



Ofsted Wellbeing Proposal

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CONTENTS

Executive Summary.....	2
Other Issues	4
Business Case	4
Legal Context	4
Health and Wellbeing Boards.....	4
Cognitive Computing	5
Global Leadership.....	5
National Health and Wellbeing Crisis	5
Centre for Mental Health (2010) The Economic and Social Costs of Mental Health Problems in 2009/10.....	5
The Office of National Statistics: (2004).....	6
Annual Public Health Report (2014): Mental Health and Wellbeing in Kingston.....	6
Wellbeing in Four Policy Areas: Report by the All-Party Parliamentary Group on Wellbeing Economics (2014) ..	6
Strengths and Difficulties Questionnaire (SDQ) & Ofsted Data Dashboard	7
Strengths and Difficulties Questionnaire (SDQ)	7
Looked-after Children Return.....	8
Ofsted Data Dashboard.....	8
Recommendations to use SDQ and share on Ofsted Data Dashboard.....	9
Wellbeing in Four Policy Areas: Report by the All-Party Parliamentary Group on Wellbeing Economics (2014) ..	9
The Pursuit of Happiness: a new ambition for our mental health (CentreForum Commission, 2014)	9
ONS Measuring National Wellbeing: Children’s Wellbeing 2014.....	10
National Children’s Bureau: Better inspection for all, a response from the Partnership for Emotional Wellbeing and Mental Health in Schools.....	10
References	11

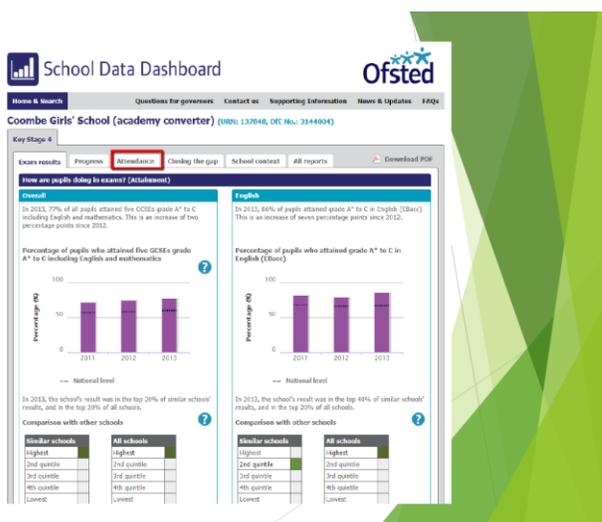
EXECUTIVE SUMMARY

To help address the current national health and wellbeing crisis where one in ten children suffers from a mental illness^{1/p.8} The Mindfulness Foundation recommends that the Ofsted online Data Dashboard be enhanced to include a snapshot of Wellbeing performance. The current ‘Attendance’ page would be renamed ‘Wellbeing’ and the Strengths and Difficulties Questionnaire (SDQ), applied to looked-after children since 2008, would be extended to all children and added as a Wellbeing measure along with Attendance.

Ofsted Dashboard

Wellbeing & Measures of Child Mental Health

www.mindfulnessfoundation.org.uk



Background

Aside from poor mental health being a heavy burden on the individual and their family, the government is spending £100 billion each year^{2/p.1} on health issues that are largely avoidable^{3/p.47}. There is ample evidence that a child's emotional wellbeing strongly predicts their adult mental health, highlighting the need to deal with mental health at an early age as part of the national wellbeing policy^{4/p.30}. Although these disorders are treatable, they often remain undetected and untreated⁵. The Education Secretary, Nicky Morgan highlights our ‘moral mission’ to meet children with compassion and support as soon as problems arise, or in other words ‘Proaction, not reaction’. Early intervention is ‘the best way to prevent serious personal, societal, and financial costs that poor mental health can cause’¹². Since 2008, local authorities have had the responsibility of monitoring the emotional wellbeing of looked-after children via the SDQ⁵. It is a quick and easy tool for measuring the mental health problems and emotional difficulties a child may be having. If difficulties are identified, the Enfield Emotional Behavioural and Health Assessment (EBH) is a screening programme model building on the SDQ's strengths and a meaningful and all-embracing assessment for potential CAMHS referrals⁵.

