

HEALTH AND WELLBEING IMPLEMENTATION GUIDE



How schools improve student health and wellbeing



Providing feedback

This resource is the result of the collaboration of numerous educational leaders from across Victoria. Their input and feedback was essential in tailoring the guide to meet schools' needs. This is the first version of the resource and your feedback will assist the Department in further improving the guide. You can provide input into the development of future versions by emailing fiso@education.vic.gov.au

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INTRODUCTION

To achieve school improvement goals, effective implementation is required. Schools have different strengths, starting points and contexts — there is no one-size-fits-all model for school improvement. To sustain and accelerate improvement, schools need to identify the right evidence-based improvement strategies, plan for effective implementation, and translate these strategies into the day-to-day work of staff.

The Framework for Improving Student Outcomes (FISO) Implementation Guides describe the professional practices of effective implementation within the improvement cycle. This includes identifying the education challenges where efforts will be prioritised, planning for how the prioritised challenges will be addressed, identifying and celebrating what is working, and adapting when barriers are encountered or changes occur.

IMPROVEMENT CYCLE



The guides aim to support schools to effectively implement strategies in six FISO dimensions.

This guide focuses on **health and wellbeing**. That is, it guides schools in developing positive, trusted and supportive environments, meeting basic material needs, ensuring good mental, social, emotional and physical health, improving learning, and empowering a positive sense of culture and identity among students.

The six FISO Implementation Guides focus on the following dimensions:

BUILDING PRACTICE EXCELLENCE

CURRICULUM PLANNING AND ASSESSMENT

EMPOWERING STUDENTS AND BUILDING SCHOOL PRIDE

SETTING EXPECTATIONS AND PROMOTING INCLUSION

HEALTH AND WELLBEING

BUILDING COMMUNITIES

STRATEGIC ENABLERS FOR IMPLEMENTATION

FISO Strategic Enablers for Implementation Guide

Complementing this guide, the [FISO Strategic Enablers for Implementation Guide](#) aims to support schools to reflect on and strengthen four common enablers:

1. Self-evaluation capability throughout a school
2. Real-time data monitoring implementation
3. Leadership capability for school improvement
4. Robust implementation structures

Strengthening these enablers in schools supports implementation across all dimensions. The FISO Strategic Enablers guide contains guidance, research and supports for school improvement and leadership teams. Use the FISO Strategic Enablers guide in conjunction with this guide.

Principles

Three key principles underpin decision-making and ways of working when using this guide:

1. All school staff, students, families and members of the wider school community have a role to play in school improvement and implementation work.
2. School leaders actively engage other staff members, students, families and members of the wider school community in school improvement and implementation work.
3. Everyone in a school has perspectives, experiences and information that can help schools better understand context and educational successes, needs and challenges.

How to use the guides

The guides can support schools to use the improvement cycle to implement improvement initiatives, for example as part of the school review process, for annual planning and monitoring or as part of Professional Learning Communities inquiry cycles. In this guide, the referencing of goals and actions can be related to four-year School Strategic Plans, Annual Implementation Plans or shorter cycles as established by your school.

In school review: School leaders, in partnership with the School Improvement Team (SIT) and school community, can use the guides to gather and examine evidence to inform the pre-review self-evaluation and reflect on the effectiveness of past improvement initiatives and their implementation. The guides can also be used by the school review panel, in partnership with the school community, to develop a new four-year strategic plan.

In annual implementation planning and monitoring: The School Leadership Team, in partnership with the school community, can use the guides to develop the Annual Implementation Plan (AIP) targets, actions and activities during Term 4. The SIT can also use the guides to reflect on how the school monitors progress each term, and during mid-year monitoring activities.

In regular cycles: Professional Learning Communities/Teams (PLCs/PLTs) can use the guides to plan and implement inquiry cycles, using real-time evidence to monitor, evaluate and celebrate student progress and reflect on the effectiveness of teaching and learning strategies.

