



Brampton Abbots CE Primary School



Bridstow CE Primary School



Oak Meadow Federation

## HEALTHY SCHOOLS POLICY SUITE

This policy will be reviewed and updated by the governing body at least annually.  
All references to 'the school' imply both Brampton Abbots and Bridstow Primary Schools.

Date signed off by full governing body: 15<sup>th</sup> October 2024

Signed Daniel Brearey, Head teacher

Paul Mason, Chair of governors

Date next review due: October 2025

## Introduction

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Our vision is rooted in Psalm 1:3: 'You are like a tree, planted by streams of water that never run dry. Your fruit ripens in its time; your leaves never fade or curl. In all you do, you prosper'. Through our Christian ethos we seek to nurture every child to reach their potential by working together in friendship, growing together in honesty and respect, and flourishing together in happiness. To this end, we are committed to supporting the emotional health and wellbeing of all our pupils, staff and community. We have a supportive and caring ethos and our approach is respectful and kind, where each individual and contribution is valued.

This suite of policies aims:

- to identify ways in which the school can encourage and support pupils to lead healthy lifestyles;
- to put in place effective procedures for helping those who have an immediate need for first aid in school.

This policy suite contains the following chapters:

[Chapter 1](#): Healthy school, a whole-school approach

[Chapter 2](#): Food policy

[Chapter 3](#): First aid

[Chapter 4](#): Signposting Mental Health

[Chapter 5](#): The graduated response to Mental Health

[Chapter 6](#): Mental Health and wellbeing in staff

Other key school documents to refer to are:

- Curriculum delivery suite (including Equality and Children with Medical Conditions);
- Safeguarding suite;
- Admissions policy;
- SEND policy in cases where pupils mental health needs overlap with these;
- Behaviour Policy suite.

## Complaints and whistleblowing

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Complaints should follow the procedures as set out in the Complaints Policy on our website. Staff also have a responsibility to raise any concerns following the school's whistleblowing policy.

## Compliance

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This policy is set out in line with the legislation, statutory guidance and good practice guidance listed at Appendix 1.

## **CHAPTER 1: HEALTHY SCHOOL, A WHOLE-SCHOOL APPROACH**

For us, a healthy school is one that is successful in helping pupils to do their best and build on their achievements. We believe that the best way to promote health is to build pupils' confidence and self-esteem by creating an atmosphere in which they can flourish and be themselves. In this context, they are much more likely to be able to and willing to take on board messages about healthy lifestyles.

### **1.1 Promoting Health**

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We promote physical, emotional, and mental health by providing accessible and relevant information and equipping pupils with the skills and attitudes to make informed decisions about their health. As part of this, we:

- promote the links between health, behaviour, and achievement;
- promote physical activity as part of a lifelong healthy lifestyle;
- promote the 'Positive Learning Skills' of Growth Mindset, Resilience, Meta-cognition and Emotional Well-being
- aim to provide high quality Physical Education that is readily adapted to pupils' differing skills and abilities so that all feel they can take part; children are given opportunities to experience dance, gymnastics and swimming, and to challenge themselves physically and learn about the importance that physical activity has on their health;
- promote safe working and playing relationships and environment both inside and outside of school;
- promote a healthy diet, including increasing pupils' understanding of the importance of water in their diet, and developing their understanding of healthy food choices through PSHE and cross-curricular activities; this is further reinforced by modelling healthy meals on our school menu;
- provide children with choices as to how they use their playtime by the development of the school grounds;
- encourage children to choose a healthy snack at morning break time, and encourage a healthy lunch for those who bring a packed lunch, by providing information to parents and carers;
- promote and foster positive mental health for both children and staff by helping children develop greater confidence, motivation and self-esteem and have the skills, information and understanding to make important life and health choices. This is done partly by promoting a whole-school ethos where all pupils feel valued and respected, and partly by having a strong pastoral support system (involving TAs, teachers, the headteacher, the church and other agencies) for those who need additional support.