Recommendation

The Mindfulness Foundation recommends the use of the SDQ to measure the mental health of all school children. The use of this measure has also been proposed by the Office of National Statistics^{6/p.8} and the Centre Forum Commission^{7/p.30}. Ofsted and individual schools have a crucial role in measuring and reporting wellbeing, as highlighted by the APPG on Wellbeing Economics^{8/p.34}. A recent report by Prof Lord Darzi and Prof Lord Layard accused schools of a 'grossly inhumane failure to care for children's wellbeing' and being 'exam factories'. They call for radical changes in the education of all children, suggesting 'happiness lessons' for all school pupils from the age of five¹³. This approach was pioneered by Dr Anthony Seldon, the master of Wellington College in Berkshire¹⁴. The Partnership for Emotional Wellbeing and Mental Health in Schools supports this by proposing that the Ofsted inspection framework should include a clear indication that mental health is a key element of the curriculum of 'outstanding schools'^{11/p.3}. We propose that this responsibility includes the implementation of a 'Wellbeing' section on the online Data Dashboard in order to share the data produced from individual schools and to make it accessible to all. .

Outcomes

This proposal has the potential to support the following outcomes

- Governors and members of the public would have access to this information and schools would be incentivised to promote wellbeing, e.g. through mindfulness education.
- The dashboard has the ability to engage governors, young people and the public through a visual and dynamic presentation i.e. making data more accessible and comprehensible.
- The data could be used to plan and commission relevant services at school, in clinical settings and by Health and Wellbeing Boards.^{7/p.31}
- Through early detection and intervention, an estimated quarter to a half of adult mental illness could be prevented.^{9/p.63}

As well as acknowledging the tremendous work by the eminent individual contributors to all the major studies documenting the evidence base for this proposal and our researcher Anna Drescher, I would like to particularly thank Edward Davey MP for his continuous constituency support including many letters to Health & Wellbeing Boards, Department of Education and Department for Health.

Finally, we include observations on 'Other Issues' including the business case, legal context and potential contribution to the work of the Health and Wellbeing Boards along with a section on the application of Cognitive Computing support for large scale measurement of wellbeing and the opportunity for Global Leadership. As the Prime Minister stated recently "We are on the brink of a new industrial revolution. I want the UK to lead it."

Yoga Bowers

Chief Executive

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www.mindfulnessfoundation.org.uk

OTHER ISSUES

BUSINESS CASE

Focusing on prevention and early intervention, better coordination of services, changing behaviour and raising education attainment via enhanced wellbeing has strong potential to result in long-term economic benefits^{10/p.48}. The 2012 Chief Medical Officer's report offers a wide range of evidence from within the UK and abroad showing the economic logic and long-term societal benefits of increasing investment into prevention and early intervention, although exact figures cannot be provided^{10/p.47}. Due to government austerity measures, there are several barriers to the investment in prevention, such as the delay between investment and benefit, meaning savings may not be evident in any given financial or political cycle, and the lack of robust evidence showing that interventions will lead to the promised outcomes^{10/p.52}. Thus, the need for extensive piloting and vigorous evaluation of early intervention and prevention approaches is essential to demonstrate the return on investment (RoI).^{10/p.48}

LEGAL CONTEXT

The costs to society of early conduct problems are immense. The total cost of crime attributable to people who had conduct problems in childhood is estimated at about £60 billion a year in England and Wales.¹⁵ In recent years it has been increasingly recognised that the police are but one of many organisations that are, or should be, involved in the prevention of crime or the enhancement of safety within communities. Nevertheless, crime prevention remains one of the key aspects of police work.

It is not however clear exactly what crime prevention should be taken to include, for on one level all social policy may play some part in preventing crime. As the Police Foundation and Policy Studies Institute report "The role and responsibilities of the police" says "There needs to be greater clarity about the nature of crime prevention. Secondly, there is no consensus about what the police should and should not do by way of crime prevention activities. Thirdly, in so far as the prevention of crime is the responsibility of many agencies and not merely the police, responsibility for taking the lead in crime prevention programmes at local level has not as yet been clearly allocated." A key question therefore arises: where is the primary responsibility for coordinating crime prevention and community safety initiatives and monitoring their implementation to lie?¹⁶

HEALTH AND WELLBEING BOARDS

The HWB's have made a strong and enthusiastic start and there is strong evidence of good local leadership and collaboration between board members and active engagement with clinical commissioning groups.