HEALTH AND WELLBEING

EVALUATE AND DIAGNOSE

Student-centred challenges in the areas of health and wellbeing can be complex to define. The opportunity at this stage of the improvement cycle is to work with the wider school community to find the challenges where investing time and effort will have the greatest impact.

This is helped by working together to define the challenges, better understand the causes and build commitment around identified areas for improvement. Engaging in these challenges is important, because improving students' wellbeing is linked to better learning achievement and mental health. Conversely, success in learning enhances students' wellbeing.

Successful health and wellbeing initiatives include policies that support students' health and wellbeing, strong networks of communication between staff, students and parents, a culture of 'shared leadership', and continuous evaluation and improvement (Dilley, 2009).

Assess the school's readiness to improve health and wellbeing

The first step at this stage is to determine the school's readiness to implement change. The school can use the discussion points, FISO dimensions and key questions in the table below to reflect on readiness, using a range of information and evidence to inform the discussion.

The following resources can help schools prepare to effectively support health and wellbeing:

- Victorian Teaching and Learning (VTLM) [Practice Principles](#)
- [Health, wellbeing and inclusion workforce practice model](#)
- [Respectful Relationships](#)
- [Student health and wellbeing](#)
- [Communities of Practice](#)
- [Partnerships and collaboration with other schools \(policy\)](#).





Download and edit a template of the [Assessing readiness table](#) (below).

DISCUSSION POINTS	FISO DIMENSIONS	KEY QUESTIONS TO ASK
An understanding shared by all school staff that health and wellbeing are foundational to student learning, and a shared vision for excellence in supporting student health and wellbeing	Health and wellbeing	Do we have a shared understanding that wellbeing is foundational to student learning? What does excellent support for students' health and wellbeing look like in our school?
A safe learning environment that is respectful, trusting and supportive for teachers, students and families	Health and wellbeing	Is our learning environment safe for students, teachers, staff and families? How do we know this?
Strong organisational structures and relationships with broader networks, supports and agencies, and access to resources which support student health and wellbeing	Networks with schools, services and agencies	Do we know what external supports and agencies can improve our students' health and wellbeing? Do we have effective relationships with them?

Identify key health and wellbeing challenges

The second step in this stage is for a representative group of leaders and staff to gather and interpret evidence to understand the challenges they want to solve, and which will have the greatest impact.

As a starting point, reflect on the following questions:

- What assumptions, beliefs and values underpin how teachers, staff, students and families perceive the importance of health and wellbeing?
- Have teachers, staff, students and families with different perspectives been given the opportunity to validate the above assumptions?
- Are decisions about health and wellbeing informed by research evidence?

What does the research evidence say?

- Higher levels of wellbeing are linked to higher academic achievement, school completion, and better overall mental and physical health ([Australian Wellbeing Framework](#)).
- Wellbeing interventions focused on belonging and engagement are found to have the greatest impact on student academic achievement (Dix et al., 2020).
- Social and emotional learning programs benefit students' social skills, self-image, academic achievement and mental health and reduce antisocial behaviour and substance abuse (Evidence for Learning, 2019a).
- Effective health and wellbeing initiatives focus on the quality of intervention programs, which is more important than the frequency or duration (Dilley, 2009).
- School connections to social services which provide additional support for student health and wellbeing also contribute to improving student achievement (Moore et al., 2013).

Further research evidence supporting the health and wellbeing dimension can be found in the [positive climate for learning evidence base](#).

Examine existing efforts to improve student health and wellbeing

The SIT can work with relevant leaders and staff (such as the wellbeing team, teachers, year-level leaders and support staff) to identify the practices in place to:

- regularly assess, evaluate and update records of students who are at risk of or have confirmed health and wellbeing issues (such as mental health issues, placement in out-of-home care, homelessness, family violence or malnourishment)
- provide education about drugs, sexuality, respectful relationships, traffic safety, health promotion, hand hygiene and swimming and water safety
- provide individualised support for students with chronic or acute health and wellbeing needs to enable them to engage as fully as possible in school life
- recognise and celebrate healthy lifestyles and choices and promote positive health and wellbeing through prevention and strengths-based approaches
- promote the impact of positive health and wellbeing on learning
- reflect on the coherence and continuity of the school's approach to health and wellbeing
- ensure health and wellbeing practices are built into the school's pedagogical model.