### **1.2 Promoting Mental Health**

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We promote a mentally healthy school environment through:

- Promoting our school values and encouraging a sense of belonging
- Providing a strong Christian ethos
- Promoting pupil voice and opportunities to participate in decision-making
- Celebrating academic and non-academic achievements
- Providing opportunities to develop a sense of worth through pupils taking responsibility for themselves and others
- Providing opportunities to reflect

- Access to appropriate support that meets their needs

### **1.3 Mental Health Strategy**

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Our strategy, detailed in Chapter 5, outlines the ways in which we help our children and adults:

- to understand their emotions and feelings better
- to feel comfortable sharing any concerns or worries
- to form and maintain relationships
- to promote self-esteem and ensure children and adults know that they count
- to be confident and 'dare to be different' and be themselves.
- to develop emotional resilience and to manage setbacks.

### **1.4 Curriculum**

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Health and wellbeing issues are embedded throughout our school planning and ethos and are further reinforced through our wider curriculum, which aims to develop our children's well-being, health, safety, responsibility, and values. The wider curriculum (including Science and PE amongst others) addresses issues such as:

- nutrition and healthy eating;
- the importance of physical activity;
- relationship education;
- emotional health and well-being;
- safety and risk education;
- careers and work-related learning;
- gender stereotyping.

## **CHAPTER 2: FOOD POLICY**

### **2.1 Overview**

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Attitudes to food play a significant role in children's health and have a significant impact on their health as an adult. We therefore take opportunities through school meals and the curriculum to develop healthy attitudes to food. The school willingly complies with the School Food Standards on balanced diets for children and supports NHS campaigns to encourage children to eat more fruit and vegetables, which has been shown to reduce the onset of certain life-threatening conditions as well as being helpful in tackling and preventing childhood obesity.

### **2.2 Food in school**

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#### **Breakfast**

Both schools have a breakfast club before school, with a rotating menu of varied healthy food items. Fruit, water and milk are always provided. The emphasis is on a friendly-family meal atmosphere; children eat and talk with each other, and only quiet activities like colouring or reading are allowed. All food is balanced with the other foods that children will eat across the whole school day and week. Feedback from parents suggests that children who attend regularly eat a wider variety of foods than they generally would at home.

#### **Morning Snacks**

All our EYFS and Key Stage 1 are entitled to free fruit and vegetables under the free fruit scheme. All EYFS and KS1 classes include a morning break-time snack of washed fruit to all children, which is shared in a family setting for all class members. Children are given responsibility for passing the fruit to others and for helping to clear away. Fruit is stored and checked by the school kitchen. KS2 children bring snacks from home and we encourage parents to make this a healthy snack.

#### **School dinners**

All our school meals are catered by AiP (Alliance in Partnership). Menus and ingredients are prepared to ensure a balanced diet for all pupils.

This includes a balance of macronutrients needed across the menu; portion sizes; levels of fat, salt and sugar; ceiling amounts for processed foods; minimum targets for omega oils, and; mandatory minimums of fruits and vegetables. Dinners are provided on a three-week rotating menu which changes every half term and includes seasonal changes. All special diets are fully and safely catered for and a special diet policy is in place.

#### **Packed lunches**

We encourage those children who prefer to have a packed lunch to bring in a reasonably well-balanced meal, including a substantial item like a sandwich, wrap or pasta. As school dinners include a pudding each day, children can also bring a fun item in their lunch box such as a packet of crisps or a cake; we ask that these are eaten with the packed lunch and not taken out for break-time snacks. We do not allow confectionery (such as chocolate bars) at any time. We ask that only water be sent with packed lunches, although a fruit smoothie may be sent as a pudding item.

#### **Water for all**

Cold water is freely available throughout the school day to all members of the school community and pupils may bring in refillable water bottles as well as using the fountains provided. No water fountains are located inside toilet blocks. Class teachers build regular water breaks into the school day and curriculum, and jugs of water are provided at lunchtime.

## **The dining environment**

Lunchtime is a busy period; we aim to ensure that children feel that they have enough time to eat as much as they need to, and also to have time for physical play. We split the lunch period into two sittings to facilitate this – children spend less time queuing and more time being sociable and eating with their friends. Two sittings also reduce crowding and noise levels.