We believe that the addition of SDQ children wellbeing performance measurements as part of the Ofsted Online Data Dashboard will enhance the ability of the Health and Wellbeing Boards to

improve the health and wellbeing of their local population and reduce health inequalities. Improve collaboration to understand their local community's needs, agree priorities and encourage commissioners to work in a more joined-up way.

COGNITIVE COMPUTING

The potential of third era computing with Big Data, Cognitive Cloud, Mobile and the Cognitive Internet of Things (IoT) that helps interpret underlying meanings, understands concepts, and hypothesises responses in support of large scale SDQ implementation supporting children's wellbeing needs to be examined along with integration of existing School assessment and reporting software. Examples include: NCB 'Power-Up' shared decision making app for young people to support them in managing their communications with mental health professionals; IBM Watson Smarter Kids for a Smarter Planet Wellbeing Teaching Assistant and MindEd, created by nine leading UK mental health organisations and funded by the Department of Health. MindEd is for parents, young people and anyone working with children along with use for specialist CAMHS entry level, therapeutic approaches and leadership.

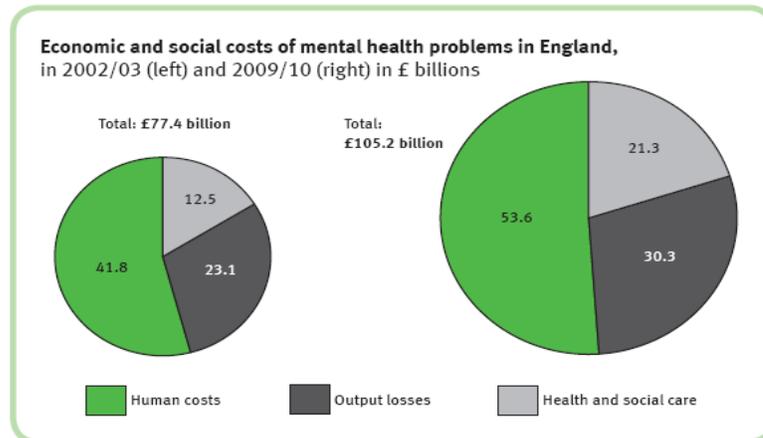
GLOBAL LEADERSHIP

The UK is a global leader in Digital Government and Wellbeing Measurement. UK also understand the impact of Wellbeing on educational outcomes² and recognises that of the £100 billion a year cost of mental ill health and its impacts on 1 in 10 children that 75% of the problems can be identified by age of eighteen.⁹ The Post 2015 UN Development Agenda, the WHO Comprehensive Mental Health Action Plan 2013–2020 and the D5 Leading Digital Governments meetings provide a framework for the UK to share its knowledge, leadership and understanding.

NATIONAL HEALTH AND WELLBEING CRISIS

CENTRE FOR MENTAL HEALTH (2010) THE ECONOMIC AND SOCIAL COSTS OF MENTAL HEALTH PROBLEMS IN 2009/10

- The cost of mental ill health has risen from £77.4 billion in 2002/03 to £105.2 billion in 2009/10 (p.2)
- Without changes to public policy and shifting the focus on prevention, these costs will continue to rise
- The cost of mental ill health falls mainly upon the individual and his/her family but it creates a high cost for taxpayers and business (p.3)
- This demonstrates the importance of an issue in public policy, economic and social terms:



THE OFFICE OF NATIONAL STATISTICS: (2004)

-In 2004, one in ten children and young people (10 per cent) aged 5–16 had a clinically diagnosed mental disorder (p.8)

ANNUAL PUBLIC HEALTH REPORT (2014): MENTAL HEALTH AND WELLBEING IN KINGSTON

- Up to 25% of all children at some point in their childhood show signs of mental health problems, more than half of which track through into adulthood (p.63)
- Early identification and intervention for children and young people who are developing problems is critical as estimates suggest that between a quarter and a half of adult mental illness may be preventable with appropriate interventions in childhood and adolescence
- Interventions during childhood and adolescence can lead to improved educational outcomes, reduced antisocial behaviour, reduced crime and violence, improved family health, as well as improved earnings in adulthood.