Rate how successful these practices have been in the past. What evidence is informing these ratings? What could be done to improve the practice?

SITs can:

- reflect on the extent to which students, teachers and staff understand how alcohol and other drugs, bullying and harassment, violence and abusive relationships are harmful
- discuss if staff know how to respond to these issues, and how to build healthy relationships, resilience and confidence in their students.

Gather relevant data to understand student health and wellbeing

Once the SIT has examined existing efforts to create and maintain a safe, supportive and respectful learning environment, it can identify other relevant sources of data to be gathered.

Use improvement measures in our system

Data available in Panorama can support evaluations of how to promote health and wellbeing. Useful sections include:

- Attitudes to School Survey — the 'resilience', 'sense of confidence' and 'attitude to attendance' factors
- School Staff Survey — the 'support growth and learning of the whole student' factor
- Parent Opinion Survey — the 'confidence and resiliency skills' factor.

Collect data and information from students and teachers

Ask Professional Learning Community/Team (PLC/PLT) leaders and the school-wide positive behaviour support (SWPBS) implementation team to engage their community in discussions about the extent to which teaching practices promote health and wellbeing.

Consider using the [Victorian child health and wellbeing survey](#) or create internal 'pulse' student surveys for the school. These may include questions that measure students' agreement with statements such as:

- I feel safe at school.
 - I don't get bullied at school.
 - My teacher listens to me.
 - I feel confident talking to my teacher if I'm having a problem.
 - I have enough food to eat at school
- Check, too, if students can name the school's values and expectations.

Supporting resources

[Student health and wellbeing resources, services and guidance materials](#)

[The Australian Student Wellbeing Framework](#)

[Australian Research Alliance for Children and Youth](#)

[Schoolwide Positive Behaviour Support](#)

Work together to make sense of the evidence

The SIT and the wellbeing team, year-level coordinators/managers, and relevant service providers can now work to ‘triangulate’ assumptions — that is, use multiple methods and sources to test their validity. This will help the SIT thoroughly understand the root causes of any challenges, and identify and prioritise areas for focus.



Download and edit a template of the [Making sense of data and evidence](#) table (below) to help with this process.

SENSE-MAKING ACTIVITIES	REFLECTIVE QUESTIONS AND SENTENCE STEMS	ACTIONS TO SUPPORT PRIORITISING AND SETTING GOALS
Identify patterns in health and wellbeing data	What were the trends? “In general I noticed...” What surprised you? “I wasn’t expecting to see...” Were there contradictions? “On the one hand... On the other hand...”	Document perspectives from each member, highlighting where multiple members agreed.
Test assumptions about health and wellbeing practices	What does our school do well to support student health and wellbeing? How do you know? What do you think are the highest priorities for improving student health and wellbeing? How do you know? Which student cohorts require additional health and wellbeing support? What in the data is telling you this?	Document perspectives on the highest-priority needs. This may also make it clear that more data is required. If so, data should be gathered and brought back to the group.
Build consensus on priority areas of focus in health and wellbeing	Allow each team member to respond to these questions: What data is telling us we need to focus efforts to improve student health and wellbeing? What are the root causes of challenges in those areas?	Record responses from each member. If there is not a clear consensus, ask members to justify their responses, seek additional data or use a voting system

A meta-analysis of whole-school approaches to social and emotional learning development found a small positive impact on a range of social, emotional, behavioural and academic outcomes. However, the quality of implementation was important. Effective interventions involved a coordinated set of activities across curriculum, teaching, school ethos and environment, and family and community partnerships. They also had strong buy-in from staff trained and supported in skills that extend beyond the classroom (Goldberg, et al., 2019).