Children who eat a packed lunch are allowed to sit with their friends who eat a hot dinner so that there is no social incentive to choose one type of lunch over another. Children are encouraged to eat a reasonable range of foods from their plate or lunchbox and a reasonable volume of food before going out to play, but without nagging.

## **Treats in school**

The School Food Standards apply to all food provided by school to pupils with the exception of curriculum-based activities and occasional events. This means that snacks provided by staff on trips, celebrations, themed occasions, after-school activities or sports events should try as far as possible to keep within the School Food Standards and steer clear of snacks high in salt, sugar and fat. Fizzy drinks should be avoided at all times. A common-sense approach is used which takes account of the context of the food, the frequency of the occasion and the age and understanding of the children. Special diets must always be catered for in these choices.

## **Affordability**

We believe that money should not be a barrier to healthy eating. Research has shown that school dinners tend to be more balanced and healthier than average packed lunches, so it is in the interests of the school to encourage as much take up of school food as possible as it is likely to lead to better health outcomes. We encourage all parents of children in classes R, 1 and 2 to take up their Universal Infant Free School Meal (UIFSM) place. We identify and encourage parents who may be eligible for Free School Meals (FSM) to apply and encourage dialogue with parents who are struggling with food bills.

## **2.3 Food across the Curriculum**

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In EYFS, KS1 and KS2, there are a number of opportunities for pupils to develop knowledge and understanding of health, including healthy eating patterns and practical skills that are needed to understand where food comes from such as shopping, preparing and cooking food.

**Literacy** provides children with the opportunity to explore poetry, persuasion, argument and narrative work using food and food-related issues as a stimulus, e.g. writing to a company to persuade them to change their unhealthy recipes; describing the tastes of foods; writing marketing information for a new food; or using imperative language in recipe instructions.

**Maths** can offer the possibility of understanding nutrition labelling; calculating quantities for recipes; weighing and measuring ingredients; surveying reactions to tastes; or counting seeds when growing food.

**Science** provides an opportunity to learn about the types of food available; their nutritional composition; digestion; why hygiene is important for safe food; the function of a balanced diet in contributing to health; how food plants grow and what they need; and how farming and food production fit into the natural world.

**RE** provides the opportunity to discuss the role of certain foods in the major religions of the world, and children experience different foods associated with religious festivals.

**ICT** can afford pupils the opportunity to research food issues using the internet and other electronic resources, and to design packaging and adverts to promote healthy food choices.

Food Technology as part of **Design Technology** provides the opportunity to learn about where food comes from and how foods are designed, manufactured and marketed, and to learn practical food preparation skills through recipe design and cooking.

**PSHE** encourages young people to take responsibility for their own health and well-being, teaches them how to develop a healthy lifestyle and addresses issues such as body image and environmental ethics. Pupils are able to discuss issues of interest such as advertising and sustainable development.

**Geography** provides a focus on the natural world and changing environment, offering the chance to consider the impact our consumer choices have on people across the world who rely on growing food as their source of income. Focussed work on individual areas of the world may also include an emphasis on culture and diet in that region.

**History** provides insight into changes in diet and food over time and the role of food in different cultures and historical events, such as Roman foods or rationing.

**Physical Education** provides pupils with the opportunity to develop physically and to understand the practical impact of sport, exercise and other physical activity such as dance and walking, and to connect activity with a healthy balanced diet as part of an overall healthy happy life.

**School visits** provide pupils with activities to enhance their understanding of healthy eating e.g. to a supermarket for food exploration activities, to shops to budget for and buy designed DT recipes, to a restaurant to see how food is prepared, or to a local farm to understand how food is produced and how farming has changed over time.

**CHAPTER 3: FIRST AID**

This chapter sets out the school's first aid procedures, ensuring that there is adequate provision at all times.

