with whole school community.	A draft strategy to be produced in liaison with parents, carers, catering staff and whole school community. The food policy will be updated and contain a section for special diets. It will also contain an application form for special dietary requirements to allow for monitoring and a flowchart to provide clarity of decision making process.	Catering and Cleaning Manager. Child Health Lead Dietician.	Your Choice Health Action Group. HMle.
19 HFS3. The Scottish Nutrient Standards for School Lunches should be adopted and education authorities and schools should have them in place in all special schools and primary schools by December 2004 and in all secondary schools by December 2006.	Successful outcomes measured using NUTMEG Hungry For Success analysis software working on behalf of the Scottish Executive.	Continue with dedicated consultant dietician. Food Service Co-ordinator – H4S. Continually review and develop menus. Consultation with schools, cooks and suppliers. Develop NUTMEG menu analysis. Healthy Weight Strategy.	Catering Providers. Food Service Co-ordinator.	Your Choice Health Action Group. HMle. Hungry For Success Catering Monitoring.

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20 HFS4. School meal facilities should not advertise nor promote food or drink with a high fat or high sugar content.	All schools to be accredited to HPS 2005.	Consultation with suppliers. SNAG groups to encourage change. HPS toolkit. SNAG training. Healthy Weight Strategy. Continue de-branding of display facilities for food & drink.	Head Teachers. Catering Providers. Whole school community. Healthy Weight Development Officer.	Your Choice Health Action Group. HMIe.
21 HFS8. Schools should consult with pupils on a regular basis on provision of school meals.	All schools to be accredited to HPS 2005.	Formation of a mechanism to demonstrate effective consultation. SNAG. Pupil Council. Dialogue Youth. Ambitious Excellent Schools/Eco-schools.	Head Teachers. Catering Providers. HPS Development Manager. Youth Workers.	Your Choice Health Action Group. QDT. HMIe.
22 HFS15. Senior management within schools should strongly support and endorse their school meal provision as part of the whole child approach.	All schools to be accredited to HPS 2005.	Schools to demonstrate ethos through HPS. Healthy Weight Strategy.	Head Teachers. Integration Managers. Healthy Weight Development Officer. Catering Providers. HPS Development Manager. Quality Development Officer.	Your Choice Health Action Group. QDT. HMIe.
23 HFS16. Caterers should consider appropriate means of labelling food and methods of conveying information on content to pupils and parents. Through existing school communication channels, menus should be forwarded to parents at least once a term. Schools and caterers should consider presentation, marketing and pricing structures to incentivise healthier choices.	Create menus in an appropriate way to ensure distribution, inclusion by electronic means, website and school newsletters. Continue the corporate branding of SMART LIFESTYLE.	SMART LIFESTYLE package. NURTURE OUR WORLD (Lochaber Primary Schools). Tuck Shop guidance within the toolkit. Development of SNAG. Promotion of healthy choices and marketing. Create an innovative way of advertising the Catering Service. Continue and develop the provision of Gaelic medium resources including menus and introductory P1 packs for schools. Explore the feasibility of including further languages/pictures ensuring accessibility to all.	Catering Providers. Child Health Lead Dietician. HPS Development Manager. Food Services Co-ordinator.	Your Choice Health Action Group. HMIe.