HEALTH AND WELLBEING

PRIORITISE AND SET GOALS

Use the data, discussions, and assumptions developed in the evaluate and diagnose stage to identify where improvement efforts will be focused. These may be the areas of greatest need, or where opportunities exist to maximise impact. Each school's goals will be specific to its context, including its community demographics, performance strengths and challenges, and staff climate and capability.

Identify goals to improve student health and wellbeing

EMERGING | EVOLVING

Schools which are 'emerging' or 'evolving' in health and wellbeing practices, or which are beginning to focus improvement efforts in this dimension, could consider:

- identifying and building the skills and knowledge that staff need to promote health and wellbeing
- identifying and building the skills and knowledge that students need to adopt healthy lifestyles and make healthy choices
- developing structures and processes that support healthy choices and practices within the school
- identifying and supporting students or groups of students with existing health conditions that might affect their learning.
(This can include implementing a current Individual Education Plan for each student, scheduling regular touchpoints with students, parents/carers/kin and wellbeing professionals, and ensuring school staff regularly communicate and receive updates from education support staff)
- establishing relationships with associated 'feeder' schools or kindergartens to improve the sharing of knowledge and of student data prior to transitions
- building stronger relationships with health and wellbeing providers in the community, and engaging them more proactively in the whole-school approach to health and wellbeing (The Building Communities Implementation Guide has advice about strengthening relationships with community organisations)
- contacting their local [LOOKOUT education support centre](#) to find out how they can build staff capacity to improve educational outcomes for students in out-of-home care
- contacting the [Navigator Coordinator](#) to find out how the Navigator program can support disengaged students to return to education.

Schools which are 'embedding' or 'excelling' in health and wellbeing practices, or which have sustained improvement efforts in this dimension, could consider:

- meaningfully involving students in promoting positive health and wellbeing. This might include establishing a small working group of students to better understand how the school might be more proactive in promoting health and wellbeing, and what will really make a difference for students. Students can be encouraged to research best practice globally, nationally and locally
- gathering students' input and ideas on enhancing the approach to health and wellbeing
- identifying members of staff who will lead on health and wellbeing, ensuring they are sufficiently resourced
- reviewing school policies, identifying which will have the biggest impact on health and wellbeing, and ensuring these are comprehensive and up-to-date
- running workshops with students, parents/carers/kin and health professionals to engage them in refreshing the school's approach to health and wellbeing.

Community health and wellbeing providers

Family violence services: Domestic Violence Resource Centre Victoria has a [database](#) of family violence services across Victoria.

Local Government Area (LGA) services: Including youth groups, health services and libraries. Some LGAs offer free general practitioner and counselling services for young people.

Headspace schools: National workforce that partners with schools to build the mental health literacy and capacity of staff.



Download and use the [Identifying where efforts will be prioritised](#) template to help with this process.



HEALTH AND WELLBEING DEVELOP AND PLAN

Once goals have been set and prioritised, the SIT can develop plans for how these will be achieved, mapping out all possible actions and approaches, then selecting those likely to have the greatest impact given the school's context.

Successful whole-school practices require careful consideration of the selection of evidence-based approaches that fit the school's context and address professional development needs. They also include supportive policies such as implementation guidelines and tools for adopting new approaches (Goldberg, et al., 2019).

Use a theory of action to plan backwards from goals

Schools may choose to develop a theory of action to explain how change will be achieved. This describes the relationships between the intended impact, outcomes, outputs and actions to help schools see the changes that will need to occur for implementation to succeed.

Along the way, the SIT can test the theory using questions such as:

- What assumptions are being made about the relationships?
- Whose perspectives are we including? Whose are we excluding?
- Are the proposed actions informed by research evidence?



Download and use the [Theory of action](#) template to help with this process.