**3.1 Roles and responsibilities**

<b>Role</b>	<b>Responsibilities</b>
Appointed person(s)	Take charge when someone is injured or becomes ill Ensure there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits Ensure that an ambulance or other professional medical help is summoned when appropriate
All staff	Undertake appropriate training every 3 years Act as first responders to any incidents; assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment Send pupils home to recover, where necessary Fill in the daily accident log sheets and detailed accident reports (where appropriate) on the same day as the incident, or as soon as is reasonably practicable thereafter
School office	Maintain list of nominated first aiders, including paediatric first aiders. Display lists of first aiders and locations of equipment prominently around school
Governing body	Approve First Aid policy Oversee and challenge policy implementation
Headteacher	Implement this policy, including: <ul style="list-style-type: none"> <li>ensuring that an appropriate number of trained first aid personnel are present in the school at all times;</li> <li>ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role;</li> <li>ensuring that all staff are aware of first aid procedures;</li> <li>ensuring that parents are aware of first aid approaches;</li> <li>ensuring that appropriate risk assessments are completed and appropriate measures are put in place;</li> <li>ensuring that adequate space is available for catering to the medical needs of pupils;</li> <li>reporting specified incidents to the HSE when necessary;</li> <li>ensuring first aid is covered in the school's insurance policy.</li> </ul>
School staff	Follow first aid procedures Complete daily accident log sheets and detailed accident reports (if required) for all incidents they attend to where a first aider is called Inform the headteacher of any specific health conditions or first aid needs (if they are out of the ordinary)



## **3.2 First aid procedures**

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### **3.2.1 In-school procedures**

In the event of an accident resulting in injury:

- the closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first-aider, if appropriate, who will provide the required first aid treatment;
- the first-aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives;
- the first-aider will also decide whether the injured person should be moved or placed in a recovery position;
- if the first-aider judges that a pupil is too unwell to remain in school, parents/carers will be contacted and asked to collect their child, and will be given recommended next steps by the first-aider;
- if emergency services are called, the school office will contact parents immediately;
- the first-aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury and submit to All Safety Matters.

### **3.2.2 Off-site procedures**

When taking pupils off the school premises, staff will ensure they always have the following:

- a school mobile telephone;
- a portable first aid kit;
- information about the specific medical needs of pupils;
- parents'/carers' contact details.

Risk assessments will be completed by the lead teacher, and approved by the headteacher, prior to any educational visit that necessitates taking pupils off school premises (see standard template in Estates policy suite). There will always be at least one first-aider with a current paediatric first aid certificate on school trips and visits.

### **3.2.3 Out-of-hours procedures**

When the school is running out-of-hours activities, the headteacher remains responsible for ensuring adequate first aid provision in line with this policy.

Where the school is let out for use by others, it is the responsibility of the person renting the space to ensure that adequate first aid provision is in place.

## **3.3 First aid equipment and facilities**

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A typical first aid kit includes the following:

- Face coverings / masks
- Hand sanitiser
- Regular and large bandages
- Sterile eye pads
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes

- Plasters of assorted sizes
- Scissors
- Cold compresses
- Eye wash fluid
- Burns dressings (in kitchen first aid kits)
- Leaflet giving general advice on first aid

No medication is kept in the first aid kit.

First aid kits are stored next to the photocopy room outside the office at Brampton Abbots and outside the staff room at Bridstow. The space outside the school office (at both schools) has been designated as the area for medical treatment.

### 3.4 Record-keeping and reporting

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The daily accident logbook (kept outside the school office in Brampton Abbots and as separate class logbooks in Bridstow) will be maintained, and for an incident resulting in an injury an accident form will be completed by the first-aider on the same day or as soon as possible after an incident resulting in an injury. As much detail as possible should be supplied when reporting an accident, including all of the information on the accident log/form and photos of where the injury took place if appropriate.

A copy of the accident report form (if the accident is severe enough) will also be added to the pupil's educational record by the Office Manager. Records held in the first aid and accident book will be retained by the school for the duration of their time at the school, and then securely disposed of. First-aiders' training will cover how to assess the severity of an injury, and what level of recording is necessary.

**Reporting to the HSE:** the headteacher will determine whether the injury is sufficiently serious to report the accident to HSE and will then report it to the Local Authority.

**Notifying parents:** the school office will inform parents on the day of the incident about any significant accident or injury sustained by a pupil, and any first aid treatment given.