WELLBEING IN FOUR POLICY AREAS: REPORT BY THE ALL-PARTY PARLIAMENTARY GROUP ON WELLBEING ECONOMICS (2014)

- Prioritising wellbeing can improve the effectiveness of public spending and sometimes save public money (p.3)
- It is vital for wellbeing policy to deal with mental health problems and nurture children's emotional wellbeing (15) (p.30)
- There is good evidence that children's emotional wellbeing strongly predicts their later mental health as adults
- Policy Area 4 of 4: Mindfulness in health and education (p. 30)
- Mindfulness has demonstrable potential to improve wellbeing and save public money (p.6)
- First step: train health and education professionals in mindfulness (p.30)

- The slow progress in widening access to mindfulness-based therapies reflects a broader need to better integrate mental and physical health to provide ‘whole person care’, and to invest in **preventing ill-health**: Health and Wellbeing Boards should lead this shift (p.30)
- Mindfulness in schools is held back by the perception that wellbeing is irrelevant to the core business of the education system – despite its clear links with academic attainment.
- Highlight the need to rediscover the purpose of education as not just an ‘exam factory’ (p.33)
- Government’s mental health strategy emphasises the role of schools in understanding the link between emotional wellbeing and good educational and wider outcomes
- References to wellbeing were recently removed from the Ofsted inspection framework as part of a drive to encourage inspectors to focus on core academic concerns and forget ‘peripherals’ (p.34)
- Teachers concerned that allocating resources to mindfulness programmes was difficult to justify ‘in the glare of Ofsted’, and argued that changing the way schools were evaluated would ‘make a huge difference’ (p.34)

STRENGTHS AND DIFFICULTIES QUESTIONNAIRE (SDQ) & OFSTED DATA DASHBOARD

STRENGTHS AND DIFFICULTIES QUESTIONNAIRE (SDQ)

(<http://www.kcl.ac.uk/ioppn/about/difference/SDQ.aspx>)

- Easy to use, reliable, short questionnaire
- Can be downloaded for free (in several languages) from the website
- To ensure looked-after children’s wellbeing is monitored regularly by local authorities and they receive care they need
- Can be implemented by teachers, carers, parents, young people
- Due to results from surveys and led by Prof Goodman put mental well-being of looked-after children firmly on policy-makers agenda
- Results informed the recommendations of Care Matters: time to change (2007 White Paper from Dept of Education and Skills)
- highlighted the need to improve the mental health of young people and children in care
- Annual SDQ scores have helped local authorities monitor the effectiveness of the services they offer to support the mental welfare of children and young people in care
- Also help to decide whether an individual child/ young person needs a referral to specialist mental health services
- It produces a ‘total difficulties score’ for each child from 0-40 (Kingston Annual Report, p.170)
 - No difficulty: 0-13
 - Few difficulties: 14-16
 - Some difficulties: 17-28
 - Severe difficulties: 29-40

LOOKED-AFTER CHILDREN RETURN

<https://www.gov.uk/children-looked-after-return>

-Annual return submitted to Department of Education with details:

-Every child who is looked after by local authority at any time during year

-Information on health of children who have been in care for 12 months

(→ Including information from SDQ)

-The data is used by Dept. of Education, other government departments, and external agencies

-E.g. social and educational researchers to monitor and develop policy, target funding, improve outcomes of vulnerable children

-There are currently 89,000 looked-after children in the UK

-They are 5 times more likely to experience mental health problems than other children (Kingston Annual Report, p.80)

-Less than 1% of 12 million children in the UK (ONS UK population estimates 2012)

OFSTED DATA DASHBOARD

-The Data Dashboard provides a snapshot of performance in a school, college or other further education and skills providers.

-The dashboard can be used by governors and by members of the public to check performance of the school or provider in which they are interested.