Illustrative practice case study

At one school, interviews with students and data collected through the Victorian Student Health and Wellbeing Survey (VSHAWS) indicated that students were not physically active for the recommended hour per day, five times per week. Staff on yard duty had observed that approximately three out of four students were sedentary at recess and lunch. The following theory of action was developed to improve student's active health through a whole-school focus on physical activity.

Impact indicators

- More students report more physical activity (in VSHAWS) and student engagement and resilience increase (identified through the Attitudes to School Survey).

Impact

- Students have improved health and wellbeing.

Outcome indicators

- All students engage in at least two hours per week of physical activity (scheduled sport and whole-school activities).
- Percentage of teachers reporting most students are physically active in breaks; students report their favourite break activities are not sedentary activities.

Outcomes

- Whole-school physical activity routines are established.
- A physically active student culture is built.

Output indicators

- Meetings of the staff team, occurrences of planned events and feedback from students and staff on the events.
- Establishment of a skipping club, prioritising resources to purchase a variety of balls students can borrow, and a designated dance courtyard with rotating student DJs.

Outputs

- Scheduled 30 minutes of whole-school physical activity once per week, and two planned half-day physical activity carnivals per term (walkathons, whole-school discos).
- A staff team is coordinated to support planning of these events.
- Student input into physically active clubs and activities.

Actions

- Increase scheduled physical activities at the school.
- Build a physically active recess and lunchtime culture.

Develop actions to support happy, healthy and active kids

In planning to improve health and wellbeing, the SIT can discuss, adapt and document the following suggested actions, or add actions specific to their school's context.



Download and complete the [Mapping possible actions](#) template to ensure the benefits and potential barriers for each action are considered.

EMERGING | EVOLVING

Schools which are 'emerging' or 'evolving' in health and wellbeing practices, or which are beginning to focus efforts in this area, could consider:

- sharing examples of how to promote and improve health and wellbeing through teaching practice
- developing a policy and process for pastoral practices, such as home groups
- allocating staff to pastoral responsibilities, including monitoring overall student health and wellbeing
- introducing a whole-school health and wellbeing program that encourages students to take ownership of their health and wellbeing
- establishing programs to ensure students engage in daily exercise, with a range of different options suited to age, fitness levels and interest
- reviewing healthy food options at the canteen and ensuring guidance for parents/carers/kin about healthy lunchboxes is made available
- ensuring students with chronic and acute health and wellbeing issues have an Individual Education Plan to help them engage as fully as possible in school life.

EMBEDDING | EXCELLING

Schools which are 'embedding' or 'excelling' in health and wellbeing practices, or which have sustained improvement efforts in this area, could consider:

- promoting the use of effective teaching and learning strategies in health and wellbeing
- extending the mandatory student support groups for students with disabilities to all students with diverse learning needs
- ensuring all staff understand their role in providing health and wellbeing support, and how this connects with other health and wellbeing support from the school
- promoting health and wellbeing as a regular topic in staff meetings and professional learning discussions
- inviting students who are receiving physical and mental health support to provide feedback about their school experience. Where possible, take action in response to this feedback
- supporting staff to be proactive in working with families/carers/kin and allied health services to support students with their treatment/recovery
- supporting students who regularly miss school because of health appointments or ill-health through remote teaching, equipping parents/carers/kin to support learning, and providing resources for students to continue their learning at home
- carrying forward and strengthening lessons from remote and flexible learning.

The Wallace Foundation report on 25 leading social emotional learning programs identified five key features of success: supportive contexts, setting realistic goals, teacher competency, family-school-community partnerships, and planning that targets a key set of skills across the multiple domains of students' development. These domains include emotional, social/interpersonal, cognitive, regulation and executive function skills (Jones, et al., 2017).

In developing actions, the SIT should discuss whether they meet the characteristics of effective implementation:

- ☑ Are actions and activities sufficiently 'bite-sized'?
- ☑ Are actions easy to understand? Is it clear what will be implemented?
- ☑ Can actions be embedded in the school's everyday structures and routines (making them easier to prioritise and adapt to)?
- ☑ Is it clear who will be responsible for what, and when? Are there systems for monitoring this?
- ☑ Are timelines and monitoring cycles short? (Completion builds satisfaction, opportunity for celebration, acknowledgement of achievement and momentum for further work.)