**Reporting to Ofsted and child protection agencies:** the headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

### 3.5 Training

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All school staff are able to undertake first aid training if they would like to. All first-aiders must have completed a training course and hold a valid certificate of competence to show this. The school will keep a register of all trained first-aiders, what training they have received and when this is valid until. Staff are requested to renew their first aid training when it is no longer valid. At all times, at least one staff member will have a current paediatric first aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework and is updated at least every 3 years.

### 3.6 Risk assessment

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First-aid arrangements will be part of the annual staffing and responsibilities review covering staff, pupils and visitors. This will identify whether any further measures need to be put in place, in addition to those outlined in this policy, and will be conducted using the school's standard risk assessment template (see Estates policy suite). This will identify:

- sites within school where ready access to a first-aid kit and first-aider is most crucial;

- an appropriate number of staff to be trained to ensure adequate numbers of trained staff are always likely to be on-site and on-duty (taking into account lunchtime arrangements, potential for sickness absence, being off-site on trips, or out-of-hours activities);
- access arrangements for emergency services;
- any activities or sites that pose specific risks/increased likelihood of injury;
- staff or pupils with specific health needs or disabilities;
- accident statistics that will be used to inform the assessment of risk.

## CHAPTER 4: SIGNPOSTING MENTAL HEALTH

We aim for the school to be a welcoming, inclusive and safe environment that children wish to attend. However, there will be occasions when children do not attend appropriately, and this chapter sets out how we will manage this.

At our school we know that everyone experiences life challenges that can make them vulnerable and at times, anyone may need additional emotional support. We take the view that positive mental health is everybody's business and that we all have a role to play.

We will ensure that staff, pupils and parents are aware of what support is available within our school and how to access further support.

### 4.1 Identifying needs and Warning signs

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All staff will monitor the wellbeing of their pupils and record (using MyConcern) any difficulties and seek advice from DSL or DDSL with persistent indicators such as:

- Poor attendance
- Punctuality
- Difficult relationships
- Poor approach to learning
- Physical indicators
- Negative behaviour patterns
- Change in family circumstances
- Recent bereavement
- Health indicators
- Domestic Violence
- Sadness and low mood
- Attention seeking or avoidance behaviour
- Changes in eating / sleeping habits
- Becoming socially withdrawn
- Changes in activity and mood
- Talking or joking about self-harm or suicide
- Expressing feelings of failure, uselessness or loss of hope
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

At least twice per year, all teachers complete an assessment on each child based upon the Wellbeing Continuum. The results of this are recorded on our internal tracking system in order to help us initially 'triage' our children for support and/or intervention where needed. This will form the basis for ongoing support and need identification.

## **4.2 Working with Parents and carers**

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In order to support parents we will:

- Highlight sources of information and support about mental health and emotional wellbeing on our school website
- Share and allow parents to access sources of further support
- Ensure that all parents are aware of who to talk to, and how to get about this, if they have concerns about their child
- Make our Mental Health and Wellbeing strategy easily accessible to parents
- Share ideas about how parents can support positive mental health in their children
- Keep parents informed about the mental health topics their children are learning about in RSHE and share ideas for extending and exploring this learning at home.