-The Data Dashboard complements the Ofsted inspection report by providing an analysis of performance over a three year period and comparisons to other schools or providers.

-The data should be used by governors to generate key questions to support and challenge the leadership team.

-Sections:

1. Exam results

2. Progress

3. Attendance

4. Closing the gap

5. School context

6. All reports

RECOMMENDATIONS TO USE SDQ AND SHARE ON OFSTED DATA DASHBOARD

WELLBEING IN FOUR POLICY AREAS: REPORT BY THE ALL-PARTY PARLIAMENTARY GROUP ON WELLBEING ECONOMICS (2014)

Recommendations:

- Mindfulness should be incorporated into basic training of teachers and medical students (p.32)
- Subjective wellbeing evidence should be used in the calculation of Quality Adjusted Life Years to better inform the allocation of scarce resources (p.33)
- References to wellbeing in the Ofsted inspection framework should be reinstated and strengthened. Schools should be encouraged to measure and report on child wellbeing (p.34)

THE PURSUIT OF HAPPINESS: A NEW AMBITION FOR OUR MENTAL HEALTH (CENTREFORUM COMMISSION, 2014)

- Investment in the wellbeing and mental health of our children and young people should be a priority and would reduce the lifetime cost of mental health problems (p.9)
- Timely identification and access to the right treatment requires effective collaboration between schools and child and adolescent mental health services
- A focus on mental health and wellbeing should be embedded across the work of government, including the formulation of policies affecting housing, **education**, employment, planning, welfare and policing (p.10)
- The national curriculum should include the requirement to teach children and young people how to look after their mental health and build emotional resilience through approaches such as mindfulness
- All children should receive child development assessments at key stages: when the child is older, simple tools such as the Strengths and Difficulties Questionnaire can be used by nursery staff, teachers and other practitioners to identify children falling outside the normal range of healthy development (p.30)
- Identify families who need support and allow schools and HWBs to assess the overall levels of wellbeing in the local population (p.31)
- Data should be shared with schools as well as other local agencies such as public health departments (p.31)
- HWBs, CCGs and local authority/ public health commissioners should use this data to plan and commission relevant services- school based and clinic based (p.31)
- The national curriculum should include the requirement to teach children and young people how to look after their mental health and build emotional resilience, e.g. through mindfulness (p.36)
- OFSTED would be charged with monitoring progress towards the goal of at least 80% of primary and secondary schools incorporating wellbeing programmes into school curriculum by 2020

ONS MEASURING NATIONAL WELLBEING: CHILDREN'S WELLBEING 2014

- ONS exploring the available measures of mental health in children
- One option: Strengths and Difficulties Questionnaire
- Use SDQ to assess the percentage of children with mental health disorders

NATIONAL CHILDREN'S BUREAU: BETTER INSPECTION FOR ALL, A RESPONSE FROM THE PARTNERSHIP FOR EMOTIONAL WELLBEING AND MENTAL HEALTH IN SCHOOLS

- Focus on how the proposed structure and content of inspection judgments may be implemented and strengthened to support schools to make positive contribution to pupil's emotional wellbeing and mental health (p.1)
- Their vision is for an education system where good emotional wellbeing and mental health are at the heart of the culture and ethos of schools (p.1)
- Research has that multi-component (whole-school approaches) are very effective in promoting social and emotional wellbeing (p.2)
 - More effective than approaches that focus on one or two areas of school life
- Public Health England shows strong evidence for this is supporting mental health and resilience (p.2)
- Outcomes: evidence shows that a whole-school approach has significant impact on range of outcomes, including attendance, attainment, better experiences for pupils and positive ethos (p.2)
- Inspectors should consider whether the curriculum meets the needs and interests of children
- 'Young people giving evidence to the recent Health Select Committee inquiry into children's and adolescents' mental health and CAMHS highlighted the need for education about mental health issues to be provided in schools' (p.3)
- Outstanding schools will ensure this is provided for all pupils (p.3)
- They will be working with health, social care and voluntary and community sector colleagues where necessary (p.3)
- Ofsted should clearly state in their inspection framework that mental health is a key component of an appropriate curriculum

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