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<p>24 HFS20. Consider the introduction of staff incentive schemes to recognise innovation and celebrate success.</p>	<p>Celebrating HPS success and achievement. To continue, develop and create new ideas. To celebrate and disseminate good practice across Highlands.</p>	<p>Ensuring schools work towards SHAW award. Schools currently accredited will ensure high standard is maintained in HPS criteria level 8. Ensure good practice is shared and development of the HPS toolkit.</p>	<p>Whole school community. Head Teachers. ECS Management Team. Catering Providers. HPS Development Manager.</p>	<p>QDT. ECS. HMle. Your Choice Health Action Group.</p>
<p>25 HFS22. All school catering and dining room supervisory staff should undertake appropriate training, for example, the Royal Environmental Health Institute of Scotland Food and Health training course (currently under development) as part of their programme of development. Interested parents, carers and teachers should also be encouraged to undertake training in food and health.</p>	<p>The standard to link with caterers, HPS, SNAGs and whole school community (including all Community Learning and Leisure facilities). All whole school community participants trained to an appropriate level to comply with food and health training.</p>	<p>Ensure training opportunities are provided through ECS CPD calendar. National training information is available to whole school community. AWARE pilot project involving all school staff training to be fully evaluated. Aspects of inclusion of catering staff to be thoroughly examined. AWARE project information to be presented to the Your Choice Health Action Group. Pilot training planned for October – ‘Foundation Certificate in Nutrition’ delivered by training company ‘Royal Society for the Promotion of Health’. Healthy Weight Strategy Child Protection Training opportunities to be explored for all catering staff with Area Child Protection Committee and ECS.</p>	<p>FSA Scotland. Whole school community. Healthy Weight Development Officer. HPS Development Manager. Catering Providers.</p>	<p>QDT. HMle. Your Choice Health Action Group.</p>

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26 HFS5. All schools to review their current practice in establishing links between learning and teaching on healthy eating in the curriculum and food provision in the school.	SNAG to take a whole school approach to nutrition by examining the formal and informal curriculum.	QD Team to ensure curriculum materials and resources are available and emerging national guidance sought. Healthy Weight Strategy.	Head Teachers. Healthy Weight Development Officer. HPS Development Manager.	QDT. HMIE. Your Choice Health Action Group.
27 Provide fruit and vegetables at break times in schools; the removal of 'tuck items' from tuck-shops.	All schools in Highland to be H4S compliant.	In collaboration with current providers all schools in Highland to review and phased removal of 'tuck items' and introduce 'healthy choices'. Revised HPS toolkit to include new guidance of health tuck shop items. Two levels of SNAG training to the whole school community to ensure development of in-house school policies. Healthy Weight strategy Ensure seasonality is maximised by ensuring goods are as fresh as possible at point of delivery.	Head Teacher. Catering Providers. SNAG's. HPS Development Manager. HW Development Officer. Child Health Lead Dietician.	Catering and Cleaning Manager. HMIE. Your Choice Health Action Group.

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<p>28 HFS9. Processes maximising anonymity for free meals recipients should be explored as a priority in all schools. Primary schools should review their ticket allocation practices to ensure anonymity for free school meals is maximised and education authorities should adopt early introduction of a school meal application for multiple use cards, in particular in secondary schools.</p>	<p>Young people who are entitled to free school meals will remain anonymous and stigma reduced that may be associated with FSM. ECS to maximise the use of smartcards in line with the Modernising Government Agenda and corporate approach.</p>	<p>Instigate independent survey for consultation in free school meals (FSM). Carry out audit within schools currently issuing tickets/FSM and in non-smartcard schools. Pupil Councils and SNAGs to ensure that FSM is an item on their agenda. Introduce website debate for Young Scot Dialogue Youth to participate in school meal topics. Healthy Weight Strategy. Increase links with Benefits Agency and departments to ensure that eligible applicants are informed about FSM.</p>	<p>Head Teachers. Highland Council. HW Development Officer.</p>	<p>HMIe. QDT. Your Choice Health Action Group.</p>
<p>29 HFS10. As part of the introduction of card systems, education authorities should ensure there are sufficient validators in easily accessed areas within the school not only in the dining room, and that they are easy to use.</p>	<p>The Highland Council to have accessible validators. Points of access to ensure electronic top-up of cards for the whole school community.</p>	<p>Ensure consultation with whole school community to identify suitable venues for validators or access to top-up cards. Internet mechanism to be explored to top-up cards.</p>	<p>The Highland Council. WSC.</p>	<p>Your Choice Health Action Group. QDT. HMIe.</p>