## **4.3 Training**

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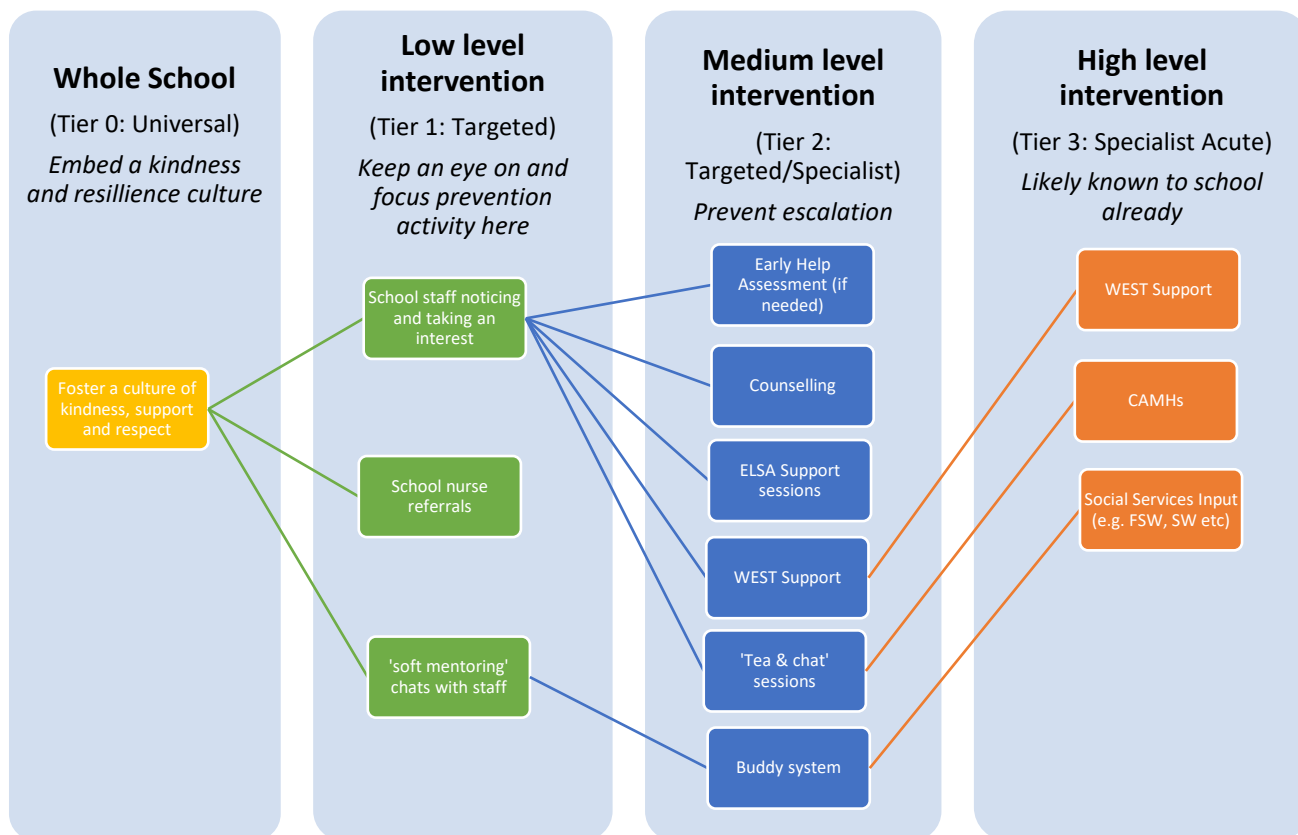
As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection training in order to enable them to keep students safe.

We have a number of staff who have had in depth mental health training. Further training opportunities for staff who require more in depth knowledge will be considered as part of our performance management process and additional CPD will be supported throughout the year where it becomes appropriate due to developing situations with one or more pupils.

## CHAPTER 5: THE GRADUATED RESPONSE TO MENTAL HEALTH

### 5.1 Graduated Response Model

We use a graduated response for support with mental health. Our strategy looks like this:



### 5.2 Whole School – Level 1

The response starts with the whole school where all children receive strategies to increase their resilience and help them to be surrounded by a culture of kindness, support and respect to help increase resilience.

The skills, knowledge and understanding needed by our pupils to keep themselves mentally healthy and safe are included as part of our developmental RSE and PSHE curriculum, Values teaching and Collective Worship. The specific content of lessons will be determined by the specific needs of the cohort we are teaching. We also use the PSHE Association Guidance to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner.

We recognise that all children need help and support sometimes and we as staff will be observant and reactive to children's needs as much as possible. We recognise the power of filling a child's cup and strive for the adults that deal with our children help to fill up their cup to guard against adversities. This is illustrated in the graphic.



### **5.3 Low level intervention – Level 2 – Targeted Support**

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Some children will need more than the whole school offer and staff will notice those children that need support. Once individuals are identified as needing extra support, class teachers and other staff will begin noticing and giving extra attention. Staff will make sure that they connect with the child more regularly, notice what they are doing and look for opportunities to fill up the cup.