Develop a professional learning plan for health and wellbeing

Effective professional learning is active: it includes opportunities for discussion and to apply what is learnt during training and between sessions (Garrett et al., 2019; Timperley et al., 2007). Professional learning for health and wellbeing should ensure that teachers and support staff:

- understand the meaning, importance and benefits of health and wellbeing
- have the skills and knowledge to actively promote health and wellbeing in the classroom
- have the skills and knowledge to develop and sustain positive relationships with students
- can identify and respond to potential student health and wellbeing challenges
- have the skills and knowledge to support students with existing medical or mental health conditions in the classroom and around the school.

Parts of the professional learning plan may be actioned by the school's PLCs/PLTs or the SWPBS implementation team.

Questions that can help to establish a well-targeted plan include:

- Which teachers in our school have outstanding skills in promoting health and wellbe-ing?
- Which teachers have outstanding skills in meeting the needs of individual students with physical or mental health support needs?
- How could they meaningfully share this knowledge and help to build the capacity of others?
- Is there a clear 'line of sight' between teachers' health and wellbeing professional Development Plan goals and the strategic plan?
- Which teachers would benefit most from professional learning on improving practice with respect to health and wellbeing?
- Have we collaborated with our Student Support Services team and the Respectful Relationships project and liaison officers to develop effective professional learning?

Continuing professional development for teachers is important to ensure uptake of evidence-based strategies to support students. A systematic review of teacher coaching found large positive effects on teacher outcomes, specifically on instructional practice, when teachers receive high-quality coaching over a sustained period. Web-based virtual coaching was highlighted as a potential way to address the need for high-quality coaches given resource constraints or other constraints (Kraft, et al., 2018).

HEALTH AND WELLBEING IMPLEMENT AND MONITOR

The success of any plan depends on how well it is implemented. Implementation is not a one-off event, but an iterative process of actioning what is planned, identifying and celebrating what is working, and adapting when barriers are encountered, changes occur, or plans fall behind schedule.

Effective schools ensure teachers and staff have the capacity and knowledge to implement programs effectively. A rigorous study of a mental health program found significant differences between the quality of implementation and academic outcomes. Students from schools with higher fidelity of implementation, dosage level and quality of delivery have better academic outcomes than schools with a lower quality of implementation (Dix, et al., 2012).

Identify how improvements to student health and wellbeing will be monitored

Monitoring allows leaders to know which practices are changing in their schools and the impact those changes are having. Monitoring also identifies barriers to implementation early so that approaches can be adapted, and strategies put in place to get back on schedule. Monitoring usually involves collecting quantitative and qualitative data.

Sometimes, data collected across Victoria (available in Panorama) will assist with monitoring and assessing impact from year to year. At other times, schools will need to develop tailored tools to monitor implementation in real-time over shorter regular cycles, or at the end of each term.



Download and use the template for [Identifying how actions will be monitored](#) to document this.

Sources of data for monitoring actions to improve student health and wellbeing include:

- surveys of student health and wellbeing (sample questions can be found in the AToSS or VSHAW surveys; schools could survey the whole cohort, a small sample of students, or students participating in a particular program)
- surveys of teachers and support staff about perceived student health and wellbeing, and the effectiveness of new programs or approaches being trialled
- student management system data (for example, in Compass) to monitor how reported student behaviours and successes are 'triaged' and responded to
- interviews or focus groups with students or parents/carers/kin
- observations of classes, the playground/yard or extracurricular health programs
- documentation of policies, programs or the health curriculum
- documentation or planning from professional learning or approaches to supporting wellbeing
- the number or type of referrals to the wellbeing team.