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	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
30 HFS19. Consider the introduction of incentive schemes to promote healthier choices and increase the take-up of school meals.	To ensure innovative schemes are devised in collaboration with the range of Services within Highland Council and outside bodies.	Existing good practice is disseminated through HPS network. SNAG groups to consult with local businesses and communities to encourage a whole school community approach in examining school nutrition. Encourage debate with established Forums, i.e. Dialogue Youth and Pupil Councils.	HPS Development Manager. Youth Forums. Catering Providers. Child Health Lead Dietician.	Your Choice Health Action Group. QDT. CLL. HMle.
31 HFS11. All schools should examine their seating and queuing arrangements to ensure that the social experience of school meals is maximised.	School dining arrangements facilitate a climate conducive to the HPS ethos. Equal opportunities policies are implemented. 31.1 HFS17. Improvements to the dining room to enhance its atmosphere and ambience, and encourage its use as a social area should be considered as a priority, and should be taken into account in their wider school estate planning. It is desirable, wherever possible, that a separate dining area should be provided.	Existing good practice is disseminated through HPS network. SNAG to carry out surveys into the eating experiences of the whole school community within the school dining areas. Public Private Partnership (PPP) have full consultation and support for inclusion of Hungry For Success and Health Promoting Schools in new school builds. SMART lifestyle branding to continue.	Catering and Cleaning Manager. HPS Development Manager. Estates Strategy Manager. Head Teachers.	Your Choice Health Action Group. HMle.

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Action	Standard/target	Strategy	Who must take action	Monitoring mechanism
	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
32 HFS12. To address queuing difficulties and in any review of the length of the lunch break, the following factors should be considered: multiple service points; more cash points in cash cafeterias; staggered arrivals of diners/separate sittings; pre-ordering facility; separate counter for collecting pre-ordered meals; delivery of pre-ordered meals to lunchtime clubs; examining the potential for additional outlets elsewhere in the school; the needs of disabled pupils	Each school will be compliant with the Disability Discrimination Act and school equal opportunities policies. School dining arrangements facilitate a climate conducive to the HPS ethos.	SNAGs/Pupil Council to undertake surveys of the social experience of school meals and with support of the Your Choice Health Action Group. Actions/Issued raised will be supported by HPS/HFS team. To explore the introduction, where possible, of staggered lunch breaks. To explore the introduction, where possible, of extending the lunch period.	Head Teachers and SMT. HPS Development Manager. Catering Providers.	Your Choice Health Action Group. HMle.

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Action	Standard/target	Strategy	Who must take action	Monitoring mechanism
	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
33 HFS14. In line with the agreement set out in <i>A Teaching Profession for the 21st Century</i>, education authorities should consider deploying classroom assistants and dining room assistants to undertake a supervisory role in dining rooms.	A whole school approach is adopted to ensure the social experience of lunchtime is maximised. Appropriate supervision of lunchtime. Whole school tooth brushing is undertaken in primary schools.	As per HFS 25. The workforce within schools is maximised to assist in lunchtime experiences. Strategic developments in oral health are incorporated into the lunchtime experience, and SNAG training. Explore mechanisms for additional funding for supervisors of tooth brushing.	Oral Health Educators. Clinical Dental Manager. HPS Development Manager. Catering Providers. Head Teachers.	Your Choice Health Action Group. HMle.
34 HFS18. Furniture design, layout and usage, along with other factors such as décor and background music, should be considered by all schools, with significant pupil input and programmes for change drawn up	A whole school approach is adopted to ensure the social experience of lunchtime is maximised.	Public Private Partnership (PPP) have full consultation and support for inclusion of Hungry For Success and Health Promoting Schools in new school builds. SNAG/Pupil Council to assist in surveys and development of programmes of change. Existing good practice disseminated through Health Promoting schools to inspire and support school's developments. SNAG training to incorporate survey examples.	HPS Development Manager. Head Teachers. Catering Providers.	Your Choice Health Action Group. HMle.