Children will be given more opportunities for positive one on one or small group activities that will give children the positive attention and chance of a better connection that they may require.

### **5.4 Medium level intervention – Level 3 – Prevent escalation**

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Some children will show, through their behaviour, that they need further targeted support in a more structured way as their poor mental health has not shown signs of improvement. The school will then offer further support through targeted approaches for individual pupils or groups of pupils which may include:

- ELSA (Emotional Literacy Support Assistants) will assess children's needs and devise a plan for a six week intervention.
- 'Tea and chat' with a mental health first aider.
- 'Circle of friends' intervention for those experiencing social isolation.
- Targeted use of SEAL resources.
- Managing feelings resources.
- Mental health and wellbeing groups.
- Therapeutic activities including art, lego and relaxation and mindfulness techniques.
- Girls on Board sessions??

### **5.5 High level intervention – Level 4 – at risk of becoming overwhelmed**

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These children will often be already known to us due to their behaviour or home circumstances.

They will be assessed, and the most appropriate agency will be involved. This could be:

- The school nurse
- Educational psychology service
- Behaviour support
- Paediatrician
- CAMHS (child and adolescent mental health service)
- Counselling service
- Family support workers
- NHS mental health nurse

## **5.6 Key members of staff & roles**

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Whilst all staff have a responsibility to promote the mental health of students, staff with a specific, relevant remit include:

### **5.6.1 School Mental Health Lead** *Main point of contact for all mental health coordination*

Brampton Abbots: Chantelle Evans                      Bridstow: Catherine Thomas

### **5.6.2 Emotional Literacy Support Assistants (ELSAs)**

Brampton Abbots:    Claire Lewis, Andrea Price, Melissa Lewis

Bridstow:                      Fiona Turner

### **5.6.3 Mental Health First Aiders**

Brampton Abbots:    Dan Brearey, Claire Lewis, Melissa Lewis

Bridstow:                      Catherine Thomas, Fiona Turner

### **5.6.4 Safeguarding Leads**

Designated Safeguarding Lead (both schools): Dan Brearey (Headteacher)

Deputy Designated Safeguarding Leads (DDSL)

Brampton Abbots:    Chantelle Evans, Lara Parry-Roberts, Claire Lewis

Bridstow:                      Andy Pullen, Catherine Thomas

### **5.6.5 SENDCOs**

Brampton Abbots: Claire Lewis

Bridstow: Catherine Thomas



## **CHAPTER 6: MENTAL HEALTH AND WELLBEING IN STAFF**

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A school's caring ethos and environment will have a major impact on the wellbeing of its staff and pupils. It is important for leaders to define that culture and vision, making it clear what behaviours, values and beliefs underpin it.

It is important too for the school leaders to build a culture of trust where school staff feel valued, can be open about their health and wellbeing and know how to access support if they need it.

For all of this to happen, it is essential for the Headteacher and the school leadership team (including governors) to model good mental health and wellbeing behaviour and practice. It is also important for the head teacher to remember to look after their own mental health and wellbeing alongside that of their staff.

### **6.1 How we support the mental health and wellbeing of staff**

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- Staff Support Services
- Annual individual staff wellbeing day – reviewed regularly to ensure access and benefit.
- Supervision offered to staff – where appropriate
- A team approach promoted and all staff feeling involved when decision making about school
- A buddy up approach when completing tasks e.g. curriculum teams
- An open door policy where staff feel they can go and talk
- Staff WhatsApp and emails limited where possible, to working hours of 8am-6pm and not on weekends or in holiday.

## **Appendix 1: Legislation and Statutory Guidance**

[School Food Standards: resources for schools](#)

[First Aid in Schools & EYFS](#)

[HSE guidance on First Aid](#)

[ROSPA](#)

Education Support

[Promoting and supporting mental health and wellbeing in schools and colleges](#) (DfE)

[How we're helping look after the mental health of children and young people](#) (Education Hub)

[Mental Health support for Schools and Colleges](#) (NHS)