Survey tips

- Short, focused surveys with a clear purpose are most effective for monitoring.
- Questions need to be carefully designed for your audience, use clear, accessible language and be presented in a logical order (Taherdoost, 2016).
- Pre-test surveys with a small group for feedback before sharing more broadly.
- Combine all monitoring questions for the same group into one survey. Consider other ways you can minimise the burden of completing surveys.

For more information about real-time data monitoring, see the [Strategic Enablers for Implementation Guide](#).

Implement plans to improve student health and wellbeing

Once goals have been set, plans have been developed, and monitoring tools are in place, school and program leaders can lead implementation effectively by:

- ensuring enough time is allocated to action considered approaches to health and wellbeing
- identifying champions of the work and seeking to engage them early
- regularly revisiting action plans to enhance health and wellbeing supports, and promoting the expectation that all teachers contribute to the school's plans to improve school and community engagement
- establishing and celebrating implementation milestones
- using and adapting monitoring tools regularly and seeking out a variety of evidence to understand how health and wellbeing support is improving
- using the improvement cycle over shorter periods to diagnose challenges and adapt implementation.

DET workforces that support health and wellbeing in schools

- Student Support Services: Teams of professional including psychologists, speech pathologists and social workers that provide schools with specialised services, group-based and individual support and build the health and wellbeing capabilities of school staff
- Respectful Relationships (RR) workforce: A dedicated workforce to support lead and partner schools implement RR.
- Primary and Secondary School nurses

Teachers become better at implementing new approaches with repetition over time. This implies that indicators for monitoring progress should identify short and long-term effects (Filges, et al., 2019). To achieve this, an essential condition for successful implementation requires monitoring progress to identify problems and adjust (Herlitz, et al., 2020).

Case studies: schools that have improved student health and wellbeing outcomes

- [Wallarano Primary School](#): Teachers and the education support team work closely with a speech pathologist and psychologist to identify and address the individual learning needs of students with language and other additional needs.
- [Yarra Hills Secondary College](#): The whole-school culture of respect has improved as a result of incorporating the Respectful Relationships (RR) education into the learning program.
- [Spring Gulley Primary School](#): Students have improved their social and emotional learning less than a year after implementing the RR initiative.

Positive behaviour in practice: Bentleigh West Primary School

Bentleigh West Primary School, a finalist in the 2020 Victorian Education Excellence Awards, takes a whole-school approach to supporting students with a wide and complex range of learning differences. The school has created a safe, supportive and high-functioning learning environment by integrating the diverse skills and expertise of the Education Support (ES) staff team in all aspects of its mission.

Positive behaviour has been a focus for Bentleigh West Primary, and the collective work of the ES team is helping the school to become an exemplar in supporting the education and wellbeing of its students.

Responding to students' diverse medical, behavioural and educational needs is both rewarding and challenging. In recognition of the growing complexity of the ES role, all staff, including the ES team, engage in ongoing professional learning including literacy, numeracy and high-impact teaching strategies programs.

This high-achieving team has formed partnerships with several tertiary institutions, establishing Certificate in Education Support student placements at the school, and extending its expertise to collaborate with neighbouring schools, parents and the local community.



REFERENCES AND RESOURCES

Links to key resources

- [Australian Research Alliance for Children and Youth 'The Nest'](#)
- [DET Bully Stoppers](#)
- [DET Healthy Eating in schools](#)
- [Health, wellbeing and inclusion workforce practice model](#) (DET log in required)
- [DET Respectful Relationships](#)
- [DET Safe schools](#)
- [DET School Wide Positive Behaviour Support](#)
- [DET Student health and wellbeing](#)
- [DET Navigator case management program](#)
- [DET LOOKOUT Education Support Centres](#)
- [Student Wellbeing Hub](#)
- [VTLM Practice Principles](#)