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Action	Standard/target	Strategy	Who must take action	Monitoring mechanism
	How many/how often/ by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
35 Introduce Healthy Vending in schools, Swimming Pools and Leisure Centres.	All Highland Council leisure venues are complaint with Hungry For Success principles.	In collaboration with current provider and assistance of new providers purchase and install vending machines at suitable sites. De-branding of display equipment for food and drink to continue. Other venues for children and young people to engage in activities outwith the Highland Council to be contacted e.g. football training venues.	HPS Development Manager. Catering Providers. CLL. Child Health Lead Dietician.	Your Choice Health Action Group. HMle.
36 Access to fruit, milk and water available to all schools where free as part of H4S.	All Highland Schools will be able to provide free fruit, milk and water to pupils.	Opportunities for supplying organic milk to all Highland schools explored.	Catering and Cleaning Manager.	Your Choice Health Action Group. QDT.
37 Promote water consumption in schools.	100% of Highland schools and education establishments have access to fresh drinking water for pupils and whole school staff.	In collaboration with HC maintenance/catering services ensure the provision of fresh water to schools. Two levels of SNAG training to the whole school community to ensure development of in-house school policies.	HC Maintenance/ Catering services. Head Teacher/ School Health Co-ordinator. SNAG. HPS Development Manager.	Your Choice Health Action Group. QDT.
38 Extend Breakfast Clubs across Highland.	Increasing breakfast clubs, funding increasing year on year.	Head of Children's Services to input. Integration Managers to continue to promote Evaluation of Service Monitoring.	Family Resource Development Officers. Head of Children's Services. Head Teachers. Integration Managers.	ACSF. Your Choice Health Action Group. QDT.

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Action	Standard/target	Strategy	Who must take action	Monitoring mechanism
	How many/how often/by when. Links to key outcome targets FHC2.	What is our strategy for achieving this? Is this adequate – what boost might it need?	Identify the key people in schools and centres to make this happen	How will this target be monitored?
39 Future Developments beyond Hungry For Success demonstrating innovative and holistic strategies.	Adverse impact on the environment is minimised. The Highland economy benefits. Food is as fresh as possible at point of delivery. Food For Life targets are met.	Sustainable Procurement Policy is implemented to ensure awareness/ expansion to local communities. Food For Life (FFL) programme extended. Links between HPS and Eco-schools increased within the HPS toolkit. Increased links to global development issues around nutrition e.g. Fair Trade.	Cleaning and Catering Manager. Child Health Lead Dietician. Head of Children's Services. HPS Development Manager. All lead professionals.	Your Choice Health Action Group.
40 Dissemination of Your Choice Implementation Plan.	Action points within this plan are met. and profile is raised of 'Your Choice', HPS & HFS.	Your Choice implementation Plan' to be printed and each school will receive a copy to keep within HPS portfolio and/or Hungry For Success folder. Printed copies designed with the corporate identity.	HPS Development Manager. Catering & Cleaning Manager. Head of Children's Services.	Your Choice Health Action Group. QDT.



Additional Recommendations

- **Best Value Review**

In any Best Value review the role of the school meal service as part of the education and health strategies should be taken into account. It should not be considered simply as a commercial trading activity.

- **Scottish Health Promoting Schools Unit**

The Scottish Health Promoting Schools Unit should take the recommendations of the Panel into consideration when developing standards for health promoting schools.

- **Partnership Working**

Education authorities should promote partnership approaches and schools should develop mechanisms to deliver partnership working.

- **Lunchtime Experience**

When education authorities and schools are examining the structure of the school day, the lunchtime experience should be part of that consideration.

- **Schools, Communities, etc**

Local authorities, guided by COSLA as appropriate, should incorporate strategies for implementing the recommendations of this report into mainstream planning processes that will empower and enable schools and school communities to adopt the recommendations.

- **Monitoring 4 Levels**

Monitoring of the implementation of the Scottish Nutrient Standards for School Lunches, and related aspects, should be undertaken using the four levels of monitoring in this report, and should involve HM Inspectorate of Education working, as appropriate, with other relevant agencies.

- **Scottish Executive**

The Scottish Executive should consider what further work needs to be done to take forward the additional important and related issues identified by the Expert Panel.