References

- Dilley, J. (2009). Research Review: School-based health interventions and academic achievement. Retrieved online: <https://www.yumpu.com/en/document/read/52968259/research-review-school-based-health-interventions-and-academic-achievement>
- Dix, K., Slee, P., Lawson, M. & Keeves, J. (2012). Implementation quality of whole-school mental health promotion and students' academic performance. *Child and Adolescent Mental Health*, 17(1), 45-51.
- Evidence for Learning (2019a). Metacognition and self regulated learning. Retrieved online: <https://evidenceforlearning.org.au/the-toolkits/the-teaching-and-learning-toolkit/all-approaches/metacognition-and-self-regulation/>
- Filges, T., Torgerson, C., Gascoine, L., Dietrichson, J., Nielsen, C. & Viinholt, B.A. (2019). Effectiveness of continuing professional development training of welfare professionals on outcomes for children and young people: A systematic review. *Campbell Systematic Reviews*, 15(4), 1-31.
- Fullan, M. (2007). *The new meaning of educational change*. New York: Teacher's College Press.
- Garrett, R., Citkowicz, M. & Williams, R. (2019). How responsive is a teacher's classroom practice to intervention? A meta-analysis of randomized field studies. *Review of research in education*, 43(1), 106-137.

- Goldberg, J., Sklad, M., Elfrink, T., Schruers, K.M.G., Bohlmeijer, E.T. & Clarke, A.M. (2019). Effectiveness of interventions adopting a whole school to enhancing social and emotional development: a meta-analysis. *European Journal of Psychology of Education, 34*, 755-782.
- Hattie, J. (2009). *Visible learning: A synthesis of over 800 meta-analyses relating to achievement*. London: Routledge.
- Herlitz, L., MacIntyre, H., Osborn, T. & Bonell, C. (2020). The sustainability of public health interventions in schools: a systematic review. *Implementation Science, 15*(4), 1-28.
- Jamtsho, S. (2015). *Implementing a Whole-School Approach to Student Wellbeing: A Study Examining the Implementation Experiences of Bhutanese and Australian Teachers in Wellbeing Leadership Roles*. Melbourne: Melbourne Graduate School of Education, The University Melbourne.
- Jones, S., Brush, K., Bailey, R., Brion-Meisels, G., McIntyre, J., Kahn, J., Nelson, B. & Stickle, L. (2017). Navigating SEL from the inside out: Looking inside and across 25 leading SEL programs (Elementary school focus). Retrieved online: <https://www.wallacefoundation.org/knowledge-center/Documents/Navigating-Social-and-Emotional-Learning-from-the-Inside-Out.pdf>
- Kraft, M., Blazar, D. & Hogan, D. (2018). The Effect of Teacher Coaching on Instruction and Achievement: A Meta-Analysis of the Causal Evidence. *Review of Educational Research, 88*(4), 547-588.
- Leithwood, K. & Sun, J. (2012). The Nature and Effects of Transformational School Leadership: A Meta-Analytic Review of Unpublished Research. *Educational Administration Quarterly, 48*(3), 387-423.
- Moore, T., McDonald, M., Tollit, M. & Bennett, K. (2013) *Children and young people's health and wellbeing in educational settings: A review of the evidence*. Murdoch Children's Research Institute.
- Sheridan, S., Smith, T., Kim, E., Beretvas, N. & Park, S. (2019) A Meta-Analysis of Family-School Interventions and Children's Social-Emotional Functioning: Moderators and Components of Efficacy. *Review of Educational Research, 89*(2), 296-332.
- Taherdoost, H. (2016). How to Design and Create an Effective Survey/Questionnaire; A Step by Step Guide. *International Journal of Academic Research in Management (IJARM), 5*(4), 37-41.
- Timperley, H., Wilson, A., Barrar, H. & Fung, I. (2017). *Teacher Professional Learning and Development: Best Evidence Synthesis Iteration*. Wellington: Ministry of Education. Retrieved online: <https://www.educationcounts.gov.nz/publications/series/2515/15341>
- Tracey, C., Slavin, R., Hanley, P. & Cheung, A. (2014). Success for all in England: results from the third year of a national evaluation. *Sage open, 4*(3), 1-10.

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